approval process, and limitations to carryover funding. However, pilot grants administered through the program strengthen the capacity to develop larger scale community-based research initiatives.

Understanding the Lived Experience of Deaf Dominicans: Implementing Qualitative Methods with the Deaf Community in the Dominican Republic

Joshua Mora[1], Pablo Taveras[4], History Estill-Varner[2], Jose Javier Sanchez[3], Wyatte Hall[1], Zahira Quinones Tavarez[1], Edward Batista[4], Alan Jesurum[4], Shazia Siddiqi[1] and Timothy Dye[1]
[1]University of Rochester Medical Center; [2]Discovering Deaf Worlds; [3]Pontificia Universidad Católica Madre y Maestra and [4]Asociacion Nacional de Sordos de la Republica Dominicana

OBJECTIVES/SPECIFIC AIMS: Qualitative approaches help explore poorly understood phenomenon, and are highly engaging, enabling both sides of an encounter greater connection. Historically, Deaf communities have been marginalized and oppressed, with their linguistic needs unrecognized and ignored. As a result, Deaf participants are rarely involved in clinical research. Like other marginalized communities, the Deaf community experiences health disparity compared with others, especially in low- and middle-income settings. The purpose of this project was to assess the feasibility of conducting qualitative research with Deaf Dominicans. METHODS/STUDY POPULATION: We implemented a partnered research process with 59 Deaf community members in the Dominican Republic, conducting preliminary thematic analysis through reviews of interviews and on-site debriefings. RESULTS/ANTICIPATED RESULTS: Participants were highly engaged with the Deaf-Deaf research encounters, indicating satisfaction with both the process and with the opportunity to communicate their needs and interests. Preliminary findings indicated Deaf Dominicans were highly engaged, confirming their interest, and often stated that they felt they were being listened for the first time. Indeed, some participants claimed that this was the first time they communicated their experiences as Deaf Dominicans and appreciated the opportunity to relate this experience to Deaf interviewers. DISCUSSION/SIGNIFICANCE OF IMPACT: This experience confirms that the Deaf Dominican community can be mobilized and will participate in Deaf-Deaf research.

Using Research Performance Progress Report data to Explore CTSI-Stakeholder Engagement through Network Analysis

Elizabeth Wayman[1], Eric P. Rubinstein, JD, MPH, MBA[1], Camille Anne Martina, PhD[1] and Ann Marie Dozier[1]
[1]University of Rochester Medical Center

OBJECTIVES/SPECIFIC AIMS: To develop a social network model of collaborations within and external to the University of Rochester Medical Center (URMC) CTSI using data from the annual Research Performance Progress Report (RPPR) as well as other sources, to provide longitudinal evaluation of the CTSI's engagement with key stakeholder groups. METHODS/STUDY POPULATION: The annually submitted RPPR follows a specific format with well-defined sections. The Highlights, Milestones and Challenges Report includes areas in which CTSI function leaders provide details about program integration and innovation, including collaborations with other functions or external groups. The Highlights, Milestones and Challenges Report was qualitatively coded to identify function-collaborator dyads. Each entity in the dyad became a node in the network. Nodes were connected by edges named by the dyads. The network included two types of nodes. The first were CTSI internal functions/programs, i.e. the entities that submitted RPPR sections and formed an interconnected sub-network. The second type of nodes were entities external to the CTSI (collaborators, internal or external to the CTSI site). These entities were named by functions submitting RPPR narratives. External nodes with similar meanings were consolidated. Duplicate edges were removed. CTSI-external nodes were grouped into five stakeholder categories: URMC, University of Rochester (UR), community, other CTSA institutions, CTSA consortium. Thus, these nodes were connected to the CTSI internal nodes, but not to each other. A second source of collaboration data was function-reported internal metrics. As part of the internal metric data collection, functions list partners who play a role in improving metric data or who are responsible for providing data. Partners identified in the internal metrics data, but not specified in the RPPR, were added to the network. RESULTS/ANTICIPATED RESULTS: Twenty-three internal CTSI functions submitted an RPPR and represent the CTSI internal nodes. Internal CTSI functions identified 235 collaborations (edges): 125 collaborations with other CTSI internal functions, 57 collaborations with URMC entities, 14 with UR entities, 15 with the external community, 15 with other institutions (CTSA hubs and other universities), and 9 with CTSA consortium entities. Thirty-eight of the collaborations were identified in the internal metrics partners section. In total, the network comprised 104 nodes. Graph density was .022 for full network and .21 for the CTSI internal sub-network. The global clustering coefficient, a measure of connectivity, for the CTSI internal sub-network was .252. DISCUSSION/SIGNIFICANCE OF IMPACT: The RPPR provides an underutilized source of data for annually repeated analyses of internal and external CTSI collaborations and is a way to enhance use of this routinely collected information. Analyses of the network yield metrics for measuring CTSI reach and impact on stakeholder groups over time. For example, measures such as number of nodes representing entities external to CTSI and average vertex degree of the CTSI Internal nodes track aspects of CTSI collaborations. Visualizations using different layouts or highlighting different sub-networks provide a representation of CTSI engagement with the communities of stakeholders as well as insights to relationships between functions, regions of collaboration, and areas of gaps. These data also provide an important new mechanism to engage the CTSI leadership and function leads in understanding how their work contributes to the overall network and synergies they have with each other.

Willingness to Engage in a Statewide Virtual Community for Biomedical Research

Christi Patten, PhD[1], Milton Eder, PhD[1], Tabetha A Brockman, MA[1], Deborah Hendricks, PhD[1], Miguel Valdez Soto, BA[1], Maria Zavala Rocha[1], Miriam Amelang[1], Chung Wi, PhD[1] and Joyce E. Balls-Berry, PhD, MPE[1]
[1]Mayo Clinic

OBJECTIVES/SPECIFIC AIMS: Virtual communities are an untested method to enhance community engagement in biomedical research. Our CTSA Hubs collaborated to assess receptivity to