REQUEST FOR PROPOSAL TO FACILITATE DESIGN PROCESS
FOR AGES THREE TO FIVE STRATEGY DEVELOPMENT

JUNE 18, 2020

INSTRUCTIONS

We are seeking responses from individuals and/or firms to facilitate development of a comprehensive community-wide strategy designed to improve outcomes for children ages three to five. Please provide the following by **Friday, July 17** if you would like to be considered:

- Description of the individual or firm, including biography of principal or team member(s) who will oversee the work. Individual respondents should include a resume.
- Statement of interest in facilitating this work, including a description of why you would be a good fit.
- High-level approach to meeting stated needs and evaluating progress.
- Capacity to meet stated needs.
- Description of similar work you have conducted, including facilitating strategy work in an online setting and experience with this content.
- Additional questions you have about the proposed work.
- Approach to budgeting for work outlined in this proposal.

Individual respondents may propose to contract with other agencies and resources.

Please submit your response to Mary Herbenick at MaryH@getreadyguilford.org. All responses will be reviewed, and selected respondents will be interviewed by GRGI staff. We hope to begin working with the selected consultant by mid- to late-August**.** Please direct any questions to Mary.

OVERVIEW

The Get Ready Guilford Initiative (GRGI), a joint endeavor of Ready for School, Ready for Life (Ready Ready) and The Duke Endowment (TDE) seeks county-wide changes in a range of early childhood outcomes and disparities spanning preconception to age eight.

GRGI has a bold mission of building a connected, innovative system of care for Guilford County's youngest children and their families that improves outcomes, starting prenatally and continuing through third grade, while reducing persistent disparities.

To reach these ambitious goals, the collaborative is building a comprehensive early childhood system in which all young children and their families are: (1) assessed for child and family need at five key points (prenatally to age-three); (2) offered targeted high-quality interventions based on their goals and needs; and (3) provided ongoing support. GRGI has a staged roll-out by age group, beginning with preconception to age three, when brain development occurs most rapidly and interventions are most fragmented and the least organized. **Please see Appendix A for information about the systemic issues we are working to solve in Guilford County.**

We are beginning the planning process for strategies targeted to reach preschoolers (ages three to five) and their families. This includes the transition into kindergarten, which is a common challenge for children, families, teachers and school administrators.

In preparation, the following materials have been developed to support the planning process:
- A research paper conducted by Duke University researchers on the neurological development of children in this age group with the goal of understanding which areas of development have the highest potential for impact;
- A draft landscape analysis of programs serving children in this age group and their families within Guilford County; and
- Additional research about evidence-based programs[1] that serve this population.

The above documents are included with this RFP.

NEED
GRGI is seeking a seasoned consultant or consulting team to facilitate the development of a strategic plan that will guide the system-building work for ages three to five within Guilford. We anticipate that this engagement will be up to 12 months in length, depending on external factors such as the ability to meet in person versus conducting online meetings, starting mid- to late-August 2020.

The selected consultant/team will possess the following:
- A proven track record in facilitating large cross-organizational, cross-sector groups to achieve desired outcomes
- Ability to collect, synthesize and use qualitative and quantitative data to guide group decision-making
- Ability to think systemically and manage complexity
- Experience developing strategies to address root causes of challenging systemic issues
- Ability to foster innovation, collaboration and a willingness to break through organizational silos
- Excellent written and oral communication skills
- Cultural humility and respect for family voice
- A passion for social change and commitment to equity

The selected consultant(s) will work with staff to shape each step of the engagement and will be supported by members of the Ready for School, Ready for Life staff – a strategic partner/project manager (.5 FTE) and administrative support (.2 FTE). In addition, members of The Duke Endowment team will serve as strategic partners throughout the process (.2 FTE) and also make resources available for research and analysis. Collectively, for purposes of this proposal, we will refer to these supports as GRGI staff.

Please note that two sets of evaluators support the initiative. We anticipate the selected consultant(s) will engage with the evaluators. A team from University of North Carolina's School of Social Work/National Implementation Research Network (NIRN) is working with the team on a developmental evaluation, which includes the development of values and principles for the initiative. The second firm, MDRC, is working with the initiative on the implementation and impact evaluations.

EXPECTED OUTCOMES
The goal is to develop strategies for ages three to five that:

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[1] Interventions with at least one well-conducted randomized-control trial in a real-world setting finding positive effects on GRGI's outcomes of interest.

