

# Data Interpretation of State Surveillance Systems/ Veterans Data:

The Role of Public Health Surveillance in Tobacco and Cannabis Monitoring and Program Development

Nikardi Hynes, MPH

October 23, 2025

#### Mission and Vision

#### **Mission**

The mission of the Prevention and Health Promotion Administration is to protect, promote and improve the health and well-being of all Marylanders.

#### **Vision**

The Prevention and Health Promotion Administration envisions a future in which all Marylanders have equitable opportunities to live, thrive, and be healthy.



### Public Health Surveillance Awareness

- Who thinks public health surveillance is mainly about tracking diseases?
- Who thinks it also includes monitoring health behaviors, like tobacco use?
- Has your work ever used public health surveillance data—for example, from surveys, reports, or dashboards?
- Have you ever seen a campaign, program, or policy that seemed to be based on public health data?





#### **Presentation Overview**

- O1. OVERVIEW OF PUBLIC HEALTH SURVEILLANCE
- 02. KEY FINDINGS #1: MARYLAND BRFSS
- 03. KEY FINDINGS #2: MARYLAND YRBS/YTS
- 04. KEY FINDINGS #3: VETERANS ETHNOGRAPHY STUDY
- 05. DATA USE, FINAL THOUGHTS, AND RESOURCES



### Overview of State Surveillance Systems



### What is Public Health Surveillance?

Public health surveillance is the ongoing collection, analysis, and interpretation of health data. It plays a critical role in guiding planning, action, and evaluation within public health. The information gathered is shared quickly with those who need it to make timely and effective decisions.

- Person: age, sex, race/ethnicity, other characteristics
- Place: where events occur
- Time: when events occur (days, months, years)

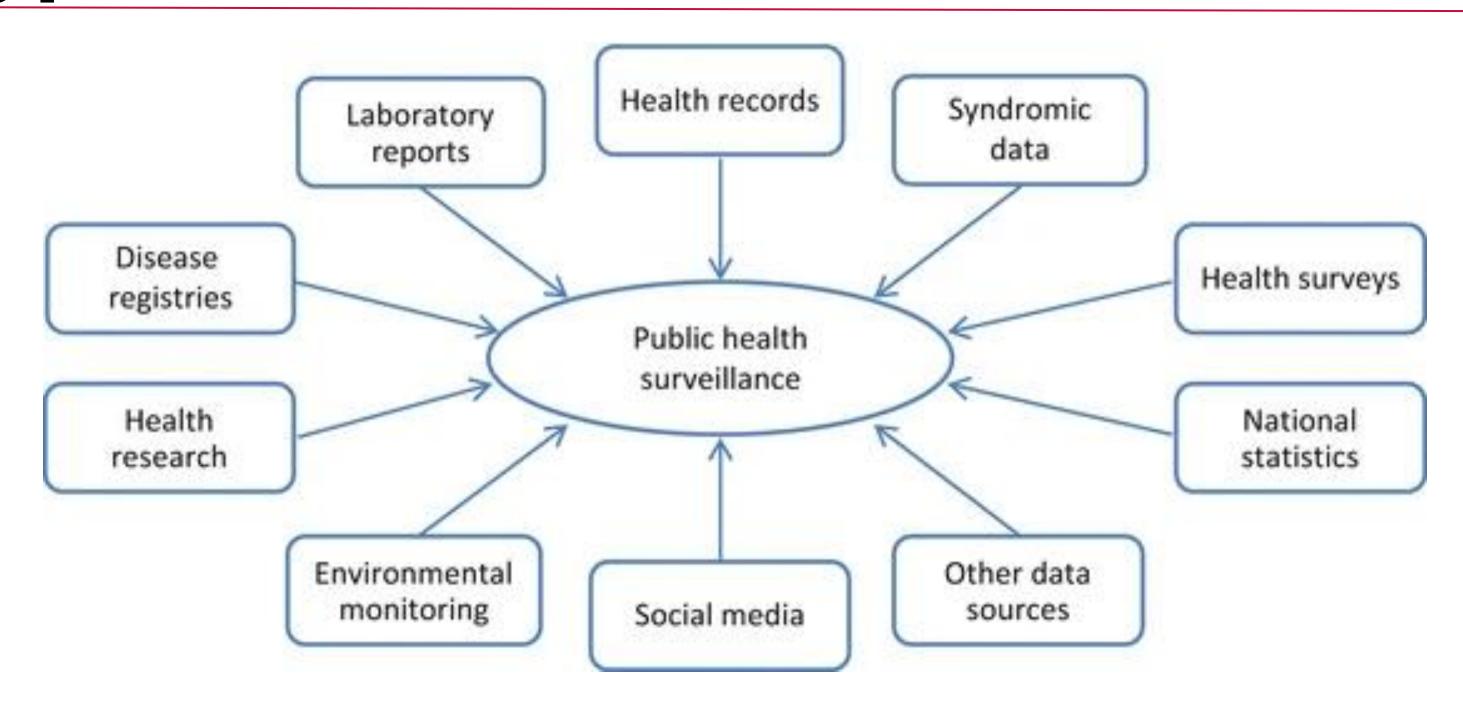


### Why Conduct Public Health Surveillance?

- Track trends in health behaviors and practices
- Measure the scope of health problems
- Detect outbreaks and emerging health issues
- Understand how diseases and other poor health factors develop and progress
- Identify and address disparities geographically and by subpopulations
- Provide data to guide research
- Support efforts to advance health equity



### Types of Public Health Surveillance



#### Conceptual framework for public health surveillance

Gilbert, R., Cliffe, S.J. (2016). Public Health Surveillance. In: Regmi, K., Gee, I. (eds) Public Health Intelligence. Springer, Cham. https://doi.org/10.1007/978-3-319-28326-5\_5



### **Tobacco Surveillance at CTPC**

Surveys

Health Records

Other Data
Sources

Behavioral Risk Factor Surveillance System Adults 18+

**National Surveys** NYTS, NHIS, NSDUH **Birth Certificate** 

Smoking among pregnant persons

**Cancer Registries** 

Lung/Bronchus Cancer Incidence and Mortality

**Other Studies** 

Veteran's Ethnography Study

Youth Risk Behavior
Survey/
Youth Tobacco Survey

 $M \subseteq X \mapsto \subseteq$ 

Cannabis discharge data

**Medical Records** 



# Key findings:

Statewide Behavioral Risk Factor Surveillance System (BRFSS)



### **About the BRFSS**



Purpose: Annual survey on adult behaviors and chronic conditions



Method: Household & cellphone interviews



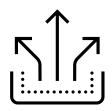
Population: Adults 18+ (non-institutionalized)



