Employment Coaching During the COVID-19 Pandemic:
Lessons Learned

Introduction

Employment coaching involves a trained coach working collaboratively with a participant to set personalized employment goals and determine action steps to meet those goals. Before the COVID-19 pandemic, programs in our study were typically providing employment coaching in person, either in the program's office or the participant's home. But the pandemic profoundly disrupted the normal operation of employment coaching programs. The programs had to adapt in fundamental ways because in-person coaching was no longer safe and because participants' needs changed.

This brief discusses how four programs in a federal evaluation of employment coaching for individuals with low incomes adapted during the pandemic and identifies lessons learned that affect how these programs offer coaching. Interviews with staff and participants, and analysis of data on service use at the coaching programs, inform the findings in this brief. In addition to informing the interpretation of findings from the federal evaluation's impact study of the programs, this discussion could provide other employment programs information about modifying service delivery and meeting client needs.

The five major lessons learned are as follows:

- All four programs found that it was feasible to provide coaching virtually, identified some benefits and drawbacks to virtual coaching, and plan to revert to mostly in-person coaching supplemented with virtual coaching after the pandemic ends.
- All four programs adapted to changing participant needs during the pandemic.
- The programs also adapted to support their staff, and staff reported feeling supported by these changes.
- Staff reported that the programs responded effectively to the pandemic.
- Program participants felt that coaching was particularly beneficial during the pandemic.

A MyGoals coach and participant meet during a coaching session. (Photo: Rich Clement, Mathematica)

The brief begins by describing the federal evaluation of coaching and the four employment coaching programs participating in the evaluation. It then describes the COVID-19 pandemic and its effect on the economy. The brief next discusses what we learned about how programs adapted to the pandemic and to changing participant and staff needs. It concludes with a summary of the lessons learned.

Evaluation of Employment Coaching for TANF and Related Populations

To learn more about the potential of employment coaching to help individuals with low incomes obtain and retain jobs, the Office of Planning, Research, and Evaluation within the Administration for Children and Families, U.S. Department of Health and Human Services, is sponsoring the **Evaluation of Employment Coaching for Temporary Assistance for Needy Families (TANF) and Related Populations** (Box 1). The evaluation assesses the implementation of four coaching programs and their impacts on study participants' self-regulation skills, employment, earnings, self-sufficiency, and other measures of well-being.

For this evaluation, we define employment coaching as an approach that (1) includes goal setting and developing action steps for meeting the goals; (2) is collaborative and not directive; (3) is individualized; (4) helps participants learn the skills to set goals on their own and work toward meeting those goals; (5) attempts to reinforce participants' motivation to meet goals; and (6) holds the participant accountable for outcomes. For purposes of this study, employment coaching is coaching in which goals are related directly or indirectly to finding or maintaining a job. It differs from staff-participant interactions in other employment programs in several ways (Joyce and McConnell 2019). Unlike typical employment program staff, the coach does not tell the participant what to do. Instead, the coach and participant set goals together that are personalized and meaningful to the participant; they then decide on the action steps needed to obtain those goals. The coach is motivating and works in partnership with the participant, checks in on their progress, and celebrates their successes. Coaches aim to help participants use and strengthen self-regulation skills—sometimes referred to as soft skills or executive functioning skills—that are needed to obtain and advance in a job (Cavadel et al. 2017).

Enrollment for the study began in February 2017 and was completed in November 2019. During the pandemic, which began in 2020, some study participants were still enrolled in the coaching programs, and data collection for the follow-up surveys of study participants was ongoing. Although the evaluation included a detailed study of each program's implementation, the majority of the data collection on the implementation of coaching programs occurred in spring 2019, before the beginning of the pandemic.

To understand how the programs changed during the pandemic, in fall 2020, we interviewed an additional 43 staff—coaches and managers—of programs participating in the evaluation. In addition, we conducted 10 in-depth interviews with program participants who had been receiving coaching before the pandemic began and continued receiving services after March 2020. Appendix A provides more details about our data collection for this brief.

Four coaching programs in the evaluation

The four coaching programs in the evaluation as operated before the pandemic are described below. Changes to the programs that resulted from the pandemic are described in later sections.

• **Family Development and Self-Sufficiency program (FaDSS)** in Iowa. Under contract to the state, 17 local human services agencies use grants from the Iowa Department of Human Rights to provide TANF participants with coaching during home visits. Seven of those 17 agencies are participating in the evaluation. Coaches conduct assessments of participants' family functioning, domestic violence, and child development, and use a goal-setting form with participants. Following assessments, coaches and participants work together to identify priorities and set goals focused on promoting

self-sufficiency. They also address families' challenges with employment and job retention by connecting participants to resources in the community to reduce barriers. Participants are expected to meet with their coach twice per month in the first three months and then monthly. They can continue in the program as long as they are receiving TANF and for six months after they stop receiving TANF benefits.

- **Goal4 It!™** in Jefferson County, Colorado. Goal4 It! is an employment coaching program designed by Mathematica and partners that is being piloted in the Jefferson County TANF program as an alternative to more traditional case management. Coaches follow a structured goal-setting process with participants that involves several forms for setting goals and identifying challenges to reaching them. Participants are expected to meet with their coach monthly. They can receive coaching services while they are participating in TANF.

- **LIFT** in Chicago, Los Angeles, and New York City.[1] LIFT is a nonprofit organization that provides career and financial coaching to parents and caregivers of young children who are in a relatively stable situation (e.g., they have housing). LIFT coaches are typically Master of Social Work students completing their internship requirements for their degree. Coaches use an assessment tool and a goal-setting form with participants during the coaching process. LIFT provides financial incentives to encourage participation in coaching sessions and address participants' financial needs. Participants can receive $150 every three months; total payments cannot exceed $1,000. Participants are expected to meet with their coach twice in the first month and then monthly. Participants can remain in the program for two years.

