

CAMPAIGN DEVELOPMENT SUMMARY

FREE MIND

YOUTH CAMPAIGN



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CAMPAIGN OVERVIEW

The Centers for Disease Control and Prevention (CDC) has developed the *Free Mind* campaign to help prevent substance use and overdose among youth ages 12–17. The campaign addresses the connection that substance use has with mental health.

This summary provides information on the creation of CDC's *Free Mind* campaign. For additional information and updates on the current campaign, visit the campaign website at cdc.gov/freemind.

Background

The drug overdose crisis is constantly evolving and remains an important public health issue across the country.¹ In 2023, more than 105,000 Americans died from a drug overdose.¹

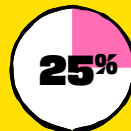
From 2019 to 2021, among deaths in youth ages 10–19:



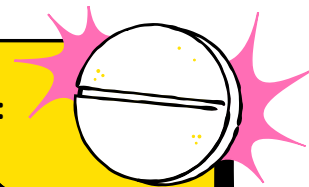
Approximately 90% involved opioids



84% involved illegally manufactured fentanyl



Counterfeit pills were present in nearly 25% of deaths among 35 jurisdictions that reported to CDC's State Unintentional Drug Overdose Reporting System (SUDORS) in 2022.²



The 2023 National Survey on Drug Use and Health (NSDUH) found that 10% of high school students reported ever using an “illicit drug” (defined as “cocaine, inhalants, heroin, methamphetamines, hallucinogens, or ecstasy”).³

Recent research shows that substance use and mental health can go hand in hand. Teens may use alcohol and other substances to help them cope with mental health challenges like stress, anxiety, and depression. Using substances can also affect teen mental health and contribute to the development of some mental health conditions.^{4,5}

The number of teens reporting poor mental health has increased over the past decade.³ In 2023, 40% of high school students stopped regular activities because of persistent feelings of sadness or hopelessness.³

Research conducted in 2023 found that, among high school students, in the last 30 days:



29%

reported experiencing poor mental health³



22%

drank alcohol³



17%

used marijuana³



4%

misused prescription opioids (defined as “prescription pain pills”).⁶

Citations:

- 1 Garnett MF, Miniño AM. Drug overdose deaths in the United States, 2003–2023. NCHS Data Brief, no 522. Hyattsville, MD: National Center for Health Statistics. 2024. DOI: <https://dx.doi.org/10.15620/cdc/170565>.
- 2 Tanz LJ, Dinwiddie AT, Mattson CL, O'Donnell J, Davis NL. Drug overdose deaths among persons aged 10–19 Years — United States, July 2019–December 2021. MMWR Morb Mortal Wkly Rep 2022;71:1576–1582. DOI: <http://dx.doi.org/10.15585/mmwr.mm7150a2>.
- 3 Centers for Disease Control and Prevention. Youth risk behavior survey data summary & trends report: 2013–2023. U.S. Department of Health and Human Services; 2024.
- 4 Substance Abuse and Mental Health Services Administration. Co-occurring disorders and other health conditions. Accessed March 11, 2025. <https://www.samhsa.gov/substance-use/treatment/co-occurring-disorders>.
- 5 Substance Abuse and Mental Health Services Administration. Mental health and substance use co-occurring disorders. Accessed March 24, 2025. <https://www.samhsa.gov/mental-health/what-is-mental-health/conditions/co-occurring-disorders>.
- 6 Substance Abuse and Mental Health Services Administration. 2023 national survey on drug use and health releases. Accessed November 21, 2024.

Campaign Goals

The goals of the Free Mind campaign are to:

Prevent drug use initiation, drug use, overdose, and related harms among youth.

Educate youth on specific risks related to drug use, substance use disorder (SUD), and overdose.

Articulate the impacts that mental and behavioral health issues have on youth as they relate to drug use, prescription drug misuse, overdose, and SUD.

Encourage youth to take responsibility for the aspects of their lives within their control and make healthy decisions.

Equip those who influence youth with tools and information to help effect positive change.

