ARMY ABORIGINAL COMMUNITY ASSISTANCE PROGRAM (AACAP)

INFORMATION BRIEF

What is AACAP?

The Army Aboriginal Community Assistance Program (AACAP) is a co-operative initiative between the Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) and Army to improve environmental health conditions within remote Aboriginal communities.

A steering committee with representation from all key organisations runs the program, identifying appropriate locations for project delivery.

Each project has a construction component, a health component and a training component. The construction component focuses on the provision of environmental health infrastructure such as housing, water, sewerage and electrical services as well as improving access to primary health care facilities by constructing or upgrading roads and airfields. The health component focuses on augmenting existing community medical, dental and veterinary programs. The training component focuses on specific skills required within the community and includes courses on construction and building maintenance, vehicle and small engine maintenance, welding, concreting and cooking.

Army is involved with AACAP at the direction of the Australian Government. Army involvement is based on its suitability to meet priorities and works proposals as determined by the steering committee. Army undertakes projects only after close, culturally sensitive consultation with the indigenous communities concerned. Works are not undertaken without the approval of the communities involved and the steering committee. Army coordinates support from across the ADF and participation from other nations.

The AACAP objectives are consistent with those of the National Aboriginal Health Strategy (NAHS) program.

The AACAP seeks to maximise benefit to Indigenous communities by focusing on projects that allow Army to make best use of its construction expertise and capability, by capitalising on Army's ability to holistically deliver a range of services to remote Indigenous communities, that would not normally be available in a single project.

History

Members for the Council for Aboriginal Reconciliation met with the Prime Minister on 23 October 1996 to raise concerns about the poor primary health of Indigenous Australians.

In November 1996, Senator John Herron, then the Minister for Aboriginal and Torres Strait Islander Affairs raised the issue of using the skills and resources of the Army to deliver urgently needed water and health infrastructure to remote indigenous communities.

As a consequence, the Ministers for Aboriginal and Torres Strait Islander Affairs, Defence and the then Health and Family Services (DHFS) met with the Prime Minister on 5 November 1996 and agreed that the Australian Army would assist with infrastructure improvements in a number of communities, identified by the Aboriginal and Torres Strait Islander Commission (ATSIC) for priority assistance.

On 14 November 1996 Senator Herron announced the initiative known as the ATSIC/Army Community Assistance Program (AACAP) where ATSIC, Army and DHFS formed a partnership to assist in the delivery of housing and infrastructure capital works to a number of remote Aboriginal Communities.
The then Department of Health and Aged Care (DHAC) also contributed to the establishment of the AACAP.

The program was formally launched when a Memorandum of Understanding (MOU) was signed by the then Chief of Army, Lieutenant General John Sanderson, ATSIC representative, Patricia Turner, and DHFS Secretary, Andrew Podger.

The MOU commits the parties to AACAP. It sets the strategic direction, working arrangements and funding process for AACAP as well as acknowledging the role of each agency and sets out the broad terms under which AACAP will be administered.

A revised MOU covering round three of AACAP was signed by Mr Jeff Harmer, the Secretary of FaCSIA, and LTGEN Peter Leahy, AO, Chief Of Army, on 27 March 06.

Army’s role is to assist with provision of infrastructure improvements by Army construction engineer units and civil contractors, and to coordinate the delivery of health and training aspects by military staff.

All projects are managed by Army. The work itself is conducted by both Army construction elements and civil contractors.

Between 1997 and 2007, Army has participated annually in the AACAP in various locations in Northern Territory, South Australia, Western Australia and Queensland. In some years the AACAP is delivered in multiple communities in a number of different areas.

The first round of AACAP projects were delivered during the period 1997 - 2000 with total expenditure from the FaCS budget of approx $13.4 million. The majority of work (65%) was completed by Army construction elements with limited support from contractors (35%).