- **MyGoals for Employment Success (MyGoals)** in Baltimore and Houston. MyGoals is a coaching demonstration project designed by MDRC and partners that provides employment coaching and financial incentives to unemployed adults receiving housing assistance. The Housing Authority of Baltimore City and the Houston Housing Authority operate this project. MyGoals coaches assess participants' self-regulation skills using a questionnaire, and they discuss these skills with participants explicitly. They also use several tools with participants during the coaching process, including goal-setting forms. MyGoals provides incentive payments for program engagement and obtaining and retaining employment. Participants can earn a maximum of $5,000 in these incentives. Participants are expected to meet with their coach monthly during the first two years and less frequently in the third year. Participants can receive coaching services for a total of three years.

The COVID-19 pandemic

At the time we collected data for this brief—fall 2020—the pandemic had been ongoing for about six months, but the worst of the pandemic was yet to come. In early spring 2020, the United States experienced its first significant number of COVID-19 cases and deaths, and states and localities across the nation began issuing stay-at-home orders and other restrictions. COVID-19 cases nationwide rose in spring 2020 and again in summer 2020, then dramatically increased in the final months of that year, before falling in the beginning of 2021 when vaccines against the disease became available (Exhibit 1). Death rates followed a similar pattern (Appendix B, Exhibit B.1). The seven states that had coaching programs in the evaluation (Box 2) had peaks in the number of COVID-19 cases and deaths at different times, but all experienced increases in cases and deaths in the final months of 2020 (Appendix B, Exhibit B.2).

Exhibit 1. National monthly COVID-19 cases per 100,000 persons, January 2020 to March 2021
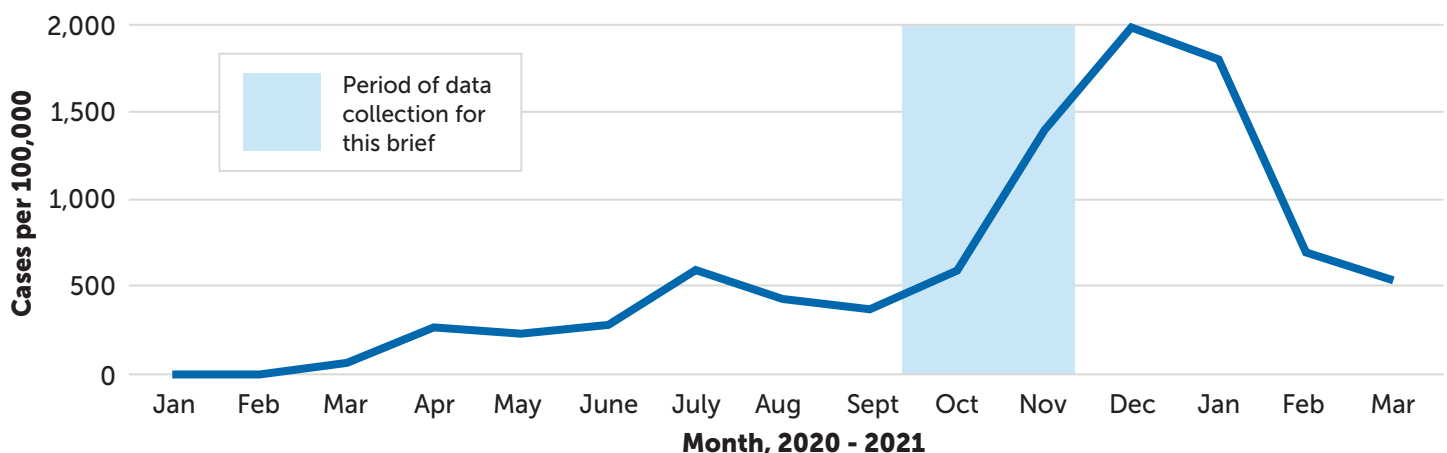
Source: Centers for Disease Control and Prevention. "Trends in Number of COVID-19 Cases and Deaths in the US Reported to CDC, by State/Territory." n.d. Available at https://covid.cdc.gov/covid-data-tracker/#trends_dailytrendscases. Accessed June 3, 2021.

The pandemic led to major disruptions in the labor market. The national unemployment rate rose dramatically at the beginning of the pandemic and hit its peak in April 2020. Although the unemployment rate declined after that, it was still substantially higher than the pre-pandemic level at the time of data collection for this brief (Exhibit 2). Data from the seven states included in the evaluation (Box 2) show that the unemployment rate at least doubled in each state between the first and second quarters of 2020 (Appendix B, Exhibit B.3). Of the seven states, California, Illinois, and New York experienced the highest rates of unemployment throughout the first year of the pandemic (from April 2020 to March 2021). Iowa had the lowest unemployment rate of the seven states during this time period.

Following national trends, in March 2020, all seven states with programs in the evaluation began implementing stay-at-home orders and other restrictions on in-person interactions, forcing businesses, schools, and child care centers to shut down. All seven states except Iowa issued mask mandates, requiring people to wear a mask or face covering when leaving their home. In March and April 2020, primary and secondary schools transitioned to remote learning across the seven states. Some states started opening schools for in-person learning in summer and fall 2020. In summer 2020, all seven states began lifting their stay-at-home orders, and businesses reopened with limited capacity.

