

in the community and working together to design and deliver solutions

METHODS/STUDY POPULATION:

- Identify measures in the 3 domains of vulnerability, health and assets for the targeted neighborhoods and conduct bivariate descriptive statistics and multivariable regression analyses to investigate association between measures of vulnerability and health outcomes.
- Initiate relationships with leaders and residents in targeted neighborhoods
- Locate organizations working in targeted neighborhoods through online mapping software and word-of-mouth at neighborhood events, and created a spreadsheet with contact information.
- Conduct multidisciplinary assessment (i.e. key informant interviews, focus groups, town hall meetings) of the targeted neighborhood.
- Iteratively synthesize assessments to develop areas of interest and relevance to the community.
- Develop a road map for solutions identified by the community.

RESULTS/ANTICIPATED RESULTS: The results from the environmental scan conducted will be displayed in a report and visual “map” of health outcomes and health determinants, including assets and barriers for the targeted neighborhoods. The research team will use results from the environmental scan coupled with listening activities including attendance at community events, key informant interviews and focus groups to develop relationships and strong collaborations with the targeted neighborhood stakeholders. The relationship building between the research team and community will provide increased trust and engagement that will further enhance the effectiveness of the assessments completed with the targeted neighborhood. The assessments will help to empower communities to develop sustainable solutions and drive future work that will lead to future grant applications and larger-scale implementation in other community impact hub neighborhoods.

DISCUSSION/SIGNIFICANCE OF IMPACT: Through the community impact hub work, we will develop collaborative efforts with targeted neighborhoods with the greatest health inequities in the Marion County area. In partnership with these neighborhoods, we will build a foundation – a network of community collaborators and a focused plan – upon which we will improve the health outcomes of residents while learning best practices on how to do so.

4255

Indiana Clinical and Translational Sciences Institute (CTSI) – CTSA-wide podcast opportunity

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OBJECTIVES/GOALS:

- The podcasts highlight work from our partners: Indiana University, Purdue University and the University of Notre Dame.
- Our goal is to expand our podcast reach to include work from at least three additional CTSA's, as well as highlighting the benefits of translational research to the public.

METHODS/STUDY POPULATION:

- Aaron E. Carroll, is the director of Education and Workforce Development for the Indiana CTSI and a popular writer covering health, research, and policy for *The New York Times*. He is host of the Indiana CTSI-sponsored *Healthcare Triage* podcasts as well as the Healthcare Triage YouTube show, with 340,000 subscribers. We will leverage his audience and research expertise to grow the Indiana CTSI podcast participation and increase audience engagement.
- We will eventually allow the nation-wide network of CTSA's to pitch guests and shows covering Translational Research, and invite local CTSA leadership or faculty to participate in the podcast.

RESULTS/ANTICIPATED RESULTS:

- Utilizing quantitative analytics, we expect to see a significant increase in podcast downloads and listeners as we expand our offering to other CTSA's, beyond Indiana
- We expect that the CTSA-wide podcast will increase the nation-wide level of knowledge and understanding of NCATS, translational research, and its benefits to society and healthcare.
- We anticipate, through this expanded podcast offering, a growing number of community members who are informed and engaged on the topics of translational research, clinical and translational sciences and beyond.

DISCUSSION/SIGNIFICANCE OF IMPACT:

- Podcasts are a convenient, portable, and efficient form of science communication.
- Podcasts also make information personal and offer us an excellent and innovative communications vehicle to spread the word about translational research, as well as the excellent work happening at each of our CTSA's.

4475

Meeting Partners Where They Are: Tailoring Community-Engaged Research Consultation Services

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OBJECTIVES/GOALS: One of the most significant challenges to community engagement experienced by Clinical and Translational Science Award (CTSA) institutions is inadequate capacity of academic and community partners to engage in collaborative research. Several CTSA's within the consortium provide consultation services to help address this gap.

METHODS/STUDY POPULATION: For over 10 years, the Michigan Institute for Clinical and Health Research (MICHR), a CTSA at the University of Michigan, has provided CEnR-specific consultations to partners seeking support for a variety of needs. Consultations can be requested for assistance with identifying potential partners, developing partnership infrastructure, finding CEnR funding opportunities, and incorporating CEnR

approaches into research plans. When a consultation is requested, MICHHR's Community Engagement (CE) Program responds by planning a meeting with staff and faculty who have relevant skills, expertise, and connections. After the initial meeting, the CE Program provides follow-up communication and support based on the needs of the specific request, and often facilitates connections with potential partners. RESULTS/ANTICIPATED RESULTS: The two most frequent types of consultation requests involve 1) making connections with potential researchers or community partner organizations, and 2) providing guidance on research grant applications that involve community engagement. MICHHR provides approximately 50 CEnR consultations each year, which have resulted in development of new partnerships, grant submissions, and research projects that utilize CEnR principles and address community-identified health priorities. DISCUSSION/SIGNIFICANCE OF IMPACT: This presentation will describe the evolution of MICHHR's CEnR consultation process and highlight successful outcomes and lessons learned over its 12-year history. CONFLICT OF INTEREST DESCRIPTION: NA