An evaluation of the first round of AACAP was completed in September 1999 which found that AACAP had been an effective partnership between ATSIC, the Army and the Department of Health and Aged Care, and that it delivered quality projects with additional benefits to communities and the Army. Accordingly, $40 million was allocated for AACAP Round two to be delivered during the period 2001 - 2004.

The significantly increased budget resulted in the majority of work (approximately 65%) being completed by contractors supervised by Army with Army construction elements completing approximately 35% of the work.

In an attempt to reduce the impact on both Army project managers and Army construction elements, it was determined in early 2004 that future projects should be no larger than $5 million per year.

With the movement of the Aboriginal and Torres Strait Islander Services (ATSIS) from the Department of Indigenous and Multicultural Affairs to the Department of Family and Community Services in mid 2004 followed by the Federal Election in Oct 04, Army’s AACAP Partners were not able to obtain approval for AACAP Round Three in time for AACAP 05. As such, $5 million was approved in the 2004 Budget to fund AACAP 05 as a ‘stand alone’ project. Approximately half of this project was completed by Army construction elements with the other half completed by contractors supervised by Army Project Managers.

Round three of AACAP was approved during 2005 to a total value of $20 million and as is to cover the period 2006 - 2009.
AACAP 2008 is being conducted in the vicinity of Kalumburu, Western Australia, in the Kimberly Region. The location is isolated with intermittent seasonal road access necessitating the extensive use of RAN and RAAF support for the deployment of personnel, equipment and materials. The project includes the demolition of the existing health clinic and construction of a new one, barge landing and access road upgrade and a public toilet block by Army assets. In addition, civil contractors will upgrade the existing airstrip and access road, as well as sealing some internal community roads. RAAF Engineers are constructing a temporary airstrip as a preliminary operation to facilitate the airfield upgrade.

The diagram below shows the locations of where AACAP has been delivered since 1997.
AACAP Outcomes

AACAP traditionally comprises three distinct delivery outcomes:

- vertical and horizontal construction
- health
- training

Construction Outcomes

Construction outcomes delivered by a combination of civil and military agencies on AACAPs have included:

- airfield construction and upgrades
- house construction and upgrades
- medical centre construction and upgrades
- road construction and upgrades (including grading, sealing and culverts)
- rubbish tip construction and upgrades
- sewer works
- subdivisions

Health Outcomes

Military health personnel are generally responsible for the following tasks:

- providing health support to the soldiers
- providing environmental health support and advice
- visiting communities and providing first aid training and lessons on healthy living
- evaluating current community health procedures and equipment
- conducting physical training and education programs
- augmenting existing dental support within the nominated communities
- providing veterinary training and support for pets in the communities
- providing health specific cross-cultural awareness training
Training Outcomes

Military personnel have been responsible for the delivery of both accredited and non-accredited training in the following areas:

• General construction
• Building maintenance
• Plumbing
• Vehicle and small engine maintenance
• Welding
• Concreting

The training program often incorporates a Community Project, such as the refurbishment or construction of a Community Meeting Place or building.

Army Contributions to AACAP

Army benefits from AACAP through practice of deployment, construction and redeployment plus provision of health and training activities.

From inception through planning, delivery and defects liability periods, each AACAP is delivered over a three year period. The delivery phase for Army assets is normally about six months and at peak periods between 150 - 200 military staff may be deployed on the AACAP.

Army contributions include:

• Salary costs of Army personnel
• Capital/depreciation costs of Army equipment
• Fuel, rations and travel funds
• Military transport costs for Army, Navy and Air Force assets

AACAP is delivered by Army with significant support from the Navy and Air Force.

The Chief of Army and the Land Commander delegate responsibility for the delivery of the AACAP to the Commander Land Command Support Group.

19th Chief Engineer Works is responsible for Project Management and Design for the construction components of the AACAP.

The military construction tasks are traditionally undertaken by elements from 6th Engineer Support Regiment.

