

perspectives on factors that affect their participation during family centered rounds and (2) resource preference (tablet, computer on wheels, paper notes) used by trainees and the reasons for said preference. **METHODS/STUDY POPULATION:** We performed a cross-sectional study with English-speaking parents who were present for multidisciplinary family centered rounds and whose children were admitted to the inpatient pediatric unit at a tertiary care academic medical center. Parents were surveyed after rounds to ascertain their opinions on factors affecting their participation in rounds, preferences in respect to the resource used by trainee, and whether they believed the resource used on rounds that day affected their understanding or participation in rounds. Parents were also asked to articulate the reasons behind their preferred resource. Responses were analyzed using descriptive statistics, and qualitative responses were analyzed for themes. **RESULTS/ANTICIPATED RESULTS:** In total, 40 parents enrolled. Common responses regarding factors affecting parental participation included: information was explained in way that was easy to understand (90%), parents' understanding of the medical information (85%), eye contact with the medical team (78%), if the medical team asks for parent input (75%), and the health of the child (70%). Fewer parents (23%) believed that the type of resource used affected their participation. Tablets were the preferred technology resource (33%) due to their portability, ease of accessing information, and that they encouraged interaction with the patient. Fewer preferred computers on wheels (27%) and paper notes (5%). In total, 35% of parents reported no preferred resource. No parents said that tablets were their least preferred resource. Reasons computers on wheels were least preferred (13% of parents) included their large size and that they limited eye contact, whereas, parents stated that paper notes were least preferred (13% of parents) because they were old-fashioned, easy to lose, and not accurate; 68% of parents stated the resource used did not affect their understanding on rounds that day, and 83% asserted the resource had no effect on participation. **DISCUSSION/SIGNIFICANCE OF IMPACT:** Clear and engaging communication during family centered rounds is most important to parents' participation. The type of technology resource used is less relevant, but parents favor the use of tablets when they report a preference. Given the convenience for providers, tablet utilization as part of a family centered, trainee based rounding process has potential benefit.

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Psychological mechanisms linking food insecurity and obesity

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OBJECTIVES/SPECIFIC AIMS: The current pilot study will use a mixed methods approach to investigate the role of psychological mechanisms in the relationship between food insecurity and obesity. We will be the first to assess 4 key psychological constructs (delay discounting, grit, future time perspective, and subjective social status) in a sample of food secure and food insecure adults with and without obesity. The specific aims are: (1) Examine associations among psychological mechanisms, food security status, and body mass index (BMI); and (2) Collect qualitative data on psychological mechanisms linking food insecurity and BMI. **METHODS/STUDY POPULATION:** This is a cross-sectional, observational pilot study that will be conducted in the local Baton Rouge community. The target study sample is 56 food secure and food insecure women and men aged 18–49 years with a BMI of 20.0 kg/m² or greater. Independent (grouping) variables are food security status and BMI. Primary endpoints are 4 psychological constructs measured via questionnaires: (1) delay discounting, (2) grit, (3) future time perspective, and (4) subjective social status. We will also assess a number of key covariates, including health literacy, sociodemographics, food assistance use, and dietary quality. Semistructured, in-depth interviews will be conducted in a subsample of 12 participants. **RESULTS/ANTICIPATED RESULTS:** For quantitative data, we will test for significant associations between food insecurity, obesity, and selected psychological mechanisms via bivariate correlations and linear and logistic regression models. Qualitative data will be analyzed to identify key themes and concepts that conceptually link the aforementioned psychological mechanisms to food insecurity and obesity. Analyzed qualitative data will be triangulated with quantitative findings. **DISCUSSION/SIGNIFICANCE OF IMPACT:** This pilot study will examine the role of psychological mechanisms in the relationship between food insecurity and obesity. Moreover, we are gathering data to identify potentially new intervention targets that will be used to develop intervention strategies aimed at reducing health disparities by effectively promoting weight management among low socioeconomic populations.

