characterize abortion attitudes among US men who live in areas with restrictive abortion laws using qualitative methods. METHODS/STUDY POPULATION: We will use a semi-structured interview guide to elicit men's attitudes about abortion, characterized within moral, legal, religious, political, and other domains. Inclusion criteria include English-speaking cisgender men, ages 18 to 65 who live in states with the most restrictive abortion laws as defined by the Guttmacher Institute. We will recruit participants through Facebook ads and interviews will continue until theoretic sufficiency. Using an inductive thematic analysis approach, transcripts will be coded for emergent themes by two researchers independently in QRS NVivo 12.0, with concurrent refinement of themes as interviews are completed. RESULTS/ANTICIPATED RESULTS: We will elucidate emergent themes regarding men's abortion attitudes which could include how men think of abortion as a medical, moral, or personal reality, why they do or do not support abortion provision, among many other possibilities. We anticipate that researchers can use the data obtained from this study to begin to build a conceptual framework of abortion attitudes among US men who lives in restrictive states. DISCUSSION/SIGNIFICANCE OF IMPACT: This study will fill an important gap in the literature by qualitatively characterizing abortion attitudes among a population that has political influence on abortion access. Results can inform policy and advocacy campaigns aimed at shifting public abortion attitudes towards increased acceptance.

4127

Achieving health equity in translational research: Applying critical race theory in workforce curricula to address disparity

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OBJECTIVES/GOALS: Learners will:

- Identify social structures that serve as root causes of health disparities
- Critically evaluate the ways in which racism, culture, and power perpetuate disparity
- Use critical reflection to shape their research and advocate for institutional change

METHODS/STUDY POPULATION: The Integrated Translational Health Research Institute of Virginia (iTHRIV) Health Equity curriculum provides a lens for participants to view health disparities, social structures that create and perpetuate disparities, and the path to a more equitable future. This longitudinal workforce curriculum incorporates the principles of critical race theory (CRT), including: race as a social construct, structural determinism, intersectionality, and the social construction of knowledge. Learners gain practical experience through facilitated group discussions and critical reflection of their own work including research question design, recruitment, dissemination, and enhancing the faculty pipeline. RESULTS/ANTICIPATED RESULTS: To measure the impact of the curriculum, we will evaluate learners' participation in mentoring activities for persons from underrepresented backgrounds; participation in local and national diversity and inclusion efforts; engagement in community-based research; ability to account for implicit bias and power imbalances in their research design, including in recruitment and retention; and share research findings with community members and research participants. Evaluation strategies will include quantitative and qualitative methodologies. DISCUSSION/SIGNIFICANCE OF IMPACT: There is growing recognition of the impact of racism on the development and perpetuation of health disparities. Public health critical race praxis (an adaptation of CRT) is emerging as a theoretical framework to empower researchers to challenge the status quo in order to achieve health equity.

4457

Adopting a Team Science Communication Module for Community-Partnered Teams

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OBJECTIVES/GOALS: There is increased recognition that patients and community members are critical to creating impactful research. To this end the UCLA CTSI Community Engagement & Research Program modified an established multidisciplinary team science communication module to train academic-community research teams. METHODS/STUDY POPULATION: Community partners who have had previous experience in participatory research provided input such as limiting the emphases of individual academic introductions to group icebreakers (to level the playing field), reduced academic jargon to lay language, reducing the amount of text to key principles, and changed academic team scenarios for the team activity to represent community-academic teams. Academic partners articulated institutional barriers to integrating community into institutional systems. Iterative testing and modifications occurred through pilots with eleven teams (49 individuals). RESULTS/ANTICIPATED RESULTS: Embedding community partners in team science training involved creating a level playing field with less emphasis on academic credentials, using lay language in the didactic sessions and ensuring accessibility in all aspects of the training. An example of modifications: communication scenarios were read out loud by participants, which community partners felt were not inclusive of potential varying literacy levels and all partners may not feel comfortable reading aloud in a group setting. The vignettes were replaced with short videos of the scenarios with audio recordings. Several modifications were made the training's team activity of the training module. DISCUSSION/SIGNIFICANCE OF IMPACT: Traditional academic team science training required significant modifications for an academic/community-partnered team to allow for optimal collaboration, inclusion, and strategically reduce the power dynamics that can naturally occur. Long-term followup to assess their effectiveness is needed.

4455

Advancing the Science of Community Engagement with Human-Centered Design

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OBJECTIVES/GOALS: To describe how the Community Engagement (CE) Program at the Michigan Institute for Clinical & Health Research (MICHR), a Clinical & Translational Science

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