Participants in the coaching programs were affected by changes in the job market and the transition to remote learning. Staff reported many participants were laid off or quit their jobs to protect themselves from potential contagion at the beginning of the pandemic. Many participants, including those laid off during the pandemic and those unemployed before the pandemic, found it difficult to find work. Participants faced fewer job opportunities, as program staff reported a drop in available jobs in the restaurant and other service industries, although demand for workers in the health care sector was still robust. Many participants needed to care for their children during the day and support them as they learned remotely. At the same time that participants' income was reduced, they faced additional expenses related to their children's schooling, such as computers and high-speed internet. Many of the participants we interviewed had trouble paying for basic needs such as food and utilities. They also often had health concerns for themselves and their family members—both concerns about COVID-19 and mental health. For all these reasons, the pandemic created considerable stress for participants (Box 3).

Box 2. States in which programs operate and evaluation is being conducted

• FaDSS: Iowa

• Goal4It!: Colorado

• LIFT: New York, Illinois, California

• MyGoals: Maryland, Texas

Box 3. A participant described the stress of the pandemic

"Just money. The hours, like I said, they've been reduced. And I want to go back to work but I'm like, 'What can I do?' You have to wear masks. What can I do where I won't be in jeopardy of my health or my mom, 'cause I'm still taking care of her? And I still have to—I want to finish school, and I still have to kind of be here with my children because of virtual [school]. I know they can do stuff on their own, but I kind of like monitor them…. So, it's harder because you have to buy more groceries, the light [bill] goes higher, everything's a little tight, but at the same time, you can see things and you can get things done." – A MyGoals participant

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Exhibit 2. National unemployment rate, January 2020 to March 2021
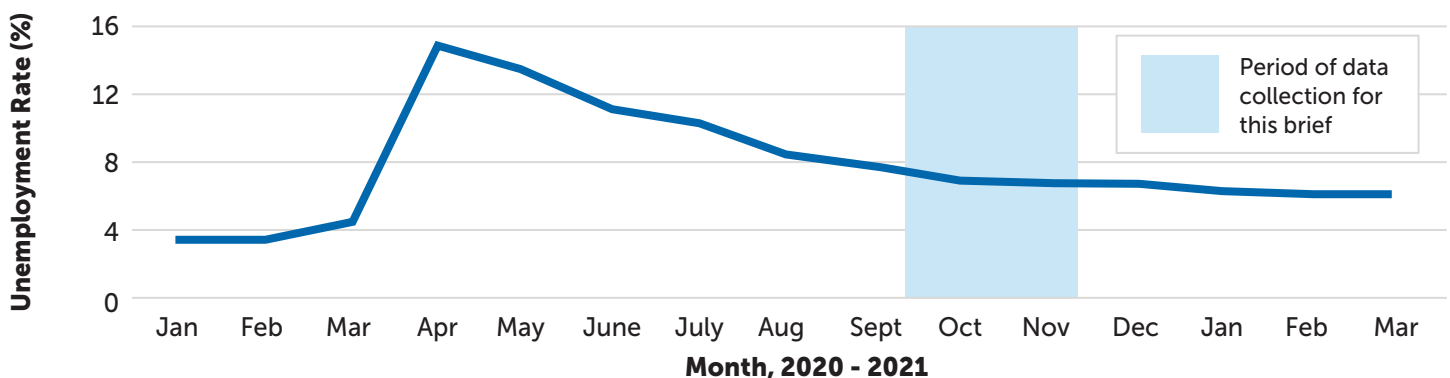
Source: U.S. Bureau of Labor Statistics. "Civilian Unemployment Rate." n.d. Available at https://www.bls.gov/charts/employment-situation/civilian-unemployment-rate.htm. Accessed May 27, 2021.

Programs shifted to offering coaching and other services virtually during the pandemic

Starting mid-March 2020, all four coaching programs closed their physical office spaces in response to social distancing requirements and stay-at-home orders related to the pandemic. Coaches continued to meet with program participants for coaching sessions after the offices closed. Instead of meeting in person, they connected exclusively through phone calls, video calls, email, and text messaging from their homes. No coaches were laid off or furloughed across the four programs.

The transition occurred quickly; all programs began offering coaching virtually almost immediately following office closures. Programs were able to provide coaching services with little disruption because program leaders quickly communicated changes with coaches and other staff, staff had the necessary technology to work from home, and programs provided staff with training on virtual coaching and coaching during a crisis and the needed information and guidance to serve participants remotely.

Before the pandemic, FaDSS provided services in participants' homes, and the other three programs met with participants in person in their program offices. Although all programs provided some virtual coaching over the telephone before the pandemic, the transition to complete virtual service delivery was a substantial change. The general structure of the coaching remained the same, with some changes in how coaches administered tools (discussed in a later section). At the time of the data collection for this brief, in fall 2020, all four programs were still not providing in-person coaching, and the program offices remained closed.

Most virtual coaching occurred by telephone rather than video.

Although all the programs offered participants the choice of conducting coaching via telephone or video, most participants opted to conduct coaching via telephone. The participants we interviewed gave three reasons for preferring telephone over video:

1. Telephone coaching allowed participants to multitask. While participating in coaching sessions via telephone, participants reported running errands, caring for their children and other family members, and taking care of personal needs (Box 4). As discussed below, some coaches were concerned about whether coaching was as effective when participants were multitasking. Participants could answer their cell phone from a place other than their home. Participants reported engaging in coaching sessions from wherever they happened to be at the time of their appointment.

2. Participants reported that their computers were often being used by their children, who were attending school remotely.

3. Some participants reported having unreliable high-speed internet, making connecting to a video call difficult

When using video, coaches and participants used any platform participants had access to, such as Facebook Messenger, FaceTime, and Zoom.