4046

Museum and Arts-Space Programming Intended to Improve Health: Interim Survey Results

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OBJECTIVES/GOALS: Many museums and art spaces conduct programming intended to improve health outcomes, but arts professionals' perceptions of these programs are not well known. This study describes arts professionals' experiences with museum and art-space interventions intended to improve health. METHODS/STUDY POPULATION: A 14-item digital Qualtrics survey was administered to museums and arts organizations selected using snowball sampling. The survey was sent to a range of arts and cultural organizations and professional membership bodies in the US and UK. Survey questions assessed the range of audiences involved in health programs, what types of activities museums and arts organizations are offering to support health outcomes, and how programs are evaluated. RESULTS/ANTICIPATED RESULTS: From 10/30/19-11/19/19, 151 surveys were completed; 66 respondents (44%) have a museum/arts in health program. Common target populations include individuals with mental health concerns (33, 22%) and older adults (26, 17%). Improving well-being (56, 37%) and social isolation (50, 33%) were the most common intended outcomes. Respondents reported using a variety of program evaluation methods including formal (23, 15%), informal (31, 21%), and anecdotal (37, 25%). Interviews are planned with a purposive sample of respondents conducting, or interested in conducting, a program for individuals with chronic pain and those formally evaluating their programs. DISCUSSION/SIGNIFICANCE OF IMPACT: Interim survey responses indicate many cultural organizations engage in programming intended to improve health outcomes. Understanding the cultural sector's current efforts to improve health represents an initial step in translating these efforts into effective intersectoral research partnerships.

4073

Parents of Faith Support School-Based Sex Education: A Louisiana Study

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OBJECTIVES/GOALS: Louisiana state law does not require sex-education (SE) in public schools. Locally and nationally, religious identity and beliefs are often invoked to oppose access to sexual and reproductive healthcare and education. This study aimed to explore support for SE among Louisiana parents, focusing on how religiosity may influence parent support for SE. METHODS/STUDY POPULATION: Participants included 1,197 Louisiana parents and caregivers of children in grades K-12 who completed a web-based survey. Multivariate logistic regression analysis was used to determine associations between covariates and support for SE. RESULTS/ANTICIPATED RESULTS: Sixty-eight percent of parents reported that their overall approach to life is based on their religion or faith. Of those parents, 77% agreed that schools should be required to offer SE. In multivariate analysis, parents who reported that their whole approach to life is based on their religion on faith were 26% less likely to support required SE compared to parents whose whole approach to life was not based on their religion; however, this difference was not statistically significant (adjusted OR 0.74, 95% CI 0.44-1.24). Although support for required SE declined as religiosity increased, a strong majority of parents support requiring SE in Louisiana schools, regardless of religiosity. DISCUSSION/SIGNIFICANCE OF IMPACT: Contrary to opposition claims, strong support for SE exists among Louisiana parents and caregivers of faith. Parents and leaders of faith may be engaged as partners in advocacy for SE as well as other sexual and reproductive health issues.

4301

Racial/Ethnic variations in discharge destination after inpatient care: A risk-adjusted analysis of a large regional dataset[†]

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OBJECTIVES/GOALS: While there are many well-documented factors for racial/ethnic variation in discharge destination, less is known about the role hospital processes play. We hypothesize that variation in hospital processes -defined as the patient length of stay (LOS) adjusted for known confounders - explains racial/ethnic variation in discharge destination. METHODS/STUDY POPULATION: Our sample was 176,686 discharges from 165 hospitals in 2014 using the New York State Inpatient Dataset from the Healthcare Cost and Utilization Project, merged with the 2014 American Hospital Association Annual Survey to build a file of inpatient discharges with patient, disease and socio-economic characteristics. We excluded patients under 18 years, those with LOS of zero, those who died, those admitted to critical access hospitals, and patients from hospitals that lacked sufficient number of minority patients. We used a generalized linear mixed effects model to create an in-hospital risk-adjusted LOS by modelling the relationship between the interaction of race and discharge destination and LOS, controlling for known confounders such as patient, disease and between-hospital