221

Factors Influencing COVID-19 Testing among American Indians and Latinos in Two Rural Agricultural Communities: A Qualitative Study

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OBJECTIVES/GOALS: Despite efforts to improve COVID-19 health outcomes through testing and vaccination, SARS-CoV-2 has exacerbated health disparities in underserved populations. Through this study we examined socio-contextual factors impacting decisions to test for COVID-19 among Native Americans in the Flathead Reservation and Hispanics in the Yakima Valley. METHODS/STUDY POPULATION: A series of 28 key informant interviews and 6 focus groups (N=39 focus group participants) were completed with community and tribal leaders using an interview guide informed by the Theory of Planned Behavior, Social Cognitive Theory, and the Social Contextual Factor Frameworks. The interview guide was designed to examine the socio-contextual factors impacting decisions to test for COVID-19 among Native Americans and Hispanics in the Northwest. A codebook was developed to apply deductive coding to informant responses, followed by an inductive, constant comparison approach. Three analysts met to refine the codebook and conduct inter-rater agreement. RESULTS/ANTICIPATED RESULTS: Five themes (social, cultural, health, religious and political factors) were identified that impacted testing for COVID-19. For social factors, participants discussed the influence of families and friends and unfair employment practices influencing decisions to test. Cultural factors included deep rooted distrust for the government and historical trauma. Health factors participants reported included the importance of testing to save lives, distrust for medical system, and health communications around COVID-19 affecting decisions to test. There was some interaction between religious and political factors. While participants mentioned beliefs in putting things in God's hands, some decisions to test seemed to be affected by their political views. DISCUSSION/SIGNIFICANCE: Several socio-cultural factors influence decisions to test for COVID-19. Understanding the community's perception of COVID-19 testing is critical for successful implementation of preventive strategies.

222

Stress and Coping Efforts Among Caregivers of Children with Down Syndrome: Application of The Transactional Model of Stress and Coping

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OBJECTIVES/GOALS: Stress is amplified in parents of children with Down syndrome (DS). However, little is known about caregivers'use of coping strategies in relation to stress-related eating and their child

with DS. The purpose of this study is to explore stressors and coping resources that increase or decrease stress-related eating among caregivers of children with DS. METHODS/STUDY POPULATION: This descriptive qualitative study sought to understand and describe the lived experiences of caregivers of children with DS. Fifteen caregivers of children, ages 2-6-years with DS, completed an online survey and individual interview. The Transactional Model of Stress and Coping was used to develop the interview guide and to assess related constructs using the Mindful Eating Questionnaire (MEQ), Perceived Stress Scale (PSS), Salzburg Stress Eating Scale (SSES), and a subscale of the Eating and Appraisal Due to Emotions and Stress Questionnaire (EADES). Interviews were audio-recorded, transcribed verbatim, coded using NVivo 12, and analyzed using deductive thematic analysis based on theoretical constructs and content approaches. RESULTS/ANTICIPATED Thirteen of the 15 participants reported moderate to high perceived stress on the PSS. Stressors identified by caregivers included caring for a child with DS, feeding difficulties, physical and mental health, family and social interactions, and finances. Caregivers utilized various interpersonal resources to cope, including family, friends, and social media groups. In the interviews, stress-related eating was revealed as a coping mechanism for 9 caregivers. Also, 13 caregivers reported eating more or eating less when stressed on the SSES and 7 caregivers reported increased emotional eating as measured on the sub-scale of the MEQ. Only two caregivers described using mindfulness strategies throughout the interview. DISCUSSION/SIGNIFICANCE: Overall, caregivers of children with DS report increased perceived stress related to their role as a caregiver of a child with DS, which may be related to changes in caregivers' dietary intake. Dietary interventions developed for these families should include mindful eating and stress management strategies.

223

Surgical Management of Degenerative Cervical Myelopathy: Comparing Outcomes Between Patients Admitted Through Clinic Versus Emergency Department Dagoberto Pina¹, Jared Watson³, Alex Villegas¹, Zachary Booz¹, Joseph Holland², Micaela White¹, Gabriel Santamaria¹, Joseph Wick³, Wyatt Vander Voort³, Brandon Ortega³, Keegan Conry³, Yashar Javidan³, Rolando Roberto³, Eric Klineberg³, Shaina Lipa⁴, Hai Le³ ¹University of California, Davis School of Medicine, Sacramento, CA ²U of L School of Medicine, Louisville, KY ³UC Davis Health Department of Orthopaedic Surgery, Sacramento, CA ⁴Brigham and

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OBJECTIVES/GOALS: Degenerative cervical myelopathy (DCM) can lead to pain, disability, and permanent spinal cord impairment. Timely diagnosis and surgical intervention is essential to optimize functional outcomes for patients with CSM. Here, we compared patients who were admitted through clinic versus the emergency department (ED) for surgical management of DCM. METHODS/STUDY POPULATION: Patients aged ≥18 years admitted for surgery for DCM through clinic (elective cohort) were compared to a surgical cohort who were evaluated through the ED (call cohort). Basic demographics included age, gender, race, ethnicity, and insurance payor. Sociodemographic characteristics were estimated using the Social Deprivation Index (SDI) and the Area Deprivation Index (ADI) for the state of California, which were obtained through aggregated Zip Code Tabulation Area (ZCTA). Cervical MRI was reviewed to assess severity of spinal cord compression. Other outcomes included number of motion segments operated on, functional outcome using the Nurick classification, length of stay (LOS), disposition, and