Box 4. A participant described multitasking during a coaching session

"The phone is easier for me because I have a three-year-old, so it's easier for me to just be able to take a call and go over things that way while I'm taking care of [my child], and you know kinda get other stuff done instead of having to like sit down and be still for a couple of hours and whatnot." – A Goal4 It! participant

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During virtual coaching, forms and assessments were completed by coaches instead of by participants.

All of the programs have some forms that participants use to document their goals and action steps, and some programs have assessments. Before the pandemic, participants completed these forms and assessments—typically by hand—and then kept a copy for themselves. Having participants rather than coaches complete the forms and assessments signals that the participant is in control of information sharing and goal setting. But during the pandemic, coaches switched to completing goal-setting forms and assessments for the participants over the telephone and then emailing them to participants after their coaching session. Some coaches reported that it was a challenge to complete the forms virtually because it took more time to gather and accurately represent details from participants. However, one Goal4 It! participant described preferring the new process because she thought it was easier than having to write it herself.

Programs continued to provide other services in addition to coaching, albeit virtually.

Before the pandemic, most of the programs offered participants workshops or trainings; these services were also offered during the pandemic, albeit virtually. LIFT, MyGoals, and Goal4 It! offered workshops online spanning topics from finance to communication tools (such as email, web conferencing, and social media), and MyGoals and Goal4 It! also provided participants access to online training, commonly for computer skills. LIFT offered virtual meetings with groups of participants for them to de-stress, discuss the daily news, and connect with one another. However, some services could not move online. For example, FaDSS offered laundry services in some of its offices that could not be offered during the pandemic.

Virtual coaching reduced some participation barriers for participants.

Participants reported that they found it easier to participate in virtual coaching than in-person coaching because it involved less transportation and child care costs, saved them time, and allowed them more flexibility with their schedule. At the three programs in which coaching occurred in the program offices pre-pandemic (at FaDSS coaching occurred in participants' homes before the pandemic), participants reported relying on public transportation, often with long travel times to get to program offices (Box 5). Participants shared that no longer having to spend time and money traveling to the program office made participating easier. In addition, participants no longer needed to obtain child care or schedule around child care to travel to and participate in the programs (although as described below, this sometimes led to participants being distracted). Participants noted that because of the flexibility of virtual coaching, it was easier to reschedule coaching sessions if a conflicting obligation came up for the participant. Instead of missing their session or canceling the appointment altogether, they could more easily reschedule it. One coach noted that she has seen a significant reduction in rescheduled appointments because virtual coaching makes it easier for participants to join meetings. MyGoals Houston also started using an online scheduling software during the pandemic to make scheduling coaching sessions easier for participants.

> **Box 5. A participant shared how transportation was a barrier to in-person coaching**
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> *"[The barrier] I had before, it was just after I lost my license, was transportation. If … I did have a meeting ... I had to drop them off at daycare, so it took two hours to drop them off or I'd have to leave extra, extra early to get them to the daycare and then … go to my meetings and then, go pick them up which could be like two, three hours, who knows, depending on where it is." – A Goal4 It! participant*

For the most part, participants became more engaged in the programs during the pandemic.

Although coaches and participants planned to meet at the same frequency—about monthly—during the pandemic as they had before, staff in all programs except one reported that participants were more engaged during the pandemic. Both staff and participants reported that virtual coaching reduced barriers to engagement. Data on contacts with coaches show that participants in all programs, with the exception of MyGoals Houston, had between 9 and 27 percent more contacts after the pandemic began (Exhibit 3). In MyGoals Houston, there was a decrease in the average number of contacts. We do not know why the change

in engagement was different in the MyGoals program in Baltimore versus in Houston. Coaches across all of the programs reported that there were fewer cancellations and instances when participants did not show up without cancelling beforehand (no-shows). The service tracking data support this finding in the three programs for which we have cancellation and no-show data (Exhibit 4). The increase in engagement could have been because it was easier to participate in virtual coaching as participants could multitask and call in from wherever they were at the time, because participants had fewer other commitments, or because participants found coaching was more beneficial during the pandemic.

Exhibit 3. Average number of contacts per month per participant, before and after the start of the COVID-19 pandemic

Program	Before March 2020	March – December 2020	Percent change
FaDSS	1.01	1.10	8.9%
Goal4 It!	0.12	0.14	16.7%
LIFT	0.45	0.52	15.6%
MyGoals Baltimore	0.93	1.18	26.9%
MyGoals Houston	0.48	0.40	-16.7%

Source: Data recorded by coaches in the study management information system or the program's management information system.

Note: This analysis includes study participants who enrolled in the study between November 2018 and November 2019. We calculated the average number of contacts per month based on whether the month occurred before March 2020 or in March 2020 through December 2020. The number of months of data we have for each participant depends on when they enrolled and varies between three and 12 months before March 2020 and up to nine months after March 2020. We do not include contacts for participants in the first three months after study enrollment in FaDSS, Goal4 It!, or LIFT because all study participants experienced these months before March 2020, and so we could not compare the contacts in those months both before and during the pandemic. For a similar reason, we do not include contacts for study participants in the first five months after study enrollment in MyGoals Baltimore or the first seven months after study enrollment in MyGoals Houston.

Exhibit 4. Average number of cancellations or no-shows per month per participant, before and after the start of the COVID-19 pandemic

Program	Before March 2020	March – December 2020	Percent change
FaDSS	0.23	0.17	-26.1%
Goal4 It!	0.08	0.04	-50.0%
LIFT	0.16	0.13	-18.8%

Source: Data recorded by coaches in either the study management information system or the program's management information system.

Note: See note to Exhibit 3. Data are not available for MyGoals.

Participants reported high satisfaction with virtual coaching.

