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Partnering and engaging in Indiana Communities through listening sessions and data sharing: successes of Connection IN Health

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OBJECTIVES/GOALS: Participants will be able to identify how partnering with state health departments for a CTSA initiative assists in meeting shared goals by building infrastructure and sharing resources and list key components of a successful county engagement process that can be replicated. METHODS/STUDY POPULATION: Connections IN Health is a collaborative project with the Indiana Clinical and Translational Sciences Institute, Indiana Department of Health, Indiana University Simon Comprehensive Cancer Center, and community partners. We address chronic disease in Indiana with coalition-based engagement at the grassroots level, and partnering to provide technical assistance, resources, connections and evidencebased strategies to address the health challenges. Our methods of county engagement include surveying the broad community, conducting listening sessions with key community stakeholders, compiling, analyzing and sharing data, collaborating with existing local coalitions, assessing community readiness and suggesting evidencebased practices to implement. RESULTS/ANTICIPATED RESULTS: As a result of county engagement, local coalitions have current, local data to drive their efforts in improving local health rankings and outcomes. Community partners in eight counties have selected and implemented evidence-based strategies to manage and/or prevent diabetes, cardiovascular disease and/or stroke. Some examples include: starting a community garden with cooking classes in a food desert to provide fresh produce and nutrition/cooking knowledge, creating a mobile kitchen on hand for organizations to use to provide education and cooking skills, providing a passport for wellness at existing community events with food samples and health screenings and offering evidencebased educational programming such as Dining with Diabetes and Be Heart Smart. DISCUSSION/SIGNIFICANCE: Moving county health coalitions to evidence-based programming that has the greatest likelihood for success is a critical translational sciences challenge. Our rigorous and well defined approach yields significant improvement in local health coalition activities, sustaining their activities through long-term trusted relationships.

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Perceptions of Scientist and Community Members Regarding the Social Responsibility of Translational Science.

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OBJECTIVES/GOALS: Translational Science includes the social responsibility to improve health outcomes and reduce disparities. This study aims to determine how scientists and community members perceive the social responsibility of translational science.

METHODS/STUDY POPULATION: Methods include a series of 12 one-hour semi-structured focus groups. Six groups were held with a total of 34 scientists and four with approximately 32 community members (community focus groups still ongoing). Sample includes scientists and community members affiliated to one of three research fields: HIV/AIDS, Maternal Health, and Mental Health/Substance Use. Inclusion criteria for scientists were based on their scholarly contributions to a field. Community members included individuals who self-identified as affiliated to any above fields. Using reflexive thematic analysis, we analyzed the transcripts against existing frameworks on social responsibility. RESULTS/ANTICIPATED RESULTS: Literature on social responsibility suggests that translational science should be relevant, usable and sustainable for endusers. Scientists and community members identified the same groups for whom research is relevant. Scientists often conceptualized social responsibility through the sustainability lens, focusing on results that might have long-term societal impacts. Due to this, they saw limitations to social responsibility in academia and funding structures. Community members often conceptualized social responsibility through the usability lens, focusing on the complexity of research use and access. They saw barriers to social responsibility in systemic disparities. DISCUSSION/SIGNIFICANCE: Although participants emphasized different practices in focus groups, participants seemed generally interested in pursuing future discussions to develop best practices and commitments regarding social responsibility. Further discussions will take place in a deliberative dialogue activity in January 2024.

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It affected me so much that I even had to tie my tubes: The Role of Patient-Clinician Communication on Black Women's Perceptions of Pregnancy Risk

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OBJECTIVES/GOALS: This study utilizes a Black Feminist metatheoretical approach in conjunction with the Social Amplification of Risk Framework to: i) assess the role of communication with clinicians on Black women's perceptions of risk and ii) outline recommendations for empowering communication that attenuates Black women's perceptions of pregnancy risk. METHODS/STUDY POPULATION: Semi-structured in-depth interviews were conducted with 28 self-identified Black women in 2022 and 2023 to gain insights into their conceptualizations of pregnancy risk, and the role of communication with clinicians in the amplification and/or attenuation of pregnancy risk perceptions. An IRB approved flier was used for both in-person and online recruitment of participants from 12 US states. Each participant signed a consent form and received \$20 as compensation for their time. Interviews were recorded and transcribed using a digital transcription tool, and then reviewed and edited to ensure accuracy. This study's metatheoretical underpinning in Black Feminist Theory informed the use of reflexive thematic analysis in the qualitative analysis of the in-depth interviews. RESULTS/ANTICIPATED RESULTS: This study found thatunclear communication (including insufficiently contextualized history taking), obstetric violence, anddiagnoses with insufficient explanation, led to the amplification of concerns and worries about pregnancy as well as erosion of trust in healthcare. In contrast, clinicians lessenedconcerns about pregnancy through clear communication (including appropriately contextualized history-taking), demonstration of empathy, and by fostering patient agency. The study thus highlights the importance of clinicians' clear communication, demonstration of empathy and fostering of patient agencyas critical factors to empowering communication that attenuates Black women's pregnancy-related risk perceptions. DISCUSSION/SIGNIFICANCE: Given the unjust dangers Black women face during pregnancy, this study demonstrates how patient-clinician communication influences Black women's pregnancy risk perceptions, providing recommendations for clinician communication practices that empower Black women and attenuate their perceptions of pregnancy risk.

