

Evaluation Form for Conflict Resolution Protocol

Instructions: Please take a few minutes to provide your feedback on the Conflict Resolution Protocol implemented at your CHA housing site. Your responses will help us assess the protocol's effectiveness and make any necessary improvements. Your feedback is anonymous and confidential.

1. How would you rate the effectiveness of the mediator in facilitating the resolution process?
 - Excellent
 - Good
 - Average
 - Poor

2. Did you feel heard and understood during the mediation sessions?
 - Yes
 - No
 - Not applicable

3. Were you satisfied with the outcomes or agreements reached during mediation?
 - Very satisfied
 - Satisfied
 - Neutral
 - Dissatisfied
 - Very dissatisfied

4. Since participating in the mediation program, have there been fewer conflicts with your neighbors?
 - Yes, significantly fewer
 - Yes, somewhat fewer
 - No, conflicts have remained the same
 - Not applicable

5. Would you recommend this mediation program to other neighbors experiencing conflicts?
 - Yes, definitely
 - Maybe
 - No

6. Overall, how satisfied are you with the Neighbor Conflict Resolution Mediation Program?

- Very satisfied
 - Satisfied
 - Neutral
 - Dissatisfied
 - Very dissatisfied
7. Do you have any suggestions or comments for improving the Neighbor Conflict Resolution Mediation Program?

Thank you for completing this evaluation. Your feedback is valuable to us and will help us improve our services.