Participants reported that they were able to maintain strong supportive relationships with their coaches during virtual coaching and found coaching just as beneficial as it had been when they met in person. Yet they reported that they missed in-person interactions and "laughing and crying" with their coach. It is important to note that all interviewed participants had met with their coach in person before the pandemic and thus had already established a relationship.

Coaches reported some benefits and some limitations with virtual coaching.

Coaches agreed that there were benefits of virtual coaching in reducing the time and costs of participants travelling to program offices or coaches travelling to participants' homes. Staff across all four programs reported that virtual coaching has increased accessibility of and engagement in the programs and reduced barriers for participants.

However, some coaches had the following concerns about virtual coaching:

- **Missing important information about participants during virtual meetings**. Body language and facial expressions are easier to pick up on when in person than over video and cannot be observed at all during telephone calls. When meeting in person, coaches can also detect personal hygiene issues that may affect employment opportunities and be a sign of a greater mental health issue. The FaDSS coaches noted that during home visits, they could observe the home environment and interactions with other family members.

- **The ability to build rapport with participants during virtual meetings**. While all study participants had met their coaches in person prior to the onset of the pandemic, coaches were particularly concerned about their ability to develop rapport with someone whom they had never met in person.

- **Ability to have conversations about sensitive topics**. Coaches found it easier and more effective to have conversations related to sensitive topics, such as intimate partner violence, in person. When a conversation is virtual, coaches cannot always see who else in the home might be able to hear the conversation.

- **Effectiveness of coaching when participants were multitasking**. As discussed above, participants enjoyed the ability to multitask during their coaching sessions. Coaches were concerned that participants were not fully focused on the coaching during their sessions (Box 6).

> **Box 6.** A coach described concerns about whether participants are fully focused when coaching is virtual
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> *"Sometimes they don't answer or they're in their car, they're in the store, or they're not fully focused. I did a FaceTime with one and she was in a car, so she had the phone in her lap and I couldn't even see her."* –A FaDSS coach

All programs plan to return to in-person coaching but will use more virtual coaching after the pandemic.

Given the pros and cons of virtual coaching, all programs were planning to use a hybrid model after the pandemic. Most coaching would revert to being in person, but programs would supplement with virtual coaching. This would allow participants to continue to benefit from the flexibility and cost savings of virtual coaching, while helping address some of the concerns described by coaches regarding information gathering, building rapport, and participants' focus during meetings.

Participant and staff needs changed during the pandemic and programs adapted in response

During the beginning of the pandemic, many participants set goals related to their immediate basic needs or stopped setting goals.

In the early months of the pandemic, many participants switched from setting longer-term goals related to education and employment to setting goals for meeting basic needs, or they stopped setting goals completely. All programs emphasized the need for coaches to remain flexible with goal setting. Program staff shared that some participants were unable to set goals during the first few months of the pandemic because they were in crisis. Other participants focused on setting goals to help them meet their basic needs such as housing and food (Box 7) or their physical and mental health. A LIFT coach noted that she viewed it as helpful for a participant to have a goal, even if it was something like going for a walk without the children, for both the participant's mental health and to keep them engaged with the program.

Coaches in FaDSS, MyGoals Houston, and LIFT received training and additional supports on how best to help participants during a crisis. Trainings covered how to navigate conversations related to death and how to deal with other difficult topics during coaching sessions.

A few months after the start of the pandemic, coaches reported that more participants began setting longer-term goals again. However, many participants redefined their employment goals to prioritize protecting their health and to adapt to the changing labor market. Many participants reported seeking out remote work, work in industries that they viewed as "safer," and work where they were less likely to be exposed to large groups of people.

Participants especially appreciated having the support of their coach during the pandemic.

Participants reported that because it was a highly stressful time, they especially appreciated the relationship with their coaches during the pandemic. They reported that they felt supported by their coaches. In addition, some participants and coaches reported that coaches shared some of their personal experiences and hardships of the pandemic during coaching sessions—such as loss of close family members—and participants offered the coaches support and comfort as well. This disclosure from coaches might have empowered participants and helped build trust and deepen the relationship between the coach and participant.

Programs changed some policies during the pandemic to help meet participants' changing needs.

To better support participants during the pandemic, programs reduced, eliminated, or adjusted some preexisting program requirements. The TANF program implementing Goal4 It! expanded the activities that they would count toward the TANF

work participation requirement hours.[2] For example, supporting children's virtual learning was counted toward the work participation requirement. In addition, to continue supporting participants during the crisis, LIFT allowed participants to stay in the program beyond the two-year limit, and MyGoals allowed participants to stay in the program beyond the three-year limit. In order to enroll in LIFT, the organization no longer requires participants to be working or have a household member who works, which was a requirement before the pandemic.

All programs provided additional financial support to participants during the pandemic.

All four programs provided participants additional financial assistance:

- Some FaDSS grantees used state and local funds to provide additional financial support for some participants. FaDSS grantees provided this support on a case-by-case basis, for example assisting a family in crisis or in other situations with prior approval from FaDSS program managers. Most participants did not receive this type of assistance; those who did receive it were typically provided with between $500 and $1,000 to pay for books for their children, food, rent, electricity, and other bills for essential services. FaDSS also dropped off children's supplies and activities at participants' homes.
- Goal4 It! offered incentives for attending virtual workshops. For each workshop a TANF participant completed, they received a $25 incentive. For the workshops offered in a series, the program offered an additional $200 to participants who completed all workshops in the series.
- LIFT provided $1,400 for each participant who was eligible to receive the federal Economic Impact Payments, also known as stimulus checks, that were made available to support people during COVID-19; LIFT provided $1,900 for those who were ineligible for these federal payments. The organization also provided school supplies, hygiene products, and grocery gift cards.
- MyGoals continued to provide the pre-pandemic incentives for participants for engagement, obtaining a job, and keeping a job. They continued to provide the job retention incentive to participants who would have been otherwise eligible, even if they lost their job as a result of the pandemic.