Sample Size: ~15,000 participants/year



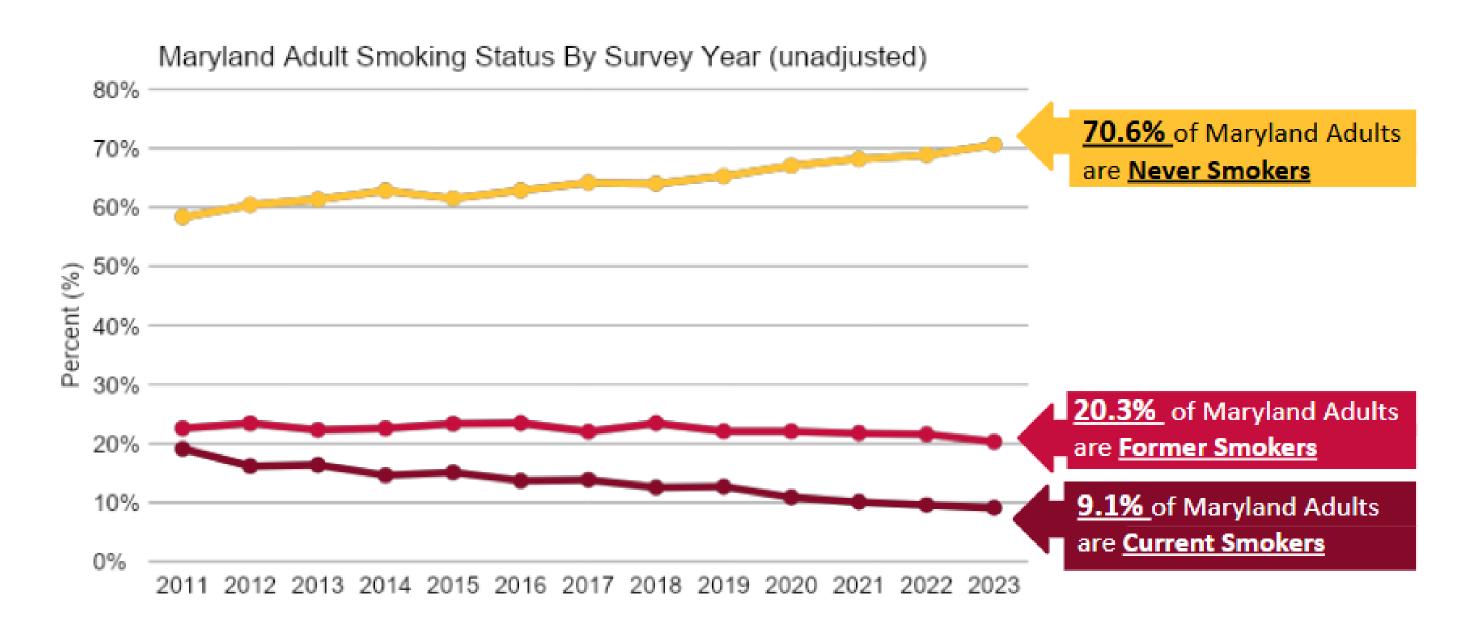
Content: Core + state-added modules



Outputs: Data on chronic conditions, risk factors, and preventive service use

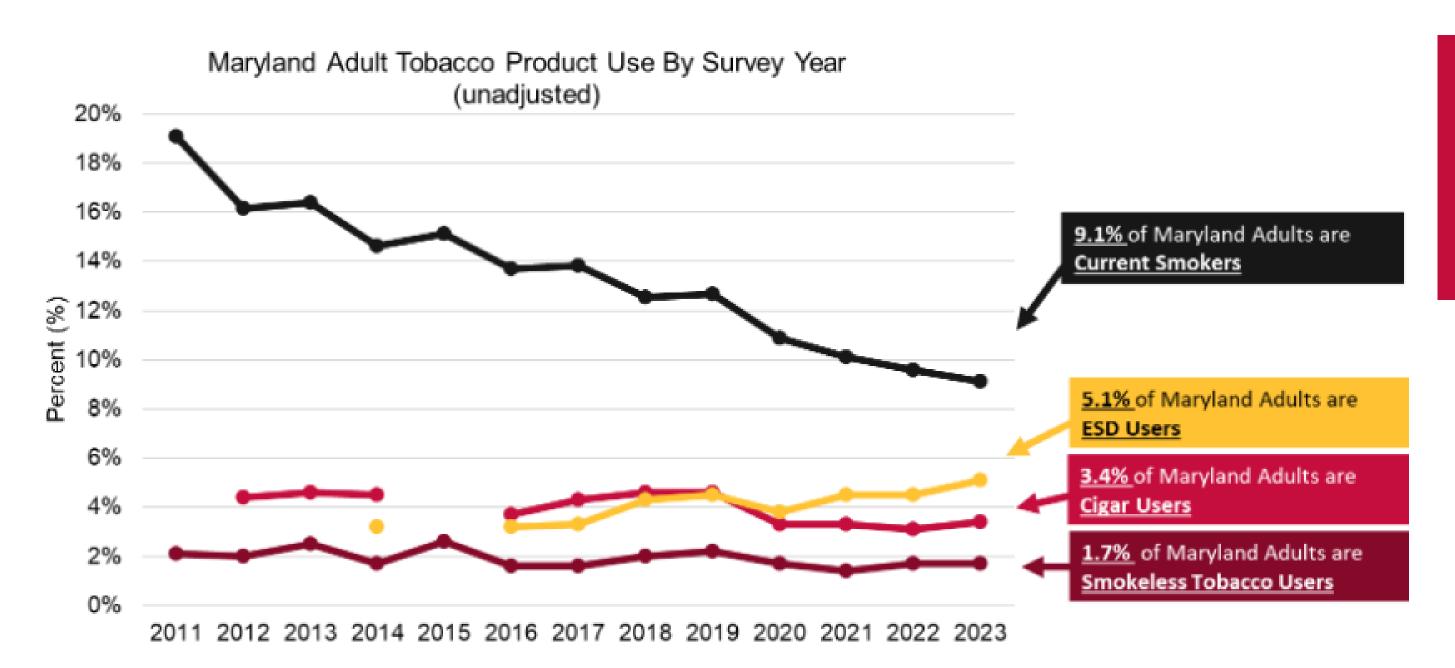


# **Smoking Status Trends**





#### **Tobacco Product Use Trends**

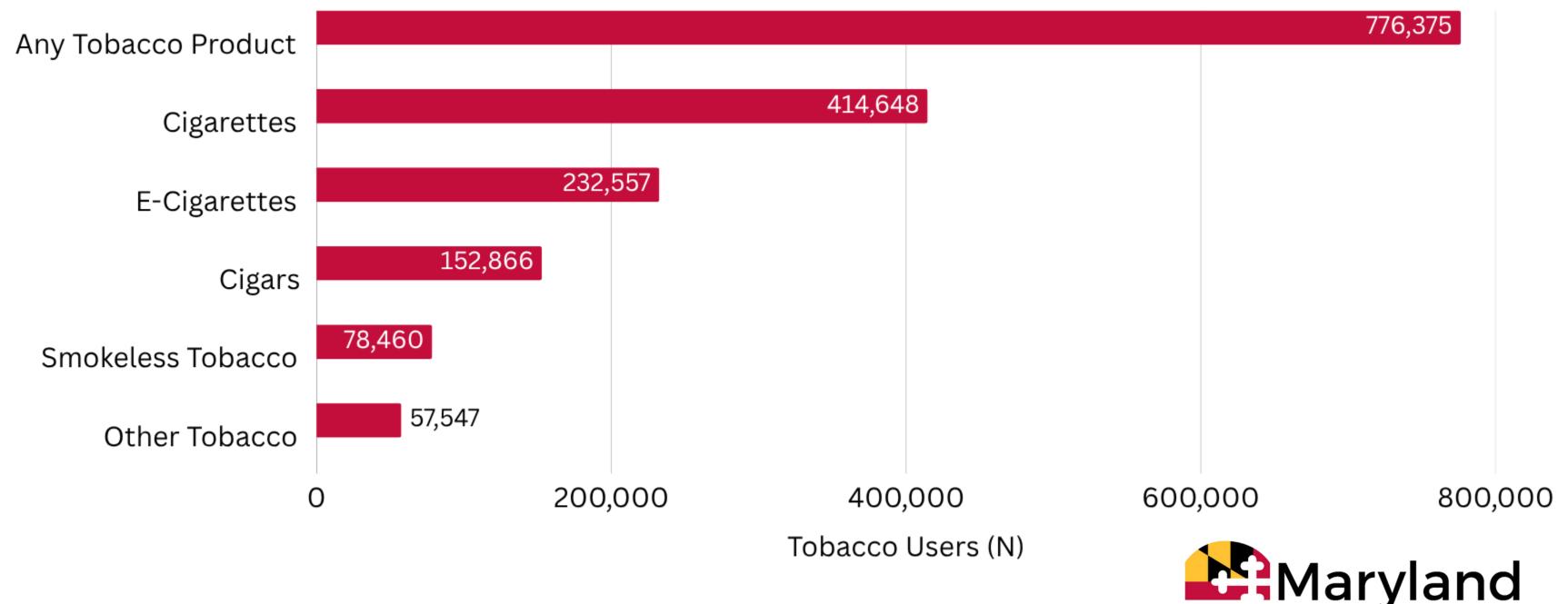


Sneak Peak: 2024 Data!

