Utilizing community engagement approaches in translational research
Keyonna M. King, Paul Estabrooks, Tatiana Tchouankanm, Heidi Keeler, David Palm, Kenya Love, Christian IJ Minter, Shinobu Watanabe-Galloway, Sean Navarrette and Maria Teel-Williams
University of Nebraska Medical Center

ABSTRACT IMPACT: Leverage community engagement to continue moving translational science and research forward. OBJECTIVES/GOALS: Engaging community in translational research improves innovation and speeds the movement of evidence into practice. Yet, it is unclear how community is engaged across the translational research spectrum or the degree of community-engagement used. We conducted a scoping review to fill this gap. METHODS/STUDY POPULATION: We used the PRISMA model search strategy with a range of databases (e.g., PubMed/Medline, Scopus) to identify articles published between January 2008 and November 2018 (n=167) and eliminated studies that did not use any level of community-engagement (n=102). Studies were coded for translational stage—corresponding to T0 (basic science), T1 (basic science to clinical research in humans; n=6), T2 (clinical efficacy and effectiveness research, n=45), T3 (dissemination and implementation research, n=95), and T4 (population health, n=21) as well as the degree of community engagement from least to most intensive (i.e., outreach, consultation, involvement, collaboration, shared leadership). RESULTS/ANTICIPATED RESULTS: The final number of eligible articles was 65. There was a relatively balanced distribution across levels of community engagement across articles (i.e., outreach, n=14; consultation, n=13; involvement, n=7; collaboration, n=15; shared leadership, n=16). Within these articles, the depth of community engagement varied with higher engagement typically occurring at later stages of translational research (T3 and T4), but more specifically in the dissemination and implementation science stage (T3). However, shared leadership, the most intensive form of engagement, was found in T2, T3, and T4 studies suggesting the value of community-engagement across the translational research spectrum. DISCUSSION/SIGNIFICANCE OF FINDINGS: A strong understanding of how various levels of community engagement are used in translational research, and the outcomes they produce, may expedite the translation of knowledge into practice and enable practice-based needs to inform policy.

Interventions and Education: What We Learned from the ‘All Eyes on Us’ Study
Sara Kennedy, Dr. Sarah Koopman Gonzalez, Leslie Richards, Bridget Croniger, Gabrielle Blackshire, Dr. Erika Trapl and Dr. Jessica Cooke Bailey
Case Western Reserve University

ABSTRACT IMPACT: This study identifies potential areas for community and clinical interventions to improve eye and vision health. OBJECTIVES/GOALS: The ‘All Eyes on Us’ study sought to understand perceptions of and barriers to eye and vision care, of residents over the age of 40 in the Broadway/Slavic Village neighborhood in Cleveland, Ohio. The goal of this study was to identify potential areas for community and clinical interventions to improve eye health. METHODS/STUDY POPULATION: Residents of the Broadway/Slavic Village neighborhood, an ethnically diverse, low socioeconomic status, neighborhood in Cleveland, Ohio were recruited from, and with the assistance of, University Settlement, a nonprofit that has been providing services to the neighborhood since 1926. The project’s Community Advisory Board assisted with the development of a semi-structured interview guide over the course of three meetings. Sixty interviews were completed, 30 with self-identified European Americans and 30 with self-identified African-Americans, all over the age of 40. Two research team members coded the interview transcripts and a thematic analysis was conducted. RESULTS/ANTICIPATED RESULTS: Participants identified barriers to obtaining eye and vision care for themselves as well as perceived barriers for others, including transportation, cost, insurance status, clinic locations, lack of education around eye and vision care, fear, forgetfulness, and priority management. To encourage people to go to the eye doctor more often, participants mentioned strategies related to access issues including lowering the cost of exams, operating on a sliding scale, improving insurance coverage, transportation services, and having mobile units that deployed to specific neighborhoods or senior centers. Additionally, participants suggested education and increasing awareness about the importance of eye and vision care. DISCUSSION/SIGNIFICANCE OF FINDINGS: Participants in this study identified that accessibility to and awareness about eye health and eye care is an issue. Interventions to address both access issues such as location, cost, and insurance as well as those that increase education could increase engagement with eye and vision care.

Engagement and co-creation in a DNA integrity cohort study
Martha I. Arrieta1, L. Lynette Parker1, Chantel M. Bonner1 and Robert W. Sobol2
1University of South Alabama Center for Healthy Communities and 2USA Health Mitchell Cancer Institute & Department of Pharmacology, University of South Alabama

ABSTRACT IMPACT: Our work is demonstrative of the value embedded in community engagement as a vehicle to facilitate and expand the focus of translational research. OBJECTIVES/GOALS: To develop a community-informed recruitment process for a population-based DNA integrity longitudinal study aiming to document the average amount of DNA damage as well as DNA repair capacity in a cohort of community-dwelling individuals. METHODS/STUDY POPULATION: The three-member Community Engagement team (CE Team) partnered with a ten-person Community Advisory Board (CAB) to develop recruitment procedures and materials. Through an iterative process taking place over 13 meetings, CAB members answered questions about community context, appropriate recruitment approaches, and tone of communication with potential study participants. They also collaborated in the creation of outreach materials, informational booklets, and the informed consent document. The CAB’s input was recorded in meeting notes that informed successive versions of the materials. The CE Team held post-meeting debriefs to develop consensus on lessons learned and next steps. RESULTS/ANTICIPATED RESULTS: CAB input generated a five-step recruitment process. It informed approaches to communications with potential participants and resulted in a set of printed recruitment materials. Furthermore, the CAB pushed the CE Team and laboratory scientists to think beyond study participation to a comprehensive view of respectful engagement including notification of elected officials and other community institutions. By