

## Division on Civil Rights Mediation Effectiveness Survey

**FOR PUBLIC  
RELEASE**

### 1) What was your role here today? (Please circle one)

Complainant

Complainant's  
Attorney

Respondent

Respondent's  
Attorney

### 2) How did you hear of mediation as a method of case resolution?

- An employee of the NJ Division on Civil Rights told me about it at intake.
  - I read about it when I was served with a complaint.
  - I read about it online on the NJ Division on Civil Rights Web site.
  - My attorney mentioned it.
  - One of the other participants suggested it and I agreed.
  - Other. Please specify: \_\_\_\_\_
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### 3) What factors contributed to your choosing to participate in mediation? (Please rank in order of importance the top three factors, with one being the MOST important.

- \_\_\_ Attorney recommended to do so
  - \_\_\_ Voluntary participation of all parties
  - \_\_\_ Previous experience in a mediation at Division on Civil Rights
  - \_\_\_ Previous experience in a mediation elsewhere
  - \_\_\_ Use of trained and experienced mediators
  - \_\_\_ Complete confidentiality
  - \_\_\_ Disputants control the outcome
  - \_\_\_ High probability of settlement
  - \_\_\_ Reduction in litigation and other expenses
  - \_\_\_ Fast service
  - \_\_\_ Other. Please specify: \_\_\_\_\_
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**4) Have you participated in our mediation program before?**

- Yes
- No

**5) Were you pleased with the effectiveness of mediation as a way of finding a resolution? Please explain why you were or were not satisfied.**

- Yes, because \_\_\_\_\_  
\_\_\_\_\_
- No, because \_\_\_\_\_  
\_\_\_\_\_

**6) Would you say that the following apply to your mediator? Was he or she:****a) Trustworthy**

- Yes
- No
- Don't know

**b) Fair**

- Yes
- No
- Don't know

**c) A good listener**

- Yes
- No
- Don't know

**d) Able to explain things clearly**

- Yes
- No
- Don't know

**FOR PUBLIC  
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- Yes
- No
- Don't know

**7) Were you pleased with the overall outcome today? If the answer is "no," please explain what occurred to your dissatisfaction.**

- Yes
  - No, because \_\_\_\_\_
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**8) Would you use this method of resolution again if the need arises?**

- Yes
- No

**9) How would you rate our facilities for the following:**

**a) Accessible for the disabled:**

- Excellent
- Good
- Poor
- Inferior

**b) Ability to speak privately with my attorney/client or the mediator:**

- Excellent
- Good
- Poor
- Inferior

**c) Comfort (of sitting area, temperature, etc.):**

- Excellent
- Good
- Poor
- Inferior

**d) Accommodations (vending machines, helpfulness of staff, etc.)**

- Excellent
- Good
- Poor
- Inferior



**10) Please rate our mediation program overall.**

- Excellent
- Good
- Poor
- Inferior

**11) Would you recommend our mediation program to others?**

- Yes
- No

**12) What changes would you recommend in order to improve this method of dispute resolution?**

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**13) What changes would you recommend in order to improve our facilities?**

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