Campaign Strategies

To achieve these goals, the campaign will use the following strategies:

Conduct youth-focused environmental scans related to communication tools, resources, campaigns, and media on the topics of mental and behavioral health impacts and risk awareness and outcomes.

Develop relevant and appropriate products and messages that resonate with intended audiences.

Test campaign concepts with members of the primary audience and message maps with CDC experts and inter- and intra-agency partners.

Collaborate with youth and partners to create, assess, and distribute the campaign (e.g., ideation sessions, training, roundtables).

Disseminate the campaign on channels and formats that reach the intended audiences.

Track and monitor the campaign to ensure optimized performance, reach, and impact.

Audiences

The primary intended audience for this campaign is youth ages 12–17. With the support of market research, this audience has been further segmented to better address the differences between the two distinct groups presented below.



Novice Youth

- Limited exposure to substances
- In need of basic education



Experienced Youth

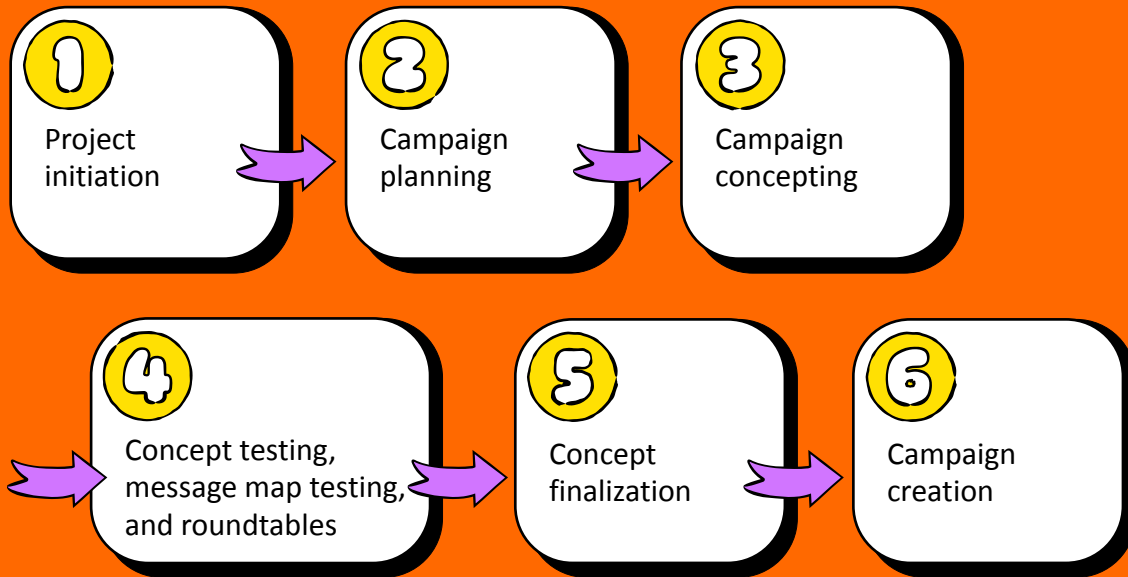
- Increased exposure to substances and substance use
- In need of prompts to change attitudes and behavior

The campaign has also identified several secondary audiences to help prevent substance use and overdose among youth. These audiences include:

- 1 Parents and caregivers of youth.
- 2 Youth-supporting adults (e.g., teachers, instructors, coaches, clinicians, guidance counselors).
- 3 Partner organizations such as:
 - a. Drug-Free Communities (DFC); and
 - b. CDC's Overdose Data to Action (OD2A).
- 4 External partners such as Community Anti-Drug Coalitions of America (CADCA).
- 5 Experts on the issues addressed in this campaign.

CAMPAIGN DEVELOPMENT

The campaign's development process follows a methodical and streamlined approach in which each step produces outputs that inform the next steps. Details for each of these steps can be found below.