- Drive measurably better and more equitable outcomes at the county level – e.g., changes in county-level rates and disparities in <u>kindergarten readiness</u> (**Please see Appendix B for GRGI outcome areas**.)
- Build upon existing strategic frameworks, including:
  - GRGI's values and principles (in development – final by August)
  - Phase 1 strategy focused on pregnancy to age three (under initial implementation)
  - Preconception strategy (in development – final in 2021)
  - Our [theory of change (to be revised in fall 2020)](#)
- Build upon existing state frameworks, including:
  - NC Pathways to Grade-Level Reading
  - NC DHHS [Early Childhood Action Plan](#)
- Can be brought to county-wide scale within a four-year period and within a specified budget (likely in multiple millions annually)
- Identify and address root causes of identified problems
- Be responsive to lessons from the referenced literature review on brain development and advisory boards convened by GRGI
- Build off strengths of the prenatal to age three system that is currently being implemented

ANTICIPATED PHASES OF WORK
The consultant/facilitator will lead the work with GRGI staff on the following phases of work.

1. **PLANNING & DISCOVERY:** Learn about GRGI, goals for three to five work, the Guilford County landscape, and put what's learned in service of data collection and theming phase.
   - Participate in a three-hour kickoff meeting with staff and conduct interviews with key GRGI staff/partners.
   - Review relevant materials to understand scope of the work, including existing qualitative and quantitative data and results of design processes for early literacy, early childhood workforce, continuous quality improvement, and navigation services.
   - Develop facilitation guides and lead sessions to collect provider and family data as outlined in phase two.
   - Co-develop and co-deliver introductory session about the design process (1-hour webinar) to community partners prior to selection of design team participants. (Timing TBD)

Facilitate one-hour weekly planning meetings with Ready Ready/TDE team to advance the 3 to 5 system building work for the course of the engagement.
   Deliverables include:
   - Written summary of Discovery phase that will serve as input to data collection
   - Focus group facilitation guides for audiences outlined in phase two
   - Presentation and speaker notes for the design process webinar
   - Meeting summaries for weekly meetings

2. **DATA COLLECTION & THEMING:** Gather additional data, lead theming process, and incorporate learnings into planning for the design phase.
   - **Conduct focus groups** with key audiences. For scoping purposes, assume up to 20 one-hour meetings conducted online or in-person with the following groups:
     - *Front-line direct service providers.* Hold virtual conversations at a variety of dates/times so those who work closely with preschoolers and families can provide input on what's working/not working to support healthy development and on-track development, focused on system barriers.

- o *Kindergarten teachers.* Invite kindergarten teachers to share their observations of what's working/not working currently to get children ready for school.
  - o *Families*. Hold one-hour virtual or in-person meetings for families with children ages three to five to collect information about what's working/not working to support healthy development of their preschoolers. Separate focus group(s) will be held for families with children who attended kindergarten during the 2019-20 school year.
- **Develop and execute family survey.** Develop a 10-question survey via app targeted to families of children ages three to five, and a secondary survey for families whose children have already attended kindergarten.
- **Theme the data.** Facilitate theming session(s) with staff, providers and parents of preschoolers to make sense of the data gathered to date. Themes will serve as key input to the design process.

  Deliverables include:
  - Verbatim transcripts from focus groups (to be completed in collaboration with administrative assistant)
  - 10-question survey targeted to families of preschoolers to be delivered electronically.
  - 10-question survey targeted to families of kindergarteners to be delivered electronically.
  - Report with themed data from focus groups and interviews
  - Recommendations for moving forward with an effective design process based on what is learned during data collection and theming

3. **DESIGN PROCESS:** Lead a collaborative process to develop strategies that meet expected outcomes outlined in this RFP. (See Appendix C for details about the process and our commitment to it.)
   - **Guide design team selection.** The team could include up to 30 core members from different organizations and perspectives to participate in an eight-month process. We would leverage tools from prior processes, e.g., continuous quality improvement cohort.
   - **Plan and facilitate (with GRGI staff support) series of design team meetings**. Work with team to develop a comprehensive strategic plan for ages three to five in Guilford County, including the transition into kindergarten, which meet the objectives outlined on page three of this document. Sessions may be held in person, virtually, or a combination of both. GRGI staff will include administrative assistance for notetaking.
   - **Test emerging strategies.** With GRGI staff and design team members, guide the testing of emerging strategies with a variety of stakeholders across Guilford County and bring feedback to the design team.
   - **Develop completed plan.** Provide all documentation about the process and the "final" plan to the GRGI team and to design team members.