The Combat Engineer Regiments have undertaken some discrete tasks in certain years, as well as providing trade reinforcements to the Construction Squadrons where possible.
Health and training outcomes are traditionally delivered by a variety of military members detached in support of the AACAP.

**Logistics and Other Support**

Members from many different ADF units from around the country join the Project Management Team and the Construction Squadron tasked to deliver the AACAP. Assisting units provide logistic, transport, communication and health support to the soldiers. Assisting units also provide training and health support to the communities.

The Navy and Air Force provides significant transport support. The Air Force also supports the delivery of the AACAP through the contribution of trade and equipment support.

Other units that contribute to the successful delivery of AACAP include:

- Training Command - Army
- 1st Division
- 2nd Division
- 17th Combat Service Support Brigade
- 1st Signals Regiment
- 9th and 10th Force Support Battalions
- Health Support Battalions
- 1st Topographical Survey Squadron
- 26th Transport Squadron
- Joint Logistic Units
- 1st Ground Liaison Group
19th Chief Engineer Works

The role of the 19th Chief Engineer Works is to plan, design, coordinate and control infrastructure-engineering projects within designated areas.

19th Chief Engineer Works consists of professional and military engineering officers, works managers, engineering supervisors, draftsmen and engineer surveyors. Specific groupings are tailored to the requirements of the supported operation. The AACAP Works Team comprises a Senior Project Engineer, Project Engineers and Building and Civil Works Managers.

The unit is based at Randwick Barracks is Sydney.

19th Chief Engineer Works is responsible for all aspects of the AACAP project management including:

- liaison with civil agencies such as councils and advisory boards
- development of technical plans and specifications
- management of the AACAP budget
- management of the military construction agency
- management of civil contractors

Construction Squadrons

The role of the Construction Squadrons is to provide construction engineering support to a deployed force in order to support land, joint and specified operations for the defence of Australia and its national interests.

Construction Squadrons consist of professional and military engineering officers, a works manager, engineering supervisors, draftsmen, engineer surveyors, carpenters, plumbers, electricians, plant operators, combat engineers, combat storemen and clerks, drivers, vehicle mechanics, cooks and medics. Specific groupings are tailored to the requirements of the supported operation.

17th Construction Squadron is based at Holsworthy Barracks in Sydney. 21st Construction Squadron is based at Gallipoli Barracks in Brisbane. Both Squadrons belong to the 6th Engineer Support Regiment.

Considering a Construction Squadrons’s typical spectrum of tasks, construction engineering may be subdivided into three broad fields:

- Mobility Engineering – the maintenance of force movement / mobility in an area of operations through the construction, repair and maintenance of movement / mobility infrastructure such as roads, bridges, runways and port facilities.

- Survivability Engineering – activities enhancing the ability of a force to survive enemy actions and the physical environment in which the force is required to act through the construction of force protection assets and the conduct of battlefield clearance operations.

- Sustainment Engineering. – the construction, maintenance and repair of infrastructure or facilities required to ensure force longevity within an area of operations.
International Support

Australian soldiers are regularly joined by small engineer detachments from regional neighbours as part of the Defence Cooperation Program (DCP), as coordinated by International Policy Division. Countries that have contributed to the AACAP delivery have included Papua New Guinea, Tonga and Fiji.

Conclusion

AACAP is an on-going commitment that reinforces the strong association between Army and the Indigenous people of Northern Australia. It is a joint initiative between FaHCSIA and Army that has been improving health and living standards in Aboriginal communities since 1997.

Army provides soldiers and equipment to complete project management, construction, health care and training support to the communities selected by the steering committee. The program has seen essential housing, infrastructure, health and training support provided to remote communities across Australia.

Projects are the result of extensive consultation between the communities through FaHCSIA, Army, and other Government agencies. AACAP is conducted in a manner sensitive to community requirements and projects are selected that provide significant training benefits to Army.

AACAP, therefore, contributes to a more unified Australia through practical reconciliation and continues to be a high priority for Army training.

Current as at 02 May 2008