

State of Asian Americans and Pacific Islanders in Iowa, 2015

Closer look at a rapidly growing population



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Executive Summary

Asian Americans and Pacific Islanders, or AAPIs, are a growing, diversifying, and driving force in the Hawkeye State. According to 2013 data from the U.S. Census Bureau, approximately 65,000 Iowa residents identified as being Asian alone, comprising 2.1 percent of Iowa's population and marking a 72.8 percent increase from 2000. Likewise, the population of Native Hawaiian and Other Pacific Islanders (NHPI) has also grown. In 2013 over 3,000 Iowa residents identified as being NHPI alone, making up 0.1 percent of the state population and signifying a 172.8 percent increase from 2000.^{1,2} In total, there are more than 68,000 Iowa residents identifying as Asian and NHPI. According to a projection made by Woods & Poole Economics, Inc., Iowa's combined AAPI population in 2040 will grow to 106,000.³

These fast-growing state trends reflect larger national trends. In 2012, the Asian population rose by 2.9 percent (530,000), making it the fastest-growing racial or ethnic group in the United States. This rate exceeded that of the Latino population (2.2 percent). NHPIs constituted the third fastest-growing group, with almost a 2.2 percent growth rate.⁴

This report takes a closer look at the AAPI population in Iowa. On the surface, it appears that AAPIs are doing well in the state across a variety of areas. For instance, there is much to rejoice about in the statistics showing that in 2013, 47 percent of Asians in Iowa held occupations in management, business, science, and the arts.⁵ However, a new community within the Asian population—including recent immigrants and refugees—is overwhelmingly employed in entry-level manufacturing and production jobs, and has much less job mobility and fewer opportunities. The top barriers to career advancement are limited English speaking ability and lack of time and resources to attend school.

On a similar note, AAPIs in Iowa may be seen as succeeding financially when looking at statistics on median household income. From 2009 to 2013, Asians alone had a median income of \$59,560, compared to Iowans as a whole at \$51,843.⁶ However, Asians also had a poverty rate of 15.2 percent, which was higher than the overall 12.4 percent poverty rate for Iowans.⁷ NHPIs alone had a high median household income at \$63,456, yet there is a large margin of error for this statistic (due to the small NHPI population size), and NHPIs had a relatively high poverty rate at 21.0 percent.^{8,9}

With the implementation of the Affordable Care Act (ACA), access to health care for AAPIs has increased and improved dramatically. However, meaningful access to linguistically and culturally appropriate care is a high need. The issue of ineligibility for both state and federal health care programs for Compact of Free Association (COFA) migrants is of significant concern, not very well known to many service providers and lawmakers, and one that the ACA does not address. There are approximately 2,000 Marshallese and Micronesians living in Iowa who have no means of getting health care if they have severe health conditions and are unable to purchase insurance through the marketplace.¹⁰ Moreover, the lack of organized groups—especially in NHPI communities—makes working with these populations more challenging and difficult.

The popular perception that AAPIs are academically and economically successful minorities sometimes puts the issues of disadvantaged AAPIs in the shadows. In particular, Asians in Iowa who face language barriers are the most underrepresented and unable to advocate for themselves. Oftentimes they are in the

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process of figuring out their lives, balancing jobs, and learning about the new communities in which they have settled. Younger AAPIs who are students may likewise face language barriers, as a number of them are English Language Learners (ELL) in school. Though the K-12 population of ELL students identifying as AAPI is small, about 43.4 percent of Pacific Islander and 34.6 percent of Asian students within their own race identified as ELL during the 2014-2015 school year.¹¹ There is great diversity in the languages spoken by AAPIs across the state, and it is essential that policies and programs are able to recognize and serve the needs of AAPIs on the issue of language access, which can profoundly impact many aspects of life for people of all ages.

This report brings much needed attention to the state of affairs for AAPIs in Iowa, covering key topics such as education, health care, economic activity, language access, and civic participation. Given that there are significant gaps in data about AAPIs in Iowa and across the country, it is necessary to interpret the data and outcomes with caution; further data collection, disaggregation, and analysis on the AAPI population is a necessary next step. Nevertheless, this is the first comprehensive report in over a decade to detail Iowa's AAPI population, providing voice to often overlooked and misunderstood issues and urging community members, researchers, and policymakers to confront the pressing challenges facing AAPIs and their fellow Iowans.

History of Refugee and Immigration Settlement in Iowa

Asian Americans and Pacific Islanders have a long history in the United States. One of the earliest groups of Asian immigrants to settle in the U.S. were Filipino sailors in the mid-1700s, who arrived in Mexico as part of the Manila-Acapulco Galleon Trade and moved to what is now Louisiana.¹² During the 1840s, Chinese sailors and merchants arrived in New York, and even greater waves of Chinese workers settled in California to join the Gold Rush and later to work on the Transcontinental Railroad. The late 1800s saw the arrival of other Asian immigrant groups, yet they were prevented from taking root due to a growing set of restrictive immigration laws and racial violence targeting Asians. It was only until after passage of the 1965 Immigration and Nationality Act—which eliminated national origin quotas for entering immigrants—that the country’s Asian American population began to grow significantly. Since then, the Asian American population has experienced rapid rates of growth that continue to today.

According to the Iowa Department of Human Services, the Fall of Saigon in April 1975 during the Vietnam War signified the beginning of Iowa’s engagement with Asian immigrants.¹³ What follows is the story of how Iowa became a new home for Asian refugees, and continues to be so today.

As American troops withdrew from Vietnam after the Fall of Saigon, the neighboring country of Laos became more volatile. Less than two weeks later, 1,228 Tai Dam crossed from Laos into Thailand. Thereafter, a request for asylum for the Tai Dam was sent to Canada, France, and the U.S. Prior to this event, many of the Tai Dam had fled to Laos in the 1950s after the communist government gained control in North Vietnam. Those unable to escape were separated from their families, lost their possessions, and dispersed throughout the country in re-education camps.

A former U.S. government employee by the name of Arthur Crisfield, who had previously worked with the Tai Dam, wrote thirty U.S. governors in hopes of addressing the refugee crisis in Southeast Asia. In response to Crisfield’s letter and a personal request from President Gerald Ford, Iowa Governor Robert Ray established the Governor’s Task Force for Indochinese Resettlement in July 1975. Heading the task force was Colleen Shearer, director of Iowa’s Employment Security Commission (IESC, currently known as Iowa Workforce Development). The task force emphasized focusing resources on employment services to support the refugees.

In September later that year, Governor Ray signed a two-year contract with the U.S. Department of State, and 1,200 Tai Dam were granted refugee status for resettlement in Iowa. Funds and resources for the Tai Dam were collected through conducting a media campaign and canvassing employers for job opportunities. On November 17, 1975, the first three planes of the Tai Dam—a group of new Iowans—arrived in Des Moines.

The task force was expanded to serve all refugees in Iowa in the summer of 1976. However, by June 1977, the program was due to phase out as the two-year contract expired. Not long after, a Congressional inquiry was established to investigate the horrific events in Cambodia. The task force was reorganized in September 1977 and renamed the Iowa Refugee Service Center (IRSC). Later that year, as a result of Pol Pot’s “Purification Campaign,” tens of thousands of Cambodian refugees escaped to Thailand to flee the hunger, disease, and mass killings. President Carter signed “The Indochinese Refugee Assistance Program Appropriation Bill” in March 1978 to extend the program from October 1, 1977 to September 30, 1981.

In January 1979, CBS aired a documentary entitled *The Boat People*, which revealed the struggles of refugees in overcrowded camps in Malaysia. The documentary deeply affected Governor Ray, who wrote to President Carter pledging for Iowa to receive 1,500 more refugees. While public opinion was not always supportive of the refugee program—with 51 percent of respondents in a September 1979 Des Moines Register poll being against resettling refugees in Iowa—Governor Ray remained steadfast in his commitment.

History of Refugee and Immigration Settlement in Iowa

In April 1979, the Iowa Joint Voluntary Agencies (IJVA) was created to facilitate interagency information sharing on refugee resettlement and to organize services and projects. The IJVA still operates today.

To support relief efforts in Cambodia, Governor Ray introduced the campaign Iowa SHARES (Iowa Sends Help to Aid Refugees and End Starvation) in November 1979. Running from Thanksgiving to Christmas that year, the campaign raised over \$540,000, in which donations went towards the purchase of food, medicine, and other relief goods. The funds were also used to build orphanages and to support UNICEF relief programs on the Thai-Cambodian border.

In August 1988, the Bureau of Refugee Programs resettled a small number of Amerasians and their families, who were sent to live in Des Moines, Sioux City, and Davenport.

In more recent history, 2006 marked the beginning of the Bureau's resettlement of Burmese refugees, and in 2007 they became the largest group of refugees being resettled. In 2008, the first few Bhutanese refugees arrived to Iowa from camps in Nepal.