   Deliverables include:
   - Meeting materials (including prework, agendas, presentations, meeting notes) for each design meeting facilitated.
   - Guidance for regular updates provided to key leaders and decision-making bodies (Ready Ready Board of Directors, GRGI Executive Committee, etc.)
   - Documentation about the process
   - Final plan for execution

Appendix A: Overview of Get Ready Guilford Initiative

The Get Ready Guilford Initiative (GRGI) has a bold mission of building a connected, innovative system of care for Guilford County's youngest children and their families that both improves outcomes, starting prenatally and continuing through third grade, while reducing persistent disparities. To reach this objective, the collaborative is building a comprehensive early childhood system in which all young children and their families are: (1) assessed for child and family need at five key points (prenatally to age three); (2) offered targeted high-quality interventions based on their goals and needs; and (3) provided ongoing support.

Guilford County has a population of 520,000. It is the third largest county in the state with residents living principally in the cities of Greensboro (pop: 290,000) and High Point (pop: 112,000). The county spans more than 600 square miles and includes ten municipalities and less developed incorporated areas.

Of the estimated 6,000 children born within the county each year, approximately half are born into poverty.[2] Based on the best data available, 9,633 children up to age three live at or under 200% of the Federal Poverty Level (FPL)[3]. Today, a child born into a family at the bottom 25% of income in our community has a less than a five percent chance of progressing to the top quartile as an adult—resulting in one of the worst rates of upward mobility in the nation.[4] Kindergarten readiness continues to decline year after year, with only 2 in 5 children entering school on track with expected early literacy skills.[5]

The diversity of this urban, suburban and rural county is one of its strengths. As the third largest refugee resettlement community in the country, more than 100 languages and dialects are spoken within the public-school system. In 2017, the majority of Guilford County babies were born into families of color.

Table: 2017 Guilford County Births by Race/Ethnicity

	Total	American Indian or Alaska Native	Asian or Pacific Islander	Black/ African-American	White	Hispanic	Not Hispanic or Latino
2017 Guilford County births[6]	6,218	30	525	2,551	2,295	817	5,401

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[2] Defined by Medicaid eligibility, or incomes up to 185 percent of the Federal Poverty Level.

[3] Calculated based on American Community Survey 2013-17 Five-Year Estimates (Table #B17024)

[4] North Carolina's Economic Imperative: Building an Infrastructure of Opportunity, MDC, 2016

[5] Guilford County Schools, 2018 beginning of year TSR

[6] North Carolina State Center for Health Statistics, 2017

The data also show significant and persistent racial disparities starting at birth. The overall infant mortality rate has declined in Guilford County; however, the rate is significantly higher for African-American/Black women (12.3) than for White women (5.1).[7] While 11.8% of births in Guilford County are low-birthweight, the rate for African-American/Black women is 16.4%, compared to 8.5% for White and 8.7% for Hispanic women.[8] In 2018, 60% of children who entered kindergarten did not meet expected language/literacy standards. However, disaggregated data show significant racial disparities (76% Hispanic; 63% black; 48% white) in kindergarten non-readiness.[9]

Situated in a state with a longstanding commitment to early childhood, Guilford County has a 30+ year history of collaboration and developing and implementing innovative programs serving young children and their families. It was the first site for Nurse-Family Partnership in North Carolina, an incubator for the Family Connects program that provides universal newborn home visits, and the first community in the country with ambitions to expand the HealthySteps program county-wide. The community also celebrates high pediatric screening rates[10], the most four-year-olds enrolled in NCPreK (the country's highest quality public pre-kindergarten)[11], and continued bipartisan support for early childhood services.[12]

The county is also home to more than 700 nonprofit organizations, making Guilford a resource-rich community. However, families with young children still report that they are unable to access services as the result of rigid eligibility requirements, long waiting lists, a lack of knowledge about available services, plus other systemic issues such as a lack of transportation. As a result, too many infants and toddlers are falling between the gaps in services that could have helped keep them developmentally on track.

To identify root causes and disrupt cycles of poverty, leaders and service providers in this "resource rich, access poor" community galvanized around early childhood systems building. This led to the establishment of GRGI, a partnership between The Duke Endowment and Ready Ready, the backbone organization leading the work.