- Cigarette Users: 7.8%
- ESD Users: 5.1%
- Cigar Users: 3.9%
- Smokeless Users: 1.6%



# Number of Maryland Adults Who Currently Use a Tobacco Product



Source: 2023 Maryland

DEPARTMENT OF HEALTH

BRFSS

### Maryland Adult Tobacco Disparities



Disability: 1.8X More Likely



High school vs. College Grad:
3X More Likely



Diagnosed Depressive
Disorder:
1.7X More Likely



>\$25,000 vs. \$100,000: 2.2X More Likely



Rural vs. Large Metro: 1.3X More Likely



LGBTQ+:
1.4X More
Likely

TO CURRENTLY USE TOBACCO PRODUCTS

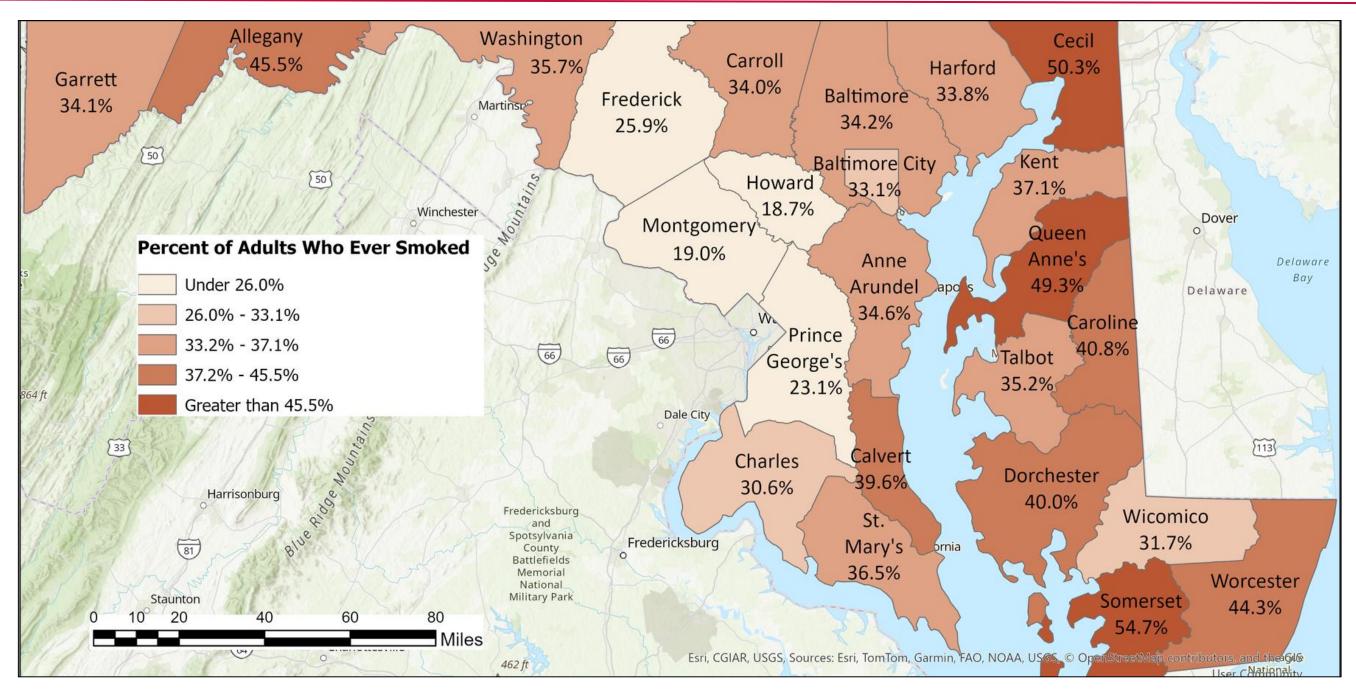


3+ ACES vs. Zero
ACEs:
2.2X More Likely

Source: 2023 Maryland

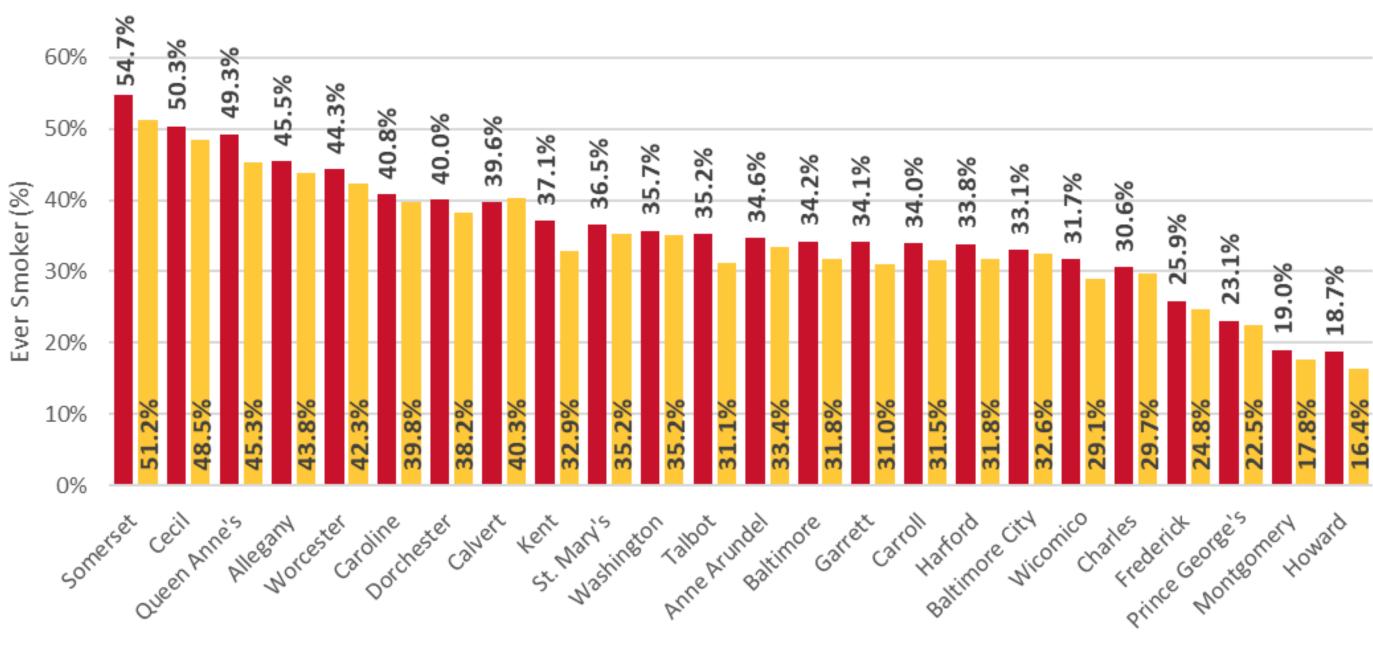
**BRFSS** 

### Jurisdiction-Level Data





### Age Adjustments on the BRFSS



Slight differences seen in the county estimates when the data is adjusted for by age

