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Hollywood, Health & Society: Infusing Cutting-Edge Science into Popular Media

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OBJECTIVES/GOALS: Partner with the entertainment industry to build trust in science and research, especially among high-disparity and underserved communities, through inclusion of research themes on popular television shows. METHODS/STUDY POPULATION: To date, our partnerships with TV writers have led to inclusion of clinical research storylines on 10 popular TV shows (e.g., Grey's Anatomy with an audience of 7M). We are now conducting research on show popularity among diverse audiences, and interviewing medical and entertainment experts to understand health priorities and potential entry-points to deliver targeted outreach. We are also analyzing keywords in scripts to assess frequency and sentiment of medical topics in entertainment. Our team also consults with the TV community regarding storylines and public service announcements on health and innovations in medicine. RESULTS/ANTICIPATED RESULTS: We anticipate reporting insights into current and shifting narratives around future-of-medicine topics. Building on work that reached over 64M viewers, more frequent and accurate depictions will likely be related to positive changes in attitudes, behaviors, and trust regarding health and science. The overall goal is to foster attitudes among high-disparity and underserved populations that will increase service utilization and early screenings, foster trust in research and evolving medical technologies, and combat misinformation. DISCUSSION/SIGNIFICANCE: By working with television writers of shows proven to be popular among key audiences, this initiative has the potential to reach millions of viewers in their homes with important and timely information modeling healthy behavior, providing accurate facts, depicting cutting edge research, and emphasizing diversity in medical research.

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Identifying and Describing Hybrid or Fully Remote Research in Washington, Wyoming, Alaska, Montana and Idaho

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OBJECTIVES/GOALS: The Institute of Translational Health Science (ITHS)Remote Technologies for Research Reference Center (REMOTECH) aims to ease the use of remote technologies in research, addressing barriers to research participation related to in-person and onsite assessments METHODS/STUDY POPULATION: We engaged with stakeholders in our CTSA catchment area to understand the use and impact of remote research: implementation practices, participant acceptability, and impact on accrual. This environmental scan consisted of three parts: (1) Facilitated discussion groups with clinical trial regulatory and implementation experts regarding 10 key areas of research operations using composite case studies of research using remote technologies; (2) Semi-structured interviews with research teams who have successfully implemented remote technologies, querying about specific technologies, expected and actual barriers, and impact on the study population; and (3) A survey distributed to 900+ faculty and staff identifying prevalence of hybrid or fully remote research and describing specific remote technologies. RESULTS/ANTICIPATED RESULTS: Discussion group preliminary findings show experts recommended prioritizing the assessment of value and burden for both research participants and the research team, that equity and diversity should not be sacrificed to accommodate cost and efficiency, and the importance of evaluating the impact of implementing remote technologies on data collection and analysis. Seventeen of 30 interviews are complete, mid-point analysis shows researchers wanting formal best practices and training in remote research, desire increasing diversity through remote options, and expressing concerns about participant burden. 46% of survey respondents report implementation barriers, including participant burden and confusing regulatory pathways. 17% thought remote technologies were not appropriate for their studies. DISCUSSION/SIGNIFICANCE: We plan to leverage a multidisciplinary team to address the identified barriers and disseminate through a public remote technology information portal. Coding and further analysis is underway, including additional interviews targeting researchers working with adolescents and older adults with an increased focus on equity and diversity.

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Impact of Gender Affirming Medical Care Access

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OBJECTIVES/GOALS: Gender affirming medical care such as hormone therapy surgery can greatly impact the emotional wellbeing and quality of life of transgender and gender-nonconforming individuals. In the US, insurance coverage for these services vary greatly. This project will focus on how insurance denial of gender affirming care can impact emotional wellbeing. METHODS/STUDY POPULATION: Data was collected via the LITE Connect study, a multi-institutional cross-sectional survey conducted among transgender and gender non-conforming adults in the United States and Puerto Rico from 2020 to 2021. The survey collected 2,125 responses concerning demographic data, insurance status, desire to access gender affirming care, history of insurance denial of gender affirming care, psychological distress (measured via Kessler 6 scale), self-harm, and suicide. The study population consisted of respondents who have sought GAMC in their lifetime, and further separated into individuals who have had insurance denial of gender affirming care versus those without insurance denial. Odds ratios were examined for categorical variables and linear regression was conducted for Kessler 6 score. RESULTS/ANTICIPATED RESULTS: Of the 2125 respondents, 1274 (61%) have sought out GAMC. Of those seeking GAMC, 451 (35.4%) have experienced an insurance denial. Preliminary analysis of the odds ratios of insurance denial versus demographic identifiers found no significantly increased odds ratios with respect to race, gender, or age. Given the impact GAMC has on quality of life, we theorize that difficulty accessing gender affirming care would be associated with greater psychological distress. Linear regression found a statistically significant impact of insurance denial of GAMC on Kessler 6 responses (Beta = 0.9684, R^2 = 0.0069). With adjustments for age, gender identity, race, and insurance status, linear regression found denial of GAMC led to a 1.28 increase in Kessler 6 score (CI [0.59, 1.98], $p < 0.05$). DISCUSSION/SIGNIFICANCE: This study examined the association between access gender affirming care and emotional

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wellness as measured by the Kessler 6 scale. We have found a statistically significant correlation between insurance denial of GAMC and psychological distress, indicating an avenue for intervention for a vulnerable population.