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[7] Five year rolling infant mortality rates, 2006-2017, Guilford County Health Department

[8] Percentage of low birthweight births, 2013-17, County Health Databook, NC State Center for Health Statistics

[9] Beginning of Year Text Reading and Comprehension, Guilford County Schools, 2018-19

[10] Community Care of North Carolina, 2016

[11] U.S. News and World Report, 2018
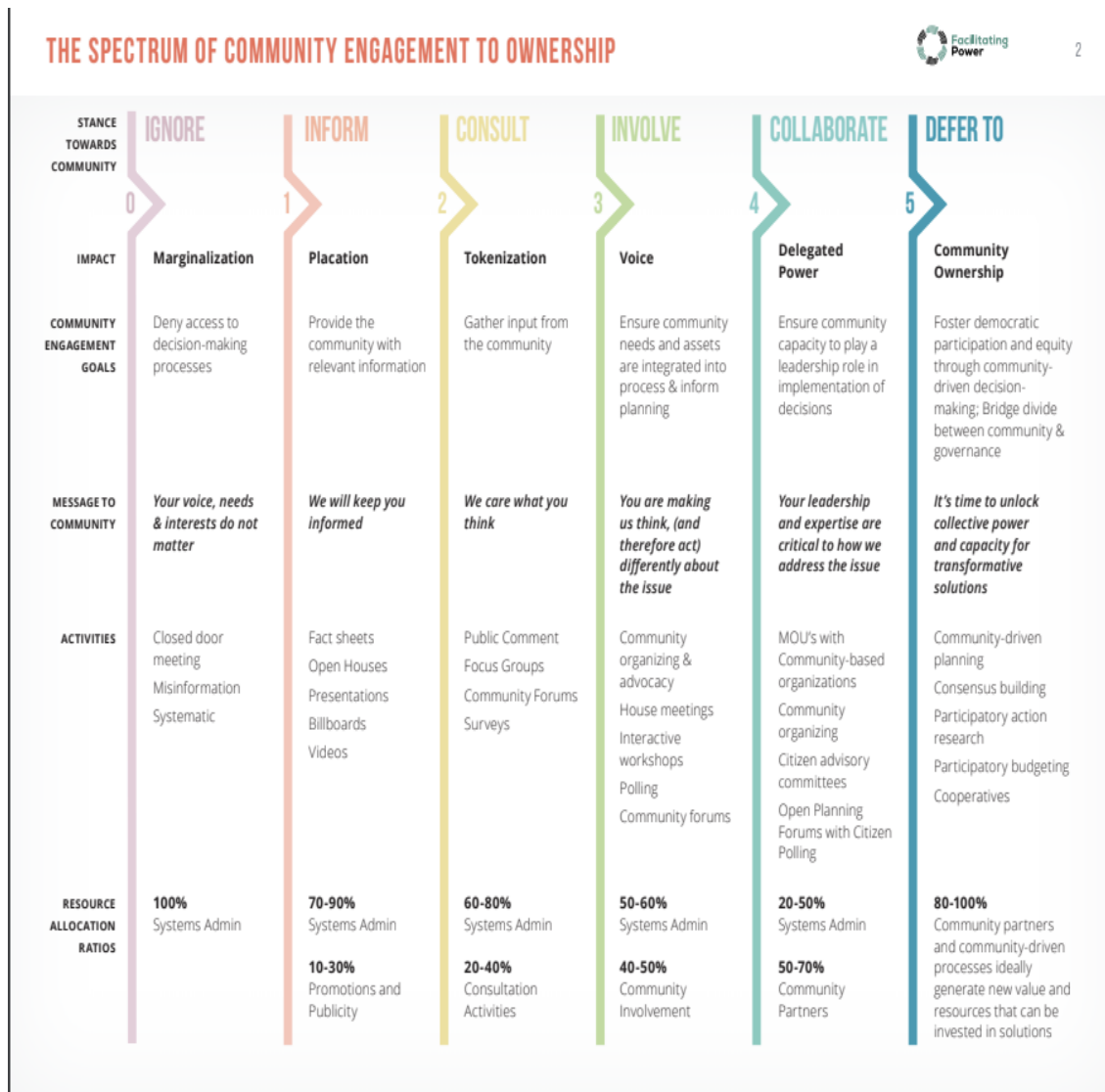
[12] Raleigh News & Observer, 2018

