

# MERLE Program Evaluation Report

**Prepared for:**

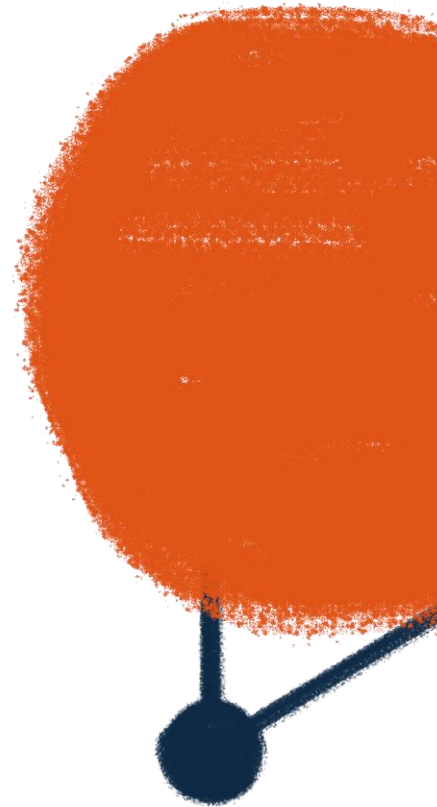
South East Community Links

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Outcome, Practice and Evidence Network, a program by the Centre for Excellence in Child and Family Welfare



# MERLE Evaluation Report

## Executive Summary

The MERLE program is an intensive, two-year intervention that aims to support 60 young people from multicultural backgrounds who are at risk of school disengagement and youth justice involvement to gain the necessary life skills to reach their full potential. The MERLE program works in partnership with schools, local government, specialist services and police to support disadvantaged youth, mainly from refugee and migrant backgrounds, living in Melbourne’s south-eastern suburbs. The program provides intensive wrap-around support to improve community safety and strengthen participants’ social and emotional wellbeing, education, community engagement and employment for a positive future. The MERLE program, delivered by South East Community Links (SECL) and funded by the Department of Home Affairs, commenced in August 2022 and is due for completion in mid-2024.

This evaluation examined the extent to which MERLE achieved its intended outcomes and identified critical success factors and opportunities for improvement through a mixed methods approach (see Table 1 for data sources). The approach drew from qualitative and quantitative data that were coded, thematically analysed and triangulated to identify consistent themes against key evaluation questions.

Table 1: Data sources used in MERLE evaluation

Data source	What were we looking to understand?
Client Management System data (n=83)	Participants’ demographic features and presenting issues Activities delivered
Interviews with partner schools (n=4)	Program structure and delivery Outcomes observed
Surveys with partner schools (n=5)	Program structure and delivery Outcomes observed
Interviews with MERLE program team	Program structure and delivery Outcomes observed
OPEN Outcomes Measurement Survey Tool (OMT) (in-scope sample n=43)	Participants’ state-of-wellbeing outcome areas and reflections on change from program commencement to completion across two points in time (early in program and later in program). Includes Personal Wellbeing Index – School Children (PWI-SC) and open-ended questions

# 1. Summary of key findings

## 1. Who are MERLE participants and what has been delivered as part of the program? Where expected participants reached?

MERLE delivered expected activities, exceeding participation targets and engaging participants with diverse multicultural backgrounds and presenting issues as planned.

### 1a. Demographic features and presenting issues of participants

Between August 2022 and March 2024, the program supported a total of 164 young people, with 83 participants fully engaged and 81 on an active-hold waitlist<sup>1</sup>. Participants ranged in age from 12 to 23, with an average age of 15.

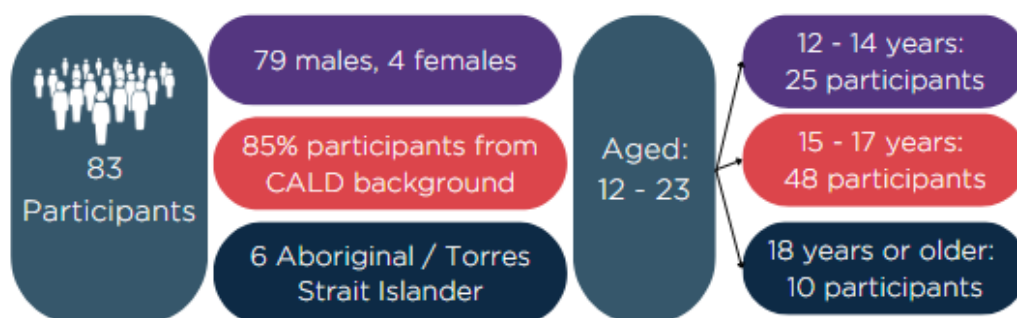


Figure 1: Demographics of MERLE participants (Source: CMS)

Participants were referred for multiple and varied reasons, with 66% having four or more concurrent issues. The most common presenting issues for participants were concerns around wellbeing (95%), relationships (78%), education and training (76%), employment (55%) and social isolation (55%).

Overall, the program effectively reached and supported its target demographic, providing tailored and flexible support to address a range of complex issues faced by young people, predominantly multicultural young people who were at risk of school disengagement and youth justice involvement.

### 1b. What was delivered by the MERLE program?

From August 2022 to March 2024, practitioners delivered 1133 sessions to 83 participants, primarily within five partner schools. The program used a multi-modal delivery model including the following components:


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<sup>1</sup> Participants engaged on an active-hold waitlist are supported by MERLE practitioners informally during group workshops, however, are not provided additional one-on-one intervention due to case-load capacity limitations.





## 2. What difference has the program made to date? Progress towards outcomes

Participants in the MERLE program who have been engaged for six months or more (n=43) have shown significant progress towards expected outcomes across the four outcome domains. Improvements were observed across all outcome domains, in particular in participant's confidence, emotional regulation and personal insights, prosocial behaviours and positive peer and family connections, school attendance and behaviour at school, future employment pathways and optimism for the future.

<b>Overview – Key outcomes (In scope: 43 Participants – MERLE engagement for 6 months or more)</b>			
12–23 years	Male	Majority complex, multiple issues	85% from CALD backgrounds
<b>Outcome domain</b>	<b>Key findings</b>		
<b>Overall wellbeing</b> 	<p><b>Overall, most participants (n= 43 in scope) experienced significant improvements in overall wellbeing and across each outcome domain due to the program:</b></p> <ul style="list-style-type: none"> <li>• 95% reported feeling 'better' or 'much better' as a result of the program</li> <li>• 88 % experienced improved 'intra-personal wellbeing,'</li> <li>• 84% experienced improved 'social wellbeing',</li> <li>• 84% improved 'educational outcomes' and</li> <li>• 58 % improved 'post-school readiness'</li> </ul> <p>The Personal Wellbeing Index – School Children (PWI-SC) scores for the group showed an increase from a mean of 65.1 (SD=0.7) to 84.4 (SD=1.0), equating to an increase of 19.3 points (SD=1.1).</p>		

	<p>This represents higher wellbeing level than the normative range for young people in Australia, which typically falls between 73.4 and 76.4 points.</p> <p><i>"[I] Feel so much better, this program has been amazing and helped changed my life – I'm so thankful (participant)</i></p>
<p><b>Outcome 1: Improved intra-personal wellbeing</b></p> 	<p><b>Overall, 88% of participants of the MERLE program experienced improvements in intra-personal wellbeing.</b></p> <ul style="list-style-type: none"> <li>• 88% reported improved confidence, wellbeing and emotional regulation</li> <li>• 86% reported improved personal insights and goal setting</li> <li>• 81% reported improved positive relationship with a trusted adult</li> <li>• 74% reported improved self-care behaviours, and improved trust and use of services</li> </ul> <p>The Personal Wellbeing Index – School Children (PWI-SC) scores for the group showed an increase from a mean of 65.68 (SD=0.7) to 84.83 (SD=1), equating to an improvement of 19.15 points (SD=1.04).</p> <p><i>"Being able to speak to someone who listens and understands is really important. Not everyone can speak to teachers and parents."</i> (participant)</p>
<p><b>Outcome 2: Social wellbeing</b></p> 	<p><b>Overall, 84% of participants of the MERLE program experienced improvements in social wellbeing.</b></p> <ul style="list-style-type: none"> <li>• 84% experienced improvements in positive peer relationships</li> <li>• 81% experienced improved positive relationships with family and/or home environment</li> <li>• 79% experienced improved behaviour or interactions in the school environment</li> <li>• 72% increased their engagement in community and recreational activities</li> <li>• 70% experienced a greater sense of belonging and optimism.</li> </ul> <p>The Personal Wellbeing Index – School Children (PWI-SC) scores for the group showed an increase from a mean of 67.78 (SD=0.66) to 85.82 (SD=0.88), equating to an improvement of 19.04 points (SD=1.05).</p> <p><i>"[I had] police charges, fighting in gangs, not looking after my health, expelled from schools, kicked out of home. Now I'm at home and have good relationship with my family, I'm working part time and doing [alternative education classes] and going to gym and looking after my health. I don't associate with gangs or those people anymore."</i> (participant)</p>
<p><b>Outcome 3:</b></p>	<p><b>Overall, 84% of participants experienced 'improved educational outcomes' particularly in attendance, more active engagement and more positive peer relationships.</b></p>