Source: 2023 Maryland

BRFSS

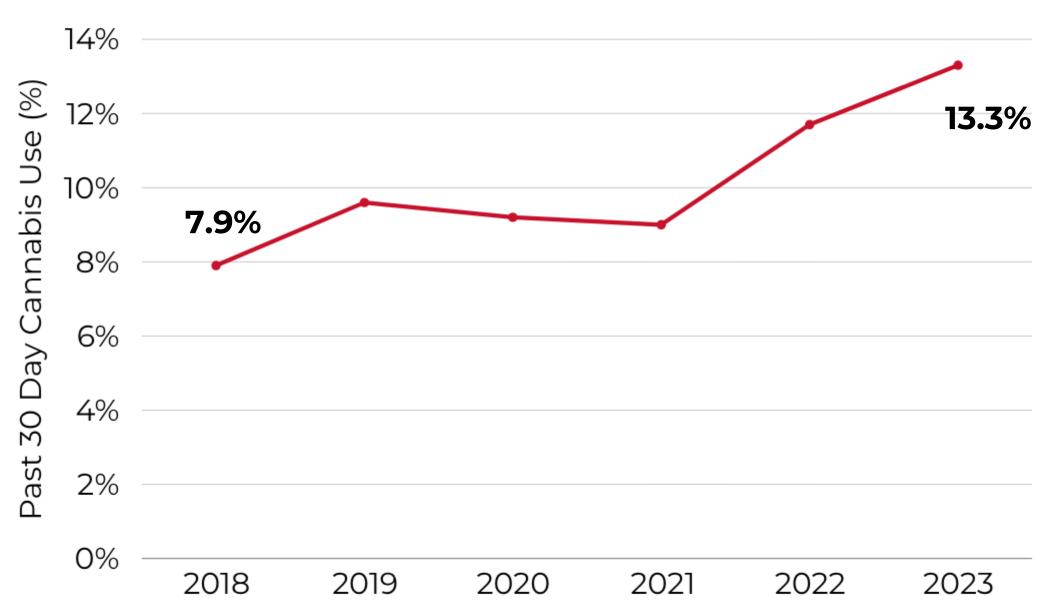
■ Crude ■ Age Adjusted

Age adjustment is a method used in the BRFSS to make fair comparisons between groups with different age ranges. It helps remove age as a reason for differences in health outcomes when comparing geographies or looking at changes over time.



### Maryland Adult Cannabis Use Trends

#### Maryland Adult Current Cannabis Use



Cannabis Use among
Maryland adults has
increased 68% from 340,498
to 559,778
people between 2018 and
2023.

Sneak Peak: 2024 Data! 14.5% (608,751) Maryland Adults currently use cannabis



Source: 2018-2023 Maryland BRFSS

### Maryland Adult Cannabis Disparities



Disability:

1.5X More Likely



High school vs. College Grad:
1.8X More Likely



Diagnosed Depressive
Disorder:
2.5X More Likely



Current Tobacco User: 3.7X More Likely



LGBTQ+: 2.6X More Likely



**3+ ACES vs. Zero ACEs: 3.7**X More Likely





# Key findings:

Statewide Youth Risk Behavior Survey/Youth Tobacco Survey (YRBS/YTS)



### About the YRBS/YTS



**Purpose:** Biennial public health surveys on risk behaviors in public schools



**Method:** Managed by the Maryland Department of Health and the State Department of Education w/ survey contractor in classrooms



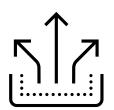
**Population:** Middle and High School Students