The large influx of refugees from Bhutan and Burma in the last five years has added significantly to the Asian population in Iowa. While any Census data has yet to capture the actual numbers of these new Asian groups, community members estimate that there are approximately 3,000 Bhutanese and 7,000 Burmese in the state. The addition of these new groups has brought newer and bigger challenges to the community. An overwhelming 60 to 70 percent of these community members are Limited English Proficient (LEP) and face multiple barriers to successful integration in language, education, transportation, and child care.¹⁴

In addition to the influx of these new Asian groups, the diversity of ethnicities and languages has tremendously increased, making it more challenging for service providers to ensure access to linguistically and culturally appropriate services. For example, Des Moines Public Schools reports that a record number of 6,100 English Language Learners (including AAPI students) were enrolled in the 2014-2015 school year. This is about 20 percent of their total enrollment, speaking as many as 100 languages.¹⁵

As refugees and immigrants continue to make Iowa their new home, it is imperative that they have meaningful access to rights and services relevant to their well-being and development.

Demographics

The Asian American and Pacific Islander (AAPI) population is a demographically rich community. There are over 30 countries, upwards of 100 spoken languages, and a wide range of immigration histories, religions, socioeconomic statuses, educational backgrounds, and cultures represented in the AAPI community.¹⁶ Both the Asian and Native Hawaiian and Pacific Islander (NHPI) populations have seen tremendous growth in recent times. From 2000 to 2010, the nationwide growth rate for Asians was about 46 percent, and for NHPIs approximately 40 percent (Table 1.1).¹⁷

Table 1.1 U.S. Population By Race and Ethnicity¹⁸

Race	2013 Population	Growth (2000-2010)	Growth (2010-2013)
White	252,672,340	7%	2%
Hispanic or Latino	54,205,670	43%	4%
Black	45,070,740	15%	4%
Asian	19,397,080	46%	10%
American Indian and Alaskan Native	6,447,437	27%	5%
Native Hawaiian and Other Pacific Islander	1,432,890	40%	7%

Note: Data per group include those who identified with that category either exclusively or combination with other race category. Hispanic can be of any race.

AAPIs are populous in several states. More than half of the Asian American population (56 percent) lives in California, Washington, Texas, New Jersey, and Hawaii. Two-thirds of the NHPI population (67 percent) lives in Hawaii, California, Washington, Texas, and Utah.¹⁹

However, AAPIs have quickly been growing in new regions during the past decade. In the state of Iowa, the Asian alone-or-in-combination population experienced a 49.6 percent increase from 2000 to 2010.²⁰ More recently, from 2000 to 2013, Iowa's Asian alone population saw a 72.8 percent increase, and the NHPI alone population saw a 172.8 percent increase.²¹

In 2013, Asians alone comprised about 2.1 percent of Iowa's population, or about 65,000 people; NHPIs alone comprised approximately 0.1 percent of the state population, or just over 3,000 people (Table 1.2).²² The combined AAPI population in Iowa is projected to grow to 75,000 by 2020 and to 106,000 by 2040.²³

Table 1.2 Iowa Population By Race and Ethnicity, 2013²⁴

Race	Percent of Population	Estimated
White	91.4%	2,824,640
Black or African American	3.3%	101,984
American Indian and Alaska Native	0.2%	6,181
Asian	2.1%	64,899
Native Hawaiian and Other Pacific Islander	0.1%	3,090
Some other race	1.2%	37,085
Two or more races	1.7%	52,537
Hispanic or Latino (any race)	5.4%	166,882
White alone, not Hispanic or Latino	87.5%	2,704,114
Total Population		3,090,416

Demographics

Figure I.3 Iowa Asian Alone Population by Selected Groups, 2013²⁵

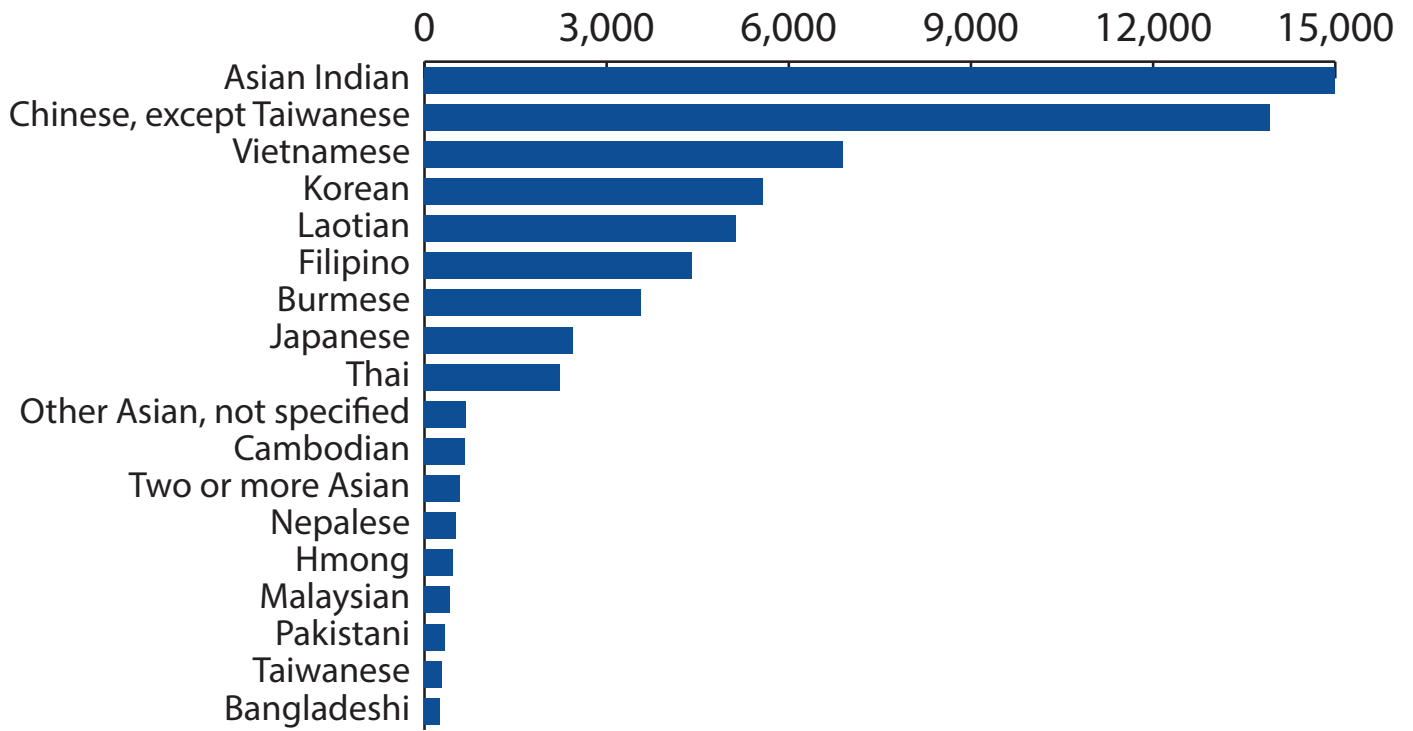
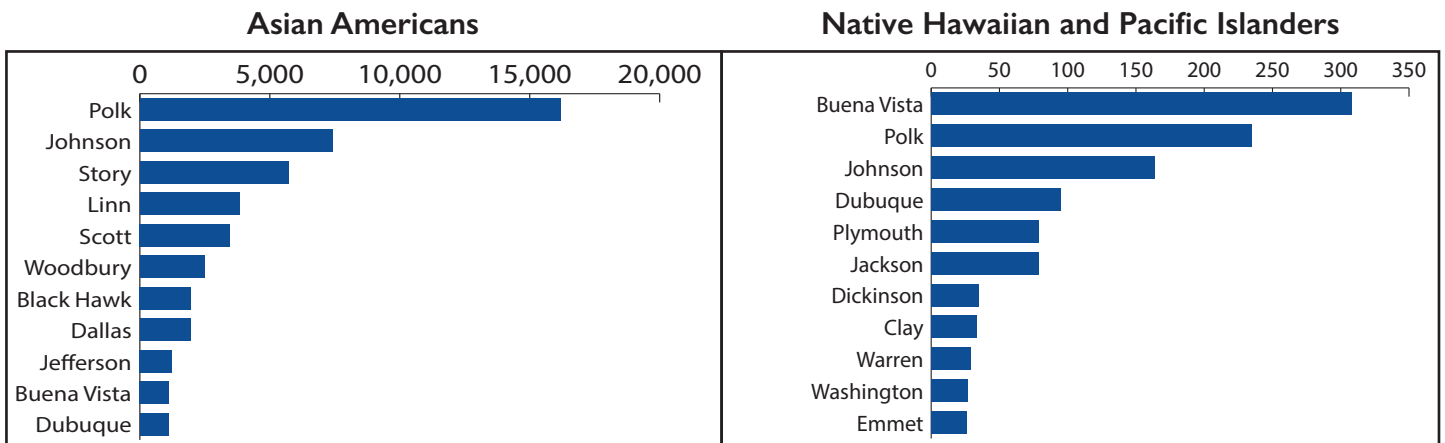


Figure I.4 and I.5 Top Counties of Residence Asian Americans and Pacific Islanders, 2009-2013^{26,27}



Education

School Enrollment

Nationwide projections for school enrollment show increases at both the grade school and undergraduate levels for AAPIs. In the U.S., K-12 enrollment for AAPIs is projected to grow 31 percent from 2009 to 2019. Likewise in higher education, AAPIs are expected to see an enrollment increase of 30 percent between 2009 and 2019.²⁸

According to data from the Iowa Department of Education, Iowa's K-12 AAPI enrollment in public and private schools has seen a 62 percent increase between the 1999-2000 and 2013-2014 school years.²⁹ During the 2014-2015 school year, about 11,773 Asian American students and 983 Pacific Islander students enrolled in Iowa's PreK-12 public schools.³⁰ Thus when combined, AAPIs make up approximately 2.5 percent of the state's total PreK-12 public school enrollment.

