

transitioned, 36 moved, and 15 died. Seventy patients are still under pediatric care and were excluded. Sixty-eight percent of patients that transitioned had their last pediatric visit in Birmingham, compared to only 32% of those that transitioned from outreach sites ($p < .01$). Patients were more likely to successfully transition if they had sickle cell anemia (HbSS or HbSÄŸ0) ($p < .01$) and if they were receiving hydroxyurea or chronic transfusion therapy ($p < .01$). DISCUSSION/SIGNIFICANCE OF FINDINGS: Geography, genotype, and SCD therapy are potential drivers for transition. Genotype in pediatrics likely confers disease severity, suggesting patients with worse SCD may be more likely to successfully transition. Novel strategies are needed to improve transition of care for patients outside of Birmingham and those with less severe disease.

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Mothers' and Fathers' Parent-Child Aggression Risk, Intimate Partner Violence, and Perceived Child Behavior Problems*

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ABSTRACT IMPACT: In light of the high co-occurrence between intimate partner violence (IPV) and physical child abuse, studying these forms of aggression simultaneously, bidirectionally, and longitudinally is vital to address this public health need. OBJECTIVES/GOALS: This study examined reciprocal associations between parent-child aggression (PCA) risk, IPV victimization, and perceived child behavior problems, to evaluate whether negative processes can transmit across family subsystems (i.e., spillover hypothesis) and/or across individuals (i.e., crossover hypothesis) over time. METHODS/STUDY POPULATION: Participants were first-time mothers and their male partners enrolled in a prospective longitudinal study, which tracked parenting and PCA risk over the transition to parenthood and into early childhood. The current project examined data from the third and fourth waves, when participants' child was 18 months old and approximately 4 years old. At both timepoints, parents reported on their PCA risk (i.e., child abuse potential, harsh parenting), physical and psychological IPV victimization and perpetration, and perceived child behavior problems. Mothers and fathers each completed protocol on laptops in separate private rooms. Hypotheses were tested with autoregressive cross-lagged path models, which were estimated for mothers and fathers separately as well as dyadically. RESULTS/ANTICIPATED RESULTS: Findings partially supported the hypotheses, with evidence of spillover occurring bidirectionally for mothers and unidirectionally for both mothers and fathers. Mothers' PCA risk predicted their subsequent IPV victimization and their reported child behavior problems (i.e., spillover effects) as well as fathers' reported IPV victimization (i.e., crossover effect). Maternal reports of child behavior problems also predicted mothers' reported IPV victimization and fathers' reported child behavior problems, indicating possible child-driven effects. Overall, results demonstrate the mutual influence of individuals and subsystems within the family. Additionally, mothers rather than fathers appear more vulnerable to harmful spillover effects. DISCUSSION/SIGNIFICANCE OF FINDINGS: The need for family prevention and intervention services is clear, given the complex, transactional nature of family violence. Particularly for mothers, higher PCA risk may herald an increased risk for subsequent IPV victimization and vice versa. Clinical implications for parent-focused intervention programs are discussed.

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The UAB COVID-19 Collaborative Outcomes Research Enterprise (CORE): Developing a Learning Health System in Response to the Global Pandemic

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ABSTRACT IMPACT: Interdisciplinary networks represent critical components of translational science and learning system development. Our work impacts translational research by presenting an evidence-based approach to developing interdisciplinary networks in response to the COVID-19 pandemic; the approach presented may have broad applications within other academic institutions and medical centers. OBJECTIVES/GOALS: As a local response to the COVID-19 pandemic, we established the University of Alabama at Birmingham COVID-19 Collaborative Outcomes Research Enterprise (CORE) as an interdisciplinary learning health system (LHS) to achieve an integrated health services and outcomes research response amid the pandemic. METHODS/STUDY POPULATION: We adapted a learning system framework, based upon a scoping review of the literature and the Knowledge to Action Framework for implementation science. Leveraging this framework, we developed an institutional-level collaborative network of extant expertise and resources to rapidly develop an interdisciplinary response to COVID-19. The network was designed to quickly collect newly published or clinical information related to COVID-19, to evaluate potential usefulness of this information, and to disseminate the new knowledge throughout the interdisciplinary network; we strove to engage a wide variety of expertise and skills in the network. Thus, we subsequently used social network analysis to examine the emergence of informal work patterns and diversified network capabilities based on the LHS framework. RESULTS/ANTICIPATED RESULTS: We identified three principal characteristics of institutional LHS development including: 1.) identifying network components; 2.) building the institutional collaborative network; and 3.) diversifying network capabilities. Seven critical components of LHS were identified including: 1.) collaborative and executive leadership, 2.) research coordinating committee, 3.) oversight and ethics committee, 4.) thematic scientific working groups, 5.) programmatic working groups, 6.) informatics capabilities, and 7.) patient advisory groups. Evolving from the topical interests of the initial CORE participants, three scientific working groups (health disparities, neurocognition, and critical care) were developed to support the learning network. DISCUSSION/SIGNIFICANCE OF FINDINGS: Interdisciplinary collaborative networks are critical to the development of LHS. The COVID-19 CORE LHS framework served as a foundational resource that may support further institutional-level efforts to develop responsive learning networks. The LHS approach presented may have broad applications within other academic institutions and centers.

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Physical and Cognitive Resilience and Alzheimer's Disease in a Tibetan Buddhist Monastic Community

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ABSTRACT IMPACT: The findings of this study could lend us insights into behavioral intervention that could potentially prevent