To pay for this additional financial support to participants, LIFT and Goal4 It! received additional funding through donations; the Coronavirus Aid, Relief, and Economic Security (CARES) Act; or other COVID-19-related grants. FaDSS was able to reallocate travel funds that had not been used that year to offer participants additional financial support.

Programs used various approaches to help participants access technology and improve their computer skills.

Access to technology and an understanding of its use became even more important during the pandemic, as it was offered as a way to participate in coaching and was necessary for participants to apply for jobs, access resources, purchase items, and communicate with friends and family. Computers and access to the internet were also often necessary for children of participants to attend school. MyGoals Baltimore provided participants with laptops as well as technology literacy courses. MyGoals Houston connected participants to community resources to access laptops and the internet at reduced rates. A MyGoals Houston coach shared, "We've been looking for resources for laptops, but we didn't have funds available to do that, so we had to look for resources in the community. [One provider] offers the Internet Essentials Program, which allows [participants] to purchase repurposed computers … for $150." Goal4 It! provided $500 to participants to purchase a laptop, an increase from the $250 participants received for this purpose before the pandemic. Some staff reported that in retrospect it would have been helpful for the programs to have offered technology support to participants sooner than they did.

Referrals to other services and information sharing changed during the pandemic.

Goal4 It! and LIFT staff reported that some of their community partners were no longer offering services or had reduced their capacity during the pandemic. LIFT staff reported partnering with organizations to deliver food and perishable items to participants to help fill the gaps.

To share information about available resources with participants, programs increased their use of email or other electronic forms of communication. Programs used email more frequently to provide information about program services, available resources, and information about the pandemic. MyGoals Houston included COVID-19-related resources, such as testing sites and financial assistance, in its blog for participants and encouraged participants to read the blog.

Program staff faced challenges working from home during the pandemic and programs provided support.

Similar to the challenges participants faced, staff talked about distractions from other family members, the need to supervise their own children, and the psychological issues of separating their work and home lives. Many had difficulties with technology, including difficulties with internal office messaging software.

Programs provided support to staff to address these challenges. Staff in two programs, LIFT and FaDSS, were able to work a flexible schedule—including early mornings and late evenings—to work around their child care or other responsibilities. Supervisors and other leaders from LIFT and FaDSS supported coaches through regular meetings and often discussed staff mental health and well-being during check-ins. Goal4 It! supervisors reported making themselves available to meet with coaches more frequently, and MyGoals supervisors encouraged coaches to take mental health days and build in time between their coaching sessions. Some programs provided staff with technology support, cell phones for work, and ergonomic equipment for their work spaces at home. All programs provided new virtual trainings to staff spanning topics from supporting participants during the pandemic to crisis coaching. Some coaches reported that programs could have offered emotional support trainings to coaches sooner, such as how to be empathetic and how to respond to mental health issues that arise during coaching sessions.

Summary of lessons learned

The pandemic required all four coaching programs to make major changes in their operations. The following lessons learned from their experiences might be helpful to other programs implementing coaching or other approaches that involve close staff-participant interaction, during a public health crisis or other type of emergency.

All four programs found that it was feasible to provide coaching virtually, identified some benefits and drawbacks, and plan to revert to mostly in-person coaching supplemented with some virtual coaching after the pandemic ends.

All four programs replaced in-person coaching with virtual coaching, conducted mostly by telephone. Participants and staff agreed on the benefits of virtual sessions in reducing participation barriers such as transportation. But staff had some concerns about whether virtual sessions were as effective as in-person coaching. They felt that participants were sometimes distracted and they lost important contextual information about participants. Coaches were also concerned about whether they could develop strong relationships with participants without any in-person coaching. Staff felt that in-person meetings when they first met participants were especially important. Yet participants felt that coaching remained effective virtually and enjoyed the flexibility it provided. All programs planned to continue some virtual coaching after the pandemic as a supplement to in-person coaching.

All four programs adapted to changing participant needs during the pandemic.

During the first months of the pandemic, staff emphasized the importance of remaining flexible in goal setting, focusing goal setting on immediate needs. When participants were in crisis, they were able to choose to stop goal setting—a key element of coaching—and coaches pivoted to addressing participants' immediate needs. All programs provided some financial assistance and other supports to participants during the pandemic, such as increased incentive payments. Two programs increased the length of time that participants were permitted to remain in the program. In addition, programs connected participants to technology resources so they had tools to stay connected to resources and community during the pandemic.

Programs also adapted to support their staff, and staff reported feeling supported by these changes.

Coaches and other program staff needed to switch to virtual coaching while facing many of the same challenges participants were experiencing. All four programs communicated rapid changes to staff quickly and frequently. Staff reported that programs shifted policies and practices to better support them during the crisis. These changes included flexible work hours, technological support, and additional training and meetings with supervisors and other leadership to discuss staff well-being. Some coaches reported that programs could have offered trainings sooner than they were made available. Most staff reported feeling supported by the programs and their adaptations during the pandemic.

Staff reported that programs responded effectively to the pandemic.

Staff from all four programs reported that program leadership effectively communicated about pandemic-related changes, such as providing coaching virtually and the required logistics, to both staff and participants. Programs were flexible and listened to staff concerns through regular meetings. They adapted to providing services virtually instead of ending services. They also allowed program participants to stop setting goals – along with relaxing other program requirements – to best serve them during the crisis. Some staff reported that the crisis coaching training one program offered to staff was an example of how well the program responded to the pandemic and to the changing needs of participants.

Participants felt that coaching was particularly beneficial during the pandemic.