Table 2.1 illustrates the breakdown of educational enrollment status for AAPI students in Iowa from 2011 to 2013.

Table 2.1 AAPI PreK-12 School Enrollment, Age 3 and Over, 2011-2013³¹

Enrollment Status	Asian Alone	NHPI Alone	Total AAPI
Enrolled in school	22,432	543	22,975
Nursery school, preschool	1,932	52	1,984
Grade 1-8	6,229	227	6,456
Grade 9-12	2,985	81	3,066
College or graduate school	11,286	183	11,469
Not enrolled in school	34,409	1,108	35,517
Total	56,841	1,651	58,492

The Model Minority Myth and Educational Barriers

The “model minority myth” perpetuates the notion that the AAPI population is a high-achieving, academically and economically successful minority group. Due to this persistent stereotype, AAPIs are also believed to not face barriers in education and are not in need of support. However, the myth over-generalizes the success of a select few to the entire AAPI population, thus silencing the needs and struggles of various AAPI subgroups.

The model minority myth arose from post-1965 immigration policies, whereby immigrants from Asia with high education levels were allowed to enter, study, and work in the U.S. Even in their countries of origin, these immigrants had above average levels of education. As a result of this selective immigration, later arriving groups with a diversity of backgrounds were identified together with the first “model minorities.” The perception of AAPIs as constituting a successful monolithic group persists today, and shapes the outlook of education issues for the AAPI community.

In spite of the model minority myth, there are a number of issues affecting AAPI students in Iowa, such as:

- Limited culturally relevant curriculum in K-12 education. Curriculum that recognizes and utilizes the cultural backgrounds of students, while upholding standards of academic success, can empower students academically, socially, and emotionally.³²
- Learning English as a second language, especially for first-generation, immigrant AAPI students.
- Limited resources about college access and career development designed for students from diverse backgrounds.
- College affordability and adjustment, especially for first-generation and low-income college students.

Education

Language Education

For AAPI students who are English Language Learners (ELL), school presents a unique set of challenges. Table 2.2 highlights the diversity of Iowa’s K-12 ELL student population in public schools, and demonstrates the need for greater awareness of and resources for ELL students and their families.

During the 2014-2015 school year there were approximately 26,988 ELL students enrolled in Iowa’s public schools, or approximately 5.65 percent of the total K-12 population (Table 2.2). The majority of ELL students were Hispanic, followed by students who were Asian and African American. Although the numbers of Pacific Islander and Asian students were small among the total ELL population, about 43.4 percent and 34.6 percent of them, respectively, were ELL students within their own race in the 2014-2015 school year.³³

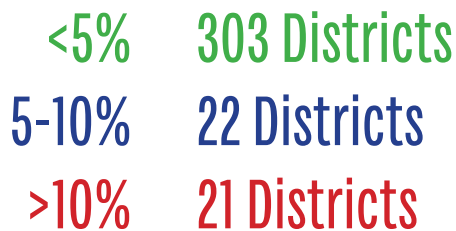
Table 2.2 K-12 Public School English Language Learner Enrollment in Iowa, 2014-2015³⁴

Race	Enrollment	ELL	ELL% (Total)	ELL % (Within Race)	ELL%(ELL)
White	373,370	1,898	0.40%	0.51%	7.03%
African American	26,275	2,718	0.57%	10.34%	10.07%
Native American	1,896	75	0.02%	3.96%	0.28%
Asian	11,080	3,834	0.80%	34.60%	14.21%
Pacific Islander	927	402	0.08%	43.37%	1.49%
Multiracial	16,143	141	0.03%	0.87%	0.52%
Hispanic	47,731	17,920	3.75%	37.54%	66.40%
Total	477,422	26,988	5.65%		

*ELL % (Total) is percent of ELL students in each race over Total K-12 Enrollment
 ELL % (Within race) is percent of ELL students within their respective races
 ELL % (ELL) is percent of ELL students in each race over all K-12 ELL students*

Across school districts in Iowa, the numbers of students with Limited English Proficiency (LEP) vary. The majority of districts have small LEP student populations, yet there are 43 districts with at least 5 percent LEP enrollment (Figure 2.1). Specifically, those with 5 percent or greater LEP student enrollment in PreK-12 are listed in Table 2.3. Several districts have over 30 percent of students identifying as LEP, including Postville (31.5 percent), Marshalltown (35.9 percent), Storm Lake (41.5 percent), and Denison (51.6 percent).³⁵

Figure 2.1 Summary of LEP Enrollment in Iowa School Districts³⁶



(PreK-12, 2013-2014)

Note: The terms ELL and LEP may be used interchangeably in the context of schools and districts; however, they have different original definitions. ELL may imply the process of learning English, whereas LEP is typically used by the federal government to denote persons who are eligible for bilingual services.

Education

Several initiatives are available to strengthen the educational attainment of ELL students, including:

1. Collecting more comprehensive data on the educational needs and experiences of ELL students.
2. Recruiting, hiring, and training more bilingual teachers.
3. Establishing comprehensive ELL programs that encompass areas such as guidance counseling, mentoring, parental involvement, mental health, and finance.

Table 2.3 Iowa School Districts with \geq 5% LEP Enrollment, PreK-12, 2013-2014³⁷

Districts with >10% LEP Enrollment	% LEP	Districts with 5-10% LEP Enrollment	% LEP
Denison	51.6	Eagle Grove	9.7
Storm Lake	41.5	Dows	9.3
Marshalltown	35.9	Boyden-Hull	9.2
Postville	31.5	Waterloo	8.6
Columbus	27.3	West Des Moines	8.5
West Sioux	20.5	Belmond-Klemme	8.2
Perry	19.4	Muscatine	8.1
West Liberty	19.0	Chariton	7.9
Sioux City	18.4	Webster City	7.7
Des Moines Independent	17.3	Clarion-Goldfield	7.1
Hampton-Dumont	16.2	Council Bluffs	7.1
Rock Valley	15.3	Newell-Fonda	7.1
Sioux Center	13.7	West Hancock	7.1
Wapsie Valley	13.0	Iowa City	7.0
South Tama County	12.8	Sheldon	7.0
Jesup	12.2	Alta	6.7
Clarke	12.0	Sibley-Ocheyedan	6.2
Lenox	11.9	Brooklyn-Guernsey-Malcom	6.1
CAL	11.0	MOC-Floyd Valley	5.9
Urbandale	10.4	Ar-We-Va	5.6
Ottumwa	10.2	Estherville Lincoln	5.4
		Ames	5.0

