appropriately contextualized history-taking), demonstration of empathy, and by fostering patient agency.The study thus highlights the importance of clinicians' clear communication,demonstration ofempathy and fostering of patient agencyas critical factors to empowering communication that attenuates Black women's pregnancy-related risk perceptions. DISCUSSION/SIGNIFICANCE: Given the unjust dangers Black women face during pregnancy, this study demonstrates how patient-clinician communication influences Black women's pregnancy risk perceptions, providing recommendations for clinician communication practices that empower Black women and attenuate their perceptions of pregnancy risk.

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Trailblazer Pilot Grants as Originators of Research Collaborators: Past, Present, and Future†

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OBJECTIVES/GOALS: We aim to share information about the Trailblazer Award Pilot Grants, which support collaborative, community engaged research projects with potential to improve health equity in Indiana, and achievements of awardees in terms of publications and funded external grants. We also share plans to expand the impact of the pilot grant process. METHODS/STUDY POPULATION: Data on publications and funded grant applications resulting from Trailblazer Award-funded projects were obtained from progress reports completed by the projects' principal investigators. Awardees submit annual progress reports throughout the project and five years following the close of the project. On these progress reports, awardees list the publications that they have submitted, and their publication status, and external grants submitted and funded. Because some progress reports were never submitted, and projects which began in 2021 or 2022 are not complete, and are therefore likely to have additional publications and grants result from their projects, our results likelyunderestimate the number of publications and grants resulting from these projects. RESULTS/ANTICIPATED RESULTS: Below are a number of charts which illustrate the outcomes of Trailblazer Award projects from years 2015 through 2022, including: the number of applications received as compared to the number of applications funded; the academic institutions of the academic partners on awarded projects throughout the state of Indiana; the general topic areas of all funded projects; and the number of publications and funded grants resulting from Trailblazer Award-funded projects, as reported by awardees. We have found that, in recent years, while the amount of publications by awardees have stayed roughly the same, the numbers of funded external grants resulting from Trailblazer-funded projects have decreased somewhat. [blob:https://acts.slayte.com/8404bbca-3054-4f57-9d36-cd8d6152841b] [blob:https://acts.slayte.com/6b43bd70-fe90-494a-be1a-c091a6ab924d][blob:https://acts.slayte.com/b0e2b7f6-1604-4379-94df-efccdc2e51c2][blob:https://acts.slayte.com/c1a591a7-2a0e-4f6d-ade1-027bb389ef68] DISCUSSION/SIGNIFICANCE: We will implement changes for Trailblazer projects, including hosting workshops on disseminating findings and applying for external funding, and helping awardees to form partnerships within their topic area. We believe providing these resources to awardees will increase publications and grant funding, thereby allowing their work to continue.#_msocom_1.

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Are you trust-worthy: Trust-building activities in Translational Sciences

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OBJECTIVES/GOALS: Many researchers aim to build trust with communities and participants. Trust building is meant to achieve greater representation across aspects of research whether in participation, or more comprehensively as partners from design to dissemination. We provide practical guidance for trust building activities and the ethical issues that can arise. METHODS/STUDY POPULATION: While trust itself is inherently seen as an ethical good, often little attention is paid to the ethical aspects of trust building exercises themselves and the fact that trust can vary in type. Using a bioethical analysis of trustworthiness, we discuss how to approach trust in different relationships and settings. Explicit communication about the supports/constraints and potential outcomes of new trusted relationships is required for ethical practice. Where relationships are built without appropriate transparency and follow through, or with misunderstandings about potential shared values, priorities, or desired outcomes, significant harms can occur in the short- and long term. Using a bioethical framework and practical examples we provide guidance on how to engage in ethical trust building activities. RESULTS/ANTICIPATED RESULTS: While many people are good at the trust building work they do, this work is often not shared as best practices and is ascribed to individual skill. This is slowly changing and an evidence-base is being developed that can support those new to these activities. Ethical guidance to support trust building practices, especially for those new to these activities, is currently lacking. By providing both a conceptual and normative bioethical analysis grounded in practice, we provide the foundations for new activities and the necessary support for work that explores and determines best practices. This analysis provides an understanding of trust including a taxonomy and a discussion of how different types of trust can be built and can support research activities, as well as problems that can arise. DISCUSSION/SIGNIFICANCE: Trust building activities with communities and participants are crucial to much of translational science and research, but ethical guidance on how to engage in these activities well is lacking. We provide bioethical guidance and offer practical recommendations.

