

OBJECTIVES/GOALS: The Clinical and Translational Research Funding Program (CTRFP) awards 12-month community-engaged pilot projects. Following cycles of proposals with underdeveloped community engagement plans, the study section recommended earlier community feedback. The CTRFP early review process integrates lived experiences in proposal development. **METHODS/STUDY POPULATION:** Each CTRFP competitive letter of intent (LOI) submission includes a partnership description with roles, project engagement plans, and aims. The early review process includes 1) match community health consultants with specific lived experiences to LOIs; 2) separately, match academics with specific community-engaged research experiences to LOIs; 3) meet with each reviewer to collect verbal feedback; 4) provide written feedback from both community and academic perspectives to applicants one month prior to proposal due date; and 5) consult with applicants as requested leading up to proposal submission. Applicants must state how they incorporated feedback into their proposal. This process is managed through the Institute of Clinical and Translational Sciences' community engagement function. **RESULTS/ANTICIPATED RESULTS:** Three cycles of early review have been integrated into the CTRFP, involving 11 community and 5 academic reviewers. * 29% of LOIs reviewed did not submit. Two realized their partnerships were not ready and within 4 months applied for partnership development funding. * An early reviewer said, "It's one thing to have a bird's eye view of an issue, but another to talk to people that grew up in it and know it in their day to day. My voice is totally necessary. I break down 'food insecurity' from this surface concept into this issue impacting real people like me and my family." * Applicants said feedback led to better research design and engagement activities, community benefit, and bigger partnerships. * 22% of proposals scored in the fundable range in 2021. In 2024, 66% of proposals scored in the fundable range. **DISCUSSION/SIGNIFICANCE OF IMPACT:** Early review of CTRFP applications proposing community-engaged research demonstrates accountability to valuing lived experience. Staggering funding with programs that support community engagement, such as partnership development funding and community studios, can efficiently improve proposals not adequately prepared for submission.

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Patient perspectives on GLP-1 receptor agonists for weight loss: A mixed-methods study to inform translational obesity care

Jane McElroy, Regina DePietro, Chloe Zink, Isabella Bertarelli and Jamie Smith
University of Missouri

OBJECTIVES/GOALS: To explore patient experiences and perceptions of GLP-1 receptor agonists for weight loss, informing translational obesity care and highlighting the impact of emerging therapies on patient-centered outcomes. **METHODS/STUDY POPULATION:** This mixed-methods study included adults (≥18 years) without diabetes, pregnancy, or relevant medical contraindications. From March to July 2025, 140 participants completed a 30-item survey and ~30-question semi-structured interview tailored to six distinct GLP-1 experience groups from considering it, to actively

using it, to having stopped. Participants received a \$20 e-gift card. Quantitative data were analyzed using SAS; qualitative data were coded and thematically analyzed in Dedoose. The sample was predominantly white (82%), female (63%), privately insured (84%), employed full-time (74%), college-educated (75%), and married (65%), with 47% reporting income ≥\$100,000 and a mean age of 45 years. **RESULTS/ANTICIPATED RESULTS:** Distinct themes emerged across groups. Group 2 reported reduced interest in food, which influenced their food choices with mixed clinician support on nutrition. Group 4 credited GLP-1 for weight loss success but feared losing access to medication due to cost or insurance and thereby rebounding. Group 6 discontinued due to unsustainable side effects, cost, or coverage denial. Female participants (Groups 3–5) often faced stigma, with comments about "cheating" in weight loss, rarely reported by males. A reduction in "food noise" – intrusive food thoughts – was common while on GLP-1. Educational support from clinicians varied widely. Despite media portrayals, nearly all participants had long struggled with weight and were actively pursuing healthy lifestyles with exercise and nutritious food while on GLP-1. **DISCUSSION/SIGNIFICANCE OF IMPACT:** Findings reveal strong patient enthusiasm for GLP-1 therapies and emphasize the need for consistent education and policy reform to support equitable, sustainable obesity care. Patient-centered insights can inform translational strategies in obesity treatment.

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Understanding cross-sector trust between healthcare clinics and farmers for Produce Prescription Program (PRx) implementation

Leandra Lacayo¹, Elizabeth C. Rhodes², Emily Nieckula² and Karen R. Siegel²

¹Emory University and ²Emory University, Hubert Department of Global Health

OBJECTIVES/GOALS: Trust among stakeholders is vital for effective implementation, boosting collaboration, and ensuring long-term commitment to a program. In the past decade, PRx has gained traction, but trust between farmers and healthcare clinics remains understudied. This study aims to identify facilitators and barriers to building trust for PRx implementation. **METHODS/STUDY POPULATION:** We partnered with 3 primary care clinics within a healthcare system in Atlanta, GA, conducting 7 one-hour focus group discussions (FGDs) with providers, residents, and staff (6–8 participants each), and 13 one-hour semi-structured interviews with healthcare administrators. Seventeen organic fruit and vegetable farmers within 2 hours of Atlanta were recruited via Georgia Organics and snowball sampling for 1-hour semi-structured interviews. FGDs and interview guides were based on the Exploration, Preparation, Implementation, and Sustainment framework's preparation phase. FGDs were held in person; interviews were in person/Zoom. Sessions were recorded, then transcribed verbatim by a professional transcription company. The data were analyzed using a team-based rapid qualitative analytic approach. **RESULTS/ANTICIPATED RESULTS:** Farmers and healthcare personnel stressed the importance of communication for building trust in a partnership for PRx implementation. They both value commitment

but are concerned about mutual engagement and reliability in the PRx. Healthcare personnel worry about unmet patient needs and disappointment, and farmers worry about unsold produce and financial losses. Farmers feel that healthcare systems do not understand their operations due to differences in work culture, bureaucratic barriers, and staff turnover, which hinder trust. Healthcare workers want to understand farmers' operations but lack the experience to initiate discussions and to integrate them into their workflow. Both reported that building trust involves having early conversations to establish alignment with their mission and workflows. **DISCUSSION/SIGNIFICANCE OF IMPACT:** Findings highlight that building trust is crucial for farmers and healthcare personnel in PRx, starting with setting shared goals, recognizing sector differences, and promptly addressing barriers early in the partnership. Future efforts could involve stakeholders in co-design to foster mutual understanding and strengthen PRx implementation.

