Arkansas State Profile

Building Resilient Inclusive Communities

Overview

Building Resilient Inclusive Communities (BRIC) is a program of the National Association of Chronic Disease Directors (NACDD) Center for Advancing Healthy Communities. NACDD and its more than 7,000 Members seek to improve the health of the public by strengthening leadership and expertise for chronic disease prevention and control in states, territories, and at the national level. Established in 1988, in partnership with the U.S. Centers for Disease Control and Prevention (CDC), NACDD is the only membership association of its kind serving and representing every state and U.S. territory’s chronic disease division.

In collaboration with the CDC’s Division of Nutrition, Physical Activity, and Obesity (DNPAO) and the Division of Population Health (DPH), and a team of nationally recognized experts, NACDD is providing funding to 20 states (including 15 DNPAO SPAN-funded states and five DNPAO Ambassador states) to implement BRIC at both a state and local level. As part of the program, states are engaging more than 60 communities to address food and nutrition security, safe physical activity access, and social connectedness through policy, systems, and environmental (PSE) change strategies. Social determinants of health, health equity, and social justice principles are integrated into the planning and implementation of all three strategy areas, in addition to accounting for the impact of the COVID-19 pandemic on groups at highest risk.

The initial project period was Jan. 1, 2021 – Dec. 31, 2021; an additional year of funding was awarded in 2021 and again in 2022, expanding the project period to Dec. 31, 2023. These profiles represent the state- and community-level activities planned by each BRIC state.

Learn more about the BRIC program or e-mail BRICinfo@chronicdisease.org.

State-Level Activities

Overarching

- Contribute to the Arkansas Department of Health’s COVID-19 specific Strategic Plan.
- Engage Arkansas Department of Transportation to advise on built environment projects.
- Conduct quarterly meetings of the Arkansas BRIC (ArBRIC) Partnership. Partners include Office of Health Equity (OHE), Arkansas Minority Health Commission (AMHC), Arkansas Disability and Health Program (ADHP), Tri-County Rural Health Network (TCRH), Arkansas Coalition for Obesity Prevention (ArCOP), Hometown Health Improvement (HHI) Northeast and Southeast Regions, Arkansas Delta Regional Obesity Program (ArDROP), Healthy Active Arkansas (HAA), Arkansas Arthritis Program, and Arkansas Department of Transportation.

Food and Nutrition Security

- Coordinate Nutrition Pantry Program (NPP) training for seven partner organizations to increase capacity and support local pantries.
- Coordinate with the Arkansas Disability and Health Program (ADHP) to assess the NPP Program for accessibility and provide technical assistance to farmers markets and pantries to ensure accessibility.
Safe Physical Activity Access
- Partner with Arkansas Disability and Health to participate in community walk audits and ensure inclusion of people with disabilities from the local community.

Social Connectedness
- Partner with Tri-County Rural Health Network to support communities in authentic community engagement related to social connectedness.
- Partner with Arkansas Chronic Disease Coordinating Council (CDCC) on the Arkansas 2030 Chronic Disease State Plan to ensure strategies that support social connectedness and equity are included.
- Build relationships with new staff at the Arkansas Department of Human Services, Aging and Adult Services Division to provide input into the next State Aging Plan.

Community-Level Activities

Chicot County (Rural)

Food and Nutrition Security (Reaching an estimated 2,736 residents)
- Collaborate with Arkansas Hunger Relief Alliance to assist pantries in conducting trainings for food pantry personnel on trauma-informed nutrition; dignified, healthy distribution; and newly revised nutrition standards for adoption by the organization.
- Administer survey to assess food insecurity rates with local worksites and identify best practices to improve access and nutrition quality in workplace food pantries and/or arrange mobile delivery options to meet food insecurity needs.
- Work with food bank, food pantries, and feeding sites to train food pantry personnel on best practices for Pantry Rx to support disease-specific food needs, such as diabetes, and work to develop food preference lists for clients with various clinical conditions.

Safe Physical Activity Access (Reaching an estimated 10,208 residents)
- Support at least two verified changes in the characteristics of the community that demonstrate equitable walkability and improved safety. Ideas proposed by the community include pop ups, wayfinding signage, and crosswalk art via youth engagement.

Social Connectedness (Reaching an estimated 10,208 residents)
- Collaborate with healthcare (local clinics and hospital) and church organizations to implement a train-the-trainer program to deliver social connectedness educational programs and activities for older adults.
- Collaborate with local organizations that support older adults (e.g., Area Agency on Aging, American Association of Retired Professionals (AARP) local chapter, and senior centers) to implement intergenerational programs such as the Story Walk project.

City of Gosnell, Mississippi County (Rural)

Food and Nutrition Security (Reaching an estimated 460 residents)
- Conduct at least three community planning meetings to establish a sustainable farmers market and implement Double Up Food Bucks program (DUBF).
- Join the Arkansas Farmers Market Association (AFMA) to obtain technical assistance, identify a Market Manager, and coordinate with ArCOP for DUBF application.
Safe Physical Activity Access *(Reaching an estimated 3,025 residents)*
- Conduct at least two community engagement meetings to create a local improvement plan to improve walkability and safety.
- Develop and implement a community design plan for safe and equitable access to transportation.
- Develop a Master Bike and Pedestrian Plan.

Social Connectedness *(Reaching an estimated 3,025 residents)*
- Host two community forums with community health workers to identify community appropriate and equitable strategies for social connectedness, educate community members, and get feedback.
- Identify at least two equitable programs in the community to foster healthy, ongoing, supportive relationships between older adults and youth.

Helena-West Helena, Phillips County *(Rural)*

Food and Nutrition Security *(Reaching an estimated 3,662 residents)*
- Collaborate with Arkansas Hunger Relief Alliance to implement training on the newly revised nutrition standards for adoption by the organization.
- Conduct community planning meetings to establish a sustainable farmers market along with Double Up Food Bucks (DUFB) program.
- Join the Arkansas Farmers Market Association (AFMA) to obtain technical assistance, identify a Market Manager, and coordinate with ArCOP for DUFB application.

Social Connectedness *(Reaching an estimated 16,568 residents)*
- Develop partnership with organizations serving older adults to bridge community services and support offered to seniors. Organizations include local senior center, housing authority and Mid-Delta Healthy System and Christopher Homes.
- Establish procedures and referral system with partners to connect seniors with local community programs.
- Collaborate and engage local community health workers in the development of community partnerships to expand services and interventions to address loneliness and isolation among our senior population.
- Engage with community living in high burden communities to identify solutions to social isolation for older adults.

**Health Equity Spotlight**
- Partner with Arkansas Minority Health Commission, Arkansas Disability and Health Program and Tri-County Rural Health Network community health workers to design and implement community forums with the intent to give voice to community members who have been impacted by inequity.
The Improving Food Security, Access to Safe Physical Activity, and Social Connectedness (otherwise known as the Building Resilient Inclusive Communities, or BRIC) program is supported by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling $7,000,000 with 100 percent funded by CDC/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. Government.