Appendix B: Outcome Areas and Indicators for the Get Ready Guilford Initiative

OUTCOME AREAS	POPULATION INDICATORS DEFINING THE OUTCOME AREAS (DATA SOURCE)	OTHER INDICATORS
A. PLANNED AND WELL-TIMED PREGNANCIES	1. Pregnancies are planned (prenatal assessment, CCNC) 2. Subsequent births no sooner than 24 months (birth records, NC DHHS) 3. Fewer teen births (birth records, NC DHHS)	13. Avoidance of child abuse and neglect (administrative records, NC DHHS)
B. HEALTHY BIRTHS	4. Children are born at a healthy weight (birth records, NC DHHS) 5. Children are born after 37 weeks completed gestation (birth records, NC DHHS)	14. Mothers initiate breast feeding (newborn home visits, Family Connects/NFP)
C. ON-TRACK DEVELOPMENT AT 12, 24, AND 36 MONTHS	6. Children demonstrate age-appropriate emotional and social development (12-, 24-, and 36-month assessments) 7. Children demonstrate age-appropriate emerging literacy skills (12-, 24-, and 36-month assessments) 8. Children demonstrate physical well-being and appropriate motor development (12-, 24-, and 36-month assessments)	15. Mothers do not report depression (newborn, 12-, 24-, and 36-month assessments)
D. SCHOOL READINESS AT KINDERGARTEN	9. Children demonstrate competence in all five domains of school readiness (Kindergarten Entry Assessment, NC Dept. of Public Instruction)	16. Children avoid unnecessary emergency department utilization (Medicaid records, DHHS)
E. SUCCESS IN THIRD GRADE	10. Children read proficiently in grade 3 (End of Grade test [proficiency rates and means], NC DPI) 11. Children perform math proficiently in grade 3 (End of Grade test [proficiency rates and means], NC DPI) 12. Children have age-appropriate social-emotional skills by end of third grade (K-3 Formative Assessment, NC DPI)	

Appendix C: The Spectrum of Community Engagement to Ownership by Facilitating Power

A primary goal of the GRGI design process is to engage as many "actors" in the local work so participants and the community own the strategies implemented within Guilford County. Several design processes have already been executed in the earliest stages of Ready Ready's work, including the community visioning process, 100-Day Challenge design teams, and the development of two community-wide strategic plans (early literacy and early childhood workforce development).

GRGI's developmental evaluators presented the *Spectrum of Community Engagement to Ownership* model, and GRGI staff agreed that the desired level of engagement is at the "Collaborate" level. This analysis is based on what we have learned over the past 18 months and takes into consideration the governance structures of GRGI that prohibit a "Defer To" approach. For purposes of this proposal, we have included a description for your consideration and reaction.

THE SPECTRUM OF COMMUNITY ENGAGEMENT TO OWNERSHIP

Facilitating Power — 2

STANCE TOWARDS COMMUNITY	IGNORE	INFORM	CONSULT	INVOLVE	COLLABORATE	DEFER TO
	0	1	2	3	4	5
IMPACT	Marginalization	Placation	Tokenization	Voice	Delegated Power	Community Ownership
COMMUNITY ENGAGEMENT GOALS	Deny access to decision-making processes	Provide the community with relevant information	Gather input from the community	Ensure community needs and assets are integrated into process & inform planning	Ensure community capacity to play a leadership role in implementation of decisions	Foster democratic participation and equity through community-driven decision-making; Bridge divide between community & governance
MESSAGE TO COMMUNITY	*Your voice, needs & interests do not matter*	*We will keep you informed*	*We care what you think*	*You are making us think, (and therefore act) differently about the issue*	*Your leadership and expertise are critical to how we address the issue*	*It's time to unlock collective power and capacity for transformative solutions*
ACTIVITIES	Closed door meeting Misinformation Systematic	Fact sheets Open Houses Presentations Billboards Videos	Public Comment Focus Groups Community Forums Surveys	Community organizing & advocacy House meetings Interactive workshops Polling Community forums	MOU's with Community-based organizations Community organizing Citizen advisory committees Open Planning Forums with Citizen Polling	Community-driven planning Consensus building Participatory action research Participatory budgeting Cooperatives
RESOURCE ALLOCATION RATIOS	100% Systems Admin	70-90% Systems Admin 10-30% Promotions and Publicity	60-80% Systems Admin 20-40% Consultation Activities	50-60% Systems Admin 40-50% Community Involvement	20-50% Systems Admin 50-70% Community Partners	80-100% Community partners and community-driven processes ideally generate new value and resources that can be invested in solutions

WHY DEVELOPMENTAL STAGES?

