OBJECTIVES/SPECIFIC AIMS: We propose to adapt a curriculum for group well-child care in order to (1) improve the experience of care for Latino immigrant families, (2) better address maternal psychosocial concerns impacting parenting and (3) teach parenting practices that promote healthy behaviors, and (4) improve LEP parent health literacy, engagement, and self-management in care. METHODS/STUDY POPULATION: This study is composed of a series of focus groups with 4 target populations: (1) The Johns Hopkins Bayview Children’s Medical Practice Latino Family Advisory Board (LFAB) (multiple meetings). The LFAB has been in existence since 2011, and has experience in iteratively adapting educational materials, both written and video, and in providing input on social work services and healthcare utilization. We will meet with the LFAB over the course of up to 8 meetings. During these meetings, the following themes will be discussed: (A) The concept of Group Well Child Care will be discussed and LFAB members will be asked about potential benefits and drawbacks of this format. (B) LFAB members will also be asked about group discussion topics that should be prioritized. Study staff will both bring up a list of topics (feeding, sleep, development, behavior, parent stress) and ask for input on additional items that should be discussed. (C) Core components of the mothers and babies course, a group perinatal depression intervention originally developed with Latina mothers, will be presented and discussed with board members, who will be asked to prioritize the components for salience and perceived helpfulness as well as inclusivity in the revised curriculum. Potential benefits and drawbacks of including components of this program will also be asked of LFAB members. Members will not be asked about their depressive symptoms. (2) Pediatric providers (including social workers, MDs, NPs, and RNs) (1 focus group) who agree to participate will also be asked about perceived benefits and drawbacks of the group well-child care model, topics that should be prioritized in the educational components, and the benefits and drawbacks of including components of a perinatal depression prevention program in the group well child visit curriculum. (3) Obstetric group visit providers—Obstetric providers of group prenatal care to LEP Latinas at JHBMC will be asked about the benefits and drawbacks of group prenatal care with their patient population, as well as topics perceived to be of relevance to the patient population based on their experience with group prenatal care and discussions that emerged during the course of the facilitated groups. (4) Obstetric group visit patients (3 focus groups) LEP Latina patients who have participated in at least 3 group prenatal visits during the course of the facilitated groups. (4) Obstetric group visit patients (3 focus groups) LEP Latina patients who have participated in at least 3 group prenatal visits during the course of the facilitated groups. (4) Obstetric group visit patients (3 focus groups) LEP Latina patients who have participated in at least 3 group prenatal visits during the course of the facilitated groups. (4) Obstetric group visit patients (3 focus groups) LEP Latina patients who have participated in at least 3 group prenatal visits during the course of the facilitated groups.

The study employed empirical qualitative methods to explore client understandings of mental health, client experiences of culture and discrimination, and the process of care engagement and care planning from both client and provider perspectives. The analysis team itself included people of Latino and Asian background, as well as a person with lived experience of mental health recovery. RESULTS/ANTICIPATED RESULTS: We anticipate that the results will show ways in which the provider-centered care successfully incorporates clients’ goals, that there will also be evidence of ways in which the clinical encounter struggles to incorporate more social, collective, and cultural values and approaches. DISCUSSION/SIGNIFICANCE OF IMPACT: The poster will present up-to-date findings on this project, which speaks to pressing issues of health equity and community engagement for 2 of the fastest growing populations in the country.

OBJECTIVES/SPECIFIC AIMS: This poster will present preliminary results from a study examining whether person-centered care planning—a new innovation in community mental health care—responds to the culture of, and helps reduce health disparities among, Latinx and Asian populations. METHODS/STUDY POPULATION: The study was funded by an NIMH/NIH Administrative Supplement for Minority Health and Mental Health Disabilities Research and approved by the Institutional Review Board of the authors’ university. Participants included 26 mental health clients and 12 mental health providers of diverse backgrounds. The study employed empirical qualitative methods to explore client understandings of mental health, client experiences of culture and discrimination, and the process of care engagement and care planning from both client and provider perspectives. The analysis team itself included people of Latino and Asian background, as well as a person with lived experience of mental health recovery. RESULTS/ANTICIPATED RESULTS: We anticipate that the results will show ways in which the provider-centered care successfully incorporates clients’ goals, that there will also be evidence of ways in which the clinical encounter struggles to incorporate more social, collective, and cultural values and approaches. DISCUSSION/SIGNIFICANCE OF IMPACT: The poster will present up-to-date findings on this project, which speaks to pressing issues of health equity and community engagement for 2 of the fastest growing populations in the country.

Current efforts to increase adolescent human papillomavirus vaccination rates using school-based setting in Starr County, Texas

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OBJECTIVES/SPECIFIC AIMS: Improving human papillomavirus (HPV) vaccination rates ultimately decreases the morbidity and mortality of HPV-associated diseases. A school-based program was piloted in the Rio Grande City Consolidated Independent School District (RGCCISD) to increase HPV vaccination. METHODS/STUDY POPULATION: We assessed baseline HPV vaccination; surveyed 622 parents of eligible children aged ≥9 years, and piloted and developed a school-based HPV education and vaccination program in 1 middle school in 2017 and 4 additional middle schools in 2018. The parent survey included (1) demographic information, (2) an assessment of parental knowledge about the HPV vaccine, and (3) information about their children and HPV vaccine experience. Results of the parent survey and pilot program are in progress. RESULTS/ANTICIPATED RESULTS: As of 9/1/2016, 20.4% of the 7527 RGCCISD eligible students (≥9 years) had completed the HPV vaccine. Baseline completion rates were higher for RGCCISD students aged 12–14 years compared with students aged 9–11 and ≥15 years (28.4% vs. 16.5%). Baseline completion rates for RGCCISD adolescents were substantially lower than those reported in NIS-Teen and for Texas (42% females and 28% males for NIS-Teen vs. 41% and 24% for the state of Texas). DISCUSSION/SIGNIFICANCE OF IMPACT: Initial results show that engagement with key stakeholders is important and schools are a great venue for delivering and increasing HPV vaccination.

Determining the prevalence and associated multilevel characteristics of undiagnosed diabetic retinopathy

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OBJECTIVES/SPECIFIC AIMS: Diabetic retinopathy is the leading cause of blindness in adults aged 25–64 years. The prevalence of diabetic retinopathy is projected to increase 4-fold by 2050. Racial and ethnic minorities have a higher prevalence and greater severity of diabetic retinopathy. Over 50% of racial and