

# Resolution Virginia

an alliance for peaceful communities



Survey: <https://virginiatech.questionpro.com/t/AUCRkZ4ei9>

**Participant Survey.** Thank you for participating in this short survey. Your feedback is important to us. Your responses will be used to determine the effectiveness of the conflict resolution services provided to you by your community mediation center. Please note that participating in the survey is voluntary. Also, your responses are anonymous, as the survey will not include your name or other identifying information.

1. Please list the name of the community mediation center that served you. If you don't know the name, please list the city or town where you received conflict resolution services.

\_\_\_\_\_

2. Please circle the letter next to the service you received.
  - a. **Intake** – I described the conflict to community mediation center staff. (This is the only service I received.)
  - b. **Conflict Exploration** – Center staff helped me think through how to navigate the conflict.
  - c. **Conciliation** – Center staff acted as a go-between between me and the other person(s).
  - d. **Mediation** – A mediator sat with me and the other person(s) to help us resolve our conflict.
  - e. **Restorative Justice** – Someone was harmed and a conference was held to try to repair that harm and to hold the person who caused the harm accountable for their actions.

3. Which of the following best describes the type of conflict you had that led to your working with the community mediation center. (Please circle)

Parking      Property      Pets      Noise      Family      Youth      Housing      Contract

Other \_\_\_\_\_ (Please write in the other type of conflict.)

4. Please put an "X" next to the status of the conflict.

- \_\_\_\_\_ The conflict was resolved, and I do not foresee any future problems
- \_\_\_\_\_ The conflict was somewhat resolved
- \_\_\_\_\_ The conflict was neither resolved nor unresolved
- \_\_\_\_\_ The conflict was somewhat unresolved
- \_\_\_\_\_ The conflict was unresolved, and I foresee future problems

5. Was this the first time you've used a conflict resolution service from your community mediation center? (Please circle)

Yes                      No

6. Please rate your level of satisfaction with the center services you received. (Please place an "X" next to your response)

- \_\_\_\_\_ Very satisfied
- \_\_\_\_\_ Somewhat satisfied
- \_\_\_\_\_ Neither satisfied nor dissatisfied
- \_\_\_\_\_ Somewhat dissatisfied
- \_\_\_\_\_ Dissatisfied

7. Please rate if the services helped you resolve your conflict. (Please place an "X" next to your response)

- \_\_\_\_\_ My conflict was resolved with the center's help, and I do not foresee any future issues
- \_\_\_\_\_ My conflict was somewhat resolved with the center's help
- \_\_\_\_\_ My conflict was neither resolved nor unresolved with the center's help
- \_\_\_\_\_ My conflict was somewhat unresolved with the center's help
- \_\_\_\_\_ My conflict was unresolved with the center's help, and I foresee future issues.

8. Do you think the situation could have become violent without the intervention of the community mediation center? (Please circle)

Yes                      No

9. Do you think the situation could still become violent? (Please circle)                      Yes                      No

*If you feel the issue is unresolved and may turn violent, please reach out to the center that provided you services for a follow-up discussion. If you are in immediate danger, call 911.*

10. Consider the conflict for which you received center services. If you were in a similar situation in the future, how would you handle it? Would you: (Please circle)

Call the police              Seek center services              Other \_\_\_\_\_ (Please describe)

**The following questions are for comparative purposes only. Your answers will remain confidential and you will remain anonymous.**

11. Please circle the responses below that describe you.

**Age:**    under 18    18 - 25    26 – 35    36 – 45    46 – 55    56 – 65    over 65

**Race:**    Asian    Black    Hispanic    White    Other    Don't know

**Sex:**    Female                      Male                      Other \_\_\_\_\_

**Marital Status:**    Married or partnered                      Not married or partnered

12. Do you have any children living with you? Please circle                      **Yes**                      **No**

13. Please briefly share on the back of this form any recommendations as to how we could improve this project.

**Thank you for participating in the project and completing the survey. If you are interested in learning more about conflict resolution, and potentially being trained to help other community members resolve conflicts, please contact your community mediation center.**

*This project is supported by Grant No. 14142965 awarded by the Bureau of Justice Assistance. The Bureau of Justice Assistance is a component of the Department of Justice's Office of Justice Programs, which also includes the Bureau of Justice Statistics, the National Institute of Justice, the Office of Juvenile Justice and Delinquency Prevention, the Office for Victims of Crime and the SMART Office. Points of view or opinions in this document are those of the author and do not necessarily represent the official position or policies of the U.S. Department of Justice.*

*Partners include Virginia Tech's Center for Peace Studies and Violence Prevention and participating law enforcement agencies.*

*The project is an equal opportunity project. For complaints related to equal opportunity, please contact Resolution Virginia Executive Director Christine Poulson at [info@resolutionvirginia.org](mailto:info@resolutionvirginia.org) or Board President Arleen Borysiewicz at [director@nvms.us](mailto:director@nvms.us).*