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Trailblazer Pilot Grants as Originators of Research Collaborators: Past, Present, and Future[†]

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OBJECTIVES/GOALS: We aim to share information about the Trailblazer Award Pilot Grants, which support collaborative, community engaged research projects with potential to improve health equity in Indiana, and achievements of awardees in terms of publications and funded external grants. We also share plans to expand the impact of the pilot grant process. METHODS/STUDY POPULATION: Data on publications and funded grant applications resulting from Trailblazer Award-funded projects were obtained from progress reports completed by the projects' principal investigators. Awardees submit annual progress reports throughout the project and five years following the close of the project. On these progress reports, awardees list the publications that they have submitted, and their publication status, and external grants submitted and funded. Because some progress reports were never submitted, and projects which began in 2021 or 2022 are not complete, and are therefore likely to have additional publications and grants result from their projects, our results likelyunderestimate the number of publications and grants resulting from these projects. RESULTS/ANTICIPATED RESULTS: Below are a number of charts which illustrate the outcomes of Trailblazer Award projects from years 2015 through 2022, including: the number of applications received as compared to the number of applications funded; the academic institutions of the academic partners on awarded projects throughout the state of Indiana; the general topic areas of all funded projects; and the number of publications and funded grants resulting from Trailblazer Award-funded projects, as reported by awardees. We have found that, in recent years, while the amount of publications by awardees have stayed roughly the same, the numbers of funded external grants resulting from Trailblazer-funded projects have decreased somewhat. [blob:https://acts.slayte.com/ 8404bbca-3054-4f57-9d36-cd8d6152841b] [blob:https://acts.slayte.com/6b43bd70-fe90-494a-be1a-c091a6ab924d][blob:https://acts. slayte.com/b0e2b7f6-1604-4379-94df-efccdc2e51c2][blob:https://acts. slayte.com/c1a591a7-2a0e-4f6d-ade1-027bb389ef68] DISCUSSION/ SIGNIFICANCE: We will implement changes for Trailblazer projects, including hosting workshops on disseminating findings and applying for external funding, and helping awardees to form partnerships within their topic area. We believe providing these resources to awardees will increase publications and grant funding, thereby allowing their work to continue.#_msocom_1.

Are you trust-worthy: Trust-building activities in Translational Sciences

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OBJECTIVES/GOALS: Many researchers aim to build trust with communities and participants. Trust building is meant to achieve greater representation across aspects of research whether in participation, or more comprehensively as partners from design to dissemination. We provide practical guidance for trust building activities and the ethical issues that can arise. METHODS/ STUDY POPULATION: While trust itself is inherently seen as an ethical good, often little attention is paid to the ethical aspects of trust building exercises themselves and the fact that trust can vary in type. Using a bioethical analysis of trustworthiness, we discuss how to approach trust in different relationships and settings. Explicit communication about the supports/constraints and potential outcomes of new trusted relationships is required for ethical practice. Where relationships are built without appropriate transparency and follow through, or with misunderstandings about potential shared values, priorities, or desired outcomes, significant harms can occur in the short- and long term. Using a bioethical framework and practical examples we provide guidance on how to engage in ethical trust building activities. RESULTS/ ANTICIPATED RESULTS: While many people are good at the trust building work they do, this work is often not shared as best practices and is ascribed to individual skill. This is slowly changing and an evidence-base is being developed that can support those new to these activities. Ethical guidance to support trust building practices, especially for those new to these activities, is currently lacking. By providing both a conceptual and normative bioethical analysis grounded in practice, we provide the foundations for new activities and the necessary support for work that explores and determines best practices. This analysis provides an understanding of trust including a taxonomy and a discussion of how different types of trust can be built and can support research activities, as well as problems that can arise. DISCUSSION/ SIGNIFICANCE: Trust building activities with communities and participants are crucial to much of translational science and research, but ethical guidance on how to engage in these activities well is lacking. We provide bioethical guidance and offer practical recommendations.

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Activating community health workers: A communityacademic partnership to understand vaccine hesitancy[†]

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OBJECTIVES/GOALS: In 2022, Chicago created the COVID-19 Response Corps, a cohort of community health workers (CHWs), trained to conduct contact tracing and vaccine outreach. Through an Earn and Learn program, corps members studied community-engaged

[†]The online version of this abstract has been updated since original publication. A notice detailing the change has been published at https://doi.org/10.1017/cts. 2024.541.