Postsecondary Education

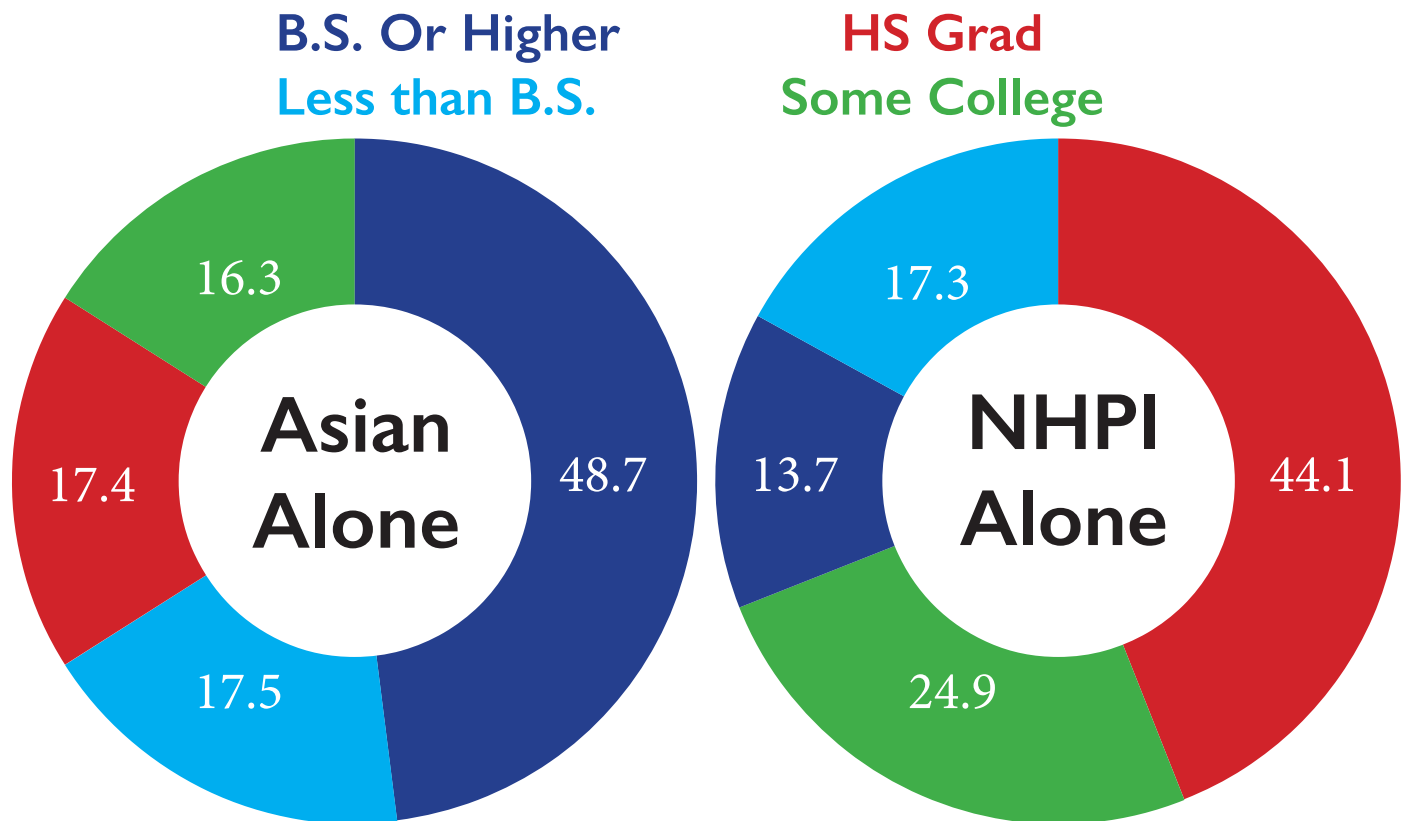
In Iowa, about 52.1 percent of AAPIs age 25 and over had a Bachelor's degree or higher in 2013—the highest rate of any racial or ethnic group in the state. The corresponding rate for all Iowans in this age group was approximately 27.4 percent.³⁸

Figure 2.2 shows that some variability exists for educational attainment within Iowa's AAPI population. For example, about 49 percent of Asians alone have attained a Bachelor's degree or higher,³⁹ but only about 14 percent of NHPis alone have the same education level. Most NHPis are high school graduates or have some college education.⁴⁰

Education

This notable difference in educational attainment between Asians and NHPIs in Iowa is also seen at the national level. According to the National Commission on AAPI Research in Education, there is considerable variability in rates of college enrollment, persistence, and degree attainment amongst AAPIs.⁴¹ Moreover, a breakdown of educational attainment by factors such as ethnicity, socioeconomic status, and immigration history may reveal further disparities in educational attainment.

Figure 2.2 AAPI Educational Attainment in Iowa, Age 25 and Over, 2009-2013⁴²



For AAPI students who are enrolled in college, a range of factors may lead to students not completing their degrees, such as socioeconomic status, parents' education, language, immigration status, family support and guidance, institutional climate, and the model minority stereotype.⁴³ Particularly in Iowa, where AAPI students are a minority on college and university campuses, the abovementioned factors may have profound impacts on their ability to succeed in higher education.

To increase both college access and attainment for AAPIs, postsecondary institutions can focus efforts on community outreach to students and their families. These may include:

- Offering college awareness resources in non-English languages.
- Conducting scholarship and financial aid workshops in community spaces in partnership with community leaders and members.
- Establishing diversity student visit days for prospective and admitted students.
- Investing in culturally and racially-relevant resources on campus (e.g., AAPI student organizations and centers), offering courses and research opportunities focused on the AAPI population, and recruiting professors and staff who are committed to supporting AAPI students and other racial-ethnic minorities.

Health and Health Care

On the issue of health and health care, AAPIs may face particular challenges in navigating the health care system, accessing linguistically and culturally appropriate services, and managing certain diseases and illnesses more prevalent in the AAPI population.

Disease Prevalence

At an estimated 87.3 years of age, Asian Americans have the highest life expectancy of any racial or ethnic group in the country. On the other hand, NHPs have significantly lower life expectancy rates than Asian Americans and non-Hispanic whites.⁴⁴

According to data from the Centers for Disease Control, when compared to non-Hispanic whites, AAPIs as a whole face increased risk of developing certain medical conditions, including:

- *Hepatitis B*: AAPIs are 4.5 times more likely to develop chronic Hepatitis B.
- *Diabetes*: Asian Americans are 10 percent more likely to be diabetic.
- *Obesity*: NHPs are 35 percent more likely to be obese.
- *Liver cancer*: AAPIs are 80 percent more likely to die from liver cancer.
- *Stomach cancer*: AAPIs are twice as likely to die from stomach cancer.⁴⁵

Currently there is a lack of systematic data collection on disease prevalence rates for AAPIs in Iowa. Further efforts to understand disease rates, risks, and outcomes for AAPIs are needed.

Mental Health and Disability

According to the National Alliance on Mental Illness (NAMI), overall prevalence rates of diagnosable mental illnesses among AAPIs are comparable to whites. However, AAPIs have the lowest rates of utilization of mental health services compared to other ethnic populations in the U.S. A national study found that Asian Americans were 25 percent as likely as whites to seek mental health services, and half as likely as African Americans and Latinos.⁴⁶

Common factors affecting the mental health of AAPIs include immigration, acculturation, assimilation, war, and poverty.⁴⁷ The NAMI finds that:

- AAPIs report higher rates of depressive symptoms than whites.
- Southeast Asian refugees are at particular risk for post-traumatic stress disorder (PTSD) associated with trauma experienced before and after immigration to the U.S.
- Among certain groups of Asian Americans, suicide rates are higher than the national average.⁴⁸

Similar to the national AAPI population, Iowa's AAPI population is far from homogeneous. It is crucial that mental health services and resources in the state practice culturally appropriate approaches when assessing, diagnosing, and treating mental health issues for AAPIs, especially those who have recently immigrated and may experience barriers to integration.

Because mental health and disability statistics such as prevalence rate, services utilization rate, and discharge rate often do not specify race and ethnicity in Iowa, it is difficult to pinpoint areas of need. Further research on the state of mental health issues affecting Iowa's AAPI population is necessary and important for addressing the potential gaps in mental health care.

The limited body of knowledge on mental health issues also extends to disability issues in Iowa. In 2011, over 26,000 Iowans identifying as Asian had some kind of disability, accounting for about 7.8 percent of the state's

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population of individuals with disabilities.⁴⁹ Greater data collection on the experiences of AAPIs with disabilities in Iowa is needed.

Alongside the gaps in data, it is also essential for health care providers and AAPI communities to address the silence and social stigma surrounding mental health and disability. The shame associated with having a mental health issue can render professional care as a last resort, such that it is more common for AAPIs to manage their psychological problems or mental disorders by relying on their families or community members, such as elders and religious or spiritual leaders.⁵⁰

Achieving culturally appropriate mental health and disability care in Iowa is an area that must be further explored, prioritized, and implemented. For AAPIs, factors such as ethnicity, language, immigration history, religion, exposure to war trauma, acculturation, family income, and educational attainment are all characteristics that deserve careful attention when addressing mental health and disability issues.