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Introducing the new Justice, Equity, Diversity, and Inclusion special interest group

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OBJECTIVES/GOALS: The Association for Clinical and Translational Science (ACTS) offers important inter-institutional communities through Special Interest Groups (SIGs). New to the SIG ecosystem is the Justice, Equity, Diversity, and Inclusion (JEDI) SIG. METHODS/STUDY POPULATION: Formed in 2022, the JEDI SIG is a growing community of individuals seeking to develop papers and products relating to improving health equity and workforce diversity within the Translational Science Community. Within this context, diversity is broadly defined to include groups at a negative power differential within US society. RESULTS/ANTICIPATED RESULTS: Comprised of 54 individuals spanning 29 institutions as of our first meeting in October 2022, the JEDI SIG is a welcoming group for ACTS members looking to make a difference. We have developed working groups to develop SIG-directed projects, and we look forward to expanding our activities in the future. DISCUSSION/SIGNIFICANCE: In this poster we will share key information about the new JEDI SIG including monthly meeting times, current activities, and ideas for future work.

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Measuring the Impact of Community Engagement Brokers through Qualitative Interviews

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OBJECTIVES/GOALS: As the clinical and translational research enterprise evolves toward addressing health equity and the science of translational science, the CE Brokers are exploring new avenues for impacting the CTSA consortium. METHODS/STUDY POPULATION: Since 2013, managers of Community Engagement (CE) programs across the NCATS CTSA institutes have met monthly to build connections, share knowledge, and advocate for the boundary spanner role. As the clinical and translational research enterprise evolves toward addressing health equity and the science of translational science, the CE Brokers are exploring new avenues for impacting the CTSA consortium. The CE Brokers are composed of 140 individuals from 58 CTSA-associated institutions, and have a long history that has fostered rich, trusting relationships. The growth and strength of this group has primed it to pivot with the new NCATS direction to contribute meaningfully to the science of community engagement and continue the work of improving health equity within the communities we serve. RESULTS/ANTICIPATED RESULTS: In 2022; we surveyed its members about their roles and responsibilities; the ways the network has contributed to their hub's adoption and development of best practices and innovations; resources and lessons learned; the creation of opportunities for members to collaboratively conduct and disseminate original research; and research on the science of CE. Grounding ourselves in this initial data, we have developed interview questions to take the inquiry further, by gathering qualitative data on the impact of the group: How the Brokers group impacted them personally and professionally; How the Brokers impacted the work of their CTSA; In three words, describe the group; How could the CE Brokers contribute to the science of community engagement? DISCUSSION/SIGNIFICANCE: Together, we will identify themes supported by quotes to inform how the CE Broker group is most effectively moving the CTSAs' mission forward and how it can be improved. These will be shared at the Translational Science Meeting, 2023.

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Meta-analysis of Transgender Exclusion from PrEP Clinical Trials

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OBJECTIVES/GOALS: To evaluate access to Pre-Exposure Prophylaxis (PrEP) medications for transgender individuals examining how systemic and sociocultural obstacles play a role. Additionally, analyzing the impact of trans-exclusion in clinical trials investigating PrEP efficacy on the trans-HIV care model. METHODS/STUDY POPULATION: By examining the clinicaltrials.gov database, inclusion and exclusion criteria will be collected for Phase III trials of FTC/TAF (Descovy) and FTC/TDF (Truvada) as PrEP for Human Immunodeficiency Virus (HIV). Secondly, trends of physicians' prescription of PrEP will be analyzed to track post-approval usage and deduce the acceptance and adherence of PrEP by transgender patients. Thirdly, post-approval marketing strategies of PrEP medications will be documented to see key demographics that biopharmaceutical companies are targeting. Finally, relevant literature about trans healthcare will be analyzed to identify key short fallings to support conclusions and justify recommendations for greater transgender clinical trial enrollment and reformations to current standard practices. RESULTS/ANTICIPATED RESULTS: After a preliminary literature review of published Phase III trials for Descovy and Truvada , there is a marked lack of transgender patient enrollment. Contemporary literature argues that this lag in enrollment has downstream effects on trust and acceptance of PrEP as safe and effective by cohorts in the transgender community. The examination of prescribing information for Descovy and Truvada for PrEP reveals a minimal effort to advise doctors of the increased risk for infection in the transgender demographic. Through continued research, I expect to elaborate on the cross-discipline impacts of trans-exclusion, including increased rates of HIV infection, sociocultural and financial barriers to PrEP, and stigmatizing doctor interactions with transgender patients. DISCUSSION/SIGNIFICANCE: The current trans-HIV treatment paradigm lags behind in its sensitivity and nuance, preventing the most equitable distribution of care. Only with more inclusion of transgender individuals in clinical trials can we hope to promote greater awareness and trust for PrEP as effective for HIV.

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