<p><b>Improved educational outcomes</b></p> 	<ul style="list-style-type: none"> <li>• 84% experienced improvements in their school attendance.</li> <li>• 67% increased participation in school support programs.</li> <li>• 47% demonstrated improved school achievement</li> <li>• 30% experienced improved education attainment</li> </ul> <p>The Personal Wellbeing Index – School Children (PWI-SC) scores for the group showed an increase from a mean of 52 (SD=0.93) to 72 (SD=1.25), equating to an improvement of 20 points (SD=1.74).</p> <p><i>“The MERLE Program has helped me during school and out of school hours. I probably would have dropped out of school if not for my MERLE worker.” (participant)</i></p>
<p><b>Outcome 4: Post-school readiness</b></p> 	<p><b>Overall, 58% of participants saw improvements in post-school readiness.</b></p> <ul style="list-style-type: none"> <li>• 58% experienced positive shifts in readiness for and pathways established into further education and/or employment. Participants who were at the age where they are legally able to obtain employment, 81% of participants were reported as experiencing improvements.</li> <li>• 56% experienced improvements in their knowledge and ability to navigate independence. Of the work-age cohort participants, 78% saw improvements.</li> <li>• 51% experienced an improved sense of wellbeing and optimism for the future. Of the work-aged participants, 67% saw improvements.</li> <li>• 47% established pathways into further education and/or employment. Of the work-aged participants, 63% saw improvements.</li> </ul> <p>The Personal Wellbeing Index – School Children (PWI-SC) scores for the group showed an increase from a mean of 63.11 (SD=0.72) to 83.11 (SD=0.73), equating to an improvement of 20 points (SD=1.00).</p> <p><i>“[I had] poor attendance at school, negative living environments and concerned about my future. Now I have an apprenticeship, go to gym regularly, have met new friends who have a positive mindset and feel great about my future.” (participant)</i></p>

### 3. What worked well and was critical to the program’s achievements?

#### a. MERLE Practitioners practice approach and skill

**The approach of MERLE practitioners was seen as key to the program’s success. Their approach was seen as adaptive, and flexible in range of engagement strategies, activities and delivery location.**

A key success factor was the delivery model used by the MERLE program team, located within the school but extending past it, building trust and rapport, and meeting the young people where they are. The MERLE practitioners were described by students and teachers as taking on a ‘big brother’, critical friend and advocate role. The approach was seen as adaptable and flexible

in relation to approach and delivery location, meeting participants where they are, in readiness and through their activities and interests.

### **b. Delivery of the MERLE program by South East Community Links**

**A key feature of the MERLE program’s success is that it is delivered in schools by an external organisation (SECL), which provides added delivery flexibility, brokerage funds and additional connections to community services.**

Being employed by an agency external to the school, MERLE practitioners have the flexibility to offer support beyond the school environment. This allows them to maintain confidentiality and gain valuable insights into participants’ needs, enabling more effective support. This support can extend to home visits and uncovering insights about participants that they may not wish to disclose at school. Additionally, it provides opportunities to attend activities outside of school hours and terms.

### **c. Strong partnership relationships**

**Strong relationships between the MERLE program team and school staff enabled the MERLE program to be delivered more effectively and efficiently, ensuring strong understanding of the program in the school and therefore appropriate referrals and program use by the schools.**

This includes regular informal dialogues aimed at providing brief updates on participants, facilitating the development of trust between staff and MERLE practitioners. It is anticipated that the strong rapport and relationships between practitioners and school staff can have a cascading effect, building stronger connections between staff and students as students observe positive relationship modelling by their practitioners. MERLE Practitioners observed that strong communication with school staff leads to earlier referrals of young people to the program, often resulting in better alignment with the program’s objectives. Additionally, improved communication aids the school’s understanding of the program’s purpose and the practitioner’s role, thereby improving the program’s effectiveness and efficiency.

## **4. What have we learnt, what could be changed or improved?**

### **a. Variability in how the program was implemented across the schools**

Data showed that the MERLE program’s implementation varied across schools, indicating differences in understanding of roles, responsibilities and expected outcomes for participants. This was in part due to the program being a pilot, which requires flexibility and innovation in regard to implementation. Additionally, flexibility was crucial given the different and complex systems in each individual school. Each school has slightly different ways of operating, including their leadership and communication structures, as such the MERLE practitioners worked in an agile way to best fit within those systems and structures.

**Recommendation: Explore consolidating operational program guidelines, refining school partnership agreement processes, and investigating oversight and leadership roles for the MERLE program.**

### **b. MERLE program and participant composition to maximise outcomes given resource limitations**

It was observed that a high number of complex clients require extensive support from MERLE practitioners, stretching capacity and reducing participant numbers. **Identifying the right**

**composition of participants, in relation to levels of complexity** can ensure more manageable caseloads, program sustainability, and worker wellbeing.

Future scaling efforts should also consider gender diversity among practitioners. While male practitioners benefit schools with staff gender imbalances, it is likely that this also reduced the participation of at-risk young women in the program, who may feel uncomfortable with male workers. Introducing female practitioners to the program would ensure equitable support for disadvantaged young women.

**Recommendation: Consider program structure in terms of delivery method, gender composition of the MERLE practitioner team, case load composition, client complexity and diversity within resource constraints to improve sustainability and maximise benefits for diverse youth participants.**

## Conclusion and Next Steps

The MERLE program has achieved significant progress in addressing the needs of culturally diverse youth in Melbourne's south-eastern suburbs who face risks of disengagement from education and involvement in youth justice issues. MERLE program participants experienced positive changes across all outcome domains including intra-personal and social wellbeing, educational outcomes and post-school readiness.

The MERLE program has shown effectiveness in its delivery model, with promising results. Continuous improvement efforts will allow the MERLE program team to consolidate operational guidelines, refine school partnership processes, and streamline program delivery methods within resource constraints. This will ensure consistent outcomes across sites and facilitate effective scaling to benefit more at-risk young men and women in Melbourne's south-eastern suburbs. Continued intervention and data collection with participants, following program completion, would be able to determine longer term outcomes and their sustainability.





# MERLE Evaluation Report

## Introduction

The MERLE program is an intensive, two-year intervention that aims to support 60 young people from multicultural backgrounds who are at risk of school disengagement and youth justice involvement, to gain the necessary life skills to reach their full potential. The MERLE program, delivered by South East Community Links (SECL) and funded by Department of Home Affairs, commenced in August 2022 and is due for completion in mid-2024.

In December 2022, SECL commissioned the Outcomes, Practice and Evidence Network (OPEN), delivered on behalf of the Centre for Excellence in Child and Family Welfare (the Centre), to support the evaluation activities of the program and the preparation of a final evaluation report of the MERLE program to examine outcomes achieved, the strengths of the program model and opportunities for improvement.

**This report provides the key findings of the evaluation of the MERLE program. The objective of the evaluation was to assess progress towards outcomes, and identify critical success factors and opportunities for improvement, drawing from data collected for the period August 2022–30 March 2024.**

## Overview of the MERLE program

*Based on international best practice, MERLE (Mentor, Empower, Reflect, Learn and Earn) is an intensive, two-year early intervention program.*

### Objective

To work in partnership with schools, local government, specialist services and police, to provide disadvantaged youth mainly from refugee and migrant background living in Melbourne's south-eastern suburbs intensive wrap around support to reduce school refusal, anti-social behaviours, substance abuse, crime and gang involvement and unemployment. It aims to deliver improved community safety and strengthen participants' social and emotional wellbeing, education, community engagement and employment for a positive future.

### Rationale

Youth from migrant and refugee backgrounds in Melbourne's south-eastern suburbs are at greater risk of disengagement from education, family and community, and poor social, educational and employment outcomes. They are more likely to have poor mental health, increased anti-social behaviours and/or criminal activity, education attainment and ultimately unemployment.

### Delivery model

The MERLE program aims to provide 60 participants who have been identified as at risk of school disengagement, anti-social peer relationships and involvement with juvenile justice with intensive support in the school context and beyond for up to 2 years through the following:



Figure 2: MERLE program components

## Key outcomes

The MERLE program aimed to support improvements for participants in the following outcomes domain areas: intra-personal wellbeing, social wellbeing, educational outcomes, and post-school readiness. The program logic is outlined in Appendix 1 and definitions of outcomes are outlined in Appendix 2.

## Key evaluation questions and method

The evaluation objective was to determine the extent to which the MERLE program has achieved expected outcomes and to identify critical success factors and opportunities for improvement.

### Evaluation questions:

1. Who are MERLE participants and what has been delivered as part of the program? Were the expected participants reached and did they receive the planned service activities?
2. What difference has the Program made following 18-months service delivery? What progress has been made towards expected outcomes?
  - a. Improved intra-personal wellbeing
  - b. Improved social wellbeing
  - c. Improved educational outcomes
  - d. Improved post-secondary readiness
3. What worked well and was critical to the program's achievements?
4. What have we learnt, what could be changed or improved?

### Method

The evaluation used a mixed methods approach drawing on qualitative and quantitative data. All data collected was coded, thematically analysed and triangulated to identify consistent themes which were reported against the key evaluation questions.

Data included:

Data source	What were we looking to understand?
Client Management System data (n=83) Ongoing	Participants' demographic features and presenting issues Activities delivered
Interviews with four partner schools (n=4) Following 1 year delivery (mid point)	Program structure and delivery Outcomes observed
Surveys with five partner schools (n=5)  Following 18 months delivery	Program structure and delivery Outcomes observed
Interviews with MERLE program team Following 1 year and 18 months delivery	Program structure and delivery Outcomes observed by participants
OPEN Outcomes Measurement Survey Tool (OMT) – (in-scope sample n=43) Commencement and following minimum of 6 months delivery	Participants' presenting issues Participants' self-reported changes and impact of the program on those changes <b>Personal Wellbeing Index – School Children (PWI-SC)<sup>2</sup></b> . Practitioners administered the OMT tool to participants at commencement and following a minimum of 6 months engagement to ensure sufficient involvement with the program to have experienced intended outcomes <sup>3</sup> . Not unexpectedly for this cohort some challenges were experienced in getting all in scope participants to complete the tool.  For the PWI-SC component of the tool, mean values and standard deviations were calculated for each participant and for the cohort overall. The aggregated PWI-SC indicators provided a measure of the cohort's overall wellbeing. This measure was compared to the normative range for young people in Australia. In addition, each indicator in the PWI was also analysed separately and reported under the relevant MERLE outcome area.

