interests, resources/support needed to jumpstart future CEnR projects, types of CPs, PA regions represented by CPs and researchers, and training resources needed to prepare CPs to engage in research efforts. Heat maps illuminating researcher/CP engagement were generated from survey results. While CEnR research projects spanned all 67 PA counties, several studies were in concentrated areas, and thus allow for opportunities to target CEnR outreach in less engaged areas. Data analysis from follow-up surveys will continue to serve as a foundation to best support existing and future CEnR projects. DISCUSSION/SIGNIFICANCE: The CHEER Initiative's purpose is to reduce health disparities and increase wellness throughout underrepresented PA communities by promoting community-engaged research (CEnR). Surveys used to capture both CEnR interests of Penn State researchers and community partners built a successful and sustainable infrastructure for meeting this goal.

Characterizing Aging-Related Health in Women who have Criminal-Legal System Involvement (CHARMS)

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OBJECTIVES/GOALS: To build a multi-function health profile for older adult (>50 years) women with a history of incarceration; explore group differences by age [45-54, 55-64, 65+], race, and length of incarceration; compare with age-matched control with no history of incarceration; and identify relative contribution of life course risk and asset factors. METHODS/STUDY POPULATION: We will analyze data from the Health and Retirement Survey (HRS) (UMichigan Institute of Social Research). The sample: women >50 years who took the leave-behind psychosocial questionnaire. The sample includes women with history of incarceration (n = 118; 2.93%) and (n =115; 2.55%), respectively, and in the control n = 4,021 women (2012) and n = 4,114 women (2014). We will use descriptive statistics to profile physical, functional, cognitive, and social health; bivariable tests to compare groups on age-related morbidity, multimorbidity, frailty, and 4-year mortality risk; measure within group differences by age strata and race; estimate GLMs for effects of life course risk on dependent variables in and between groups; and if data permit, test direct mediation by life course risks and indirect by life course assets. RESULTS/ANTICIPATED RESULTS: Our results will characterize health in 4 health domains of women over 50 who have a history of incarceration. In bivariable analysis, we expect significant differences between groups on the dependent variables. Based on previous study using this data set, life course and accumulated stress theory, and our own previous research, we hypothesize that women with incarceration history will have more and earlier cardiovascular disease, stroke, and multimorbidity, higher 4-year mortality risk, and more and earlier cognitive impairment. We anticipate significant contributors to aging-related health outcomes to include childhood challenge and trauma history and, for Black women, perceived racial discrimination. We anticipate education and social support will partially mediate relationships. DISCUSSION/SIGNIFICANCE: The CHARMS findings, based on large-sample, representative, longitudinal HRS survey data, will contribute a profile of multi-function health status, risk, and assets in older women with CLS involvement. The much-needed characterization of aging in the group will set the stage for future interventional study to guide shifts in clinical practice.

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Colorado Immersion Training: Ten years of lessons learned and accomplishments

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OBJECTIVES/GOALS: The Colorado Immersion Training in Community Engagement (CIT) provides experiential training in community-based participatory research (CBPR). We summarized evaluations from the first ten years on program outcomes and lessons learned to inform future programming and the field of community research. METHODS/STUDY POPULATION: CIT is a six-month program that includes didactic sessions, group readings and reflections and a one week immersion experience in a Colorado community experiencing health disparities. The Evaluation Center - University of Colorado Denver provides external evaluation services to the Colorado Clinical and Translational Science Institute (CCTSI). Evaluators used three primary methods to collect data to evaluate the program; Document review, interviews, and surveys. Evaluation data were analyzed using the framework of CBPR Principles and the CBPR conceptual logic model to understand potential shifts in researchers' thinking and actions, as well as to identify the potential for longer-term impact. RESULTS/ANTICIPATED RESULTS: As of 2020, CIT trained 122 researchers. 25 CIT alumni went on to receive 33 CCTSI Pilot Grants. Out of these 33 grants, an additional \$8,723,000 of external grant funding was awarded to continue projects. Community Research Liaisons are a crucial component of the program through their efforts to bridge academic researchers and communities. Survey results indicated that community partners reported high levels of satisfactions with the program and shared stories about the impact they have seen in their community. Common challenges for researchers remain 1) protected time and institutional value and, 2) funding opportunities. DISCUSSION/SIGNIFICANCE: CIT has grown CBPR researchers. Similar programs should consider contributing factors: establishing institutional value and funding for CBPR initiatives with protected time for developing and maintaining community relationships. CIT offers a crucial connection between academia and community.

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Community Driven Research Day: Addressing Community Needs in Rural Pennsylvania

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OBJECTIVES/GOALS: Describe the community of Norther Dauphin County, PA and increase awareness of this community's health related needs. Establish partnerships between Penn State faculty and Northern Dauphin County community-based organizations to develop an optimal approach to address identified health related needs. METHODS/ STUDY POPULATION: Northern Dauphin is located in the rural Northern Tier of Dauphin County, PA and has roughly 30,000 residents within 272 square miles. Of those residents, approximately 1 in 4 families live below the poverty level. Although over 6,000 residents receive Medical Assistance (MA), only one local provider accepts MA covered patients. Residents have limited access to health care due to the rurality of the area when paired with a lack of public transportation. The Penn State Clinical and Translational Science Institute (CTSI) Community Engaged Research Core (CERC) has partnered with Northern Dauphin County community- based organizations