

**Summary of School-based  
Youth Suicide Prevention Campaign Activities**  
2006-2007

Name of school \_\_\_\_\_ City \_\_\_\_\_

Size of student population \_\_\_\_ Faculty advisor/teacher \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

# of students on team \_\_\_\_ Name of class or student group that implemented the campaign \_\_\_\_\_

#of students impacted by campaign \_\_\_\_\_

**Summary of Activities**

**Priority #1:**

- # of classroom presentations given \_\_\_\_\_
- How effective were the presentation teams in terms of getting the suicide prevention messages across to the students? \_\_\_\_\_  
(1=not at all effective to 5=very effective)
- How responsive was the audience? \_\_\_\_\_  
(1=not at all to 5=engaged & actively participating)
- Did the teacher stay in the classroom during the presentation? \_\_\_\_yes \_\_\_\_ no
- Would you do anything differently the next time? If yes, explain \_\_\_\_\_  
\_\_\_\_\_

**Priority #2:** List each activity you completed and its effectiveness in getting the suicide prevention messages to the student body, faculty and/or parents. (1= not at all effective to 5 = very effective)

1. *Sample: We had an informational booth during lunch and handed out brochures: 3*

2.

3.

4.

**Campaign Materials:** If you used posters, t-shirts, key chains, etc. to enhance your suicide prevention campaign, list the item(s) here.

1. *Sample: We ordered enough posters to put into every classroom in the school:*
- 2.
- 3.
- 4.

**Community Involvement:**

Did your campaign utilize community “experts” other than YSPP? [i.e., suicide intervention trainer, suicide survivor]    \_\_\_\_ yes \_\_\_\_ no

Did your campaign receive local media attention?    \_\_\_\_ yes \_\_\_\_ no

**Evaluation:**

Did you think your school campaign was successful? \_\_\_\_ yes \_\_\_\_ no

Please describe 1 or 2 examples of things you have seen or heard that indicates to you that your activities have been effective: \_\_\_\_\_

\_\_\_\_\_

**Future Plans:** Would you do another suicide prevention campaign? \_\_\_\_ yes \_\_\_\_ no

What are some of the necessary factors – at this point – that would sustain your school’s continued participation in a suicide prevention effort? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Complete by May 31<sup>st</sup> and return to YSPP  
444 NE Ravenna Blvd., Suite 401  
Seattle, WA 98115  
Or FAX to 206 297-0818