<sup>2</sup> The PWI-SC is a validated tool for measuring the subjective wellbeing of children over age 12. It includes seven 'happiness' items across various quality-of-life domains, with two additional items on happiness with secondary school and employment. (Cummins, 2023)

<sup>3</sup> (Komosa-Hawkins, 2010)

# Key findings

## 1. Who are MERLE participants and what has been delivered as part of the program?

### **MERLE has delivered expected activities, exceeding participation targets and engaging participants with diverse multicultural backgrounds and presenting issues as planned.**

Between August 2022 and 30 March 2024, the program delivered 1133 sessions to participants. Sessions included 1:1 support (1098), structured workshops involving specialist guest presenters (31) and school holiday activities and camps (4). The program engaged 83 participants, aged between 12 and 23, from multicultural backgrounds. Eighty-five per cent of participants were from a culturally and linguistically diverse (CALD) background, with 19 different countries of birth. Participants were referred for multiple and varied reasons, most commonly wellbeing concerns, relationships and education/training.

### 1a. Who are the MERLE participants and what are their demographic features and presenting issues? Did the program reached its intended participants and deliver intended service activities?

#### **Demographic features and presenting issues for MERLE participants**

Between August 2022 and March 2024, 164 young people were referred to the MERLE program. 83 were engaged in the program formally and were supported with the full range of activities on offer through the program. An additional, 81 young people were supported through an active-hold waitlist, including incidental engagement and access to group activities held on school grounds.

#### *Demographic features of participants*

MERLE participants are aged between 12 and 23 years, with the average being 15 years of age. Features of participating included:

- 25 participants aged between 12 and 14 years, 48 participants aged between 15 and 17 years and 10 participants were aged 18 years and older
- 79 are male and 4 are female,
- Six participants identify as Aboriginal and/or Torres Strait Islander,

Eighty-five per cent of the participants identified as culturally and linguistically diverse (CALD). There were 19 different countries of birth listed, Australia (28), being the most common followed by Afghanistan (24), Sudan (6), Samoa (4).



Figure 3: Demographics of MERLE participants (Source: CMS)

It is worth noting that both the MERLE practitioners are male, which may go some way to explaining the dominance of male participants in the program. It was observed by school staff that the male practitioners provided a beneficial referral option for male students. This option is normally not available due to the limited number of male staff members within wellbeing teams. While this is a benefit of the current program structure in supporting at-risk young males, it does risk excluding at-risk young women from receiving support.

### Presenting issues

The referral reasons for participants were multiple and varied across the cohort. Sixty-six per cent of participants were referred for four or more reasons. For example, five participants presented with 10 to 14 concurrent issues each, which included a combination of wellbeing concerns, education/training, employment, child protection, family violence, social isolation, relationship issues and legal. Ninety-five per cent of participants presented with well-being concerns. Other common presenting issues include relationships, education/training, employment and social isolation. Further reasons include legal, child protection, alcohol/other drugs, bullying and linking to other services. Less common reasons for referral included family violence, fines, financial capability, child support, homelessness, utilities and document support.

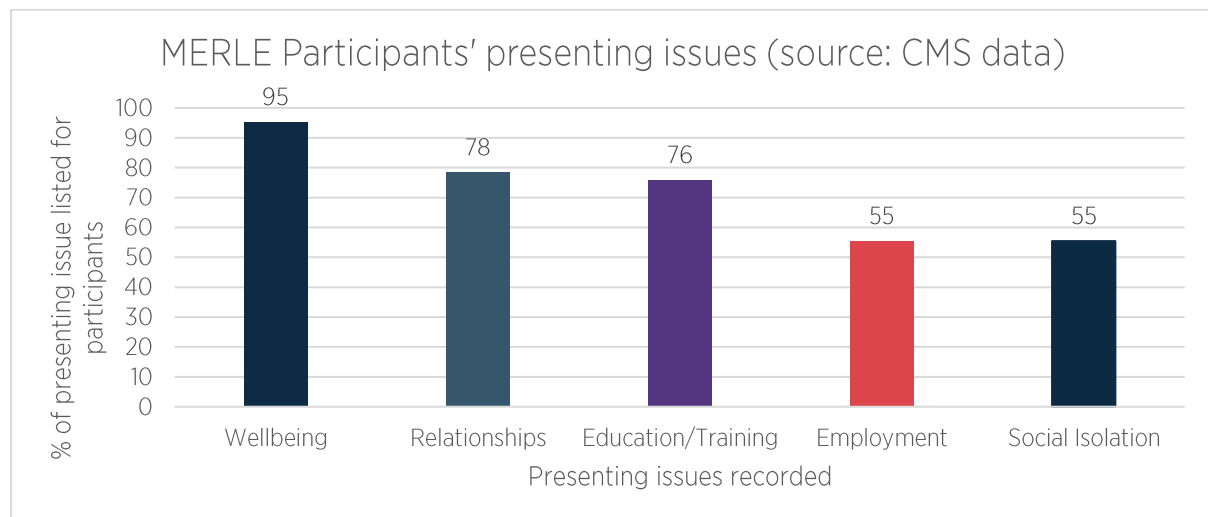


Table 2: MERLE participants' presenting issues (Source: CMS)

## Were expected participants reached?

The MERLE program aimed to support 60 young people aged 12–24 years, from multicultural backgrounds at risk of school disengagement and youth justice involvement. Between August 2022 and 30 March 2024, the program has engaged 83 participants, exceeding participation targets. Participants were 95% male aged between 12 and 23. Eighty-five per cent of participants were from a culturally and linguistically diverse (CALD) background, with 19 different places of birth. Participants were referred for multiple and varied reasons, most commonly wellbeing concerns, relationships and education/training. An additional 81 participants are on an “active hold waitlist”, engaged via group workshops.

Twelve participants disengaged from the program before they had received six months of service. This was for various reasons, including that young people could not be contacted or did not engage on point of referral (6), young people moved location or school (4), the young person entered youth justice (1) and young person completed all goals (1). The reasons for disengagement at point of referral warrant further exploration for the MERLE program, as a deeper understanding of the young person’s starting circumstances could provide insights into who is best suited to the program.

## 1b. What was delivered by the MERLE program?

Between August 2022 and 30 March 2024, MERLE practitioners delivered a total of 1133 sessions to the 83 MERLE participants.

Referrals and delivery of activities was mainly based within one of the five partner schools,



- Hampton Park Secondary College
- Noble Park Secondary College
- Lyndhurst Secondary College
- Dandenong High School
- Narre Warren P-12



In addition, MERLE practitioners also received referrals for six participants through formalised partnerships with Victoria Police and Youth Support and Advocacy Service’s (YSAS) Embedded Youth Outreach Program (EYOP), Foundation House, and Cultural Engagement Program Statewide Children and Families Branch (DFFH), with these participants not required to be in a partner school. (Participants referred through this pathway attend non -partner schools - Keysborough college, Fountain Gate College and 3 are not enrolled in a school). A further five young people were engaged in the program through a newly formed partnership with Monterey Secondary College. The participants and teaching staff at Monterey Secondary College were not in scope for this evaluation.

## MERLE activities

The MERLE program delivers its service using a multi-model delivery model. This includes one-on-one sessions on and off school grounds, group workshops, referring participants to community services and recreational opportunities, and organising school holiday activities and camps. The program is implemented in each school in a unique way, with practitioners using an adaptable approach to connect with participants in environments where they feel most at ease. This flexibility allows practitioners to tailor the program’s composition, adjusting the balance between informal engagement activities like basketball, one-on-one sessions, outreach support,

and holiday activities based on the participants' readiness, rapport, and needs. Consequently, the program's structure and positioning vary across schools.

Activity type	Activity description														
 <p>One-on-One 1098 sessions</p> <p><b>Location of sessions:</b></p> <table border="0"> <tr> <td>Education facility</td> <td>633</td> </tr> <tr> <td>Telephone</td> <td>253</td> </tr> <tr> <td>Community venue</td> <td>145</td> </tr> <tr> <td>Organisation outlet/office</td> <td>48</td> </tr> <tr> <td>Clients' residence</td> <td>10</td> </tr> <tr> <td>Digital</td> <td>8</td> </tr> <tr> <td>Healthcare facility</td> <td>1</td> </tr> </table>	Education facility	633	Telephone	253	Community venue	145	Organisation outlet/office	48	Clients' residence	10	Digital	8	Healthcare facility	1	<p><i>MERLE practitioners provide support and guidance to participants on school grounds, in wellbeing offices, sporting grounds, community settings including gyms, SECL offices, family homes</i></p> <p><i>Provides links to community, positive social outlets, ongoing connection and broadens social connections</i></p> <p><i>Young people stated they enjoyed these the most, got the most out of these sessions</i></p> <p>MERLE practitioners spend 1-2 days per week on site at their allocated partner schools, offering adaptable support to participants to address their diverse needs. This support is available during school hours and term periods, as well as after hours and during school holidays.</p> <p>Sessions primarily take place on school premises, with practitioners utilising dedicated private spaces or outdoor sports areas. They actively engage with participants during breaks, promoting informal connections. Practitioners support young people to understand the impact of their behaviour and attitudes on their peers, families and future. They set goals for positive engagement in education and future career pathways.</p> <p>Additionally, practitioners also meet participants at the SECL office, community locations like cafes, recreational venues such as sports centres or in their family homes.</p>
Education facility	633														
Telephone	253														
Community venue	145														
Organisation outlet/office	48														
Clients' residence	10														
Digital	8														
Healthcare facility	1														
 <p>Structured Group workshops 31 sessions across three schools</p>	<p><i>A series of 8 structured workshops were delivered across three of the schools, spanning 8 weeks. These workshops featured team games promoting collaboration among participants to achieve specific goals.</i></p> <p><i>In addition, specialist services were engaged to deliver sessions such as legal counselling and nutrition guidance, covering topics like sleep, self-care, and nutrition.</i></p> <p>The structured group workshops offered practitioners the chance to extend "light touch" or "active hold" support to an additional 81 participants who otherwise lacked access to such support. School staff also supervised these activities, enabling them to establish rapport with participants outside of the classroom environment and strengthen their relationships with the practitioners.</p>														

 <p>School holiday activities – 2 and Camps – 2</p>	<p><i>Provides links to community, positive social outlets, ongoing connection. Broadens social connections</i></p> <p>The MERLE program organised two camps that connected participants from all five schools. The annual camp, located in Phillip Island, featured sports and nutrition workshops, bike riding, team building activities, and opportunities for peer engagement. During interviews, school staff highlighted the significant value of out-of-school activities such as holiday events or camps. These activities assist practitioners in maintaining contact and rapport with participants, while also reinforcing trust and consistency during school breaks.</p>
 <p>Outgoing referrals and financial support 42 referrals made for 23 participants to 19 different services</p>	<p><i>Enables participants to be more widely connected support services and community, improving help-seeking behaviour and social capital.</i></p> <p>Twenty-three participants were referred to multiple external programs and services, including Reclink Australia (14), employment and training services (6), Larita Academy (6) and legal support (4). Nine young people were referred to multiple services, with the highest number of referrals being 8 and the average, 2.</p>

## 2. What difference has the MERLE program made? What progress has been made towards expected outcomes?

The following section provides an overview of outcomes experienced by 43 MERLE participants engaged in the program for six months or more. It was determined in scoping the evaluation that a minimum of six months engagement would allow sufficient time to reasonably expect participants to have experienced outcomes<sup>4</sup>.

