

Asian American Organizing Project (AAOP)– Minneapolis and St. Paul, Minnesota

SNAPSHOT

Overview

Since 2013, Asian American Organizing Project (AAOP) has worked to lead, sustain, and cultivate grassroots organizing in the Asian American and Pacific Islander (AAPI) community in Minnesota. AAOP is committed to advancing the AAPI community through grassroots organizing with a comprehensive approach to addressing AAPI barriers and issues in Minnesota. AAOP is committed to the principle of affecting long-term social change that cultivates the development of the individual, the family, the organization, and the community in Minnesota.

Mission

“The mission of AAOP is to advance Asian American and Pacific Islander participation in democracy for an equitable and just society.” – AAOP website

Constituency

- Youth and adults (between 15-35)
- Asian
- Pan Asian
- Southeast Asian (Hmong, Vietnamese, Lao, Khmer, Karen)
- LGBTQ
- Relative caregivers
- Homeless
- Immigrant
- Undocumented
- Persons with disabilities
- Limited English speaking
- Refugee
- High school students
- College students



Local Conditions & Critical Issues Impacting 0-5 Childhood Health in Minneapolis

Poverty

Twenty-five percent of Minneapolis residents live below the poverty line.¹ Nine percent of Asian & Pacific Islanders (API) live below the poverty line.²

Cost of Education

Neighborhood Safety

Including a lack of programs and other activities for youth.

“We door knocked in [a] part of St. Paul and Frogtown where there are a lot of young people walking around and doing things and causing a ruckus, right? And if anything, the Asian residents wished there were afterschool programs that their children or young people in the streets could be part of.”

Language Barriers

Almost 12% of Minnesotans (age 5+) spoke a language other than English at home; the most common non-English languages spoken are Spanish (about 193,600 speakers) and Hmong (56,200 speakers).³

“Parents [are] afraid that tuition will cost too much for their children and that they have to work two jobs [but] can't make ends meet. They're worried about their children being able to afford college.” – Linda Her, Executive Director

–Linda Her, Executive Director

Key Indicators of Childhood Health in Minneapolis

12.4%

of Minnesota children (ages 2-4) on WIC were **obese**⁴ ; 15.1% of API children (ages 2-5) in Minnesota were **obese** compared to 11.3% nationwide.⁵



In Minnesota, fewer than **20%** of elementary, middle and high school students eat the recommended 5 servings of fruits and vegetables per day.⁵



49% of 12th grade boys and 67% of 12th grade girls **did not do physical activities** on 5 or more days per week statewide.⁶



Close to half (49%) of third graders have **tooth decay** in Minnesota.⁷

Current Wellness & Safety Efforts

- **Civic engagement and organizing programs**—year-round engagement on voter education, issues conversations and organizing, such as immigration, fair wage, mental health and wellness, and education justice.
- **Summer youth program**—workshops around gender and racial justice, civic and community organizing.
- **Asian language justice program**—translating electoral, political terms and generational justice terms (Hmong and Vietnamese)

“We’re going to record audio versions and create a little dictionary specifically for the community organizers. We are also coining new words around gender and racial justice. Then we are also translating scripts that we use a lot. So when we create curricula the young people can come and get trained and get familiar and not feel afraid to get involved with their community because that’s one of the bigger fears that young people have. The young Asian people feel like, we’re here talking to young Asian people, but then we meet parents at the door or family members who can’t speak English and we can’t get the message through, so what can you all do? So we’re like, okay, we’re going to create this program and see if it can help adjust the need and further develop your leadership in this aspect. So we’re piloting that right now.”



Community Defined “Best Practices” to Improve Childhood Health

Taking the Time to Address Nuances of Race, Gender, Sexuality, and Class in Multi-Racial Coalitions

“My staff and I [facilitate workshops with] different communities in the room talking about political histories of Asian communities and stereotypes. And black communities also listen to all that stuff, so we’re educating each other on that and how would we like to be seen and treated. What are the strengths that we bring to the table? So, I think one of our best practices is how do we pause for a moment and understand the process [of working together] and getting to know each other, first—without just jumping in to do the work.”

Language Access and Removing Language Barriers

“We create the space and [the] curriculum and we do role playing in our native language, first, before we send people out the door so that the messages relay as accurate as possible and then [we] debrief with them. Our language piece is so important to us right now on how to become effective and better organizers in our community.”

Letting people Who are Impacted Take the Lead and Listening to the People (through community surveys, door knocking, etc.)

“We listen to people versus us spouting so much at them...our approach is centering our community, which means that we need to hear from them. And that’s been working for us because we’re intentionally helping build their voices instead of an organization’s voice and agenda. That’s what we’ve seen and that has built that trust then people remember us. And they’re like, oh hey, I remember you all. I liked your Facebook page.”

AAOP Accomplishments in Wellness & Safety

- **Youth organizing** program—helps young people become community leaders and recognize their power to change injustices in their community.

“I think creating space for [the youth] has enabled them to have conversations that they were not able to have at home, especially around international marriage, also being mixed Asian and black, mixed Asian and white, and being LGBT, too. That’s been successful for us because the young people are like, ‘we want to come back and be involved again,’ [and] ‘I know this friend who would really love to be part of this.’ So we’ve increased it [from nine] to fifteen young people who can participate in the program.”

- **Partnerships**—building coalitions and partnerships with other non-profits.

“It’s been successful for us to get Asian organizations together [and have community roundtables] and focus on supporting each other’s leadership, learn about our different but connected political and social stories, and community issues that can look different from each Asian communities, but are systematic and institutionally connected in shaping our wellbeing.”

- **Year-round engagement**—more funding and capacity has supported the organization’s growth in the past two years.

“[Recently] we were able to do our activities year-round and that people know that we’re here year-round and that we’re not just popping up for the election.”

Allies/Partnerships Working on Children’s Health

- Lao Assistance Center – Minneapolis, MN <http://www.laocenter.org/>
- Asian Media Access – Minneapolis, MN <http://ww2.amamedia.org/>
- Hmong American Partnership – Saint Paul, MN <http://www.hmong.org/>
- Minnesota State Voices – Washington, DC (nationwide) <http://www.statevoices.org/>
- Headwaters Justice – Minneapolis, MN <https://headwatersfoundation.org/>



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