began integrating into each other's team meetings and processes. Each team has their own process for providing services to investigators, consisting of intake and consultations. To these, we added tags for the other's program topics. This allowed efficient identification of opportunities for referrals and joint consultations. Program leads meet regularly to discuss referrals and partnerships allowing for more effective and consistent collaboration. RESULTS/ ANTICIPATED RESULTS: Over the last two years, OCTRI Community and Recruitment built a collaborative process that allows investigators to work with both programs, receiving comprehensive, supportive assistance and education on how to design their study, engage with community, and recruit participants in a community-based setting. During this time, the programs have: provided consultations that discussed the other's program (N=21); made direct referrals to the other program (N=4); and, provided joint consultations (N=2). Studies that are investigator-initiated, in planning phase, and population focused were found to benefit most from the collaborative efforts. Additionally, we have improved the collaborative process during this time, resulting in more streamlined, efficient support services for investigators. DISCUSSION/ SIGNIFICANCE: Diverse study populations and DE&I are essential to research. This collaborative, community-engaged recruitment approach by our programs allows investigators to leverage both programs' resources and expertise. We continue to identify best practices and study types that benefit from this collaborative approach to improve our services.

199

Early expansion and outcomes of a multilingual Latine review board for inclusive science

J. Tommy White¹, Alicia Bilheimer¹ and Lupe C. Hernandez²

¹North Carolina Translational and Clinical Sciences (NC TraCS)
Institute, University of North Carolina, Chapel Hill, NC, USA and

²UNC Gillings School of Global Public Health, University of North Carolina, Chapel Hill, NC, USA

OBJECTIVES/GOALS: The NC Translational and Clinical Sciences (NC TraCS) Institute's Latine Community Review Board (CRB) provides expertise to researchers seeking to culturally adapt interventions and improve language access in clinical and translational science. Early efforts aimed to expand CRB membership, build member capacity, and assess CRB impact. METHODS/STUDY POPULATION: Founded in 2021, the NC TraCS Latine CRB is an advisory group of natively Spanish-speaking, Latine North Carolinians who contract with research teams (RTs) to review Latine community-facing study materials (e.g., decision aids, scales, recruitment scripts) and provide feedback for improving or validating materials' linguistic accuracy and cultural relevance. Bilingual staff facilitate members' review of materials, use focus group methods to solicit feedback, and report key findings and suggested revisions to RTs. In 2023, we recruited new age-, gender-, and racially diverse members; and implemented process and impact evaluation, via (1) post surveys of RTs and (2) assessment of members' experiences and visions for growth utilizing the Focused Conversation Method (Top-network, 2021). RESULTS/ ANTICIPATED RESULTS: Since 2021, NC TraCS has conducted 11 Latine CRB review sessions to support 7 research studies. Current CRB members (n=8) report that (1) their work effectively supports Latine inclusion in research; (2) increased group size and diversity help ensure study materials are comprehensible to heterogenous Latine populations; and (3) an hourly member compensation rate equal to the hourly rate of TraCS' staff accurately represents member contributions. Members also cited that they value open communication, continuous improvement, communication via email and group chat, periodic programming meetings, and RT updates on study outcomes. Post-session RT surveys to date (n=3) show that RTs would recommend this program to other researchers (pending survey responses from RTs this year will provide additional impact data). DISCUSSION/SIGNIFICANCE: Early data highlight the value of fairly compensated, bilingually coordinated input from diverse Latine community members for improving studies' inclusion of heterogeneous, multilingual communities. Our approach can inform the development, growth, and continuous improvement of multilingual review boards at other research institutions.

200

Assessing Pre-Diabetes Knowledge, Attitudes, & Needs: A Study of the CHW Translational Advisory Board of South Texas

Elisabeth de la Rosa^{1,2}, Paula Winkler⁵, Ariel Gomez⁵, Belinda Flores⁴, Ludivina Hernandez⁵, Sharon Elwin⁶, Virginia Lopez⁷, April Kneuper⁷, Vanessa Ortiz³, Martha Flores⁷, Raquel Romero³, Kathryn E. Kanzler⁶ and and The Community Health Worker Translational Advisory Board (TAB)

¹University of Texas Health Science Center at San Antonio; ²Institute for Integration of Medicine & Science; ³Research to Advance Community Health Center, UT Health San Antonio; ⁴South Coastal AHEC; ⁵South Central AHEC; ⁶Baylor College of Medicine, Center for Innovations in Quality, Effectiveness and Safety and ⁷Community Health Worker TAB

OBJECTIVES/GOALS: The CHW TAB is exploring pre-diabetes knowledge and perceived needs in south Texas to facilitate the role of CHWs to increase the capacity of community members to better manage their prediabetes diabetes risk. The long-term goal of this project is to show how the diagnosis of pre-diabetes can be managed to prevent type 2 diabetes. METHODS/STUDY POPULATION: We selected a two-pronged approach to gather quantitative and qualitative data. CHW TAB members collected data participated in different aspects of the project (e.g., study design, survey development, etc.). Data collection procedures include Quantitative - a 9-item survey in English and Spanish administered by each participating CHW in 2022 at community events. One hundred surveys were collected. In Phase 2: Qualitative, participants attended focus groups to gather in-depth data about pre-diabetes management, including challenges and opportunities, which will inform CHW-led intervention development. Eight English and one Spanish focus groups, with 65 participants in 6 counties were completed. RESULTS/ANTICIPATED RESULTS: This project is still in progress. Preliminary results show that most survey participants identify as Hispanic, and half have been diagnosed with pre-diabetes. Additionally, 87.8% report that prediabetes is a problem in their community. Preliminary focus group findings indicate that knowledge and support for managing prediabetes is missingin South Texas. Many participants report feeling "doomed" to develop type 2 diabetes but are eager to share their experiences.