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Evaluating Community Engagement Studios 2.0: Insights from applying an implementation framework

Tabetha Brockman¹, Alfred Vitale², Nuwanthi Heendeniya³, Gladys B. Asiedu⁴, Douglas Murrell⁵, Monica Albertie⁶, Mark L. Wieland⁷ and Sagar Dugani⁸

¹Mayo Clinic; ²Program Evaluation and Continuous Improvement Manager, Mayo Clinic; ³Program Manager, Mayo Clinic Center;

⁴Associate Professor of Health Services Research, Mayo Clinic;

⁵Administrator, Mayo Clinic; ⁶Assistant Professor of Health Care Administration, Mayo Clinic; ⁷Professor of Medicine, Mayo Clinic

and ⁸Associate Professor of Medicine, Mayo Clinic

OBJECTIVES/GOALS: In 2021, Mayo Clinic Center for Clinical and Translational Science (CCaTS) launched CE Studios to enhance community-informed research across a multisite institution. This study applied the Proctor's implementation outcomes framework to evaluate the implementation efforts across diverse settings. **METHODS/STUDY POPULATION:** From June 2022 to October 2025, we held 59 CE Studios across 19 sites in Arizona, Florida, and Midwest. CE Studios were done in-person and virtually via Zoom. Researchers and community members completed a survey assessing their experience and perceived influence of communities' feedback on the research project. Data were collected and analyzed from June 2022 to October 2025. To assess the implementation, we applied Proctor's Implementation Outcomes Framework, which examines eight constructs: Acceptability, Adoption, Appropriateness, Feasibility, Fidelity, Implementation Cost, Penetration, and Sustainability. **RESULTS/ANTICIPATED RESULTS:** Thirty (51%) researchers and 286 (67%) community members completed the survey. Both groups indicated high satisfaction with CE Studio planning, format, and facilitation, emphasizing meaningful contribution of community feedback on research. All researchers noted at least one stage of their research was influenced by community input: pre-research (28%), study design (28%), implementation (22%), infrastructure (15%), analysis (1%), and dissemination (6%). Over time, CE Studios requests increased, reflecting recognition of their value in enhancing research. The framework

revealed missing structured coordinators' feedback, a key for understanding implementation and highlighted the need to revise evaluation tools and identify additional data sources aligned with the broader framework. **DISCUSSION/SIGNIFICANCE OF IMPACT:** Applying the Proctor's Implementation Outcomes Framework revealed areas to strengthen CE Studio implementation such as coordinator feedback, refinement of evaluation tools, data source, and strategies to assess CE Studio sustainability and institutional impact. These insights offer a model to guide similar efforts at other institutions.

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Community engaged research mentoring: A tailored approach to growing early-stage investigators' capacity and networks in conducting CER

Darierian Schueller^{1,2}, Jacqueline Dolata², Samar Farha³ and Daryl Thornton¹

¹Case Western Reserve University; ²The MetroHealth System and

³Cleveland Clinic

OBJECTIVES/GOALS: Mentoring is essential for the development of investigators, and while many mentorship programs exist, few focus exclusively on the challenges associated with community-engaged research (CER). This program focused on forging lasting mentoring relationships with CER experts and strengthening connections with community partners. **METHODS/STUDY POPULATION:** The 9-month program focused on: Exclusive focus on CER mentorship. The curriculum drew on best practices from CTSC partner institutions (Emory University, University of Wisconsin-Madison) and local expertise from the NIH-funded U54 Investigator Development Core. Prior work identified the lack of CER-specific mentorship as a barrier to success, prompting the creation of this dedicated program. Small cohorts with community mentors: Each bi-monthly cohort comprised four mentees and one community mentor, supported by CTSC staff. This structure created a safe space for sharing project challenges and offered grounded perspectives on community-partner needs and expectations. Mentor coaching mentors received targeted coaching, enhancing their capacity to guide mentees and boosting overall mentor satisfaction. **RESULTS/ANTICIPATED RESULTS:** Evaluation surveys captured satisfaction, confidence, and likelihood of continued participation. Key findings include * High Satisfaction: Both mentors and mentees reported strong satisfaction with program elements. * Skill Development: Mentees cited support across project design, grant development, networking, and policy work. * Future Participation: 100 % of mentors and mentees indicated they would join again or recommend the program to colleagues. * Community Impact: Participants highlighted the program's sense of community, passion, and peer support. **DISCUSSION/SIGNIFICANCE OF IMPACT:** This CER mentoring program addresses a critical gap: traditional career mentors often focus on clinical or academic specialties, overlooking the unique challenges of building equitable community partnerships. By centering mentorship on CER and incorporating coach-driven mentor development, the program fosters bidirectional growth.