Outcomes were measured through thematically analysing and triangulating data collected from the following sources:

- Outcomes measurement tool (OMT) (includes the Personal Wellbeing Index – School Children (PWI-SC) and supplementary questions
- MERLE practitioner interviews
- School staff interviews and surveys

<sup>4</sup> While every effort was taken to secure data for the full 63 participants engaged in the program for six months or more, challenges were experienced in collecting this data. This included the transient nature of this cohort of participants and difficulty engaging young people in data collection activities. This is not unexpected.



The demographic features of participants engaged in the program for six months or more (in scope participants) were representative of the whole cohort including:

- All male, between 12 and 23 years old (at commencement; average age 15.3 years) and 86% were from a CALD background

Most were complex clients, with 58% of participants having multiple presenting issues (3–6 reasons for referral). The most common presenting issues were limited support from a trusted adult; behaviour had negatively changed; engaging in high risk behaviours; limited involvement in social or recreational activities; and reduced engagement or attendance at school.

Ten participants had statutory services involved, with eight of those having multiple (2–5) statutory services involved. These included Victorian police, child protection and youth justice.

## Overview – Improved overall wellbeing

**Overall, most participants (n= 43 in scope) experienced significant improvements in overall wellbeing and across each outcomes domain due to the program:**

- 95% reported feeling ‘better’ or ‘much better’ as a result of the program
- 88 % experienced improved ‘intra-personal wellbeing,’
- 84% experienced improved ‘social wellbeing’,
- 84% improved ‘educational outcomes’ and
- 58 % improved ‘post-school readiness’



The Personal Wellbeing Index – School Children (PWI-SC) scores for the group showed:

- An increase from a mean of 65.1 (SD=0.7) to 84.4 (SD=1.0), equating to an increase of 19.3 points (SD=1.1).
- This represents higher wellbeing level than the normative range for young people in Australia, which typically falls between 73.4 and 76.4 points.

Ninety-five per cent of participants stated they felt ‘better’ or ‘much better’ since starting in the MERLE program.

- “[I] Feel so much better, this program has been amazing and helped changed my life – I’m so thankful (participant)
- “My life has changed for the better since I have been in the MERLE Program.” (participant)

Overall, most participants in the MERLE program reported improvements in each outcome domain, with improvements for participants identified in ‘intra-personal wellbeing’ (88%), ‘improved social wellbeing’ (84%), ‘improved educational outcomes’ (84%) and ‘post school readiness’ (58%).

The mean adjusted score for the group Personal Wellbeing Index – School Children (PWI-SC) showed substantial improvement over the course of the program. Specifically, at the beginning

of the program, the cohort had a mean adjusted PWI-SC score of 65.1 (SD=0.7). By the end of the program, this score had increased to 84.4 (SD=1.0), indicating a notable increase of 19.3 (SD=1.1) points in the overall PWI-SC score. This surpasses the lower bound of the normative range for Australia, which typically falls between 73.4 and 76.4 points. The cohort's mean score (65.1, SD=0.7) at the first time point was well below the normative range, the subsequent mean score surpassing this demonstrates critical improvement.

These results underscore the positive impact of the program on the subjective wellbeing of the group, demonstrating a substantial improvement in their overall personal wellbeing throughout the program duration.

### Participant journey case examples

The following case examples were chosen by the MERLE practitioners as the most typical participant journeys experienced in the MERLE program. These participant journey examples demonstrate a range of changes commonly seen within a MERLE participant, including building relationships with trusted adults, improved health and wellbeing, improved peer connections and improved engagement with education. These case studies are in extended detail in Appendix 4.

*\*names have been changed for privacy reasons*

#### *Case Study: Michael*

Michael\*, aged 13, was referred to the MERLE program after he stopped attending school and had no other service involvement. The MERLE practitioner initiated contact by visiting Michael at home. Initially, Michael found short walks around the local area exhausting, leading the MERLE practitioner to suspect underlying health issues were affecting Michael's energy levels and his ability to engage with school.

Once Michael's health issue was managed, he and his MERLE practitioner developed a plan to gradually increase his school attendance. He quickly progressed from attending school 3.5 days per week to attending full-time, and also started participating in community activities with the MERLE practitioner's encouragement and guidance. Beyond health improvements, Michael was observed to have increased self-confidence, improved wellbeing, better school engagement and broader social networks. Michael reported feeling less tired and more hopeful about the future.

#### *Case Study: Ali*

Ali\*, aged 18, was referred to the MERLE program after he stopped attending school, and had come to the attention of Victoria Police for high risk behaviours. Ali\*, aged 18, was referred to the MERLE program after he stopped attending school, and had come to the attention of Victoria Police for high risk behaviours. Ali was frequently involved in school fights and faced the risk of expulsion. Initial attempts by the MERLE practitioner to engage Ali were unsuccessful until he met with Ali's family to explain the support he could offer. This meeting led to Ali beginning to engage with the program.

Over time, Ali's school attendance improved, but his academic performance remained a concern. Utilising the rapport built with Ali's family, the MERLE practitioner helped develop a plan for Ali to prove his consistency and dedication to school before transitioning to TAFE for an apprenticeship. With growing momentum, Ali obtained his driver's license and a white card, enabling him to start an apprenticeship in building and construction. Since

## 2a. Outcome 1: Improved intra-personal wellbeing

### Overall, 88% of participants of the MERLE program experienced improvements in intra-personal wellbeing.



- 88% reported improved confidence, wellbeing and emotional regulation
- 86% reported improved personal insights and goal setting
- 81% reported improved positive relationship with a trusted adult
- 74% reported improved self-care behaviours, and improved trust and use of services

The Personal Wellbeing Index – School Children (PWI-SC) scores of the group for intra-personal wellbeing showed<sup>5</sup>:

- An increase from a mean of 65.68 (SD=0.7) to 84.83 (SD=1), equating to a mean improvement of 19.15 points (SD=1.04).

### Intra-personal skills and wellbeing

Participants reported improvements in emotional regulation, mood and confidence, physical health and sleep routines. Participants also recognized the impact of their behaviours on other people as well as an improved understanding of actions leading to consequences and decision-making:

- “[My MERLE practitioner] helped me understand the importance of eating, drinking water and good sleep. Helped get me back playing basketball and around positive people” (participant)
- “[I’m now] taking responsibility for my actions, and thinking how it has affected my parents.” “[I’m now] taking responsibility for my actions and thinking how it has affected my parents.” (participant)

- “So in the group program, I’ve definitely seen a lot of the young boys come out of their shells or sort of hold each other accountable for a lot of different things, which we hadn’t seen before.” (School staff interviewee)
- “Students feel more excited to come to school, students have mentioned that the program has helped with their confidence.” (school staff survey)

<sup>5</sup> It should be noted that benchmarking or comparison data for the PWI-SC is only available for the mean values of the whole PWI-SC scale, it is not available for individual PWI-SC indicators.

Particularly noteworthy were the improvements attributed to the trusted adult relationship established between the MERLE practitioner and the participants. Both participants and school staff identified the strength of these relationships as crucial to the success and outcomes of the program. This bond was promoted through the individualised support offered to participants, which was recognised as a vital component of the program’s effectiveness. MERLE practitioners utilised an informal, strengths-based approach to inspire, motivate, educate, and instil self-confidence in participants. Observations from MERLE practitioners suggested that the significance of their role as a trusted adult may, in certain cases, stem from the absence of other male role models providing guidance in participants’ lives. Participant comments included:

- “Having an adult give me advice, and support me has been really good, teachers do not do this.” (participant)
- “Being able to speak to someone who listens and understands is really important. Not everyone can speak to teachers and parents.” (participant)
- “The time the MERLE worker gives me is great, means a lot.” (participant)

### Service confidence and help seeking behaviours

Building on the trusted relationship established with the MERLE practitioner, participants demonstrated increased awareness of available services and an increased utilisation of those services. MERLE practitioners expanded the participants’ understanding of services, supported referrals, and provided contact information to enable them to follow through with the referrals. Moreover, participants were able to share these details with their peers who might also be in need of support, illustrating the ‘ripple effect’ of the MERLE program. An unintended outcome of the MERLE program, which was observed by three out of five schools surveyed, was improvements in young people, not directly involved in the MERLE program, including improved relationships with trusted adults, confidence, community engagement and help seeking behaviours.

MERLE practitioners provided links to services to support young people with complex issues, such as housing and legal support. By supporting links to these services and addressing basic needs and safety, young people are then able to flourish and continue with education or employment.

