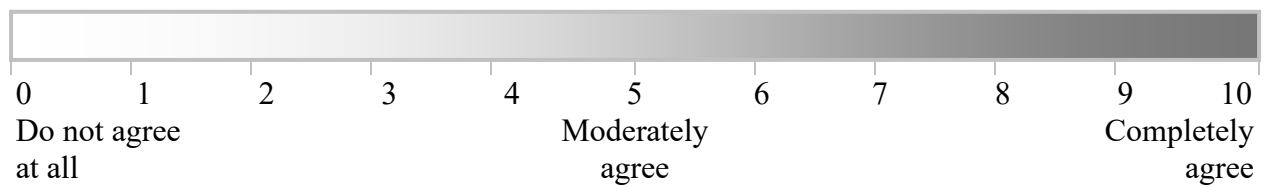


# National Center for Environmental Conflict Resolution Facilitated Process Evaluation - Participant Questionnaire

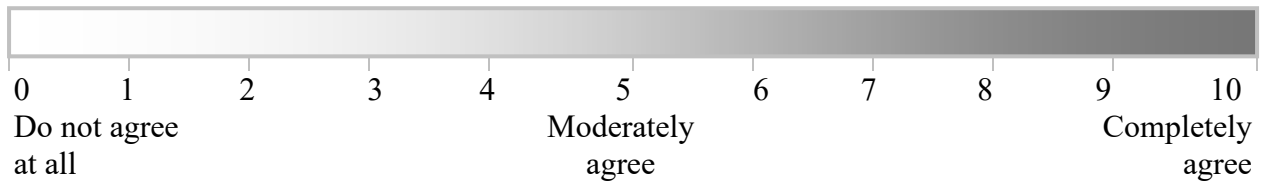
The John S. McCain III National Center for Environmental Conflict Resolution (National Center) evaluates all of its services. As a part of this evaluation, we ask the various participants who have been involved in this project to provide us with information about their experience. Your responses will be used to improve our programs and services. The average estimated reporting burden for this questionnaire is 12 minutes. This estimate includes time for reviewing the instructions, gathering the data needed, and completing and reviewing the questionnaire. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the National Center. Please note your responses to this questionnaire are confidential. The identity of individual respondents is not recorded. Moreover, the National Center will not report information from this evaluation in a way that respondents or their organizations can be identified.



Using the scale above, please rate the following about the participants and resources:

*Rating*

_____	a. The participants, as a group, represented all affected concerns.
_____	b. The participants continued to be engaged so long as their involvement was necessary.
_____	c. The participants had sufficient authority to make commitments on behalf of their organizations.
_____	d. I had the resources (e.g., time, money) needed to participate effectively in the process.
_____	e. I had sufficient access to relevant information I needed in order to participate effectively in this collaborative process.
_____	f. Relevant information was effectively integrated into the process (e.g., a project web site was used to share information, spatial analysis and decision support tools were used).



- 1. Using the scale above, please rate the following for each facilitator involved in this process:**  
 Please identify each facilitator by placing their initials in the space provided, and then rate each statement for each facilitator. Please use the margins to rate additional facilitators if needed.

<i>Initials</i> of Facilitator(s)			Facilitator Skills and Practices
1. ____	2. ____	3. ____	
<i>Ratings</i>			
____	____	____	a. The facilitator kept us on track and helped us find ways to move forward constructively.
____	____	____	b. The facilitator dealt with all participants in a fair and unbiased manner, and made sure that no one dominated the process.
____	____	____	c. The facilitator helped us manage technical discussions efficiently.
____	____	____	d. The facilitator helped the participants test the practicality of the options under discussion.
____	____	____	e. The facilitator was helpful in documenting our work.

- 2. Using the scale above, please rate the following statements about the process:**

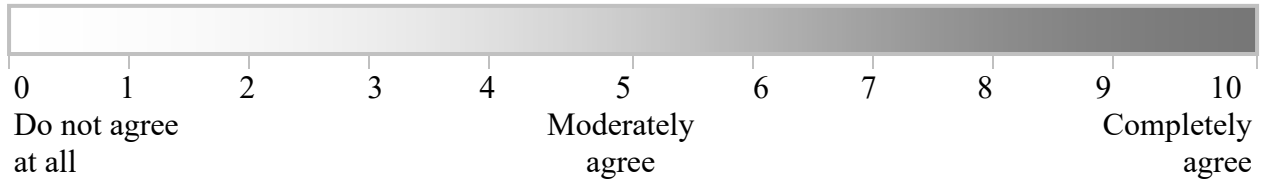
*Rating*

____	a. The process helped you gain a better understanding of the other participants' views and perspectives.
____	b. The process helped you identify and focus on the key issues that had to be addressed.
____	c. The process helped the participants, as a group, to explore options or resolutions that meet the common needs of all participants.

**3. Please indicate the extent to which progress was made:**

*Check only one*

<input type="checkbox"/>	Progress made on <u>all</u> key issues	<i>Use the space below if you would like to elaborate on your response:</i>
<input type="checkbox"/>	Progress made on <u>most</u> key issues	
<input type="checkbox"/>	Progress made on <u>some</u> key issues	
<input type="checkbox"/>	We ended the process <u>without making</u> much progress at all.	