**Sample Size:** ~60,000

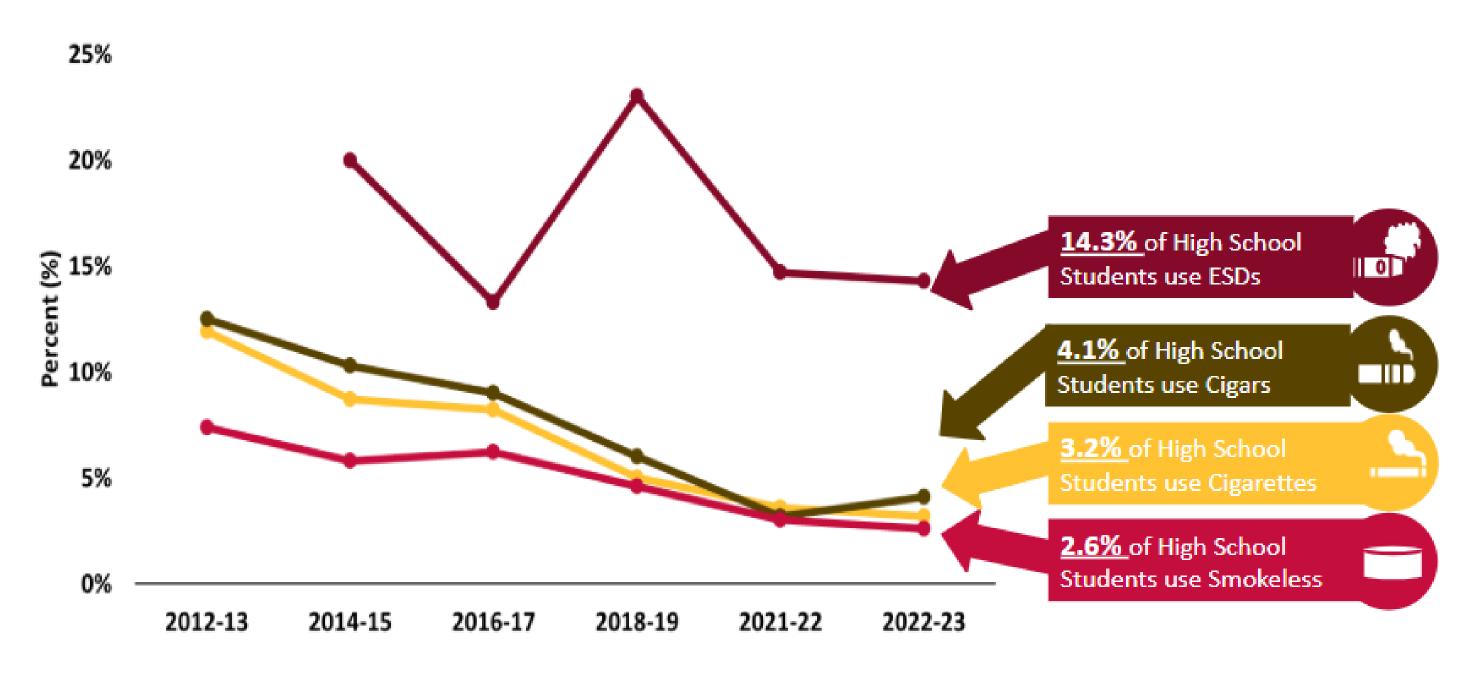


Content: 2/3 of the standard survey and state-added questions



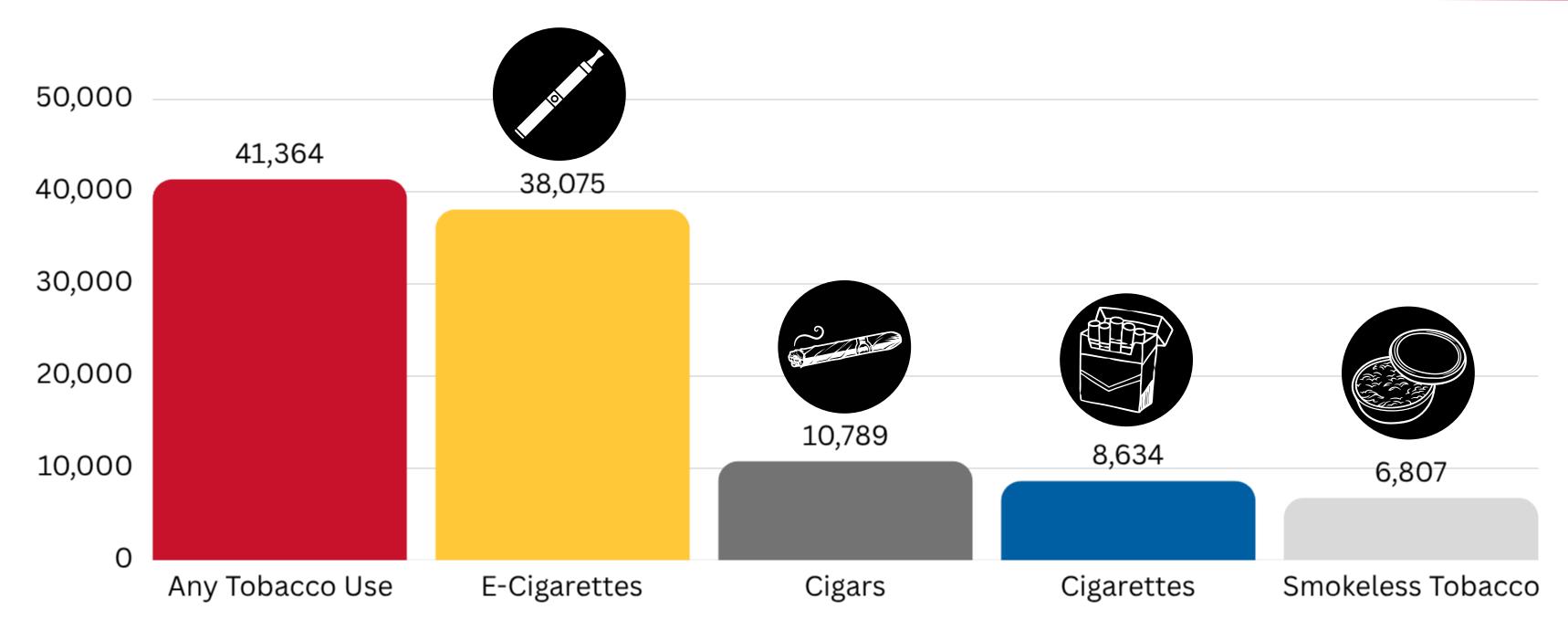
**Output:** Data on risk behaviors including mental health, injury and violence, tobacco use, other substance use, nutrition, sexual health, injury, and violence

#### **Tobacco Product Use Trends**



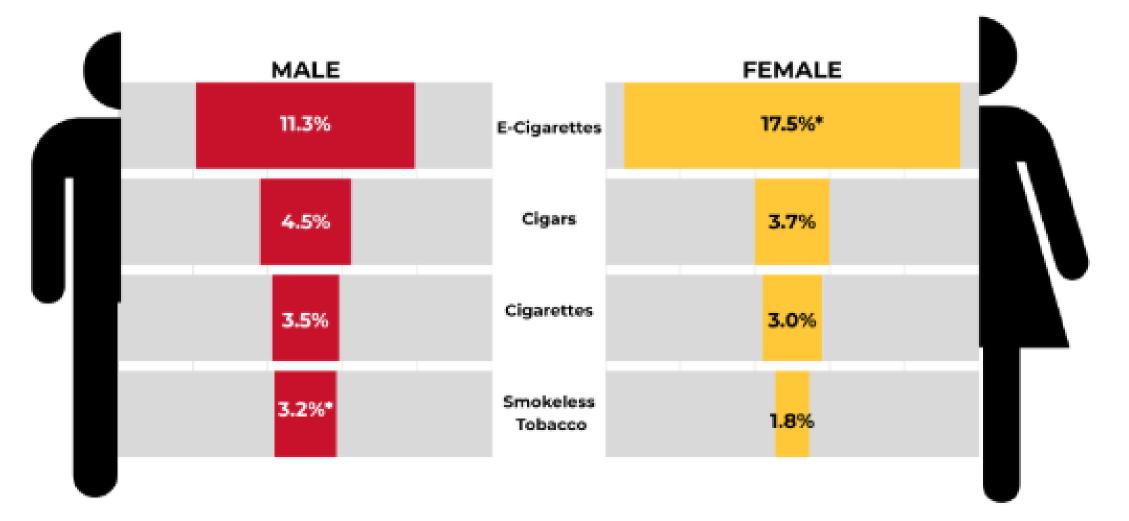


#### Number of Tobaco Product Users





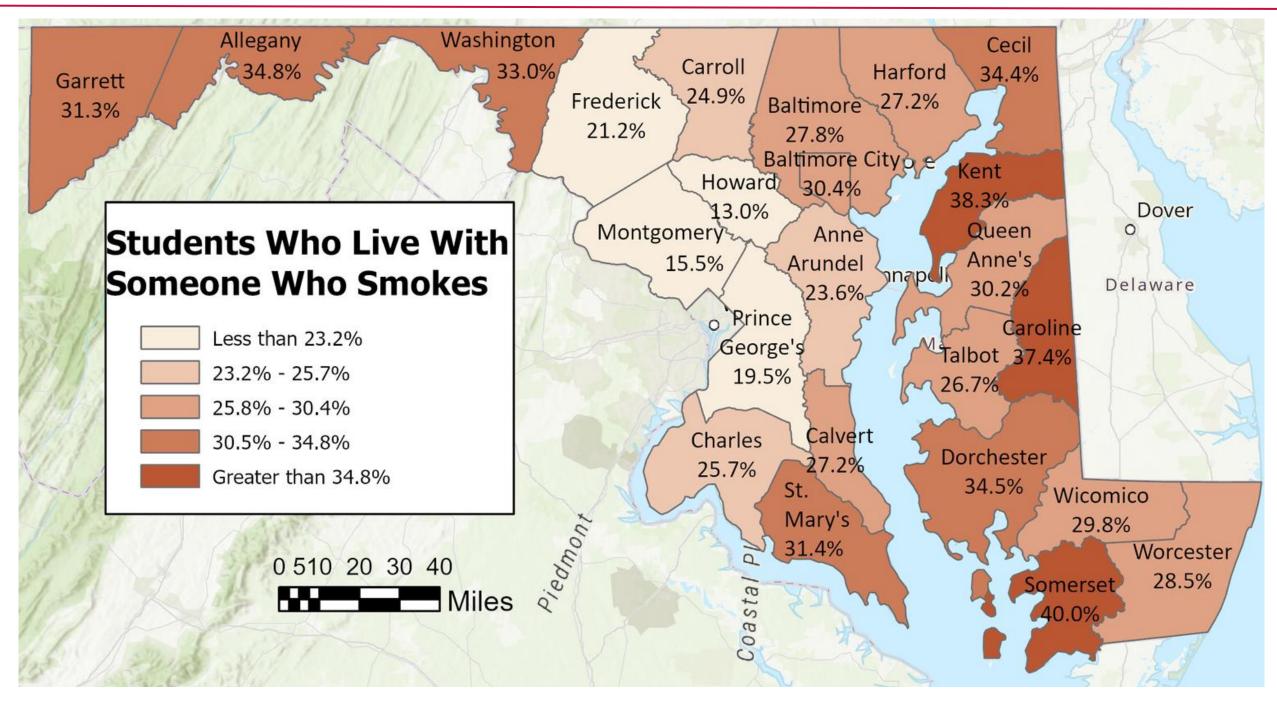
### Tobacco Use by Sex



Most recent data show \*significant differences between female and male students who use e-cigarettes and smokeless tobacco.