Step 1: Project Initiation

To begin, CDC conducted information-gathering efforts that included:

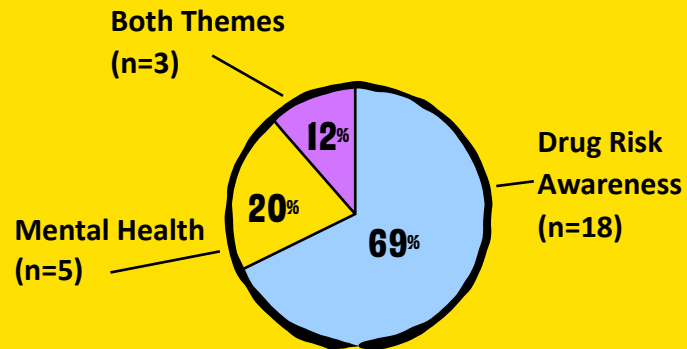
- An environmental scan;
- Strategic workshops and planning;
- A youth engagement workshop; and
- Creative discovery.

The results of these activities were used to compose the campaign's concepts and creative vision.

Environmental scan:

In October 2023, CDC identified and assessed a sample of 26 active drug overdose prevention and mental health-related campaigns with youth as a key audience. Most addressed the risk of substance use, and only three addressed both. These findings helped determine the need to address the connection between substance use and mental health in the *Free Mind* campaign.

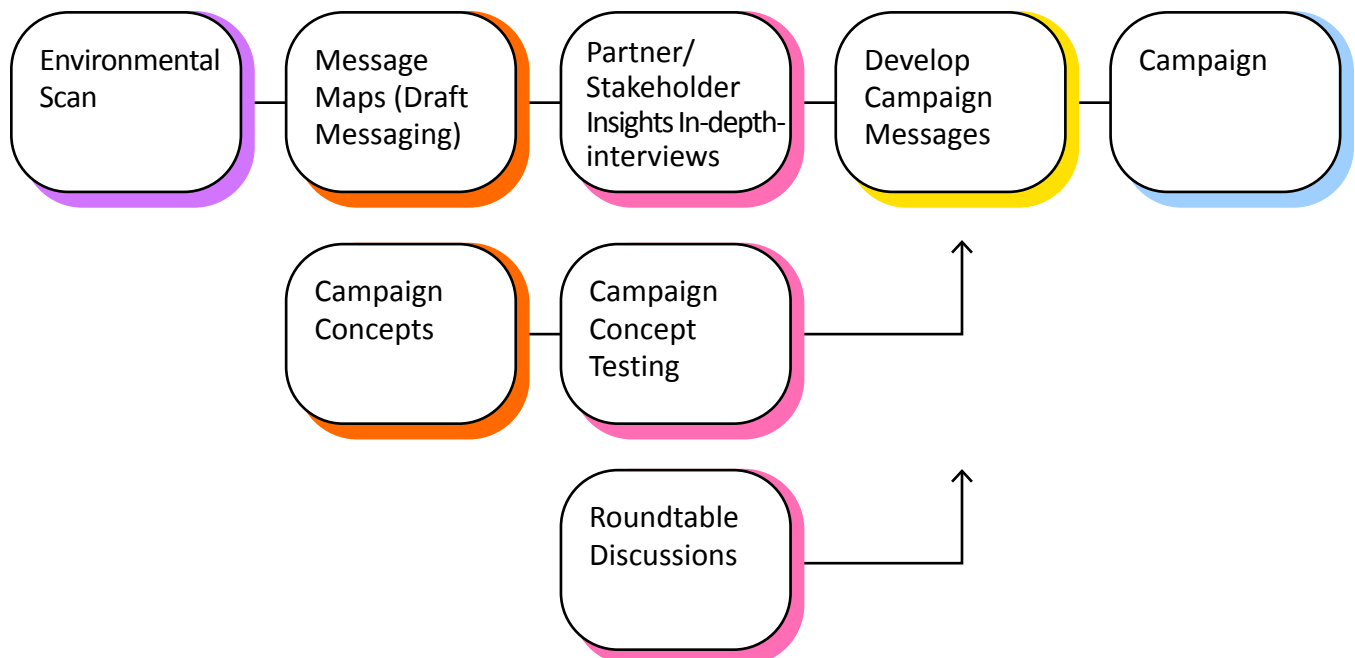
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CAMPAIGNS
IDENTIFIED



Step 2: Campaign Planning

Audience-focused research and strategic creativity served as the foundation for this youth-focused campaign. Feedback from these activities was then used to develop the campaign's strategic messaging and design its visual identity.

