program lasted 6 weeks, with 1 session per week, participants received up to 35 trip perturbations per session. The feasibility and acceptability of PBT to participants and clinicians was assessed within the Theoretical Framework of Acceptability, prospectively and retrospectively via interviews and surveys, and concurrently via field notes. RESULTS/ANTICIPATED RESULTS: Data analysis is ongoing and will be complete by the time of presentation. Preliminary results suggest the portable PBT program was generally acceptable to older adults and local clinicians. Perceived effectiveness was generally positive and increased balance awareness and low burden are emerging as common themes. Local clinicians indicated the burden of implementing PBT was low, PBT fit within their views on fall prevention, and had a high level of perceived effectiveness. There appear to be a few limitations to feasibility, which are primarily related to the weight and transportation of the treadmill. We are currently working to refine the treadmill and lower its weight and are developing a grant with local clinicians and extension agents that would facilitate transportation to a broader network of communities. DISCUSSION/SIGNIFICANCE: Our preliminary findings suggest PBT is feasible in rural communities and accepted by older adults. Increased balance and fall awareness and low burden are emerging as important factors in the feasibility and acceptability of PBT. This study provides a foundation for future studies to translate other PBT modalities from the lab to the community.

227

The History of PACER (Partners for the Advancement of Community Engaged Research) as a Special Interest Group of ACTS

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OBJECTIVES/GOALS: To outline the successes of Partners for the Advancement of Community Engaged Research (PACER), a Special Interest Group (SIG) of ACTS, created to bring together academic and community researchers to promote best practices, contribute to science and form collaborative networks to improve public health through community research and dissemination. METHODS/STUDY POPULATION: Developed from the CTSA Key Function Committee, PACER began monthly meetings in early 2015. Zoom replaced teleconference technology for the initial email list of about 100 people from 50 institutions which has grown to 225 members from 88 affiliates. Meeting attendance is 40 to 50. PACER meetings start with operational updates and member announcements (15 minutes), proceed to presentations (20-25 minutes), followed by Q & A and discussion (20 minutes). A subset of members functions as an Operations Workgroup, meeting monthly to discuss emerging issues and guide the group's activities. Email traffic is intentionally limited to one or two messages a month, including meeting announcements. RESULTS/ANTICIPATED RESULTS: PACER meetings have included 65 presentations. Featured speakers have described local community engaged research, explored methodology, and talked about diversifying the workforce, ethics, programs and partnerships. PACER members have collaborated on three manuscripts published in the Journal of Clinical and Translational Science; one with 50 members and 20 institutions contributing. Additionally, PACER members obtained two federal grants, including a network to recruit underrepresented scientists and diverse participants for the All of Us precision medicine effort. These projects totaled $23.5M in funding and involved 9 CTSA hubs. Measuring the value of ongoing dialogue and promulgation of successful practices through presentations has proven challenging. DISCUSSION/SIGNIFICANCE: ACTS support helps PACER SIG members share research interests, develop papers and proposals, and archive meeting materials on the SIG webpage. Beginning with Translational Science 2018, the in-person PACER meeting is a much-anticipated opportunity to meet colleagues and foster new collaborations, and is a critical addition to the PACER calendar.

230

The impact of the COVID-19 pandemic on stress, substance use, and teen dating violence among young adult women in Baltimore City

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OBJECTIVES/GOALS: Social distancing practices during COVID-19 may impact experience of stress, substance use and violence exposure. This study aims to describe the effect of the COVID-19 stay-at-home orders on stress, substance use, and teen dating violence (TDV) among young women living in Baltimore City. METHODS/STUDY POPULATION: Study participants were recruited from an observational study examining TDV before the COVID-19 pandemic, through snowball sampling, pediatric and adolescent primary care clinics, the pediatric emergency department, and a registry for patients interested in participating in COVID-19 research. Participants were between the ages of 16 and 22, identified as female, and lived in Baltimore, Maryland. They were asked to complete a baseline survey. March 16, 2020 (Maryland governor's stay-at-home order) through June 2022 defined the COVID-19 pandemic period. The survey assessed stress experiences, including isolation, finances, job loss, transportation, school stress, substance use, experiences of violence and adherence to COVID-19 safety measures. We conducted descriptive and bivariate analyses. RESULTS/ANTICIPATED RESULTS: Participants (n=105) had a mean age of 19.4 years (SD 1.73). Preliminary analyses demonstrate that stress associated with isolation, finances, transportation, and school increased during the pandemic compared to pre-pandemic. In addition, the majority of participants who used marijuana, e-cigarettes, and alcohol used about the same amount or more of each substance during the pandemic. For the next steps, we will examine experiences of TDV for young women during the pandemic and examine whether experiences of TDV differ for young women who reported a greater adherence to COVID-19 safety measures compared to participants who adhered less. DISCUSSION/SIGNIFICANCE: Assessing the impact of COVID-19 safety measures on stress, substance use, and TDV is critical to informing and designing future public health interventions. In addition, the information obtained from this study may be used to address the unique challenges faced by disenfranchised populations while curbing the spread of infectious diseases.

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