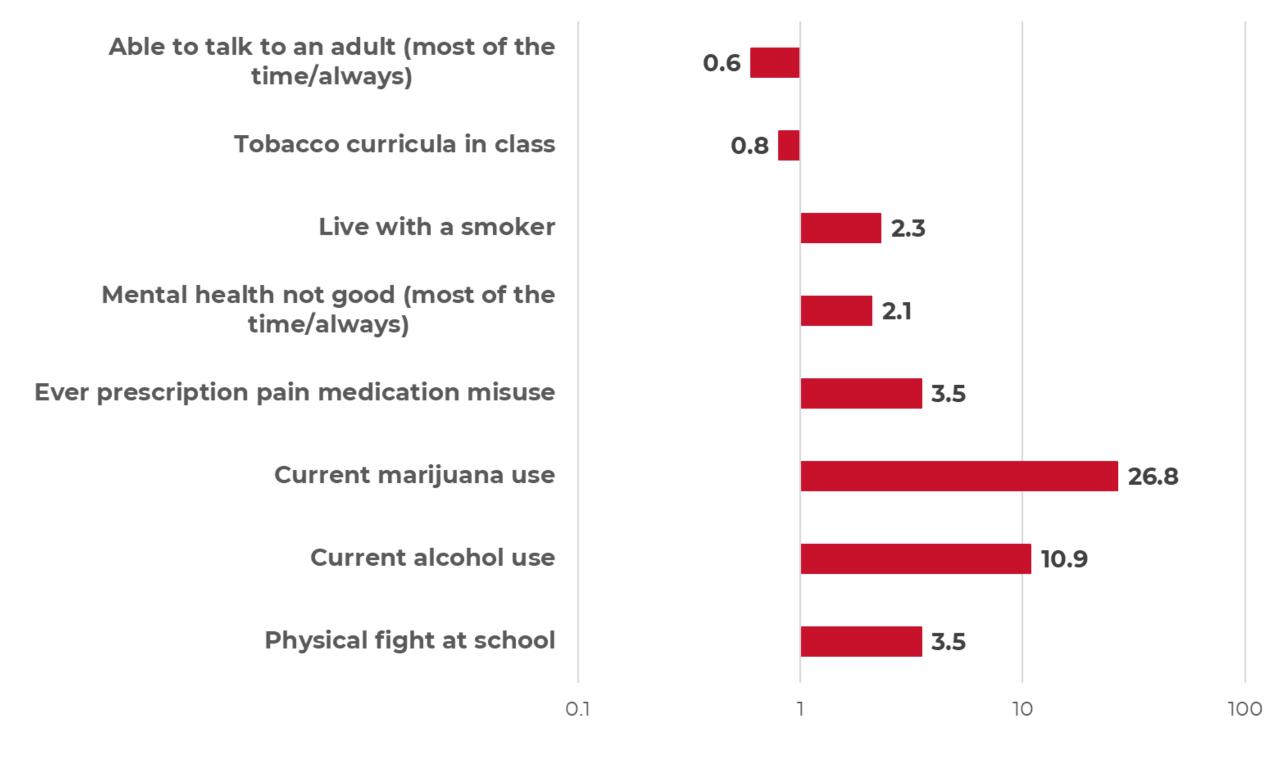


### Jurisdiction-Level Data (Live With a Smoker)



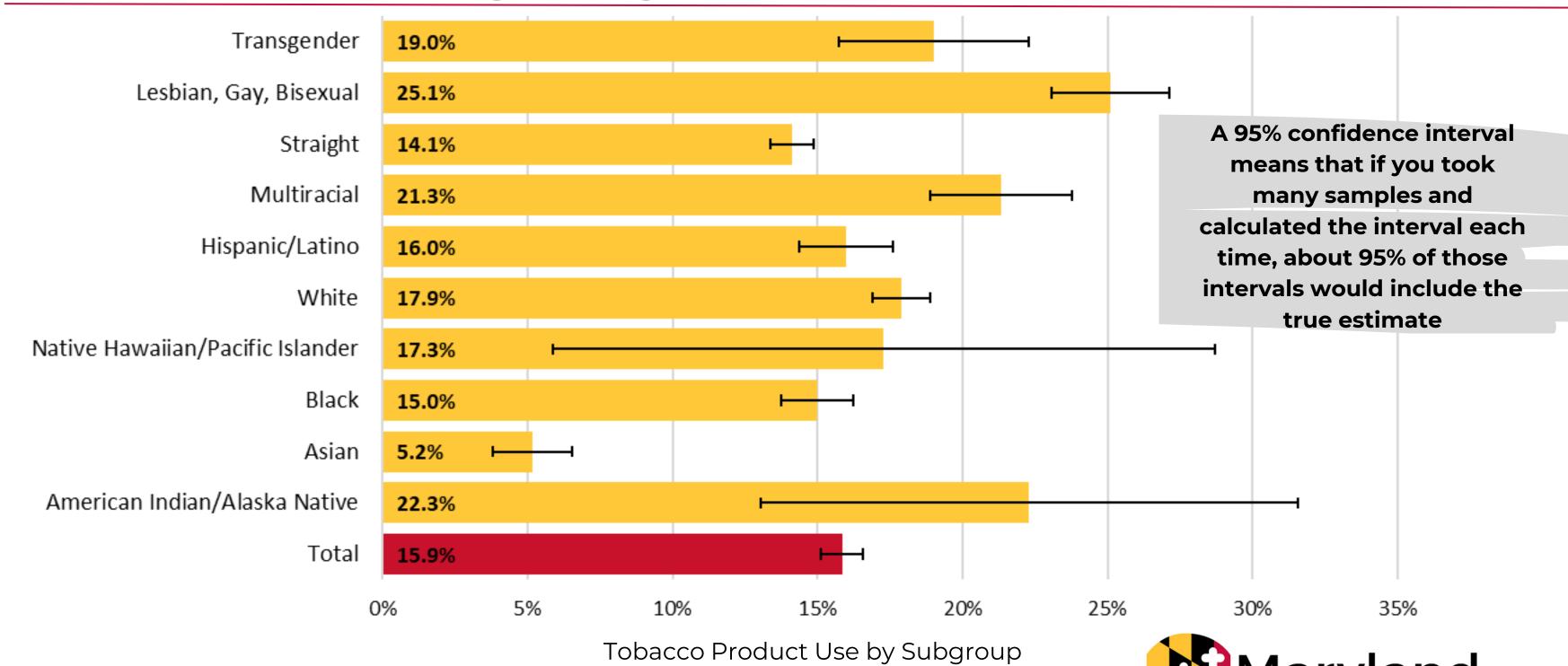


### Odds of Tobacco Use





## Determining Significant Differences



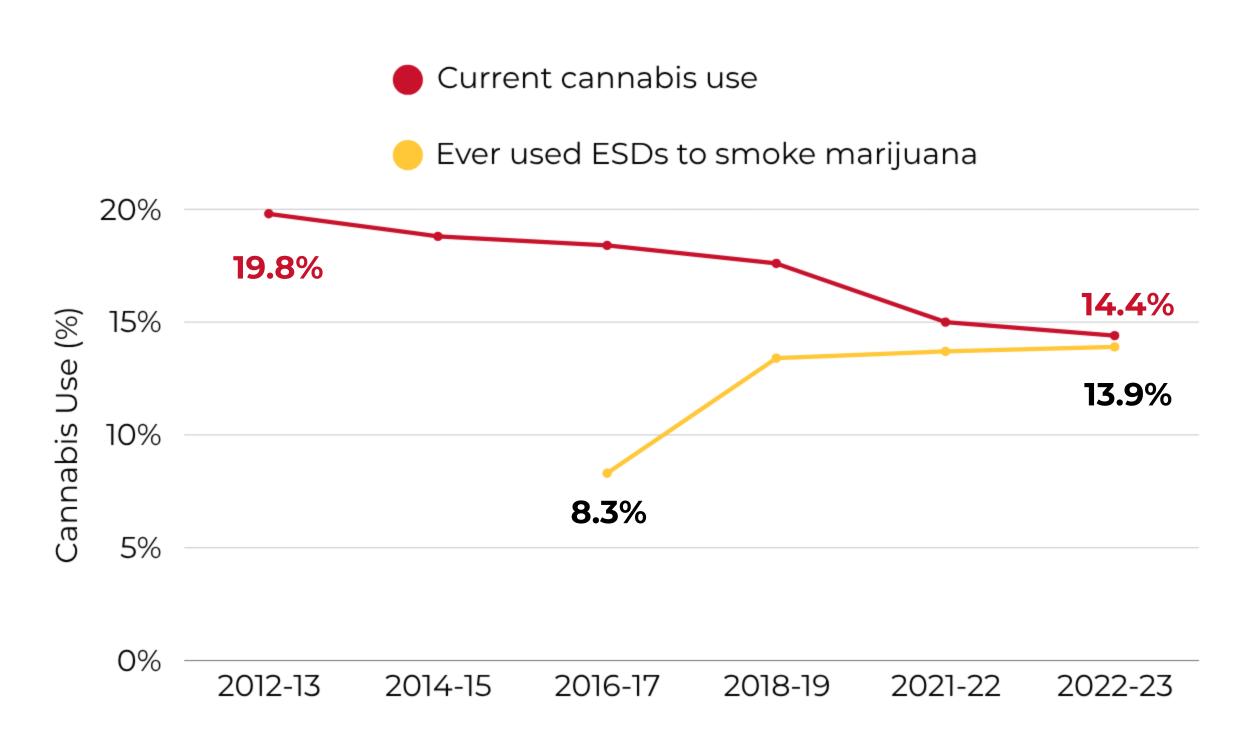
(Percent)

**DEPARTMENT OF HEALTH** 

Source: 2022-23 Maryland High School

YRBS/YTS

#### Youth Cannabis Use Trends

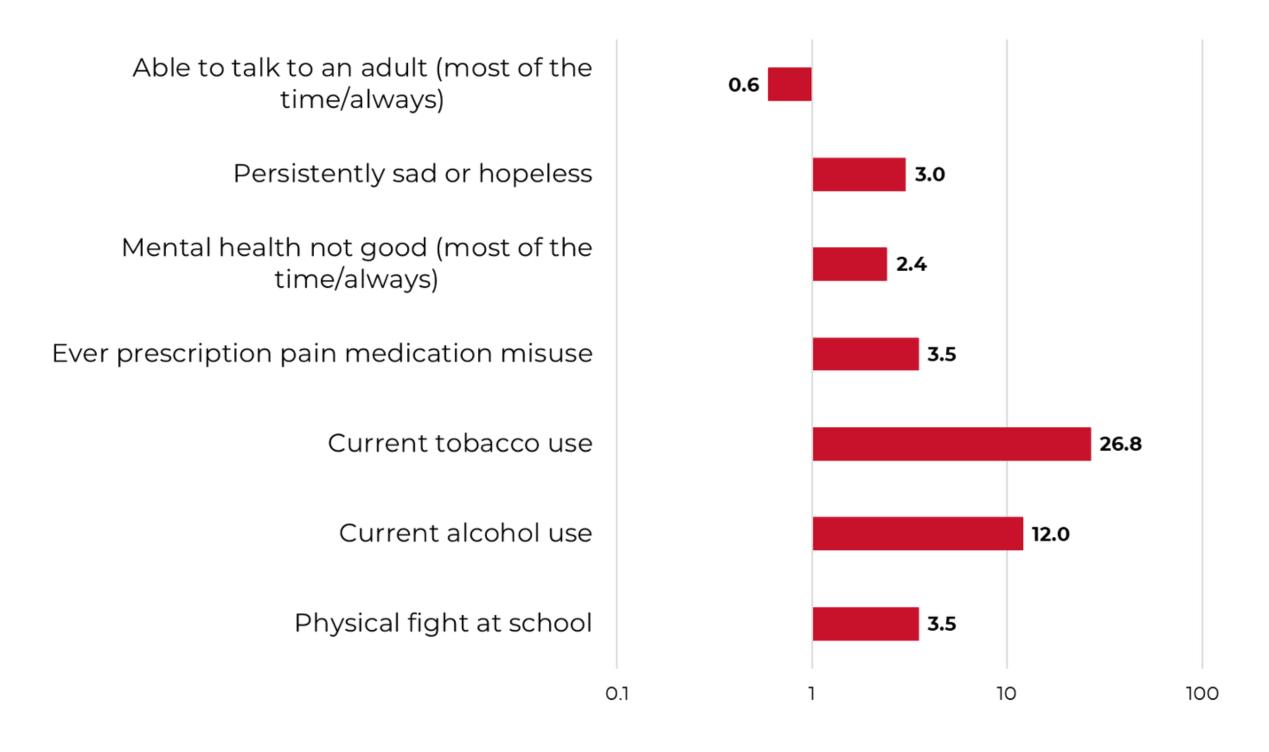


Cannabis Use among
Maryland high school
students has
DECREASED between
2012-13 and 2022-23.

The number of students who reported ever using an ESD to smoke marijuana INCREASED between the 2016-17 and 2022-23 school years.



### Odds of Cannabis Use





# Determining Significance (Cannabis)

Percentage of students who currently used marijuana (one or more times during the 30 days before the survey)

		Total	
	Percentage	95% confidence interval	N
Total	14.4	(13.6 - 15.3)	36,625
Age			
15 or younger	10.4	(9.6 - 11.3)	18,250
16 or 17	17.7	(16.5 - 19.0)	16,591
18 or older	21.1	(18.0 - 24.6)	1,745
Grade			
9th	9.1	(8.1 - 10.4)	10,403
10th	12.6	(11.4 - 13.8)	10,364
11th	16.4	(15.0 - 17.8)	8,622
12th	21.4	(19.7 - 23.2)	6,993
Race/Ethnicity			
Asian*	3.5	(2.6 - 4.8)	1,620
Black*	17.0	(15.5 - 18.6)	7,952
Hispanic/Latino	12.2	(10.8 - 13.8)	5,937
Native American*	15.5	(8.7 - 25.9)	164
White*	14.6	(13.6 - 15.6)	17,848
All other races*	20.3	(8.7 - 40.6)	94
Multiple races*	20.6	(18.2 - 23.2)	2,746

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# Key findings:

Statewide Ethnography Study



### **About the Valor View Survey**



Purpose: Gain insight on populations where data is limited

Method: Managed by CTPC with contractor to administer digital survey at

community events



**Population:** U.S. Military Veterans who were current residents of Maryland



Sample Size: 125 Veterans



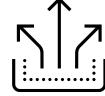
**Content:** Incorporated questions from Department of Defense's Health Related Behaviors Survey and the Behavioral Risk Factor Surveillance System (BRFSS)