With the exception of marginalization (a zero on the spectrum), each of the steps along the spectrum are essential for building capacity for community collaboration and governance. Communities must be informed, consulted, and involved; but through deeper collaboration we can unleash unprecedented capacity to develop and implement the solutions to today's biggest crises in our urban centers. To achieve racial equity and environmental justice, we must build from a culture of collaboration to a culture of whole governance, in which decisions are driven by the common good. Whole governance and community ownership are needed to break the cycle of perpetual advocacy for basic needs that many communities find themselves in. **Developmental stages allow us to recognize where we are at, and set goals for where we can go together through conscious and collective practice, so key to transforming systems.**

5

DEFER TO
Foster democratic participation and equity by bridging the divide between community and governance, through community-driven decision-making

4

COLLABORATE
Ensure community capacity to play a leadership role in implementation of decisions

3

INVOLVE
Ensure community needs and assets are integrated into process and inform planning

2

CONSULT
Gather input from the community

INFORM
Provide the community with relevant information

1

UNDERSTANDING THE SPECTRUM WITHIN LOCAL CONTEXTS

Through facilitated dialogue, reflect on each of the developmental phases in the context of your city/region.

PHASE	DESCRIPTION	REFLECTION QUESTIONS
IGNORE 0 MARGINALIZATION	**Marginalization represents the status quo, given current systems have been historically designed to exclude certain populations. If concerted efforts are not made to break-down existing barriers to participation, then by default, marginalization occurs.** The history of the United States can be understood as generations of social movements striving to extend the rights of democracy to groups that have been previously excluded. The health of our democracy AND our economies depends on our capacity to recognize and address marginalization and exclusion. There is a direct connection between economic exclusion (slavery, taking land by force, taxation without representation, exploitation of labor, etc.) and political exclusion (denying citizenship and voting rights, top-down decision-making practices, etc.).	• What are the roots of systematic marginalization in your city/region? How is political exclusion related to local economic factors? • How does the legacy of political exclusion based on race and class persist to today? What forms does it currently take in your city/region?
INFORM 1 PLACATION	**Information is the foundation for taking action towards real solutions to the threats we face. As the saying goes, knowledge is power. If, however, community engagement efforts remain at the level of one-way information sharing, such efforts result in placation.** The role of the community is reduced to absorbing information from those with more positional power; meanwhile, the notion that every day people can actually shape solutions is stifled. Community-based organizations can play a key role in ensuring access to information about issues, services, solutions, etc. in ways that are culturally rooted and relevant.	• What does information flow look like for impacted communities in your city/region? What is contributing to information flow? What is hindering it? • Reflecting on existing community assets, what will it take for impacted communities to have equitable access to information about the issues that directly impact them?
CONSULT 2 TOKENIZATION	**The most common fom of 'community engagement' among mainstream institutions is consultation, usually in the form of semi-interactive meetings in which members of the community have the chance to offer input into pre-baked plans.** This is of course a step up from one-way information-sharing; a two-way exchange is initiated. The biggest critique of this form of engagement is that decisions are often already made; the community input period simply serves to check a box. What's more, if the people participating have not had the chance to develop a shared analysis of the problem or articulate a shared vision, values, and priorities, with their peers, then they don't actually represent a 'community,' they are simply participating as individuals, and therefore are only 'tokens' of the community they are supposed to represent. This is the trap of consultation.	• When is it appropriate for impacted communities to be in a consultation role? What should impacted communities in your city/region be consulted on? • Where, in your experience of community engagement does it feel like consultation can be a trap? • What is needed to move beyond consultation and get to solutions that benefit from the genuine involvement of impacted communities?