In most programs, participants engaged more in coaching during the pandemic, with more contacts and fewer cancellations and no-shows. Although coaching for many participants switched from focusing on long-term employment goals to focusing on meeting basic needs at the beginning of the pandemic, as the pandemic continued, they returned to working on long-term goals. Participants noted how much they appreciated the support they received from their coaches during a difficult time.

References

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Joyce, K., and S. McConnell. "Employment Coaching: Working with Low-Income Populations to Use Self-Regulation Skills to Achieve Employment Goals." OPRE Report #2019-67. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services, 2019.

Endnotes

[1] LIFT also operates in Washington, DC, but that location is not participating in the evaluation.

[2] The changes to the work participation requirements and allowable activities were made by the state.

A LIFT coach works on a laptop at her desk. (Photo: Rich Clement, Mathematica)

Appendix A: Data Collection

This appendix describes the data collection conducted for this brief.

Staff interviews

We conducted 43 90-minute, semi-structured interviews with staff. We interviewed 9 to 13 staff from each program, including program directors, local directors, supervisors, program managers, and coaches (Exhibit A.1). We interviewed all program directors, local directors, supervisors, and program managers from MyGoals and Goal4 It!. For FaDSS, we interviewed all program directors and local directors, supervisors, and coaches from Polk County and Four Oaks, which represent two of the seven agencies participating in the evaluation. We selected these locations because they served the most participants in the state. For LIFT, we interviewed program managers in the national office and local directors, supervisors, and coaches from the Chicago, Los Angeles, and New York offices—the three offices participating in the evaluation. Program leaders selected coaches to be interviewed based on their availability and involvement in the programs both before and during the pandemic.

Participant interviews

We scheduled in-depth interviews (Exhibit A.1) with 10 participants: four from MyGoals—two from Baltimore and two from Houston—and two from each of the other three programs. We conducted two interviews at each MyGoals location because each MyGoals location had about as many study enrollments as each of the other programs. Interviews lasted an average of about 75 minutes. Coaching participants were selected by the programs for the interviews using the following criteria: (1) they were enrolled in the study and assigned to the program group, (2) they attended at least one coaching session sometime before the pandemic (i.e., before March 2020) and at least one sometime during the pandemic (between March and September 2020), and (3) they could conduct the interview in English. We limited our sample to English-speaking participants because we did not have the resources to analyze data in another language. Interviewed LIFT participants were from the Chicago and New York locations. Only participants who consented to be interviewed were interviewed. Interview respondents received a $60 Walmart gift card as a token of appreciation for participating.

Service receipt

Throughout the evaluation, program staff recorded all contacts with participants. In FaDSS, Goal4 It!, and LIFT, they entered data into a management information system specifically designed for the study. In MyGoals, they entered the data into a program-specific management information system. Staff in FaDSS, Goal4 It!, and LIFT also recorded information about participant cancellations of coaching sessions and no-shows. MyGoals staff were not required to collect these data in the MyGoals management information system.

Public data sources

We collected data about COVID-19 cases and deaths from the Centers for Disease Control and Prevention's COVID data tracker, accessed through https://covid.cdc.gov/covid-data-tracker/#trends_dailytrendscases%20and%20Provisional and provisional COVID-19 deaths by week, accessed through https://data.cdc.gov/NCHS/Provisional-COVID-19-Death-Counts-by-Week-Ending-D/r8kw-7aab. We collected unemployment rate data from the U.S. Bureau of Labor Statistics' civilian unemployment rate, accessed through https://www.bls.gov/charts/employment-situation/civilian-unemployment-rate.htm.

Exhibit A.1. Total number of staff and participants interviewed per program

	Administrators and supervisors	Coaches	Participants
FaDSS	6	6	2
Goal4 It!	3	6	2
LIFT	4	9	2
MyGoals Baltimore	2*	3	2
MyGoals Houston	1	3	2
Total	**16**	**27**	**10**

*We interviewed a technical assistance provider at MDRC who spoke to the experiences at both MyGoals Baltimore and MyGoals Houston. We have counted that interview as an administrator and supervisor interview for the MyGoals Baltimore location.