Health Insurance

The rates of health insurance coverage for AAPIs in Iowa are comparable to the nationwide AAPI rate, the latter of which in 2012 was approximately 85 percent of Asian Americans and 82 percent of NHPIs with health insurance.⁵¹ As Table 3.1 shows, in Iowa an estimated 88 percent of Asians alone have health insurance coverage and about 12 percent are uninsured; an estimated 73 percent of NHPIs alone have health insurance coverage and about 27 percent are uninsured (Table 3.1).⁵² Overall, 87.7 percent of AAPIs in the state are covered, which is slightly below the rate for all Iowans at 91.4 percent from 2009 to 2013.⁵³

Table 3.1 Overall Health Insurance Coverage in Iowa, 2009-2013⁵⁴

	Asian Alone	NHPI Alone	Total AAPI
With health insurance coverage	88.1%	73.4%	87.7%
No health insurance coverage	11.9%	26.6%	12.3%

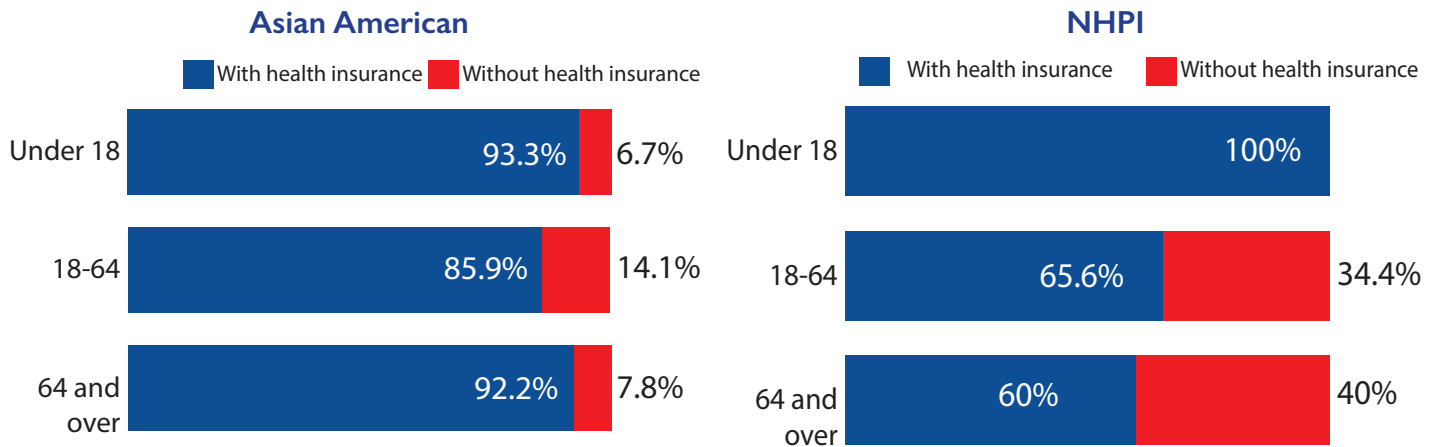
Table 3.2 Health Insurance Coverage Status by Age in Iowa, 2009-2013⁵⁵

Age	Asian Alone	NHPI Alone	Total AAPI
Under 18 years:	13,807	334	14,141
With health insurance coverage	12,886	334	13,220
No health insurance coverage	921	0	921
18 to 64 years:	39,114	941	40,055
With health insurance coverage	33,605	617	34,222
No health insurance coverage	5,509	324	5,833
65 years and over:	2,781	110	2,891
With health insurance coverage	2,563	66	2,629
No health insurance coverage	218	44	262
Total	55,702	1,385	57,087

Health and Health Care

Finally, Table 3.2 and Figure 3.1 display the rates of coverage by age, highlighting the disparities between Asian and NHPI adults in Iowa. Notably, approximately 86 percent of Asians ages 18-64 are covered, while about 66 percent of NHPIs in this age group are covered. The disparity widens for the elderly: about 92 percent of Asians 65 and over have health insurance, but only 60 percent of NHPIs in this age group have health insurance.⁵⁶

Figure 3.1 Health Insurance Coverage by Age: Asian Alone and NHPI Alone, 2009-2013⁵⁷



Cultural Health

The growing AAPI population in Iowa calls for further strengthening of health care access and delivery in the state. In particular, a sustained, systematic effort aiming to improve linguistically and culturally appropriate services is needed. Language barriers are related to increased emergency room visits, more lab tests, decreased follow-up from health care providers, less patient health literacy, and less overall satisfaction with health services.⁵⁸ Thus, it is vital that hospitals and other health care providers are able to ensure that they have sufficient language resources in their facilities (especially in emergency rooms). Resources may encompass translated materials in non-English languages, on-site bilingual staff, and training for health care professionals to work with interpreters.

Income and Poverty

Income

According to the U.S. Census Bureau, from 2009 to 2013 the estimated median household income for all Iowans was \$51,843. This is below the \$59,560 median income of households who reported their race as Asian, and below the \$63,456 median income of households who reported their race as NHPI (Table 4.1). However, taking the large margin of error for NHPIs into account, the estimated \$59,560 median household income for Asians alone is the highest out of all racial groups.⁵⁹

Table 4.1 Median Household Income by Race and Hispanic Origin in Iowa, 2009-2013⁶⁰

Race	Estimate
White alone	\$52,883
Black or African American alone	\$27,060
American Indian and Alaska Native alone	\$30,765
Asian alone	\$59,560
Native Hawaiian and Other Pacific Islander alone	\$63,456
Hispanic or Latino origin	\$39,512
White alone not Hispanic or Latino	\$53,178
Total population	\$51,843

Note: Large margin of error for NHPI, +/- 26,817. For comparison, Asian alone margin of error is +/-2,729.

Table 4.2 Household Income Distribution by Race and Hispanic Origin in Iowa, 2009-2013⁶¹

Household Income	White alone not Hispanic or Latino	Black or African American alone	American Indian & Alaska Native alone	Asian alone	NHPI alone	Hispanic or Latino origin
Less than \$10,000	5.61%	18.86%	15.46%	10.58%	10.51%	8.28%
\$10,000 to \$14,999	5.17%	11.02%	6.81%	3.87%	2.37%	5.34%
\$15,000 to \$19,999	5.19%	8.62%	8.99%	4.29%	8.81%	6.29%
\$20,000 to \$24,999	5.33%	7.42%	10.43%	5.03%	0.00%	8.51%
\$25,000 to \$29,999	5.33%	8.04%	7.21%	3.81%	0.00%	8.06%
\$30,000 to \$34,999	5.48%	7.05%	5.25%	3.76%	0.34%	7.63%
\$35,000 to \$39,999	5.12%	5.40%	8.71%	3.50%	9.83%	6.49%
\$40,000 to \$44,999	5.19%	4.35%	4.17%	5.10%	4.41%	5.35%
\$45,000 to \$49,999	4.53%	4.04%	7.21%	3.38%	1.69%	5.49%
\$50,000 to \$59,999	8.97%	5.75%	3.99%	7.05%	9.83%	9.88%
\$60,000 to \$74,999	11.33%	6.37%	5.31%	14.35%	11.19%	9.89%
\$75,000 to \$99,999	13.88%	6.44%	6.63%	14.25%	20.68%	9.27%
\$100,000 to \$124,999	8.21%	3.72%	5.80%	7.81%	18.31%	4.79%
\$125,000 to \$149,999	4.27%	0.92%	0.37%	4.74%	0.00%	2.11%
\$150,000 to \$199,999	3.55%	0.95%	1.10%	3.86%	2.03%	1.05%
\$200,000 or more	2.84%	1.06%	2.55%	4.64%	0.00%	1.57%
\$200,000 or more	2.84%	1.06%	2.55%	4.64%	0.00%	1.57%

Note: Large margin of errors for NHPIs.

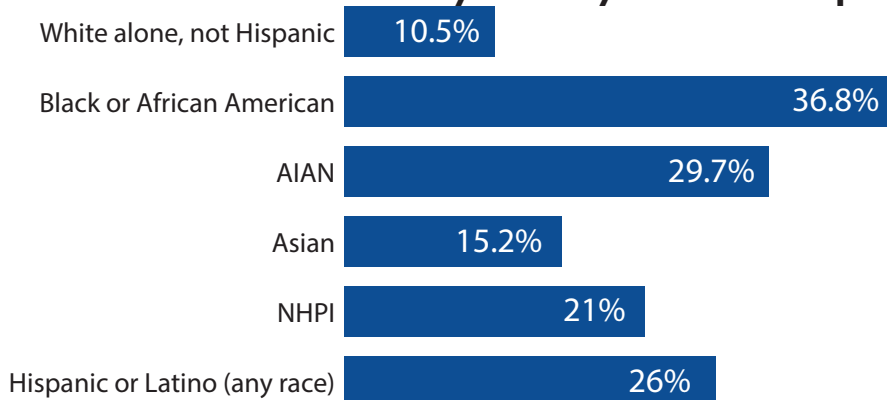
Income and Poverty

However, similar to how the “model minority myth” shapes the perceived well-being of AAPIs in education and health, the stereotype also purports that AAPIs are financially successful and upwardly mobile. A closer look at the economic profile of AAPIs in Iowa highlights the range of socioeconomic statuses in the AAPI community. Table 4.2 shows that the income of Asians alone is spread out. Of note, almost 11 percent of the Asian alone population earns less than \$10,000 in household income on average, and about 14 percent each fall in ranges of \$60,000 to \$74,000, and \$75,000 to \$99,999, respectively. Again, the high proportion of NHPIs in the upper echelons of household income are due to the group’s much smaller sample size, compared to other racial groups.⁶²