- “I was in trouble with the Police for driving without a license, the MERLE worker, wrote a support letter for me to take to court and that helped. It has made me think before making the wrong choices now.” (participant)
- “I have been giving Housing, and enrolled in Uni.” (participant)

Four out of five schools surveyed reported an increase in young people engaging with support services already on offer from the school, citing that the MERLE program assisted in breaking down cultural barriers:

- “More students have accessed wellbeing support and also attended wellbeing office when issues arise... Broken down barriers between cultural stigma and wellbeing” (school staff survey)

## 2b. Outcome 2: Improved social wellbeing

**Overall, 84% of participants of the MERLE program experienced improvements in social wellbeing.**



- 84% experienced improvements in positive peer relationships
- 81% experienced improved positive relationships with family and/or home environment
- 79% experienced improved behaviour or interactions in the school environment
- 72% increased their engagement in community and recreational activities
- 70% experienced a greater sense of belonging and optimism.

The Personal Wellbeing Index – School Children (PWI-SC) scores for the group showed: The Personal Wellbeing Index – School Children (PWI-SC) scores of the group for social wellbeing showed:

- An increase from a mean of 67.78 (SD=0.66) to 85.82 (SD=0.88), an improvement of 19.04 points (SD=1.05).

### Positive relationships with family friends and the school

Participants were observed to have positive shifts in peer relationships and more positive interactions in the school grounds, including with teachers. Four out of five schools surveyed saw positive improvements for most students in peer relationships, and improvements in playground behaviour. This perception was reinforced by participants' reflections that:

- "I listen to teachers more now, I try not to have outbursts of anger, sometimes it's hard but getting better." (participant)
- "[I had] police charges, fighting in gangs, not looking after my health, expelled from schools, kicked out of home. Now I'm at home and have good relationship with my family, I'm working part time and doing [alternative education classes] and going to gym and looking after my health. I don't associate with gangs or those people anymore." (participant)

### Recreational and community participation

Leveraging the strong, trusted relationships established with participants, MERLE practitioners effectively utilised resources offered by SECL and external partnerships to facilitate recreational opportunities. These included access to the gym, participation in sporting events, and attending camps. These activities introduced participants to new experiences, involving them in positive community engagements, expanding their social circles, improving peer relationships, and mitigating idle time that could potentially lead to risk-taking behaviours. Additionally, participants' peers not directly involved in the MERLE program were offered similar opportunities, extending the support offered to reinforce peer connection. School staff

confirmed this shift observing that there has been improved engagement of participants in outside activities.

Seventy-two per cent of participants increased their engagement in community and recreational activities, with many stating that they regarded these opportunities highly. As an example, participants stated:

- “[I’m] going to the gym, staying focused and being involved with more positive people like MERLE.” (participant)
- “I was never going to school and now I always go, I have a gym membership and also my white card thanks to the program.” (participant)
- “I have been able to go to the gym for free which has helped.” (participant)

### **A greater sense of belonging and optimism**

Thirty-five per cent of participants reported a stronger sense of belonging and hope for the future. While a smaller number than the other outcome areas, this is an increase from the midterm evaluation result which showed 27% of participants reporting this improvement. This suggests that with additional time in the program, participants’ awareness of and aspirations for the future are likely to further increase.

- “[I have] no more trouble, out of a big gang and not around bad people. Focused on my future, made new friends and going to the gym looking after my physical and mental health.” (participant)
- “I wasn’t doing much, now I am busy, and working towards a better future.” (participant)
- “[I have] increased confidence & belief that I can have a bright and happy future.” (participant)

## 2c. Outcome 3: Improved educational outcomes

**Overall, 84% of participants experienced positive shifts in ‘improved educational outcomes’ particularly in improved attendance, more active engagement and more positive peer relationships.**



- 84% experienced improvements in their school attendance.
- 67% showed increased participation in school support programs.
- 47% saw improved school achievement
- 30% showed improved education attainment

The Personal Wellbeing Index – School Children (PWI-SC) scores for the group showed:

- An increase from a mean of 52 (SD=0.93) to 72 (SD=1.25), equating to improvement of 20 points (SD=1.74).

### Attendance and greater engagement with school work

Eighty-four per cent of participants displayed positive changes in their school attendance, and there was an improvement in school achievement for 47% of participants.

Staff members of partner schools observed improvements in school engagement, including:

- Improvements in school attendance for most students (4/5 schools).
- Improvements in punctuality for the most students (3/5 schools).
- Improvements in classroom participation for some or most students (3/4 schools)

Staff members also noted improvements in participants’ mood, engagement with peers and school staff:

- “All the students have struggled with engagement and attendance at school. Most have improved attendance or are at least here a couple times a week. There are clear signs to me that students working with [MERLE Practitioner] have improved mood, better emotional regulation and better engagement with staff and other students too. (School staff survey)

While few participants explicitly reported improvements in their grades, several reported being more focused on their work and MERLE practitioners reported some improvements in educational attainment (grades) for 47% of participants and completion (of compulsory education) for 30% of participants. These outcomes are likely to become more evident over time. Participants who have been disengaged from school may need time to improve attendance and catch up on missed learning before grades and attainment show improvement. Additionally, many students are not yet at the age expected for completing secondary education.

Numerous participants provided comments which highlighted these improvements as directly related to their involvement in the MERLE program:

- “The MERLE Program has helped me during school and out of school hours. I probably would have dropped out of school if not for my MERLE worker.” (participant)
- “When I started, I wasn’t going to school much, I nearly failed. Then I worked with the MERLE worker, and went back to school full time, stayed for a term and then went to TAFE.” (participant)
- “At the start of 2023, I was only going to school a few days over a month, and when I wasn’t at school, I was staying with friends for weeks at a time, breaking into houses and stealing cars. Now I go to school every day, and working on being a good person.” (participant)

### **Improved classroom interactions and engagement, engagement with school support services and stronger peer relationships**

Participants frequently reported that they noticed their behaviour at school improving, indicating both an improvement in personal insights, improved emotional control and attitudes towards education, resulting in improved interactions and engagement with education, teachers and education support services. Participants reported these changes:

- “[Before, I was] not going to school, getting in fights, disrespectful to teachers – trouble with the police. Now I’m going to school more and not getting in fights or trouble with police.” (participant)
- “I was very angry, talking back to teachers, now I listen more and don’t act out as much.” (participant)

Interviews with school staff indicated improvements in classroom confidence and peer relationships. Four out of five schools surveyed also reported improvements in engagement with the supports on offer at the school for most students.

- “More students have accessed wellbeing support and also attended wellbeing office when issues arise... Broken down barriers between cultural stigma and wellbeing” (School staff survey)
- “We can see that the students who have worked with MERLE have become confident and engaged, they are much more open to supports and engaging with staff. They have become more open to accessing supports outside of their local area.” (School staff survey)



## 2d. Outcome 4: Post-school readiness

### Overall, 81% of participants aged 16 and over<sup>6</sup> saw improvements in post-school readiness.



- 81% experienced positive shifts in readiness for and pathways established into further education and/or employment
- 78% saw improvements in their knowledge and ability to navigate independence
- 67% experience an improved sense of wellbeing and optimism for the future.
- 63% had pathways established into further education and/or employment.

The Personal Wellbeing Index – School Children (PWI-SC) scores for the group showed:

- An increase from a mean of 63.11 (SD=0.72) to 83.11 (SD=0.73), equating to an improvement of 20 points (SD=1.00).

### Optimism for the future

MERLE practitioners observed improvements in 51% of participants in relation to their optimism for the future. Of the smaller cohort of work-aged participants, 67% reported experiencing improvements in optimism for the future. Participants also frequently expressed a sense of improved optimism and hope resulting from their interactions with the practitioners. Indicators from the PWI-SC demonstrated improvements in overall life satisfaction (increase of 23.8 points, SD=0.8), and in anticipation of future happiness (increase of 19.4 points, SD=1.3).

- “I wasn’t too sure at the start of my direction, but after time went on, working with the MERLE worker, I got back on my feet and now very happy.” (participant)
- “I know I can do amazing things in life.” (participant)
- “...I had nothing positive outside of school and now I feel in control of my life and I have many opportunities ahead of me.” (participant)

### Knowledge and ability to navigate services

Fifty-six per cent of participants saw improvements in their knowledge and ability to navigate independence. Of the smaller cohort of work-aged participants, 78% saw improvements in their

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<sup>6</sup> Improvements in the outcome domain ‘Post-school readiness’ were measured across all in-scope participants, through both self-reported OMT responses and MERLE practitioner interviews. While improvements were observed for the many (58%) of this cohort, it was decided to further stratify the in-scope sample to gain deeper insights into the changes experienced for those who were already or almost 15 years and 9 months of age, the legal age of employment in Victoria.

knowledge and ability to navigate independence. Participants shared insights into their changed mindsets and new skills:

- “Improved school attendance, thinking about a career & staying away from friends who get in trouble.” (participant)
- “I have been giving the skills to learn and be a better person.” (participant)
- “Staying focused on where I want to be when I finish school, and that is play professional Soccer.” (participant)

### Readiness and pathways into further education

Fifty-eight per cent of participants were observed to show positive improvements in their future career thinking and readiness, specifically TAFE and university pathways. Of the smaller cohort of work-aged participants, 81% saw improvements in their future career thinking and readiness, specifically TAFE and university pathways.

- “I have been given housing, and enrolled in Uni.” (participant)
- “[The MERLE program] helped encourage me to stay out of trouble and focus my career and what my life could look like if I focus on a career path. Also financial support which really helped me” (participant)
- “[I had] poor attendance at school, negative living environments and concerned about my future. Now I have an apprenticeship, go to gym regularly, have met new friends who have a positive mindset and feel great about my future.” (participant)

- “Okay, well, I’ve like identified they need a job, will they need help with their housing situation. And so SECL, he’s been able to go, or bring in the person that works with housing support, or help them build a resume, get employment, and hopefully reduce some of that unstructured time.” (school staff interview)

- “Okay, well, I’ve like identified they need a job, will they need help with their housing situation. And so SECL, he’s been able to go, or bring in the person that works with housing support, or help them build a resume, get employment, and hopefully reduce some of that unstructured time.” (school staff interview)

## Who does MERLE work best for?

**The MERLE program is most effective for two groups: one-on-one support for older participants (16+ years) and group workshops for younger participants (12–15 years).**

- Older participants, especially those over 15 years and 9 months, show significant improvement and readiness for work, with some securing apprenticeships and full-time jobs. This group requires more intensive support to build community connections, reducing idle time and risky behaviours.
- Younger participants, less involved in risky peer networks, benefit from the structured group workshops with less need for one-on-one support.