PHASE	DESCRIPTION	REFLECTION QUESTIONS
3 **INVOLVE** VOICE & POWER SHIFT	**Community organizing and power building is needed to bring community engagement out of tokenization and into true involvement of impacted residents in the decisions that impact them.** Community organizing offers vital elements to local democracies: 1) Community power puts needed pressure on local systems to make change; 2) Education and leadership development supports residents to make informed decisions that reflect the needs and interests of their communities; 3) Organizing builds the public will to develop, advocate for, and implement viable solutions; 4) Community organizing can also balance uneven power dynamics so that communities can effectively collaborate among sectors with more institutional power.	• What does it take for residents of impacted communities in your City to have a real voice in the decision-making that impacts them? What are the examples? • What is needed to build sustained voice & power? • What community-based organizations are building an informed base of resident leaders with the capacity to advocate on behalf of the needs and interests of the community?
4 **COLLABORATE** DELEGATED POWER	**As a culture of systems change develops through community organizing, advocacy, and relationship-building, the limits of local systems to carry out changes on their own becomes apparent. At this point, the opportunity to collaborate across sectors emerges and makes culture shift possible.** Through the leadership and delegated power of community leaders, structures of participation can be made more accessible and culturally relevant to groups that have been historically excluded. In turn, collaboration requires and makes possible more trusting relationships and the healing of old divides within systems that tend to be more transactional. Collaboration also brings together unique strengths, assets, and capacities essential to enacting needed solutions, and that unconsciously go untapped.	• Where are the opportunities for meaningful collaboration between impacted communities & local government to co-develop solutions to racial & environmental injustices? • To what extent have impacted communities built an informed base of community members with the power and influence to achieve policy & systems change? • What culture shift and system changes are needed for authentic collaboration between institutions and impacted communities?
5 **DEFER TO** COMMUNITY OWNERSHIP	**We are building to community ownership to ensure communities have a direct say over what is needed to survive and thrive.** Throughout each of the developmental phases, we must be consciously building the capacity for communities currently impacted by poverty, pollution, and political disenfranchisement to have increasingly more control over the resources needed to live, such as food, housing, water, and energy. Strengthening local democracies is about ending dependency and restoring dignity.	• What role will community ownership play in closing equity gaps? • What is your collective vision for local community ownership? • What can you be doing now to lay the groundwork for community ownership? • What infrastructure for community ownership is needed that you can start building now?

USING THE SPECTRUM AS A TOOL FOR PLANNING AND GOAL SETTING

PURPOSE

To assess current community engagement efforts and set goals for how efforts can advance along the spectrum toward greater community ownership. This exercise can be conducted by a single entity around a single campaign or their work generally, and can also be carried out by a collaborative entity that includes multiple stakeholders. It is best facilitated by a 3rd party facilitator.

MATERIALS

- Color copies of the Spectrum of Community Engagement to Ownership
- Post-its, Flip chart paper and markers

PROCESS

ACTIVITY		FACILITATOR NOTES
Welcome and Context: Work together to set the context for the meeting and the purpose for adopting the spectrum to guide the work you are doing with the communities to whom you are accountable.		Read through the Applying the Spectrum to Local Context worksheet prior to facilitating the workshop.
Apply the Spectrum to the Local Context: Ask people to review the spectrum in pairs, noting what stands out to them and what questions it brings up. Open it up for pairs to share observations and questions in the whole group, using the conversation as a springboard into applying the spectrum to the local context: Use the worksheet on page 6-7 to apply the spectrum to the local context.	Invite pairs or small groups to each discuss one of the sections and afterwards report out their thinking to the whole group. After each report out, invite the rest of the group to share any additional thoughts on how that stage of the spectrum relates to the local context you all are working in.	Alternative approach to this exercise: create slides for each of the stages along the spectrum. For each stage, present the basic description (provided in the table) in your own words, and then discuss the questions in small groups or as a whole group. Make sure you have a solid grasp of the local context, and prompt people, as needed, to zero in on what's most important to understand about the context.
Assess & Reflect: Now that the group has a thorough understanding of the spectrum and how it applies to your local context, use the spectrum to assess your current work, or the general state of community engagement in your region (or both):	Give pairs or small groups 5 minutes to discuss where along the spectrum the work currently is and why Invite everyone to hold up the number of fingers that corresponds to their assessment of the work and discuss.	Make sure the group understands each stage along the spectrum is important and has a role to play in building community capacity to govern. For example, there is no shame in being at a level 1 on the spectrum; ensuring the community is informed is an essential part of the work.
Set Goals: Ask pairs or small groups to now discuss where along the spectrum they think the work should be within a given time frame or as the result of a given cam-	paign/project, and why. Share out and build consensus on the goal. Discuss what it will takes to reach the goal.	The goals you set can help guide your shared work and can be used to evaluate the work along the way