Poverty

From 2009 to 2013, approximately over 300,000 individuals of all ages in Iowa lived below the poverty line, or about 12.4 percent of the state population. In comparison, both Iowa’s Asian alone and NHPI alone populations had higher estimated poverty rates, at 15.2 percent and 21.0 percent, respectively (Figure 4.1).⁶³

Figure 4.1 Percent Below Poverty Level by Race and Hispanic Origin in Iowa, 2009-2013⁶⁴



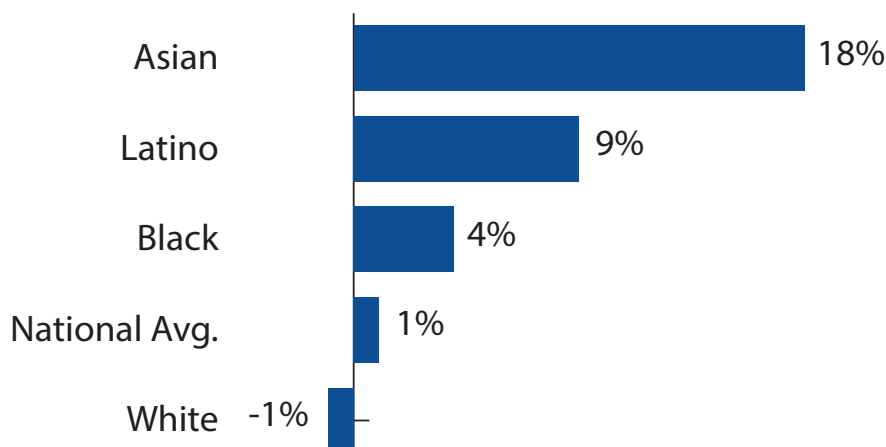
Note: Large margin of error for NHPI, +/-12.5%. For comparison, Asian alone margin of error is +/-1.8%.

While the disparities in sample size and margin of error are apparent, they highlight the need to attain a deeper picture of economic activities and outcomes for AAPIs in Iowa. Further data collection and disaggregation—particularly by the categories of immigration status, ethnicity, education level, and English language proficiency—are of high priority.

Workforce Participation and Economic Activity

According to a recent report from the Center for American Progress and AAPI Data, Asian Americans are the fastest growing segment of the U.S. labor force. The Asian American labor force grew nearly 20 percent from 2010 to 2013, which was higher than the labor force growth of any other group (Figure 5.1).⁶⁵

Figure 5.1 Change In U.S. Labor Force, 2010-2013⁶⁶



In Iowa, the labor force participation rate was at approximately 66.8 percent for Asians alone from 2011 to 2013, which was comparable to that of whites alone (67.7 percent) and African Americans alone (63.8 percent) in the state. Both Asians and whites had lower unemployment rates than African Americans and other races: Asians had a 6.2 percent unemployment rate and whites had a 5.0 percent, whereas African Americans had an 15.3 percent unemployment rate.⁶⁷ Further employment data concerning refugees, other new Asian immigrants, and NHPIs are needed to obtain a fuller picture of how AAPIs participate in Iowa’s workforce.

Immigrant Contributions to Iowa’s Economy

According to the Immigration Policy Center, Asians and Latinos are the “New Americans” who are making significant economic contributions to the U.S. workforce, tax base, and business community. They account for one out of every eight people and one out of every six workers in the U.S.⁶⁸

Immigrants are increasing the overall rates of workforce participation, thereby building Iowa’s economic foundation and capacities. According to the Iowa Policy Project, 83.2 percent of the total immigrant population is of prime working age (between ages 18 and 64), compared to 60.5 percent of native-born Iowans. In 2014, immigrants generated 4.5 percent of the state’s economic output and accounted for 1 in 20 Iowa workers.⁶⁹

Table 5.2 Firms Owned In Iowa by Race, 2007⁷⁰

Total number of firms in Iowa	259,931
Black-owned firms	0.8%
American Indian- and Alaska Native-owned firms	0.2%
Asian-owned firms	1.1%
Native Hawaiian and Other Pacific Islander-owned firms	0.1%
Hispanic-owned firms	0.9%

The Immigration Policy Center has also found that nationally, Asians and Latinos (both foreign-born and native-born) wield \$1.9 trillion in consumer purchasing power, and the businesses they own have had sales of \$857 billion and employed 4.7 million workers.⁷¹ In Iowa, Asians and Latinos each own 1.1 percent and 0.9 percent of firms, respectively (Table 5.2).⁷²

Workforce Participation and Economic Activity

Occupations

As Table 5.3 indicates, Asians in Iowa are more likely to work in computer, engineering, and science occupations, as well as in management and business. However, they are considerably less likely to be employed in areas such as the law, design, media, firefighting, law enforcement, construction, and transportation.⁷³ Occupational data on NHPIs in Iowa is not available and is another area needing data collection.

Table 5.3 Occupational Diversity of Asian Americans in Iowa⁷⁴

Occupation	Number of Workers	Share of Asian Am Workforce
Total:	31,764	100.0%
Management, business, science, and arts occupations	14,940	47.0%
Management, business, and financial occupations:	2,674	8.4%
Management occupations	1,682	5.3%
Business and financial operations occupations	992	3.1%
Computer, engineering, and science occupations:	5,853	18.4%
Computer and mathematical occupations	4,086	12.9%
Architecture and engineering occupations	676	2.1%
Life, physical, and social science occupations	1,091	3.4%
Education, legal, community service, arts, and media occupations:	3,705	11.7%
Community and social service occupations	449	1.4%
Legal occupations	136	0.4%
Education, training, and library occupations	2,869	9.0%
Arts, design, entertainment, sports, and media occupations	251	0.8%
Health care practitioners and technical occupations:	2,708	8.5%
Health diagnosing and treating practitioners and other technical occupations	2,525	7.9%
Health technologists and technicians	183	0.6%
Service occupations	7,079	22.3%
Health care support occupations	905	2.8%
Firefighting and prevention, and other protective service workers	81	0.3%
Law enforcement workers including supervisors	165	0.5%
Food preparation and serving related occupations	3,270	10.3%
Building and grounds cleaning and maintenance occupations	1,200	3.8%
Personal care and service occupations	1,458	4.6%
Sales and office occupations	3,376	10.6%
Sales and related occupations	812	2.6%
Office and administrative support occupations	2,564	8.1%
Natural resources, construction, and maintenance occupations	502	1.6%
Construction and extraction occupations	129	0.4%
Installation, maintenance, and repair occupations	275	0.9%
Production, transportation, and material moving occupations	5,867	18.5%
Production occupations	4,747	14.9%
Transportation occupations	108	0.3%
Material moving occupations	1,012	3.2%

Language Diversity and English Proficiency

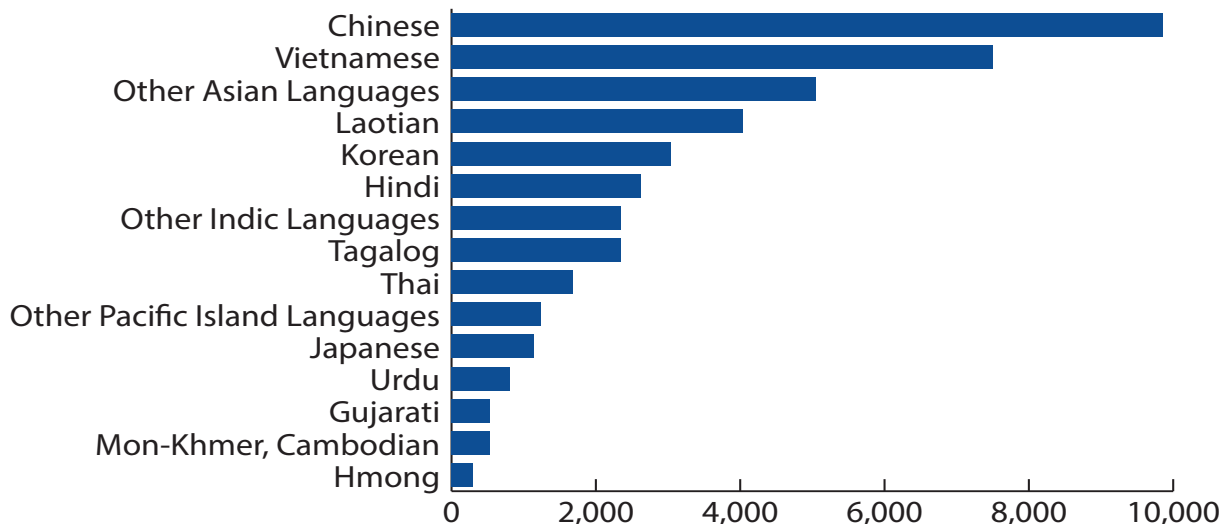
AAPIs have significant diversity in national origin and ethnicity, which contributes greatly to the linguistic diversity of the AAPI population both across the U.S. and within Iowa. Nationwide, 77 percent of the Asian alone population and 43 percent of the NHPI population speak a language other than English at home.⁷⁵

Top Asian Languages Spoken at Home in the United States, 2009-2013⁷⁶

- 2.9 million Chinese
- 1.6 million Tagalog
- 1.4 million Vietnamese
- 1.1 million Korean
- 643,000 Hindi

A number of Asian and Pacific Island languages are spoken in Iowa (Figure 6.1). The most common Asian language spoken is Chinese, followed by Vietnamese, Laotian, and Korean.⁷⁷

Figure 6.1 Top Asian Languages Spoken at Home in Iowa, 2009-2013⁷⁸



Note: Large margin of error for Hmong, +/-193.

