

focus groups, qualitative perspectives of the intervention's impact on shared decision-making and overall engagement in treatment will be collected. The study's design ensures active collaboration with the study population and aims to enhance MBC understanding and engagement in mental health care among youth. **RESULTS/ANTICIPATED RESULTS:** We anticipate increased youth involvement within MBC practices, and overall increased engagement in shared-decision making in treatment. We anticipate the developed knowledge product will enhance youth's understanding of MBC, foster dialogue between youth and clinicians, and promote active involvement and informed decision-making in their mental health treatment. By involving youth in the co-design process, our project is poised to foster a sense of ownership and relevance, ultimately improving youth engagement, decision-making, and mental health outcomes within integrated mental health services. **DISCUSSION/SIGNIFICANCE:** Youth deserve to have an active role in shaping treatment decisions. This tool may bridge a gap by equipping youth with the knowledge needed to engage in decisions that are often practitioner-led. This study will discuss the impact and strategies for increasing involvement in MBC practices on youth engagement within treatment.

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### **Equity Considerations and Impacts when Implementing Remote Technologies**

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**OBJECTIVES/GOALS:** The Institute of Translational Health Science (ITHS) Remote Technologies for Research Reference Center (REMOTECH) aims to support researchers using remote technologies. Understanding barriers specifically for engagement of diverse populations is critical to improve equitable access and increase diverse participation in research. **METHODS/STUDY POPULATION:** We conducted semi-structured interviews with researchers (N=30) within the WWAMI (Washington, Wyoming, Alaska, Montana and Idaho) region, identified through participation in a previous survey as well as those known to have previously implemented remote technologies at ITHS institutions. We solicited specific concerns regarding equity, diversity, and inclusion (EDI) related to remote research participant recruitment, retention, and implementation, as well as outcomes and potential solutions. Interview transcripts were coded, summarized, and emerging themes were identified. **RESULTS/ANTICIPATED RESULTS:** The pandemic necessitated a shift to the use of remote research engagement strategies. Our interview findings show that researchers have a desire to: increase diversity through remote engagement options; decrease participant burden; and understand and include strategies that advance equity, diversity, and inclusion (EDI) efforts. While geographic diversity was positively impacted by the use of remote technologies, significant barriers and challenges currently exist in the use of remote technologies with respect to other types of diversity, for example access to technologies and limited financial resources. **DISCUSSION/SIGNIFICANCE:** Remote technologies in research could increase diversity, but interviewees shared barriers and challenges that prevent that from happening. Researchers would

benefit from equity-oriented digital literacy resources to use with diverse populations. Such tools can also be used to guide study design/procedures, materials, and processes.

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### **Promoting Health Equity in South Los Angeles: A Place-Based Initiative in the Nickerson Gardens Housing Development**

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**OBJECTIVES/GOALS:** Partnering with the Housing Authority of Los Angeles, we launched a place-based initiative in the Nickerson Gardens housing development in South Los Angeles, where we apply our community engagement approach of listening and learning, and trust and relationship building, to deliver public health interventions in a discrete community. **METHODS/STUDY POPULATION:** Nickerson Gardens is the largest housing development in Los Angeles, with 1,066 units and over 3,000 residents. 58% and 40% of the residents are Hispanic and Black/African American respectively with an average yearly income of less than \$30,000. To build trust and establish relationships, our team began attending community events, holding weekly educational workshops, and participating in the summer program for youth. We also held listening sessions in English and Spanish that asked about the overall health of the Nickerson Gardens community, environment and public space, access and barriers to care, needed healthcare services, and the lived experience within Nickerson Gardens. **RESULTS/ANTICIPATED RESULTS:** To date, we have held eight 90-minute listening sessions in English and Spanish with 59 participants. The sessions provided insight into the needed health and educational resources and services, the organizational structure of the housing development and how that impacts access to information and services, as well as the nuanced and area-specific transportation issues and the connection to safety concerns. These findings will inform the next phase of this initiative which includes convening a Coordinating Council composed of service providers and Nickerson Gardens residents. This council will oversee the coordination and implementation of needed services, help maintain accountability of the providers, and offer residents the opportunity to take ownership of the process. **DISCUSSION/SIGNIFICANCE:** Academic-community partnerships are an effective strategy to deliver public health interventions and promote health equity in under-resourced communities. We tested and measured impact in a distinct community to reinforce a widely-applicable place-based model.

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### **Strategies used by trained Peer Mentors in an intervention designed to increase engagement in new modalities for HIV prevention**

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**OBJECTIVES/GOALS:** Peer supporters are frequently engaged to help people with marginalized identities access a range of health