community-engaged 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 consent 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