Additionally, participants report that family and culture play a huge part in their ability to eat healthier foods. DISCUSSION/SIGNIFICANCE: These findings can help identify knowledge gaps, strengths, and areas for promoting and empowering better health behaviors among those who have pre-diabetes. Participant feedback and focus group responses will inform a CHW-led educational intervention through our TAB.

201

Challenges Encountered and Lessons Learned from Developing and Implementing the Michigan Research Engaging the Academy and Community in Health (M-REACH) Platform

Donald Vereen, Athena McKay, Tiffany Veinot, Patricia Piechowski, Polly Gipson Allen, Susan J. Woolford and Sarah Bailey University of Michigan

OBJECTIVES/GOALS: Communities of color often report that their concerns are ignored and desire a means to facilitate effective community-academic engagement, especially during a crisis. The objective is to share lessons learned and challenges faced in the development of an online portal designed to meet this need. METHODS/STUDY POPULATION: The Michigan Institute for Clinical & Health Research (MICHR) worked with community and academics to develop an online tool, the Michigan Research Engaging the Academy and Community in Health (M-REACH) platform. The community-engaged research (CEnR) project involved conducting qualitative interviews exploring connectivity to community and academic organizations and pilot testing of the novel platform. Following development, efforts were made to implement the statewide use of M-REACH. We will report on the challenges encountered and lessons learned from development and optimization of the platform. RESULTS/ANTICIPATED RESULTS: Authors will review the timeline of the launch of M-REACH. Steps to promote engagement of the locally developed platform to statewide utilization will be shared. Challenges encountered with scaling, matching the needs of differing communities both rural and urban, and navigating connections between remote geographies will be presented. Lessons learned and potential solutions will be discussed. DISCUSSION/ SIGNIFICANCE: M-REACH can connect partners by increasing understanding of the CEnR process, enhancing alignment, and building a foundation for well-functioning research partnerships. Further work is required to address the challenges encountered in development and implementation.

202

Improving the Nutritional Impact of Food Pantry Programs: Client Recipe Preferences and Kitchen Equipment Accessibility

Samantha Cheng¹, Ian McConnell¹, Emilie Ruiz², Meera Patel², Farra Kahalnik³, Heather Kitzman², Jaclyn Albin^{1,*} and Sarah Bailey¹ ¹UT Southwestern Medical Center School of Medicine; ²UT Southwestern Medical Center School of Public Health and ³UT Southwestern Medical Center Clinical and Translational Science Award (CTSA) Program

*These two authors contributed equally to this work.

OBJECTIVES/GOALS: Despite food pantries' efforts to improve nutritional quality and encourage healthy cooking, limited evidence exists regarding pantry shoppers' culinary preferences and kitchen equipment access. This project utilized pantry food demonstrations and samples to collect recipe and kitchen feedback. METHODS/STUDY POPULATION: For 4 months, a Culinary Medicine team delivered food demonstrations at Crossroads Community Services food market in Dallas, Texas, which serves primarily Hispanic and Black residents. Each demo provided a food sample, corresponding printed recipe in English or Spanish, and a survey. Part 1 of the survey measured shoppers' hedonic liking of the sampled food and their likelihood of recreating it. Part 2 used the same scale for non-sampled recipes adapted from Health meets Food Community Culinary Medicine programming. Averages of appeal and likelihood to cook between sampled and unsampled groups were compared with a student's T test. Part 3 contained a visual graphic of 24 kitchen appliances, and shoppers circled each item they owned. Investigators collected surveys from 207 shoppers across 12 demos. RESULTS/ANTICIPATED RESULTS: Preliminary analyses showed a positive response to the food demonstrations with a mean rating on a 5-point Likert scale of 4.58 for recipe appeal and 4.46 for likelihood of cooking the recipe at home. The Health meets Food recipes not demonstrated were also positively reviewed (4.40 for appeal and 4.32 for likelihood to cook). There was a statistically significant difference in appeal between sampled and non-sampled recipes (p = 0.03) while no significant difference was found for likelihood to cook (p = 0.08). On average, clients owned 75% of kitchen appliances with most clients owning a sauté pan (94%) but few having access to a food processor (27%). DISCUSSION/SIGNIFICANCE: An effective nutrition program for food pantry clients must be accessible, culturally relevant, nourishing, and enjoyable. Providing samples alongside recipes may increase appeal and engagement. Consideration of kitchen equipment access is essential to promote recipe recreation at home.

203

Assessing social determinants of health and psychosocial factors critical to sustaining recovery among pregnant and parenting women with opioid use disorder

Doris Titus-Glover

University of Maryland, Baltimore

OBJECTIVES/GOALS: This study explored personal recovery support, including social determinants of health and psychosocial needs to understand factors for sustaining recovery among parenting and pregnant women with opioid use disorder. METHODS/STUDY POPULATION: This study used a mixed method quantitative/qualitative design and recruited women from residential/transitional facilities in an urban area. We used the Accountable Health Communities Health-Related Social Needs tool to assess social determinants of health factors, level of physical activity, family/community support, and mental health (stress). Through focus groups, we interviewed women to describe challenges to recovery and to resources including access to providers, housing, childcare, and food assistance from lived experiences. RESULTS/ANTICIPATED RESULTS: Survey analysis showed social determinants of health factors such as food and transportation were partially mitigated by residential living; however, parenting and pregnant women with opioid use disorder remained concerned about housing and finances; and encountered low levels of physical activity and significant stress. Preliminary results from the focus groups revealed a theme of positive recovery and retention experiences from residential living. DISCUSSION/SIGNIFICANCE: Evidence from studies suggests focused interventions for recovering women to reduce relapse risk