Appendix B: Supplemental Tables

Exhibit B.1. National monthly COVID-19 deaths per 100,000 persons, January 2020 to March 2021
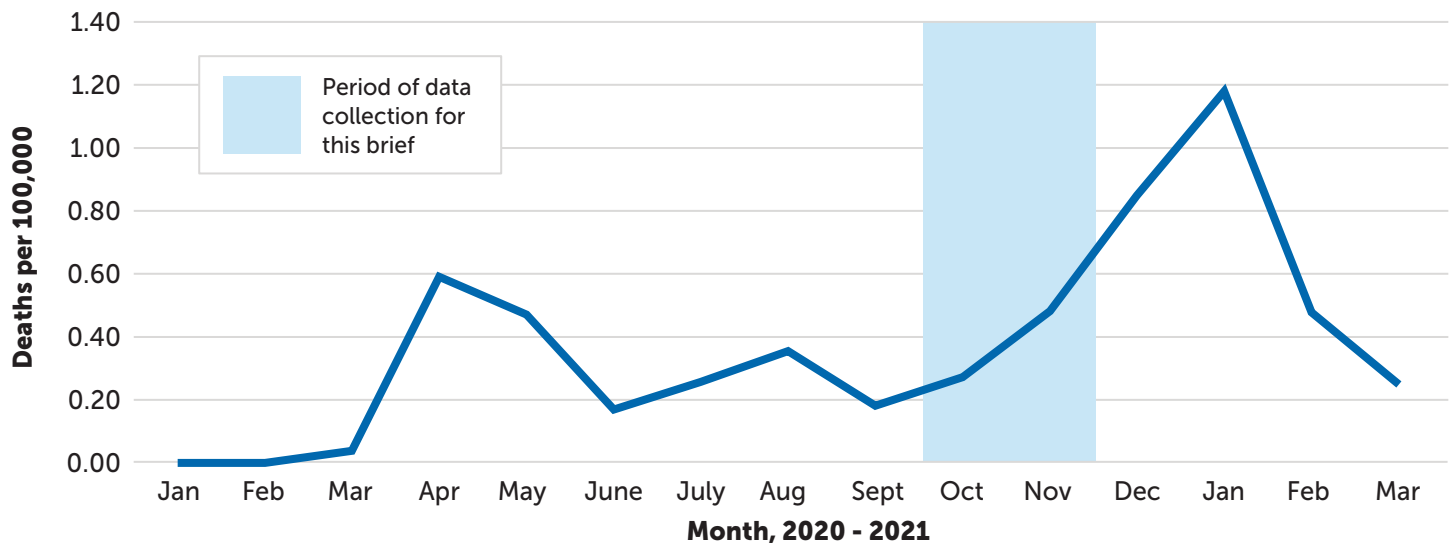
Source: Centers for Disease Control and Prevention. "Provisional COVID-19 Death Counts by Week Ending Date and State." n.d. Available at https://data.cdc.gov/NCHS/Provisional-COVID-19-Death-Counts-by-Week-Ending-D/r8kw-7aab. Accessed June 3, 2021.
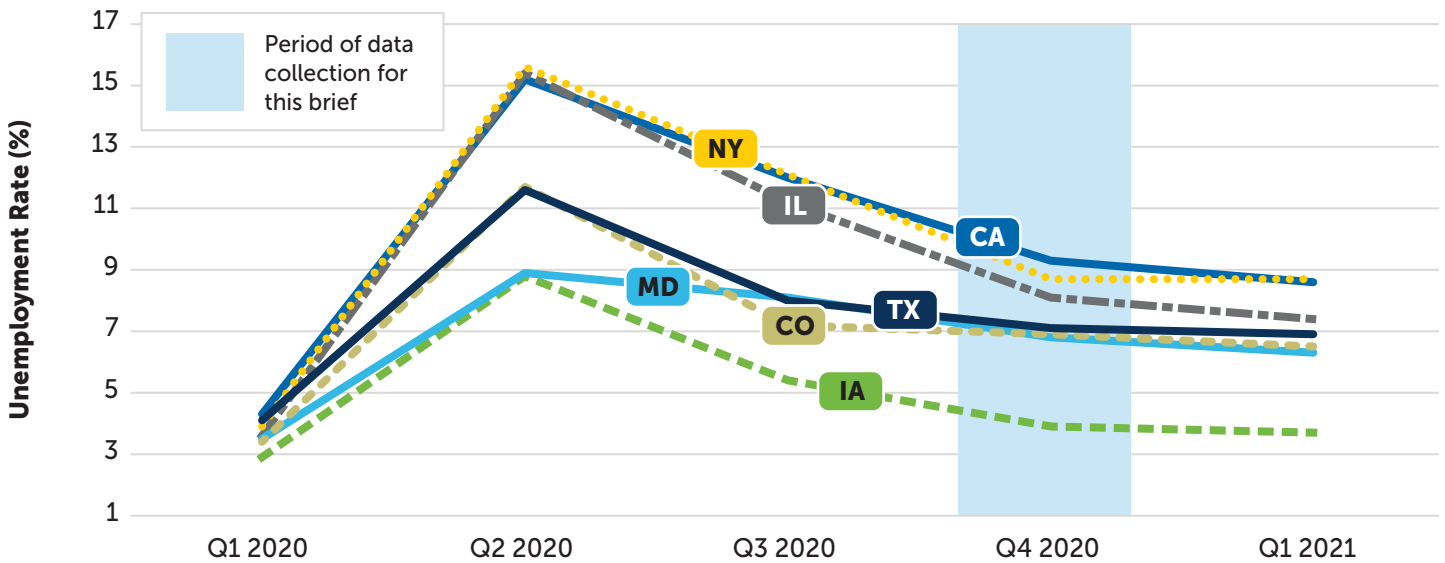
Exhibit B.2. Number of COVID-19 deaths and cases per 100,000 in population, by state with a program included in this study, 2020 and first quarter of 2021

| | 2020 | | | | | | | | 2021 | |
| | Q1 | | Q2 | | Q3 | | Q4 | | Q1 | |
	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases
California	1	48	17	712	25	1,356	39	4,157	72	2,819
Colorado	N/A	N/A	29	568	6	657	48	4,577	23	2,222
Illinois	N/A	N/A	56	1,138	14	1,196	72	5,269	44	2,219
Iowa	N/A	N/A	23	918	20	1,898	81	6,080	59	2,229
Maryland	N/A	N/A	55	1,123	12	953	37	2,559	42	2,195
New York	2	295	77	1,317	3	329	32	3,017	56	4,324
Texas	N/A	N/A	11	552	47	2,031	49	3,474	58	3,542

Source: Data were collected from the Centers for Disease Control and Prevention's https://covid.cdc.gov/covid-data-tracker/#trends_dailytrendscases and Provisional and https://data.cdc.gov/NCHS/Provisional-COVID-19-Death-Counts-by-Week-Ending-D/r8kw-7aab.
N/A: not available

Exhibit B.3. Quarterly unemployment rate by state with a program included in this study, seasonally adjusted

Source: Data were collected from the U.S. Bureau of Labor Statistics https://www.bls.gov/charts/employment-situation/civilian-unemployment-rate.htm.