



### Mediation Feedback Form

It is important that we evaluate the mediation that you have taken part in to ensure that our mediators are providing the best service possible.

#### **ALL RESPONSES TREATED IN CONFIDENCE**

**Your Name:**

**Mediator's Name:**

**Date of Mediation:**

**Please answer the following questions by ticking the box that most accurately reflects how you feel.**

- 1) Were the initial arrangements for the mediation satisfactory? Were you given some guidance about preparing for the mediation?

Yes	<input type="checkbox"/>	briefly	<input type="checkbox"/>	Not at all	<input type="checkbox"/>	Unsure	<input type="checkbox"/>		<input type="checkbox"/>
Further Comments:									

2) Did the mediator adequately explain the mediation procedure at the initial joint meeting or privately

Strongly Agree		Agree		Unsure		Disagree		Strongly Disagree	
Further Comments:									

3) The mediation information given to me by the mediator was clear and easy to understand

Strongly Agree		Agree		Unsure		Disagree		Strongly Disagree	
Further Comments:									

4) The mediator was fair and impartial?

He / she was a good listener developing good rapport with you/the client?

His / her interventions were helpful?

Strongly Agree		Agree		Unsure		Disagree		Strongly Disagree	
Further Comments:									

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5) I felt comfortable that confidentiality was respected at all times

Strongly Agree	<input type="checkbox"/>	Agree	<input type="checkbox"/>	Unsure	<input type="checkbox"/>	Disagree	<input type="checkbox"/>	Strongly Disagree	<input type="checkbox"/>
Further Comments:									

6) The mediator...(please tick any of the boxes that you agree with, and /or provide feedback below)

Was impartial	<input type="checkbox"/>	Made me feel relaxed and comfortable	<input type="checkbox"/>	Helped us to identify and consider a number of constructive options	<input type="checkbox"/>	Listened to us carefully	<input type="checkbox"/>	Remained calm and professional	<input type="checkbox"/>
Further Comments:									

7) Following mediation my understanding of the other person has improved

Strongly Agree		Agree		Unsure		Disagree		Strongly Disagree	
Further Comments:									

8) I feel I was given enough support to express my views

Strongly Agree		Agree		Unsure		Disagree		Strongly Disagree	
Further Comments:									

9) From my point of view, the situation has improved following mediation

Strongly Agree		Agree		Unsure		Disagree		Strongly Disagree	
Further Comments:									

10) I feel more able to deal with any differences that might arise in future with the same or a different party

Strongly Agree		Agree		Unsure		Disagree		Strongly Disagree	
Further Comments:									

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11) I would recommend the mediation service to a colleague

Agree		Disagree	
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12) What would have improved the mediation service / experience for you?

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13) Overall, I would rate the mediation service as effective

Strongly Agree		Agree		Unsure		Disagree		Strongly Disagree	
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Further Comments:

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14) Any additional comments you would like to make:

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Thank you for taking the time to complete this form. Please send this form to  
**MTI East Africa offices at Agip house 4<sup>th</sup> floor suite 417 or email it to**

[info@mtieastafrica.org](mailto:info@mtieastafrica.org) . or send by post to P.O Box 42199-00100 Nairobi.  
Everything will be treated in confidence.