To utilise resources most effectively, limiting the number of highly complex participants is recommended, as those with less complex needs may gain benefits with less time and resource intensive support.

**The MERLE program is less effective for participants who are already heavily entrenched in negative peer networks and risk-taking behaviour.** The program is designed to intervene earlier in a young person's life trajectory and based on current resourcing, does not have capacity to adequately provide services to young people with these characteristics.

The MERLE program supports young people aged 12–24 years. During the first 18 months of service delivery, participants ranged between 12 and 23 years, with the average being 15 years of age. Ages were distributed as follows.

- 23 participants were aged between 12 and 14 years
- 42 participants were aged between 15 and 17 years
- 6 participants were aged 18 years and older

MERLE practitioners commented that the young people who were slightly older and more mature, with opportunities for employment (older than 15.9 months) were more responsive to the program and showed more improvements. Practitioners suggested this age group are more prepared for work, and some have gone on to obtain apprenticeships and gain fulltime employment. However, practitioners noted that these participants often also need more intensive support. This support includes building community connections outside of school, which requires additional time from practitioners. By fostering these community connections, practitioners help participants develop peer networks, offering positive outlets and reducing idle time that might otherwise lead to risky behaviours. Demands of highly complex participants were described by practitioners:

- “More complex students take huge input. You may have 7 or 8, which frequently involves having to talk to each 2–3 times per week – along with court appearances, parental liaison, getting a positive environment around them, along with supporting their appointments. This was my whole week.” (MERLE practitioner)

MERLE practitioners and school interviewees recognised that occasionally, individuals may be too heavily entrenched in behaviours and peer groups, making it challenging for the program to effect significant change. Staff emphasised their limited awareness of participants' challenges until they are deeply immersed in negative peer networks and associated behaviours, considering it "too late" at that point. Additionally, circumstances like homelessness and family violence can impede practitioners' ability to meet with young people off-site, with individuals often forming peer networks as replacements for familial connections due to the disconnection caused by such situations.

MERLE practitioners also noted that younger participants, less entrenched in risky peer networks, also experienced positive outcomes. The structured workshop program was particularly beneficial for them, requiring less intensive support. The group workshop activities provide a basis to build rapport with participants and link them with positive peer connections, serving as an early intervention component of the program.

Due to resource limitations, it's suggested to establish defined limits on the number of complex participants, given the intensity of support required, and the potential of providing significant value to those with less complex needs with lower time demands.

### 3. What worked well and was critical to the program's achievements?

**Overall, the MERLE program's delivery model was reported as key to its success. Key elements include:**

- Embedding the program within a school setting but reaching far beyond the school into participants' homes, service needs and recreational and employment activities.
- The practice approach and skills of the MERLE practitioners, with students and teachers describing the practitioners as taking on a 'big brother', critical friend and advocate role, was particularly important.
- The flexibility of the program and the provision of structured workshops, which provided a social learning environment for MERLE and non-MERLE students.
- The opportunities provided by MERLE location within SECL for referral into other SECL programs or to programs run by other organisations within SECL's network. The opportunities provided by MERLE's location within SECL for referral into other SECL programs or to programs run by other organisations within SECL's network.

#### **MERLE practitioners' practice approach and skill**

***The approach of MERLE practitioners is key to the program's success. Their approach was seen as adaptive, and flexible in relation to approach and delivery location.***

A key success factor was the delivery model used by the MERLE program team, located within the school but extending past it, building trust and rapport, and meeting the young people where they are. The MERLE practitioners were described by students and teachers as taking on a 'big brother', critical friend and advocate role. The approach was seen as adaptable and flexible in relation to approach and delivery location, meeting participants where they are, in readiness and through their activities and interests.

MERLE practitioners tailor their interactions with participants to meet them where they are in terms of readiness to engage, aligning activities and engagements with their readiness and interests. With access to school grounds and sports facilities, practitioners create a relaxed atmosphere where participants felt at ease. The relationship between the practitioners and the participants is significant, with 44% of participants indicating that they enjoyed the one-on-one adaptable sessions the most and that these had the most value to them. Additionally, practitioners extend their support beyond school boundaries, accommodating after-hours meetings with families at home, accompanying participants to external appointments and court hearings, and customising the program to suit the needs of both participants and schools.

The trust fostered through this flexible approach enables practitioners and school staff to adopt a direct, no-nonsense attitude toward participants, holding them accountable without intimidation or authoritarianism. School staff observed that this straightforward approach deepens the connection between practitioners and participants, ensuring that participants feel listened to and understood. For example:

- “[MERLE practitioner] Keeps it kind of real, and there’s no kind of fluff about it. It’s like, if they’re doing the wrong thing, he kind of calls them out for that, and just holds them accountable. And sort of speaks to the consequences of some behaviours. So that’s been I think refreshing for them.” (School staff interview)
- “[MERLE practitioner] just has a way about him, ...there’s no underlying meaning as to why he’s trying to support them. It’s just the support for support, and they’re kind of seeing that for what it is, and there’s no sort of agenda behind it.” (School staff interview)
- “(MERLE Practitioner) will spend breaks with students and have through this engaged with students who don’t work with him. Those students after building rapport seek support from (MERLE Practitioner) even without being linked in. He has been able to work with students on linking them into extra curricular activities and help with overall welfare and wellbeing of these students. We find students come to asking to be linked in with (MERLE Practitioner).” (school staff interview)

In conjunction with the adaptable engagement style of MERLE practitioners, their gender—being male—has proven beneficial, particularly in building rapport with culturally and linguistically diverse (CALD) young men. School staff highlighted the significance of having male staff members to support CALD male students, a resource that is often limited. This may also account for the higher representation of male participants in the cohort, underscoring the necessity for

male practitioners to assist schools in addressing high-risk behaviours among certain male students.

On referral trends, one school interviewee noted:

- “...it was around how to engage our young males with a CALD background” (School staff interview)
- “[MERLE practitioner] who is a male and working with other well known males within the school, we’ve definitely seen an increase in students accessing the wellbeing team.” (School staff interview)

At three partner schools, MERLE practitioners conducted structured group sessions comprising both in-house-developed content and sessions facilitated by external partners. As part of the schools’ duty of care requirements, a school staff member was mandated to be present during these sessions, providing an opportunity for them to observe the participants’ progress. These sessions, with school staff in attendance, also served as a chance for staff to gain a better understanding of the MERLE program and its expected outcomes, establish rapport with the practitioners, and connect with the participants. Furthermore, the group workshops, serve as an “active hold” or “light-touch” support option for young people who may not be actively engaged in the MERLE program otherwise, due to the practitioners’ capacity. This model also provides an avenue to build rapport with young people in a low-stakes manner which may in future reduce the need for lengthy engagement periods before intervention delivery for participants. At completion of data collection, the group workshops had provided light-touch support to an additional 81 young people, demonstrating the level of demand for the MERLE program.

## **Delivery of the MERLE program by South East Community Links**

***A key feature of the MERLE program’s success is that it is delivered in schools by an external organisation (SECL), which provides added delivery flexibility, brokerage funds and additional connections to community services.***

Being employed by an agency external to the school, MERLE practitioners have the flexibility to offer support beyond the school environment. This allows them to maintain confidentiality and gain valuable insights into participants’ needs, enabling more effective support. This support can extend to home visits and uncovering insights about participants that they may not wish to disclose at school. Additionally, it provides opportunities to attend activities outside of school hours and terms. For example:

- “Because he is attached to SECL, he runs activities at school during the school holidays, the kids connect with him in multiple ways. So they will attend maybe like a school holiday activity, and then they’ll see him at school. Or they’ll recognise him at school and then that relationship forms. And he definitely seems less threatening, you know, they recognise him as part of the school, but someone in the community as well. So I think that’s actually a big connection” (school staff interview)

This positioning also allows MERLE practitioners to ‘act as a bridge to the community and other services’ for participants and families. SECL can provide participants and their families access to a range of programs and activities, such as housing, emergency relief or the L2P program, and can provide links to other community organisations such as RECLink for gym access. The benefits of these community links extend beyond the direct MERLE participants, where the participants encourage their friends to access more positive behaviours thus creating a ripple effect throughout their peer networks.

Additionally, practitioners noted that often financial burden on families reduces ability to access these activities. The availability within MERLE of brokerage funds is also valuable in enabling MERLE to support participants access to recreational activities such as RECLink for gym or other sporting events.

- “(Students are) feeling connected and confident, wanting to go outside of their local bubble and explore the SECL activities” (school staff survey)
- “Participants projecting their experiences and hope onto their own peers and sharing the benefits. For example, being able to join the gym and then their friends decide they want to join as well. Ripple effects – fostering pro social peer relationships and reduced anti-social behaviours” (school staff interview)

## Strong partnership relationships

### ***Strong relationships between the MERLE program team and school staff enabled the MERLE program to be delivered more effectively.***

This includes regular informal dialogues aimed at providing brief updates on participants, facilitating the development of trust between staff and MERLE practitioners. It is anticipated that the strong rapport and relationships between practitioners and school staff can have a cascading effect, building stronger connections between staff and students as students observe positive relationship modelling by their practitioners. MERLE Practitioners observed that strong communication with school staff leads to earlier referrals of young people to the program, often resulting in better alignment with the program’s objectives. Additionally, improved communication aids the school’s understanding of the program’s purpose and the practitioner’s role, thereby improving the program’s effectiveness and efficiency.