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Activating community health workers: A community-academic partnership to understand vaccine hesitancy†

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OBJECTIVES/GOALS: In 2022, Chicago created the COVID-19 Response Corps, a cohort of community health workers (CHWs), trained to conduct contact tracing and vaccine outreach. Through an Earn and Learn program, corps members studied community-engaged

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participatory research, and co-led a rapid assessment with researchers to assess vaccine hesitancy in communities. METHODS/STUDY POPULATION: The Chicago COVID-19 Community Response corps worked to mitigate COVID-19 transmission in disadvantaged neighborhoods by activating CHWs, a diverse public health workforce from communities most affected by health and economic inequities. The Earn and Learn Program allotted 600 corps members up to 7.5 hrs/week of paid capacity building opportunities to learn new skills, pursue training programs, or college courses. Embodying a praxis of participatory action research and intergenerational organizing, corps members co-designed research questions and survey instruments, pilot tested the tools, trained other corps members on how to recruit and collect data, and contributed to the analysis and interpretation of the results. They generated evidenced-informed solutions to address future real-world problems. RESULTS/ANTICIPATED RESULTS: Corps members brought insight, cultural literacy, and lived experience that was invaluable in reaching the priority population of unvaccinated Chicagoans. They enhanced all aspects of the rapid assessment while conducting their work safely and comfortably in neighborhoods that outsiders consider challenging. Community member responses as to why they had not yet received a COVID-19 vaccine included being unable to risk putting what they saw as a rushed or improperly tested product into their bodies, to not being able to risk becoming ill even temporarily due to the potential for lost wages, as well as having other priorities in their lives which took precedence over concern about COVID-19, such as paying bills and feeding their families. DISCUSSION/SIGNIFICANCE: Research and evaluation benefits from the inclusion of CHWs. They are agile agents of change with the potential to replenish and repair trust in a fractured public health system. Engaging CHWs in evaluation work can strengthen community-academic partnerships and enhance the understanding of challenges and solutions to improving community health.

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The MEND Initiative: Meaningfully Empowering the NeuroDiverse

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OBJECTIVES/GOALS: This project's objective is to empower verbally-communicating autistic adults to express their mental health needs to mental health professionals, regardless of their training or experience in autism. By enhancing empowerment in this area, we aim to enhance their self-awareness and confidence in navigating and accessing mental health support. METHODS/STUDY POPULATION: Following the Toronto Translational Framework (TTF), our approach involves co-designing and testing an intervention directly with the autistic population through three phases. Phase I will review published literature on autism, mental health, and patient empowerment, validate our identified need through informal meetings with stakeholders, and assemble an autistic advisory committee (AAC) of 5-8 members who are able to provide informed conset without assistant, are fluent in English, and 18 years of age or older. Phase II will involve participatory design sessions with our AAC to develop a low-fidelity prototype to address the identified need. Phase III will evaluate our prototype's effectiveness through a separate series of focus groups, which will consist of members from our target population. RESULTS/ANTICIPATED RESULTS: We are anticipating that by the end of our research, we have successfully co-designed an intervention that effectievly empowers autistic adults in their mental health journey through increasing their self-awareness and confidence in navigating and receiving mental health support. At a larger scale, results may include the empowerment of autistic adults to seek and receive mental health care from mental health professionals, regardless of professionals' prior autism expertise. DISCUSSION/SIGNIFICANCE: By enhancing self-awareness of their mental healthcare needs and boosting self-reported confidence in communicating with mental health professionals, we aim to take the first step in creating timely, patient-centered solutions, and bridging gaps in the evolving neuro-affirmative healthcare system.

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Strategies for engaging patients in building a model for patient partner engagement to accelerate translational science

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OBJECTIVES/GOALS: To describe the strategies our newly created Patient Partners Program has planned for engaging diverse patients in the co-creation of our planned Patient Partner Academy. We will elicit feedback from other CTSAs about their strategies for promoting individual patient partnerships in research. METHODS/STUDY POPULATION: Our program to promote authentic patient-researcher partnerships to advance clinical and translational research is grounded in participatory approaches to maximize meaningful engagement. The process of creating our Patient Partners Academy is co-led by a patient partner and national leader in re-envisioning the role of patients in research, and a University of Michigan faculty member who advocates for patient partnerships in research. Listening sessions and community engagement studios will involve the developers of patient partner training programs, patient partners who have received research capacity training (as well as researchers and patient partners interested in collaborative research. Insights from these sessions will inform the development of learning models and curriculum content. RESULTS/ANTICIPATED RESULTS: Through individual listening sessions and community engagement studios we will collect data on the barriers and facilitators to patient partner engagement in research and the experiences and preferred learning models in patient partner training programs. Both the listening sessions and community engagement studios will be recorded, transcribed, and analyzed for common themes. We aim to answer three questions: What do patient partners need to be meaningfully engaged as equal partners across the research continuum? How can we best engage people who

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