Limited English Proficiency (LEP)

In addition to having a population with great language diversity, the problem of English proficiency is significant in the AAPI population. By definition, a Limited English Proficient (LEP) individual is someone whose primary language is not English and has limited ability to read, speak, write or understand English. The U.S. Census Bureau classifies any person ages 5 and above who reports speaking English less than “very well” as LEP. Those who only speak English or speak it “very well” are English proficient.

Over 20,000 AAPI residents in Iowa speak English less than “very well,” accounting for about 0.72 percent of the total state population and 23.9 percent of the state’s total LEP population. Asian and Pacific Island language speakers in Iowa have high percentages of LEP status. On the whole, almost half of people who speak an AAPI language are LEP, or speak English less than “very well,” such that this group has the highest proportion of LEP individuals compared to other major language categories (Table 6.1).⁷⁹

Language Diversity and English Proficiency

Table 6.1 Limited English Proficiency in Iowa, 2009-2013⁸⁰

Languages	Speak English “very well”	Speak English less than “very well”
Spanish or Spanish Creole	55.8%	44.2%
Other Indo-European languages	72.0%	28.0%
Asian and Pacific Island languages	52.2%	47.8%
Other languages	64.1%	35.9%

A further breakdown of this data shows that there is some variability of LEP status among AAPI language speakers in Iowa (Table 6.2). Within each AAPI language group, LEP status ranges from 20 to over 50 percent, indicating that English language learning and proficiency is an issue affecting AAPIs of all ethnicities and countries of origin.⁸¹

Table 6.2 English Proficiency in Iowa by Select AAPI Languages, 2009-2013⁸²

Language	Estimate
Chinese:	9,858
Speak English less than "very well"	5,119
Vietnamese:	7,499
Speak English less than "very well"	4,886
Laotian:	4,039
Speak English less than "very well"	1,963
Korean:	3,037
Speak English less than "very well"	1,904
Hindi	2,628
Speak English less than “very well”	924
Tagalog	2,348
Speak English less than “very well”	676
Thai	1,679
Speak English less than “very well”	831

It is important to note that LEP challenges do not necessarily arise across the board in all English language situations, but may come up in a specific context or situation (e.g., an individual may be LEP when confronting a medical problem in the doctor’s office, yet is able to sufficiently converse in English in everyday circumstances). Individuals who are LEP often face significant barriers to accessing services and opportunities. For them, English proficiency is related to outcomes such as job earnings, occupational mobility, school performance, quality of health care received, and ability to participate in civic and political life.

LEP individuals are eligible to receive language assistance when utilizing services funded or provided by the federal government. State and local entities receiving federal government funding must comply with Title IV of the Civil Rights Act and provide language assistance such that users are able to have meaningful access to services.

Civic Participation

The AAPI electorate is growing rapidly. According to a report from the Center for American Progress and AAPI Data, the number of Asian American voters in the last decade has nearly doubled from more than 2 million voters in 2000 to 3.9 million voters in 2012.⁸³

The Immigration Policy Center predicts that about 1.8 million U.S. citizens who identify as Asian and Latino become eligible to vote in each two-year election cycle. Immigrants who become U.S. citizens through naturalization will be significant contributors to the evolving electorate. It is also predicted that one-third of newly eligible voters nationwide will be young Latinos, young Asians, or recently naturalized immigrants.⁸⁴ According to the State Data Center of Iowa, 36.5 percent of Iowa's foreign-born population who became naturalized citizens in 2013 identified as Asian.⁸⁵

Despite growing numbers of the Asian American electorate, significant gaps in citizenship and voter registration for Asian Americans continue to exist. This is in part due to many Asian American adults being foreign-born and having significantly lower citizenship rates than some other racial groups, such as whites and African Americans. On the other hand, the majority of adult NHPI residents are U.S. citizens.⁸⁶

Based on the U.S. Census Bureau's Population Survey from November 2012, voter participation for Iowa's Asian population is low. Of the 21,000 Asian Americans registered to vote, 17,000 voted in the 2012 elections (Table 7.1).⁸⁷ Rates of voter participation are comparatively lower than other racial groups. Voting data for NHPIs in Iowa is unavailable due to the group's small size.

Table 7.1 Voter Participation in Iowa by Race, 2012⁸⁸

Race/Ethnicity	Total Population	Citizen Population	Total Registered	Total Voted
White	2,173,000	2,123,000	1,673,000	1,482,000
Black	54,000	51,000	35,000	33,000
Asian	61,000	35,000	21,000	17,000
Hispanic (of any race)	120,000	71,000	32,000	30,000
Total	2,320,000	2,232,000	1,745,000	1,548,000

One possible barrier to voter participation for AAPIs in Iowa may be related to language access. According to the nationally conducted 2012 AAPI Post-Election Survey, AAPIs who have difficulty communicating in English had lower turnout than among those who did not, and some cited language barriers as a precursor to not voting.⁸⁹ Local political organizations in Iowa should aim to provide election-related information in Asian languages. Some jurisdictions across the U.S. are required by the Voting Rights Act to provide language assistance to voters, such as translated election documents and bilingual election staff. While AAPI voters constitute a minority in Iowa, it is never too late for Iowa to consider how its own jurisdictions can ensure voting access and serve voters who have difficulty communicating in English.

Political party identification among AAPIs nationwide and in Iowa is not readily defined. According to estimates from the Iowa Democratic Party, AAPI Iowans vote for Democratic Party candidates 51.8 percent of the time.⁹⁰ However, the 2012 AAPI Post-Election Survey found that while the majority of AAPIs voted for Barack Obama as President, almost half of AAPI voters identified as independent or undecided with regard to their political party affiliation, suggesting that AAPIs may be swing voters.⁹¹

Unfortunately, by and large, there is limited data on AAPI voting patterns and civic participation, the extent of outreach from political parties, and the level of engagement from elected officials. What is known from a national

Civic Participation

perspective is that political campaigns generally have limited contact with AAPI voters. Only 31 percent of Asian Americans and 26 percent of Pacific Islanders received contact from political parties and election-related organizations during the 2012 election season.⁹² As Iowa's AAPI electorate continues to grow and diversify, it is in the best interests of political organizations in the state to tap into this group and its civic potential.

A growing number of AAPIs serve as elected officials nationally and locally. In the 110th Congress, ten U.S. Representatives were Asian American or NHPI, and one U.S. Senator was Asian American.⁹³ The low numbers of AAPI elected officials at the federal level is in part due to the fact that Asian immigrants were not eligible for naturalization until the 1940s. It was not until 1975 that the first Asian American came to serve as a member of Congress. Since then, there have been a total of six U.S. Senators and twenty-six U.S. Representatives from the AAPI community. In Iowa, AAPIs have been historically underrepresented in elected office and other government positions. It is with hope that efforts to increase AAPI civic engagement in Iowa will help pave the way for future AAPI leaders.

Future Directions

Asian Americans and Pacific Islanders are already an important part of the Iowa story. This report has provided a meaningful snapshot of AAPIs in Iowa, on outcomes that range from education and occupation to health and poverty. The picture that emerges is one that shows success as well as challenges, and opportunities as well as barriers. This is particularly true when we disaggregate Asian Americans and Pacific Islanders by detailed origin. With AAPIs among the fastest growing populations in the state, progress in the collection of detailed origin data for a range of outcomes will remain critical, to ensure that every Iowan can realize equal opportunity, prosperity, and well-being.

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Appendix A: Iowa Office of Asian and Pacific Islander Affairs

History

The Iowa Department of Human Rights was created in 1986 as an umbrella agency. Its mission is to ensure basic rights, freedoms, and opportunities for all by empowering underrepresented Iowans and eliminating economic, social, and cultural barriers.

On October 5, 2004, Governor Thomas Vilsack announced appointments to the Commission on the Status of Asian and Pacific Islanders (now the Commission on Asian and Pacific Islander Affairs) within the Department of Human Rights. The Commission was created by Senate File 2188, which Gov. Vilsack signed into law on March 31, 2004.

Mission

To ensure Iowa's Asians and Pacific Islanders have opportunities equal to other Iowans in education, employment, health care, housing, and safety, and to publicize the accomplishments and contributions of Asian and Pacific Islanders to the state.