## 4. What have we learnt? What could be changed or improved?

**Drawing from the critical success factors identified above, consideration could be given to further develop, systematise and structure a consistent model of practice in a way that can be tailored for individual participants and school sites but have consistent elements across sites to build efficiencies and leverage from the findings of this report. Additionally, consideration could be given to assessing the most optimal composition of the MERLE participants in relation to level of complexity. This would support a manageable case load for practitioners and maximum outcomes from the program.**

### Variability across the schools in their use of the MERLE program

Data showed that the MERLE program's implementation varied across schools, indicating differences in understanding of roles, responsibilities and expected outcomes for participants. This was in part due to the program being a pilot, which requires flexibility and innovation in regard to implementation. Additionally, flexibility was crucial given the different and complex systems in each individual school. Each school has slightly different ways of operating, including their leadership and communication structures; taking account of this, the MERLE practitioners worked in an agile way to best fit within those systems and structures.

While this flexibility initially benefited MERLE practitioners, consolidating operational guidelines and school partnership agreements could, in the next phase of the program, improve efficiency, relationships and program outcomes. Clear guidance and timelines would streamline processes such as referral, intake and data collection, ensuring consistency and scalability. Formal agreements would assist in onboarding new partner schools, establishing expectations and fostering communication. Guidelines also support effective risk management to support the program's sustainability.

Exploring program oversight and leadership requirements is also essential for strong management, partnership consolidation and scalability. To support this, introducing a MERLE Team Leader role would support MERLE practitioners with administration, partnerships and program management.

**Recommendation: Explore consolidating operational program guidelines, refining school partnership agreement processes and investigating oversight and leadership roles for the MERLE program.**

### MERLE program and participant composition to maximise outcomes given resource limitations

It was observed that a high number of complex clients require extensive support from MERLE practitioners, stretching capacity and reducing participant numbers. Practitioners stated they often felt pulled in various directions, adding stress to their workload. Adjusting participant composition based on complexity can ensure manageable caseloads, program sustainability, and worker wellbeing.

In addition, school staff noted that they see the program benefitting a wider range and greater number of young people, however there is no capacity for the program to take additional referrals. School staff also noted that having the MERLE practitioners split across multiple school sites further reduces capacity and availability. Adjusting program composition in terms of practitioner time allocated across schools may further support program sustainability and benefit participants.



- “There are more students who would benefit from the MERLE Program, however at our school, the capacity is full. If the capacity of practitioners could be increased, it could help students who meet the criteria for this program.” (school staff survey)
- “Our (MERLE) practitioner is amazing and building relationships and the support he provides the students. Would be great if we could have more time!” (school staff survey)
- “We would love the program to receive more funding to enable greater hours spent with students at school” (school staff survey)

Group workshops currently serve as light-touch support for youth not actively engaged in the program due to limited practitioner capacity. Implementing this approach across all schools could balance caseloads and meet program demand.

Future scaling efforts should also consider gender diversity among practitioners. While male practitioners benefit schools with staff gender imbalances, it is likely that this also reduced the participation of at-risk young women in the program. It is important to consider that, for some young women from multicultural backgrounds, cultural or religious reasons may influence their interactions with male workers. Introducing female practitioners to the program would ensure equitable support for disadvantaged young women.

**Recommendation: Consider program structure in terms of delivery method, gender composition of the MERLE practitioner team, case load composition, client complexity and diversity, within resource constraints to improve sustainability and maximise benefits for diverse youth participants.**

### 3. Conclusion and next steps

The MERLE program has achieved significant progress in addressing the needs of culturally diverse youth in Melbourne’s south-eastern suburbs who face risks of disengagement from education and involvement in youth justice issues. MERLE program participants experienced positive changes across various aspects including intra-personal and social wellbeing, educational outcomes, and post-school readiness.

Of particular note is the informal, strengths-based support provided by practitioners, serving as trusted adults for participants lacking positive role models. Leveraging the program’s flexibility, MERLE practitioners engaged participants, built trust, and tailored interventions to their needs, fostering positive relationships and addressing risky behaviours’ implications for the future.

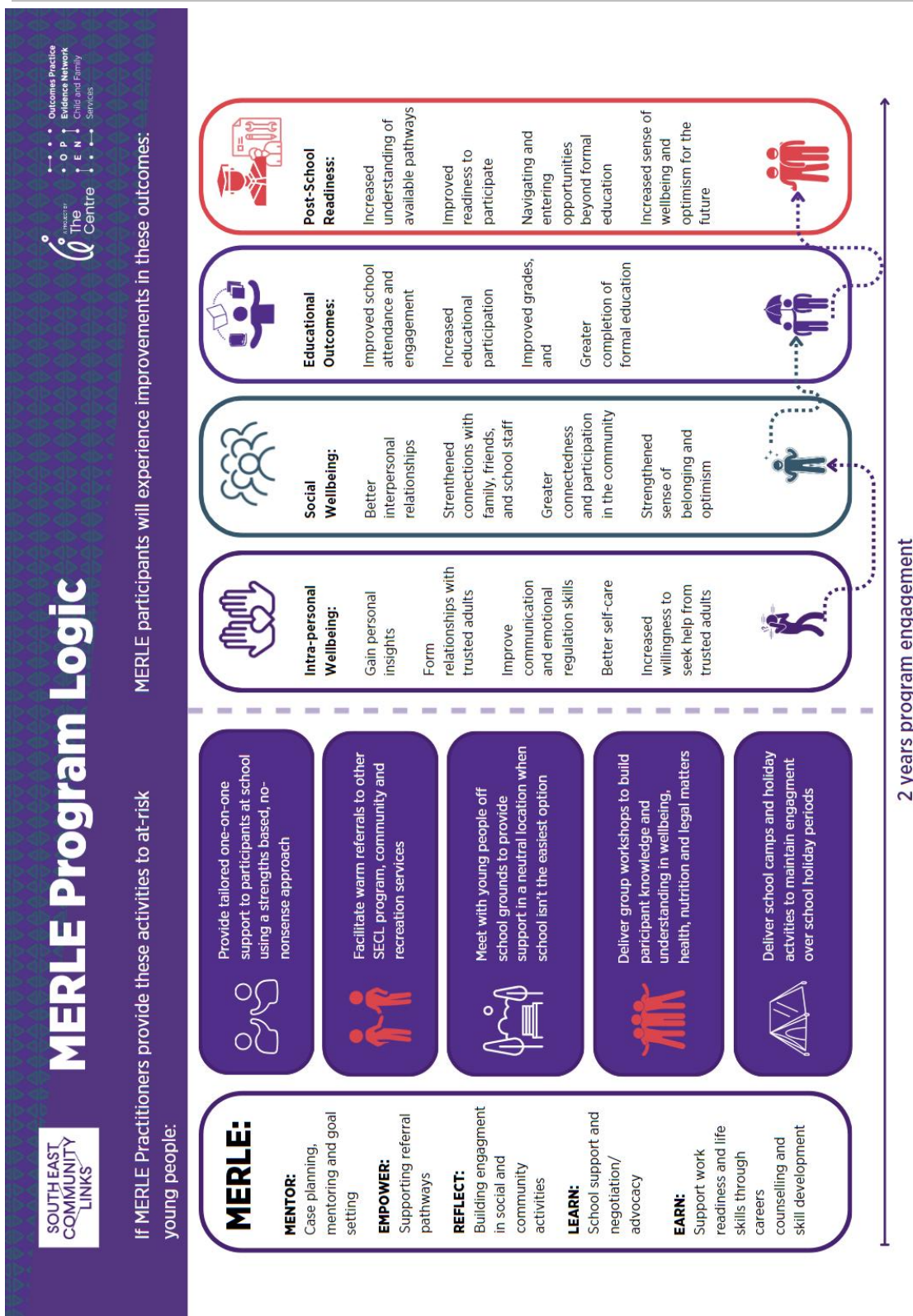
MERLE practitioners also utilised their connections within South East Community Links and external partnerships to offer additional social and recreational opportunities, expanding participants’ social capital and enhancing peer relationships. Delivery across partner schools facilitated improvements in attendance and engagement, with many participants experiencing positive shifts. Moreover, the MERLE program demonstrated support for post-school readiness by assisting participants with obtaining certificates, resumes, and pathways to further education and employment opportunities.



The MERLE program has shown effectiveness in its delivery model, with promising results. Continuous improvement efforts will allow the MERLE program team to consolidate operational guidelines, refine school partnership processes, and streamline program delivery methods within resource constraints. This will ensure consistent outcomes across sites and facilitate effective scaling to benefit more at-risk young men and women, in Melbourne's south-eastern suburbs.

# Appendix

## Appendix 1 – Program logic



## Appendix 2 – Expected outcomes – definitions.

Outcome domain	Shown through
1. Improved intra-personal wellbeing – Youth show improved health, wellbeing and engagement with services for support when needed	<p>Increased personal insight and goal setting –immediate risks addressed</p> <p>More positive relationships with trusted adults</p> <p>Improved communications, self-esteem and emotional regulation/wellbeing</p> <p>Improved self-care behaviours</p> <p>Improved knowledge of, trust and use of services – help - seeking behaviours</p>
2. Social wellbeing – Youth show more positive relationships and engagement with others – family, peers, teachers, recreational and community involvement	<p>Improvement in positive relationships with family and/or home environment</p> <p>Improvement in positive peer relationships – reduced anti-social peer relationships</p> <p>Improvement positive interactions within the school environment,</p> <p>Improved recreational and community participation and depth of engagement (leadership)</p>
3. Educational outcomes – Improved education engagement, experience and performance	<p>Increase school attendance and engagement (reduced disruptions/ increased positive involvement)</p> <p>Increased participation in school support programs and activities – homework clubs <i>others</i></p> <p>Improved school achievement (grades)</p> <p>Improved education attainment (completion)</p>
4. Post-secondary readiness – Improved life skills and readiness for post-secondary education, training or transitional programs	<p>Improved knowledge and ability to navigate independence – communication, self-regulation, financial skills, self-care, post-secondary education and employment readiness</p> <p>Readiness for and pathways established into further education and/or employment</p> <p>Improved ability to engage with services and others in community to identify education/employment or other opportunities</p> <p>YP have improved sense of wellbeing, and optimism in the future</p>

## Appendix 3 – Personal Wellbeing Index – School Children – method of analysis and results

The Personal Wellbeing Index – School Children (PWI-SC) is a validated tool designed to measure subjective wellbeing for children and young people over the age of 12<sup>2</sup>. The PWI-SC includes seven items of ‘happiness’ that correspond to various quality of life domains. Two additional items were added to the scale for the purpose of understanding participants’ happiness with attending secondary school, and happiness with gaining employment.

