

**STUDY POPULATION:** While the survey is based on the CDC Youth Risk Behavior Surveillance System (YRBSS), there was community need for an expanded survey and thus a workgroup was formed to create the Galveston Youth Risk Survey, including members from UTMBs Institute for Translational Sciences, a number of other UTMB departments and Centers, the Research, Education, and Community Health (REACH) Coalition, several school districts, Teen Health Clinic, and a variety of other community health organizations with vested interest. The survey was administered in November 2020 via ScanTron and REDCap to two local high schools with populations greater than 2,000. CDC guidelines for administration of the YRBSS were followed. **RESULTS/ANTICIPATED RESULTS:** A total of 2,428 students completed the survey from GISD and DISD. The survey provided insight into the following categories, with mental health emerging as a pressing issue, specifically stress and depression, particularly among females. All results are reported in several contexts, including comparisons by gender, grade, and ethnicity, a comparison to state and national statistics when available, as well as risk trends from previous surveys. Demographics Safety, including driving, violence, and bullying Mental Health: stress, depression, suicidal ideation, and ACEs Human Trafficking Substance Use, including smoking, alcohol, marijuana, and other drug use Sexual Behaviors, including contraceptive use Body Weight and Body Image Health Conditions Home Life: Support and Security **DISCUSSION/SIGNIFICANCE:** The report has been presented to the school districts, immediate stakeholders, REACH membership, and the general public. Several presentations have been given to groups to report the findings. Workgroups will now be formed to address the needs of our students, as well as a possible follow-up survey to look at data specific to COVID-19 and mental health.

126

### How Weight Stigma Affects Weight-Related Health in Adolescents and Young Adults: Public Health Research with Implications for Translation into Clinical Practice

Laura Hooper<sup>1</sup>, Rebecca Puhl<sup>2</sup>, Marla E. Eisenberg<sup>1</sup> and Dianne Neumark-Sztainer<sup>1</sup>

<sup>1</sup>University of Minnesota and <sup>2</sup>University of Connecticut

**OBJECTIVES/GOALS:** Weight stigma, or discrimination and devaluation of people due to high body weight, is associated with higher prevalence of concerning health consequences (e.g., depressive symptoms, body dissatisfaction). This public health research investigated how experiencing weight stigma affects weight-related health outcomes in a cohort of young people. **METHODS/STUDY POPULATION:** 1,534 Project EAT 2010-2018 participants were surveyed as adolescents (mean age=14.4 years) and eight years later as young adults (mean age=22.2 years). Participants were asked how often they were teased about their weight. Outcomes included body mass index (BMI), nutrition habits (intake of breakfast, fruit, vegetables, sugar-sweetened beverages, fast-food), sedentary/activity behaviors (moderate-to-vigorous physical activity, screen time, sleep duration), and disordered eating behaviors (unhealthy weight control behaviors, extreme weight control behaviors, dieting, chronic dieting, overeating, binge eating). Regression models were adjusted for BMI, sociodemographic characteristics, and, in longitudinal models, the outcome assessed at baseline. **RESULTS/ANTICIPATED RESULTS:** Experiencing weight stigma was cross-sectionally significantly associated with higher BMI, shorter sleep duration, and higher prevalence of all six disordered eating behaviors during both adolescence and young adulthood. It was also significantly associated

with longer screen time in adolescence, and with lower breakfast frequency, higher intake of sugar-sweetened beverages, and higher intake of fast-food during young adulthood. Weight stigma in adolescence significantly predicted higher BMI and higher prevalence of overeating and dieting in young adulthood. For example, adolescents who were teased about their weight had a higher mean BMI (28.2 kg/m<sup>2</sup> [95% confidence interval: 27.8-28.7]) in young adulthood compared to those who had not been teased (26.4 kg/m<sup>2</sup> [95% confidence interval: 26.1-26.8]). **DISCUSSION/SIGNIFICANCE:** Findings add to the growing body of evidence that weight stigma may pose a threat to weight-related health. Because many clinicians are unaware of this evidence and healthcare settings are common sources of weight stigma, next steps include writing a research proposal that aims to decrease weight stigma conveyed to patients in clinical practice.

127

### Reciprocal Innovation Workshops: Identify Shared Health Challenges for Mutual Benefit in Global Health

Thomas Sors<sup>1</sup>, Kara Wools-Kaloustian<sup>2</sup>, Rishika Chauhan O'Brien<sup>2</sup>, Luanne Bermel<sup>1</sup>, Jephchirchir Kiplagat<sup>3</sup>, Marya Lieberman<sup>4</sup>, Nydia Morales-Soto<sup>4</sup>, Winstone Nyandiko<sup>5</sup> and Debra Litzelman<sup>2</sup>

<sup>1</sup>Purdue University, <sup>2</sup>Indiana University, <sup>3</sup>Academic Model Providing Access to Healthcare (AMPATH)), <sup>4</sup>University of Notre Dame and <sup>5</sup>Moi University

**OBJECTIVES/GOALS:** Our concept of reciprocal innovation (RI) supports global health (GH) research partnerships that address shared health challenges for mutual benefit in both high and low- and middle-income (LMIC) settings. To advance this GH approach, the Indiana CTSI launched a RI program building on longstanding global health partnerships in East Africa **METHODS/STUDY POPULATION:** A core component of the program is annual RI workshops to promote reciprocal approaches in GH, identify priority areas for reciprocal research, and link investigators and stakeholders across settings. The first meeting in 2019 was in-person and focused on identifying health priority areas from the perspective of Indiana stakeholders. The second meeting was held virtually and focused on priority areas in East Africa. The third meeting focused on shared priority areas and discussing potential RI research projects. Agenda sessions include (1) presenting successful examples of funded RI projects; (2) breakout groups to share proposal ideas in preparation for the RI grants program; (3) building partnerships with colleagues in similar fields **RESULTS/ANTICIPATED RESULTS:** As of 2021, three RI workshops have been held with an average of 60 attendees at each workshop. Participants identified several overlapping priority areas for research and RI in Indiana and East Africa, including research in chronic disease, substance abuse, infant and maternal health, and access to healthcare. A Global Health Innovation Exchange of RI projects was created to support connections between locally- and globally-focused investigators. The repository is used to share updates on project progress, outcomes, and published materials. Workshops have also been used to explore a reciprocal innovation virtual platform to facilitate and foster more regular collaborations between globally and locally-focused investigators and pursue research projects on shared health challenges for mutual benefit **DISCUSSION/SIGNIFICANCE:** The collaboration at the stakeholder meetings set the foundation for continued partnership building, strong proposals for RI grants, and dissemination and translation of successful RI projects. To leverage momentum from