Qualitative study of obesity risk perception, knowledge, and behavior among Hispanic taxi drivers in New York

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OBJECTIVES/SPECIFIC AIMS: To access obesity risk perceptions, knowledge and behaviors of Hispanic taxi cab drivers and develop a better understanding of the factors that influence health outcomes in this population. **METHODS/STUDY POPULATION:** Focus groups were conducted at NYC H + H/Lincoln, where subjects were screened and recruited from taxi bases with the help of the local Federation of Taxi Drivers. This was done by utilizing flyers, messages through taxi-base radios, and referrals from livery cab drivers. Approval from the local Institutional Review Board was obtained. The research investigators, developed a structured focus group procedural protocol of open-ended interview questions related to cardiovascular disease. Participants for the focus groups were older than 18 years old and working as livery cab drivers in NYC for at least 6 months. Three focus groups were held with informed consent obtained from each participant in their primary language before the start of each session. After completion of the focus group, participants received a gift voucher for attending the approximately 1-hour session. Focus groups were moderated by trained research staff members at Lincoln. Three main categories of questions were organized based on perception, knowledge, and behavior. Participants were questioned on topics about obesity, CVD and diabetes knowledge; knowledge about etiology, risk perception, possible prevention and interventions. Responses were recorded using audiotapes and transcribed verbatim. If participants did not elaborate on the initial question, a probing question was asked to clarify. The transcript was translated from Spanish by trained bilingual staff and analyzed using standard qualitative techniques with open code method. Four research investigators read the transcript separately and formulated concepts, which were then categorized and formulated into dominant themes. These themes were then compared and analyzed with a group consensus to ensure representative data. Once recurring themes emerged and the saturation point was reached, the study concluded, after enrolling 25 participants. The Health Believe Model (HBM) was employed to understand and explain the perceptions and behaviors of taxi drivers. HBM is one of the most widely recognized models and is used to understand, predict and modify health behavior. HBM helps to identify perception of risks of unhealthy behavior, barriers for having healthy behavior, actions taken by patients to stay healthy, self-efficacy and commitment to goals [12]. **RESULTS/ANTICIPATED RESULTS:** Of the 25 Hispanic livery cab drivers, 92% were male. The majority of taxi drivers that participated in the study were immigrants (96%), with a mean age of 53 years (ranged 21–69), and 92%, were spoke Spanish. In total, 52% participants identified themselves as Hispanic, 20% White, 4% Black, and 20% did not identify their race. Mean body mass index (BMI) was 31 (22.8–38.7) kg/m². In all, 56% were obese and another 40% were overweight. From this sample, 50% had been diagnosed with hypertension and 27% were living with diabetes. In all, 64% had a high school education or higher. Answers provided by the taxi drivers to focus group questions were recorded, reviewed and divided into 8 dominant themes based on concepts that emerged from the focus groups discussions. (a) Focus group study findings: Themes recorded during the focus group discussions, include poor diet, sedentary lifestyle, comorbidities/risk factors, stress, health not being a priority, discipline, education, and intervention. Participants shared their opinions in regards to these themes with minimal differences, making an emphasis on the fact that the nature of their profession was the root cause. Of the themes, the top 3 dominant themes include poor diet, sedentary/lifestyle and comorbidities/risk factors. (1) Diet: The theme “Poor diet” evolved from 151 related concepts that were described by participants. All 25 participants perceived their diet as bad due to eating high-fat meals associated with the cultural food and restaurant chains with lower food prices and ease of car parking. Drivers also reported that they did not have enough time to eat healthy foods based on their long working hours. They say: “comemos muy tarde por que preferimos montar un pasajero” ... stating that they preferred to pick up passengers and delay their meals. However, they consider poor diet as the most decisive factor in their increased risk for obesity, diabetes, and hypertension. (2) Life Style: The theme “Sedentary lifestyle” was derived from 147 similar concepts described by participants. They believe that physical inactivity is another leading risk factor for obesity, diabetes, and CVD. The demands of the profession force them to drive more than 10 hours per day. They understand the importance of daily exercise but they admit that at the end of the workday they are too tired to exercise or “stop working” to participate in exercise as this means less money. They also understand that family history of obesity in addition to poor diet increases their risk of obesity, diabetes, and cardiovascular risks. (3) Comorbidity: The theme “Comorbidities” developed from 143 concepts grouped together. Taxi-drivers perceived that obesity complications directly