Iowa Code 216A.154: Office of Asian and Pacific Islander Affairs

According to Iowa Code 216A.154, the Office of Asian and Pacific Islander Affairs is established and shall do the following:

1. Serve as the central permanent agency to advocate for Iowans of Asian and Pacific Islander heritage.
2. Coordinate and cooperate with the efforts of state departments and agencies to serve the needs of Iowans of Asian and Pacific Islander heritage in participating fully in the economic, social, and cultural life of the state, and provide direct assistance to individuals who request it.
3. Develop, coordinate, and assist other public or private organizations which serve Iowans of Asian and Pacific Islander heritage.
4. Serve as an information clearinghouse on programs and agencies operating to assist Iowans of Asian and Pacific Islander heritage.

Office of Asian and Pacific Islander Affairs Priorities, 2015-2016

Mission

To increase access to workforce, education, and health care services for Limited English Proficient Asian and Pacific Islanders in Iowa.

Economic and Workforce Development

Iowa is home to more than 68,000 individuals of Asian and Pacific Islander descent, contributing to about 2.1 percent of the state's total population. From 2009 to 2013, the median income of households who reported their race as Asian was \$59,560, which was higher than the median household income for all Iowans, \$51,843. This suggests that by and large, the members of Iowa's Asian communities are doing well.

The Office of Asian and Pacific Islander Affairs would like to draw your attention to one of the most vulnerable, invisible, and severely underserved groups—refugees and recent immigrants. This group of refugees and immigrants is a large pool of untapped employees who can fill the employment gap that exists in our state. However, a cookie cutter approach of one-size-fits-all does not work with this group when it comes to employment, simply

Appendix A: Iowa Office of Asian and Pacific Islander Affairs

because they face a few extra barriers—language being the biggest one—which prevents them from fully taking advantage of the various programming available from the public workforce system. The Office of Asian and Pacific Islander Affairs is working on the following priorities to help Iowa become a state that can become a truly welcoming and inclusive place, while tapping into this pool of potential employees to fulfill the employment gap.

Specific areas of focus

- Increase collaboration between community colleges, employers, nonprofit agencies, and local workforce programs to:
 - » Streamline their services.
 - » Expand services to Limited English Proficient (LEP) clients.
 - » Make services accessible to LEP population by bringing services to where the clients are using community- and work-based learning.
 - » Develop need-based training programs in areas such as welding, automotive, health care, etc. at no cost to the job seeker.
- Work with the Central Iowa Investment Board to identify ‘Refugees’ as a special needs population and dedicate resources to provide culturally and linguistically appropriate services, supporting refugees to becoming self-sufficient and contributing members of our society.

Health and Human Services

Despite the majority of AAPIs in Iowa having health insurance coverage, there remain significant barriers to achieving greater health and well-being, particularly for those from LEP and refugee backgrounds. One key component to elevating the status of health for AAPIs and the greater Iowa community is by establishing culturally competent health care: that is, to implement culturally and linguistically appropriate services across primary care, mental health care, and community health care. The National Standards for Culturally and Linguistically Appropriate Services (CLAS) provides a framework for health care providers to implement services that are sensitive to diverse cultures, languages, beliefs, and practices.

Specific areas of focus

- Work with the Department of Human Services and health care providers to comply with CLAS Standards to better serve the LEP population by adopting a Language Access Policy, conducting outreach in different languages (especially when there is a relatively large number of a specific language group), and ensuring staff mirror the clientele base they serve.
- Collaborate with health care workers, nonprofit agencies, and communities to provide more interpreter trainings to community leaders, thereby improving the quality and quantity of interpreters in a variety of Asian languages.

Language Access

Language has been identified as the topmost barrier for many AAPIs to be able to access government programs, navigate the new system they are in, and fully contribute to the economic and civic development of our society.

The ability to understand and communicate in English has a significant impact on a new or recently settled Asian’s ability to find a job, advance in a career, and become civically active in his or her community.

Appendix A: Iowa Office of Asian and Pacific Islander Affairs

The Office of Asian and Pacific Islander Affairs is working to form an interagency coalition to:

- Discuss language access issues in Iowa.
- Share best practices.
- Improve interpreter resources and quality of interpreters across the state.

Civic Engagement

The AAPI electorate is growing rapidly. From 2000 to 2010, Asian Americans grew at a rate of 46 percent and NHPs at a rate of 40 percent, such that alongside Latinos, they were the fastest-growing racial groups in the country. Despite the growing numbers of the AAPI electorate, significant gaps in citizenship and voter registration—especially for Asian Americans—continue to exist. Statistics have clearly shown that the rates of voter participation among Asian Americans are comparatively lower than other racial groups.

Asian Americans are poorly represented in different boards and commissions across Iowa, quite notably, the Iowa state legislature does not have any AAPI representation or leaders.

Specific areas of focus

- Provide educational opportunities for AAPIs around the state about the importance of voting, help them become registered to vote, and encourage various forms of civic participation.
- Encourage AAPIs to participate in boards and commissions as a way of being a voice at the decision-making table.
- Organize ‘Ready to Run’ trainings to help AAPIs understand the basics of running for office.

Appendix B: Iowa Commission of Asian and Pacific Islander Affairs

The seven members of the Commission on Asian and Pacific Islander Affairs are appointed by the Governor and are responsible for advising the Governor, Lieutenant Governor, and General Assembly on issues confronting Asian and Pacific Islander persons in this state, including the unique problems of non-English speaking immigrants and refugees, as well as administrative and legislative changes necessary to ensure Asian and Pacific Islander persons access to benefits and services provided to people in this state.

Iowa Code 216A.152: Commission of Asian and Pacific Islander Affairs

1. The Commission of Asian and Pacific Islander Affairs is established and shall consist of seven members appointed by the Governor, subject to confirmation by the Senate. Members shall be appointed representing every geographical area of the state and ethnic groups of Asian and Pacific Islander heritage. All members shall reside in Iowa.
2. Terms of office are four years and shall begin and end pursuant to section 69.19. Members whose terms expire may be reappointed. Vacancies on the Commission may be filled for the remainder of the term of and in the same manner as the original appointment. Members shall receive actual expenses incurred while serving in their official capacity, subject to statutory limits. Members may also be eligible to receive compensation as provided in section 7E.6.
3. Members of the Commission shall appoint a chairperson and vice chairperson and other officers as the Commission deems necessary. The Commission shall meet at least quarterly during each fiscal year. A majority of the members of the Commission shall constitute a quorum. A quorum shall be required for the conduct of business of the Commission, and the affirmative vote of a majority of the currently appointed members is necessary for any substantive action taken by the Commission. A member shall not vote on any action if the member has a conflict of interest on the matter, and a statement by the member of a conflict of interest shall be conclusive for this purpose.

Iowa Code 216A.153: Commission powers and duties

According to Iowa Code 216A.153, the Commission shall have the following powers and duties:

1. Study the opportunities for and changing needs of the Asian and Pacific Islander persons in this state.
2. Serve as liaison between the Office and the public, sharing information and gathering constituency input.
3. Recommend to the board for adoption rules pursuant to chapter 17A as it deems necessary for the Commission and Office.
4. Recommend legislative and executive action to the Governor and General Assembly.
5. Establish advisory committees, work groups, or other coalitions as appropriate.

2015 Commission Members

Member	Location	Term
Benjamin Jung	West Des Moines (chair)	5/1/2012 – 4/30/2016
Yolanda Duerson	Ankeny	5/1/2012 – 4/30/2016
Albert Liu	Urbandale	5/1/2012 – 4/30/2016
George Youi Sayavong	Sioux City	1/8/2009 – 4/30/2018
Karlai W. Thornburg	Ames	3/1/2012 – 4/30/2018
Michelle Yoshimura	West Des Moines	5/1/2014 – 4/30/2018

Ex officio:

San Wong, Director, Iowa Department of Human Rights

Monica Stone, Deputy Director & Division Administrator, Community Advocacy and Services (CAS)

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The Office of Asian and Pacific Islander Affairs is grateful to Sono Shah for providing technical support and designing the report. Sono is a PhD student at the University of California, Riverside in Political Science; he is also a researcher at AAPIdata. Sono's research interests include minority political participation and representation.

Finally, the Office is deeply indebted to Karthick Ramakrishnan, founder of AAPIdata.com, for reviewing the report and providing valuable support and guidance. Dr. Ramakrishnan is a Professor of Public Policy and Political Science at the University of California, Riverside, where he also serves as Associate Dean of the School of Public Policy. Ramakrishnan received his PhD in Politics from Princeton University and has held fellowships at the Russell Sage Foundation, the Woodrow Wilson International Center for Scholars, and Public Policy Institute of California. In addition, Ramakrishnan is an appointee to the California Commission on APIA Affairs (2014-2017) and a Global Fellow at the Woodrow Wilson Center, Washington DC.



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