This flowchart illustrates the campaign road map:



Step 3: Campaign Concepting

Meeting the needs of the campaign's audiences requires striking a balance between visually distinctive and culturally relevant campaign concepts and associated products.

To this end, CDC developed and tested three proposed campaign concepts with distinct themes:



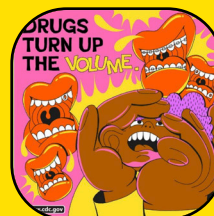
"Concept 1"

THEME: negative effects
of drugs on life



"Concept 2"

THEME: gaining skills to
live a drug-free life



"Concept 3"

THEME: substance use
and mental health

Step 4: Concept and Message Map Testing

The next step was to test the effectiveness of these concepts by conducting a national online community study to collect qualitative feedback from youth. Participants were invited to share their perceptions of each concept and their thoughts on the topics of mental health, substance use, and overdose prevention.

Of the three concepts presented, participants reported "Concept 3" (55%) as more effective than "Concept 1" (23%) and "Concept 2" (23%). **Specifically, they cited "Concept 3" as most effective for its:**

- **Relatability and modernity;**
- **Engaging design;**
- **Clarity and simplicity of its key message; and**
- **The emotional connection it evoked.**

In addition to the concept testing, in-depth interviews were conducted with key partners who work in substance use prevention, youth mental health, and/or communications with youth audiences. CDC staff, federal partners, and non-federal partners were asked to address two specific research questions:

1. What are key partners' perceptions of CDC's proposed campaign messages?
2. How can CDC's youth overdose prevention risk awareness and mental health messages be optimized to engage youth effectively?

Finally, CDC held in-person roundtables with youth and parents/caregivers in cities across four states:

Tucson, Arizona

This city was selected because of its diverse population and university town status, offering a rich variety of perspectives on drug use among young people. The city's high youth population ensures a robust sample for the roundtable, allowing for a broad range of insights. Tucson's location within Arizona, a state grappling with drug use issues, provides valuable regional context. Additionally, the presence of support systems and collaborations with local organizations and experts enhances the activities' credibility. It also opens avenues for comprehensive prevention and intervention strategies.

Arlington, Virginia

This city was selected because of its close proximity to Washington, DC, the center for policymaking and advocacy on national drug-related issues. This area has local resources, experts, and initiatives for drug prevention and intervention. It has a diverse population, including many young individuals who can participate in the outlined activities. Proximity to universities and healthcare systems makes Arlington a prime location for collaborations with drug use prevention experts. This contributes to effective prevention strategies for youth drug overdose.

St. Paul-Minneapolis, Minnesota

This city was selected because of its diverse population. This includes urban, suburban, and rural communities, each with its own drug use dynamics. Despite facing drug-related challenges, the area has an extensive network of community organizations and resources dedicated to drug prevention and treatment. This provides opportunities for collaboration and insight into addressing youth drug use.

Greensboro, North Carolina

This city was selected because of its significant youth population, providing ample opportunities to engage directly with youth. Greensboro also offers significant access to healthcare facilities, educational institutions, and community organizations. It also has resources for effective drug overdose prevention.

These roundtables were an opportunity to hear directly from the campaign's audiences on the topics of youth substance use, mental health, and the connection between the two.

Participants also shared feedback on what information or resources they would want related to these topics.

To learn more about how these roundtables were facilitated, refer to the campaign's roundtable facilitators' guide in the toolkit at cdc.gov/freemind.



Step 5: Concept Finalization

After completing the above activities, CDC used all their findings to update the most popular concept. This included naming the campaign *Free Mind* to reflect the campaign's focus on the connection between youth substance use and mental health. In addition, messages were aligned to message maps following the Health Belief Model. Learn more about the Health Belief Model as a theoretical framework here: <https://www.ncbi.nlm.nih.gov/books/NBK606120/>

Step 6: Campaign Creation

Now equipped with a concept and a name, CDC began creating the *Free Mind* campaign and readying it for launch. This included finalizing messaging, content, and materials, identifying effective tactics, and planning campaign activities.

