

1 | What is CRISP intervention?

The CRISP (Culturally Responsive Intersectional Stigma Prevention) intervention is a package of training, skills building, technical assistance, and quality improvement activities for healthcare organizations to improve the healthcare experience for Black MSM.

2 | Where is the CRISP intervention taking place?

During the HPTN 096 pilot phase, the CRISP intervention is being implemented in four healthcare facilities: two healthcare facilities in both intervention communities.

3 | How does the CRISP intervention work?

- The CRISP intervention starts with an intensive, foundational whole-facility-based training that covers HIV inequities in a Southern US context; evidence for PrEP and viral suppression; intersectional stigma specifically anti-Black racism, sexual stigmas, and HIV-related stigma; socio-cultural assets of Black MSM; communication skills for affirming interactions; and creating culturally responsive and accountable healthcare climates for Black MSM.
- After the foundational training, a train-the-trainer approach is taken for continued distance skills-based learning and quality improvement activities, including peer exchanges.
- A key ongoing training approach is the use of “client-instructors” who are trained Black MSM who conduct simulated visits at the healthcare facilities, rate providers on their communication skills, and provide tailored feedback and coaching to providers.
- Clients of the healthcare facilities will be asked to complete periodic surveys assessing the healthcare environment to see how experience of the clinic may change over time.

4 | Why is the CRISP intervention being used?

The intersection of distinct stigmas -- specifically, anti-Black racism, sexual stigmas such as homophobia and fem phobia, and HIV stigma -- combine to create a unique and synergistic effect that is a significant barrier to Black MSM engagement in HIV treatment and prevention services. Negative interactions with healthcare staff can discourage HIV testing and disrupt linkage to care, and the perception of stigma can cause Black MSM to avoid healthcare service due to fear of being discovered or identified, and/or fear of discriminatory treatment. Intensive, skills-based training and quality improvement methodologies are proven means of reducing stigma at healthcare facilities.