MERLE practitioners provided participants with the outcomes measurement tool, which included open-ended questions and the PWI-SC. Participants were asked to complete the tool again approximately six months later to measure any changes in wellbeing. Of the in-scope participants (n=43), 37 had completed at least two measurement tools including the PWI-SC. These responses were used to compare answers between the earliest and latest time points within the program.

Mean values were calculated at each participant’s time point and for individual participants’ differences, along with standard deviations. The mean of the aggregated indicators within the PWI-SC was calculated to understand the cohort’s overall wellbeing. Each Indicator within the PWI-SC was also analysed separately and the mean for the cohort was aggregated and is reported under the appropriate MERLE outcome area further in this report.

### Results

The mean adjusted score for the group showed substantial improvement over the course of the program. Specifically, at the beginning of the program, the cohort had a mean adjusted PWI-SC score of 65.1 (SD=0.7). By the end of the program, this score had increased significantly to 84.4 (SD=1.0), indicating a notable increase of 19.3 (SD=1.1) points in the overall PWI-SC score.

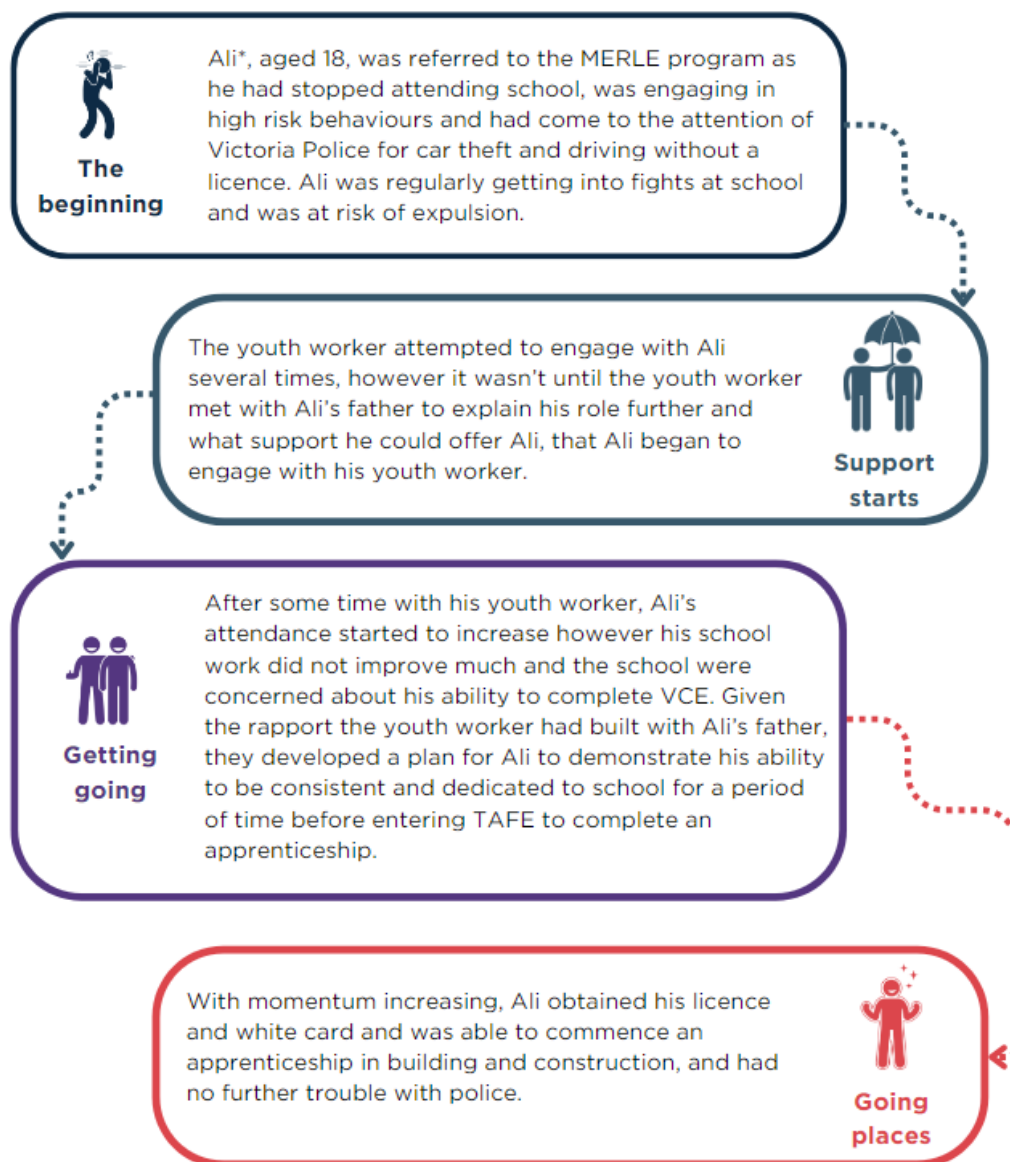
It is noteworthy that this improvement surpasses the lower bound of the normative range for Australia, which typically falls between 73.4 – 76.4 points. The cohort’s mean score (65.1, SD=0.7) at the first time point was well below the normative range, and the subsequent mean score surpassing this demonstrating significant improvements.

These results underscore the positive impact of the program on the subjective wellbeing of the group, demonstrating a substantial improvement in their overall personal wellbeing throughout the program duration.

## Appendix 4 – Participant journeys graphics

### MERLE Participant – The Participant Journey: Ali\*

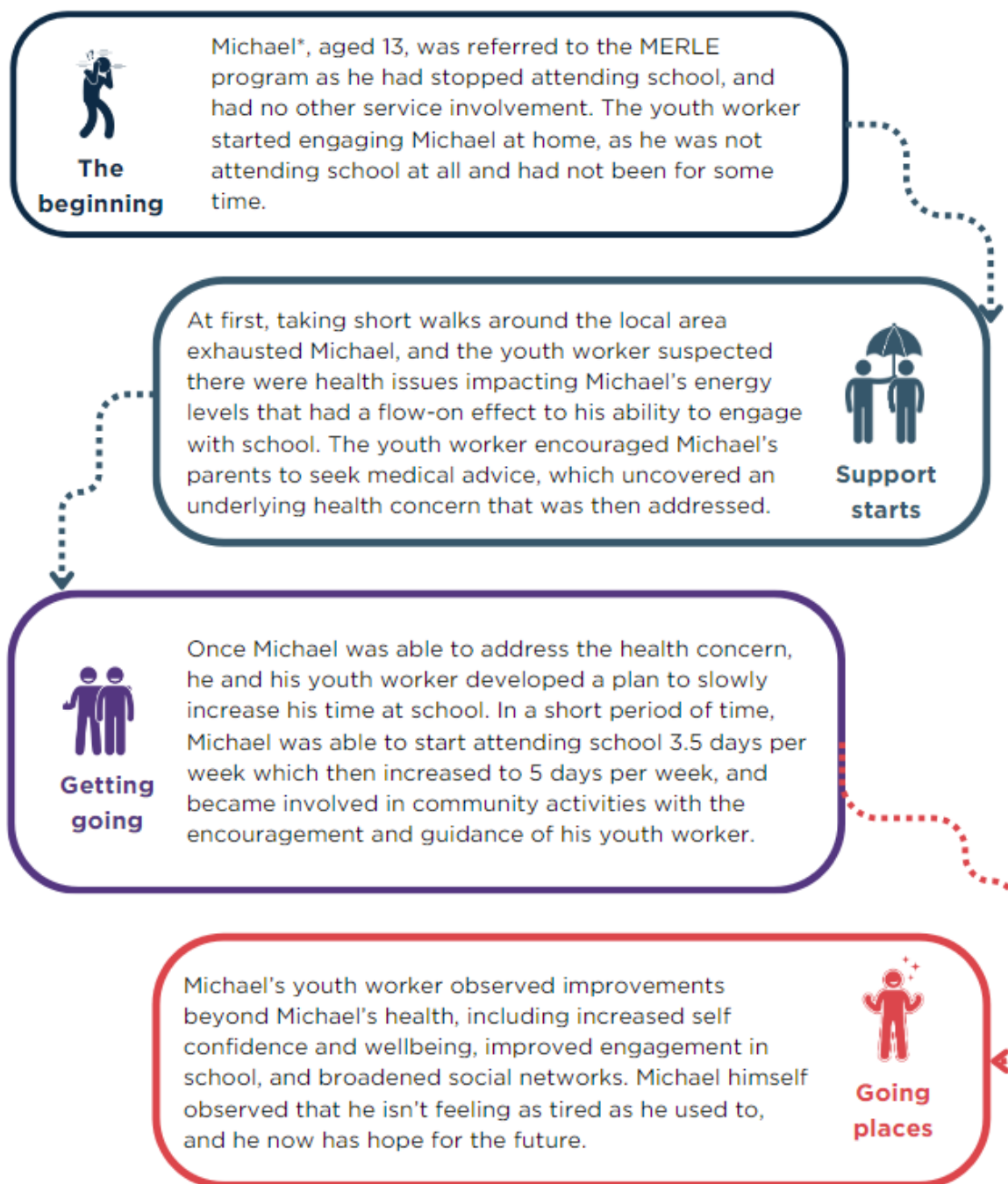
\*Names have been changed



***"I was in trouble and did not know what to do or where to go. I would of kept getting in trouble if I did not start talking to [MERLE Practitioner]...(I was) never at school - did not care about school or work and was cheeky and in trouble and hanging with bad people. Now I stay home and focus on being good and starting work so I can save for my car and have a better future."***

## MERLE Participant – The Client Journey: Michael\*

\*Names have been changed



***“At the beginning I felt hopeless, now I see hope in my future.”***