Creative Vision: Create campaign concepts and associated products that strike a balance between being visually distinctive and culturally relevant. The intended audience is eclectic, so communications must grab their attention and leave a lasting impression. Ultimately, a campaign that is unique, informational, and actionable will resonate with youth. The goal is to make youth feel connected, strong, empowered, seen, and heard.



DISSEMINATION AND LAUNCH

The ***Free Mind*** campaign includes products for three distinct audiences:

- 1 Youth (primary)
- 2 Parents and caregivers (secondary)
- 3 Partners (secondary)

Below is a list of the materials. Although some are already available, others will be developed on a rolling basis as the campaign continues.

To find the latest materials, visit the campaign toolkit at: cdc.gov/freemind.



Youth Audience

Social media and digital assets:

- Static and animated social media ads
- Paid and organic social media (e.g., posts, stories, filters)
- Hashtags

Ads for streaming audio

Videos

Out of home:

- Posters
- Billboards

Educational materials:

- Fact sheet
- Conversation starters
- Learning experiences

Website



Parents and Caregivers Audience

Social media and digital assets:

- Paid and organic social media (e.g., posts, stories, filters)
- Social media ads

Public service announcement (PSA) script/talking points

Educational materials:

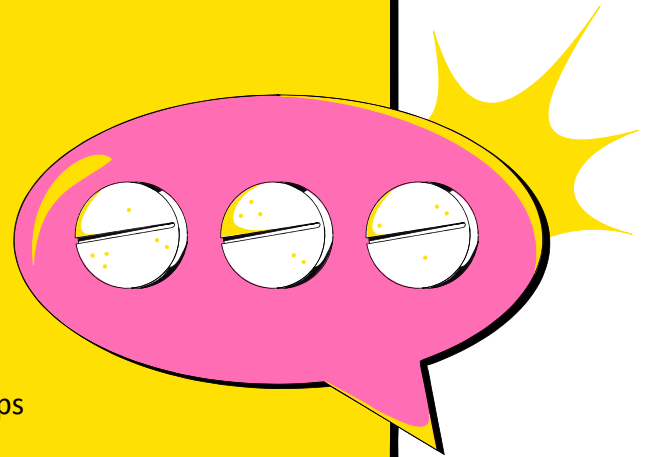
- Fact sheet
- Conversation starters
- Learning experiences
- Web content



Partners Audience

Campaign resources:

- Campaign development summary (this document)
- Press release
- Launch webinar/presentation
- Roundtable facilitator guide
- Implementation toolkit:
 - PSA scripts
 - Social media toolkit
 - Downloadable, audience-centric assets
 - Customizable messages from the message maps



Planned campaign activities across primary and secondary audiences include:

- Paid media, earned media, social media, outreach, and shared tactics with partners;
- Engaging website and materials; and
- Learning experiences.

Campaign Monitoring and Optimization

To measure the success of a campaign, it's important to define what success means and use indicators to track progress. Broad success indicators for this campaign include:



Achieving campaign goals

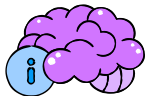
How well we achieve the predefined prevention, education, and awareness goals, and encourage youth behavior change. This can be measured through ongoing (i.e., weekly and monthly) evaluation via social listening and media monitoring. It can also be measured through a more robust program evaluation.



Campaign visibility and recognition

Enhanced visibility and recognition through robust digital tactics and positive feedback. This can include:

- **Engagement and amplification of the campaign through:**
 - Media coverage via articles and releases.
- **Observance-specific promotion.**
- **Exhibits and presentations at conferences and events.**



Increased engagement

Increased engagement with primary and secondary audiences through:

- **Likes, shares, comments;**
- **Event participation; and**
- **Other interactions.**



Strong campaign performance

Compare campaign dissemination efforts to government and platform benchmarks to make sure expectations are met.

NEXT STEPS

For more information and to get involved in the *Free Mind* campaign, visit the campaign website at www.cdc.gov/freemind.

Additional general resources for overdose prevention education can also be found at: [CDC's Overdose Prevention Education and Learning Hub](#).