**4. Using the scale above, please rate the extent to which the participants were able to work together cooperatively when the process began and as a result of the process.**

	<u>Before the process began</u>	<u>As a result of the process</u>
	<i>Rating</i>	<i>Rating</i>
The participants were able to work together cooperatively.	_____	_____

**5. Using the scale above, please rate the following:**

*Rating*

_____	I would recommend this type of process to colleagues in a similar situation.
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**6. What is your top suggestion on how this collaborative process could have been improved?**

PLEASE WRITE "NONE" IF YOU FEEL THIS PROCESS COULD NOT HAVE BEEN IMPROVED.

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**7. From your perspective, what will be the effect of the progress made (e.g., impacts or benefits)?**

PLEASE RANK THE MOST IMPORTANT EFFECTS (E.G., 1<sup>ST</sup> MOST IMPORTANT, 2<sup>ND</sup> MOST IMPORTANT).

PLEASE ALSO BRIEFLY DESCRIBE THE EFFECTS.

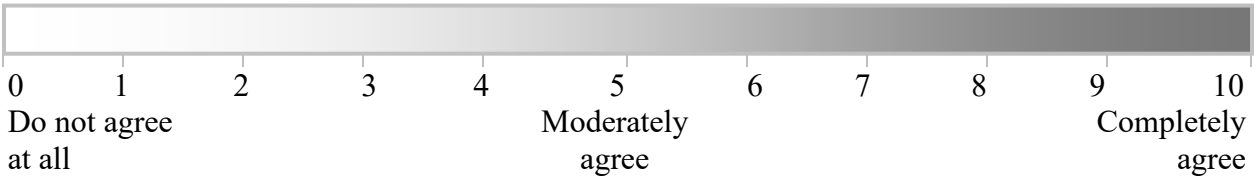
Rank all that apply	<i>Briefly describe the effects of the progress made:</i>	
<input type="checkbox"/>	Natural resources and environmental conditions	
<input type="checkbox"/>	Historic and cultural resources	
<input type="checkbox"/>	Community and social conditions	
<input type="checkbox"/>	Economic conditions	
<input type="checkbox"/>	Recreational uses	
<input type="checkbox"/>	Other	

**8. If an assisted collaborative process had not been used, what would have been the most likely approach for the issues to be addressed or resolved?**

<i>Check only one</i>	
<input type="checkbox"/>	a. Unassisted negotiation
<input type="checkbox"/>	b. Judicial settlement conference
<input type="checkbox"/>	c. Litigation
<input type="checkbox"/>	d. Lobbying or working to achieve legislative action
<input type="checkbox"/>	e. Rulemaking
<input type="checkbox"/>	f. Arbitration
<input type="checkbox"/>	g. Administrative proceeding (e.g., agency appeals process, agency order)
<input type="checkbox"/>	h. Wait for a better time to take action.
<input type="checkbox"/>	i. Don't know
<input type="checkbox"/>	j. Other (PLEASE SPECIFY) _____

**9. Overall, what did this collaborative process accomplish?**

Check the Most Important	Check the Second Most Important	
<input type="checkbox"/>	<input type="checkbox"/>	a. A potentially costly or divisive dispute was likely avoided.
<input type="checkbox"/>	<input type="checkbox"/>	b. An impasse (stalemate) was broken.
<input type="checkbox"/>	<input type="checkbox"/>	c. A crisis was likely averted.
<input type="checkbox"/>	<input type="checkbox"/>	d. Conflict didn't escalate.
<input type="checkbox"/>	<input type="checkbox"/>	e. Costly or protracted litigation was likely avoided.
<input type="checkbox"/>	<input type="checkbox"/>	f. Relationships among parties in this process were improved.
<input type="checkbox"/>	<input type="checkbox"/>	g. The process resulted in timely decisions and outcomes.
<input type="checkbox"/>	<input type="checkbox"/>	h. Nothing was accomplished.
<input type="checkbox"/>	<input type="checkbox"/>	i. The process made the issues or dispute worse.



**10. Using the scale above, please rate the following final questions:**

*Rating*

—	a. On reflection, this was the right facilitator(s) to guide this process.
—	b. I was involved in selecting the facilitator(s).

**11. Which category best describes the interest or organization you represented in this process?**

CHECK THE MOST APPROPRIATE BOX ONLY.

<input type="checkbox"/>	a. Federal Government
<input type="checkbox"/>	b. State Government
<input type="checkbox"/>	c. Local/County/Regional Government
<input type="checkbox"/>	d. Tribal Government
<input type="checkbox"/>	e. Environmental/Conservation
<input type="checkbox"/>	f. Recreational
<input type="checkbox"/>	g. Industrial/Resource Extraction
<input type="checkbox"/>	h. Business/Commercial
<input type="checkbox"/>	i. Community or Private Citizen (e.g., neighborhood association, local resident)
<input type="checkbox"/>	j. Special Advocacy Interests (Please specify): _____
<input type="checkbox"/>	k. Other (Please specify): _____

**12. Please use the space below for any additional comments you would like to make.**

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**THANK YOU FOR TAKING THE TIME TO COMPLETE THIS  
QUESTIONNAIRE.**

PERSONS WITH DISABILITIES WHO REQUIRE ALTERNATIVE MEANS FOR  
COMMUNICATION OF PROGRAM EVALUATION INFORMATION SHOULD CONTACT  
THE NATIONAL CENTER AT (520) 901-8544.