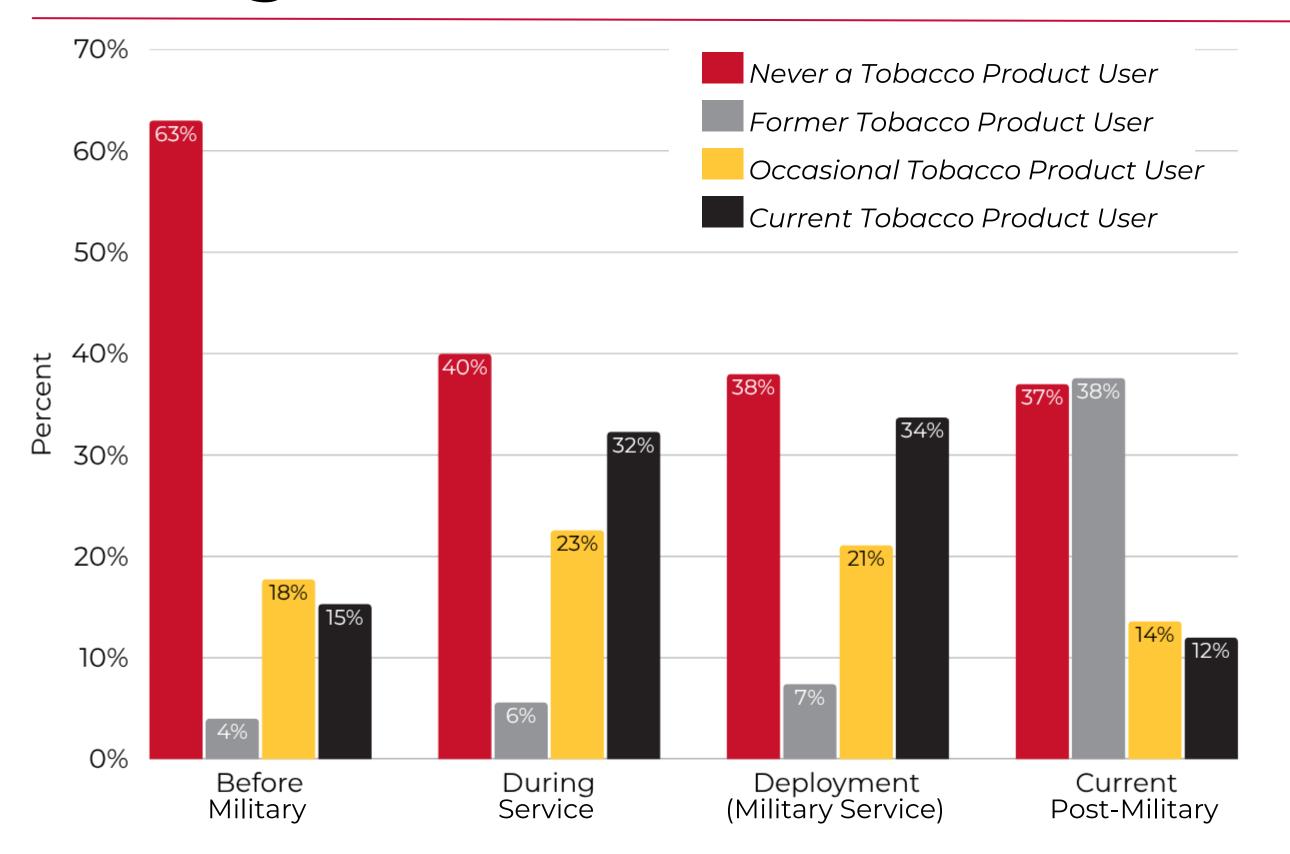
**Output:** Data on tobacco product use pre-, during, and post-military service, service-specific factors (deployment, social norms, mental health) that may

contribute to tobacco-related disparities,

and cessation efforts



### Changes to Overall Tobacco Product Use



- More Veterans used tobacco (Occasional and Current use) During Service and During Deployment.
- The percentage of Current tobacco users decreased Post-Service.
- The percentage of Former tobacco users increased Post-Service.



#### Veteran Tobacco Product Use

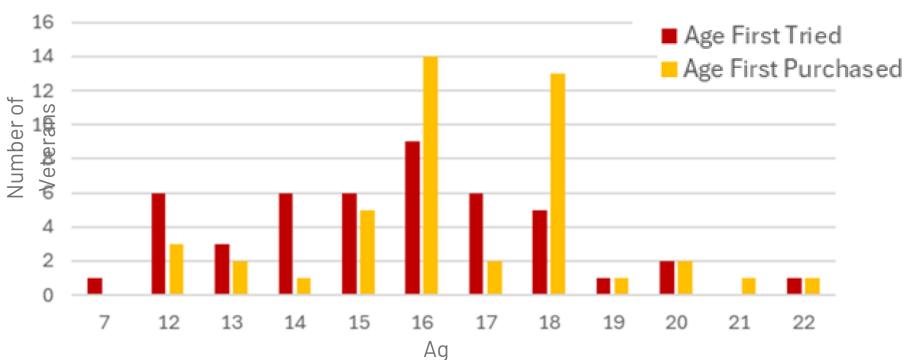
#### **Reasons for Tobacco Use Initiation**

- Social influence
- Peer pressure to fit in
- Stress relief
- Routine and environmental Factors
- Alertness and enhancing performance



Age of First Tobacco Product Use vs.

Age of First Tobacco Product Purchase



#### Reasons for Tobacco Product Use

Among tobacco product users

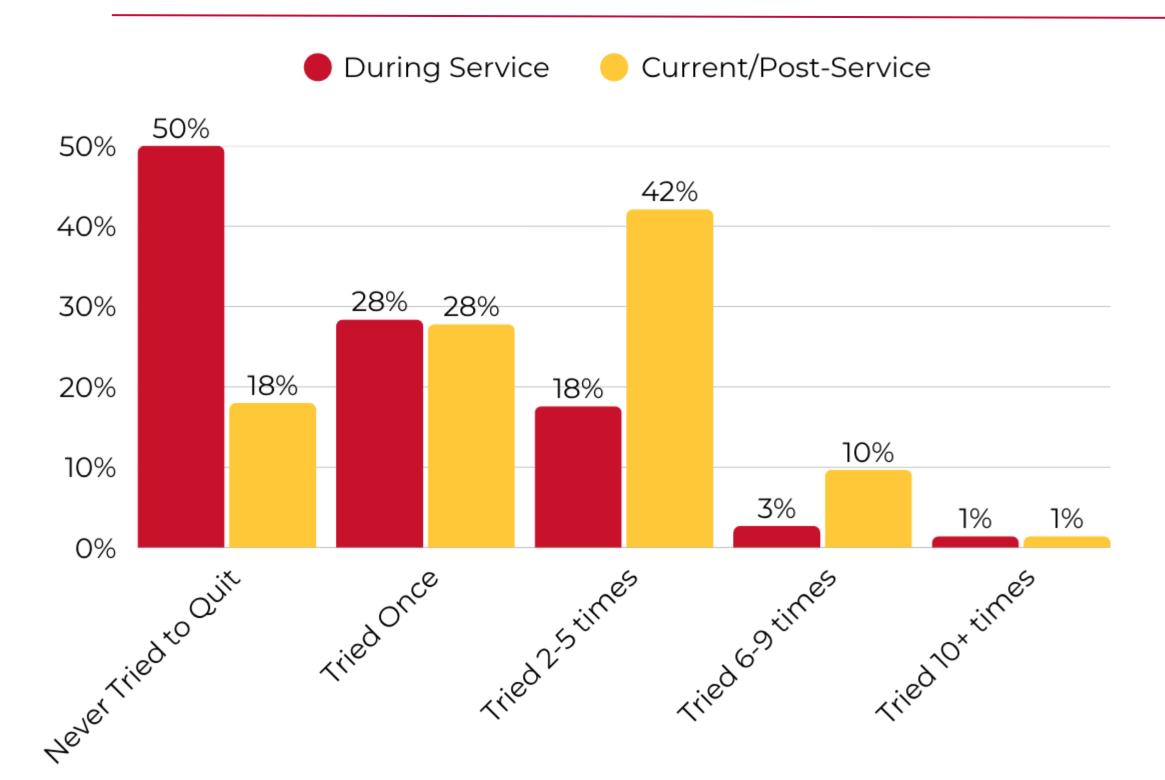
- Stress relief
- Coping mechanism

Among non-tobacco users

- Social factors
- Camaraderie



### **Cessation Efforts**



- 50% attempted to quit one or more times During Service.
- "Cold turkey" was the most commonly used cessation method. "Tapering" and nicotine patches were also used.
- Most Veterans did not seek cessation support. Only 7% sought support During Service and 24% sought support Post-Service.



### Data Usage

State Surveillance, Special Projects, and More



## Data Usage





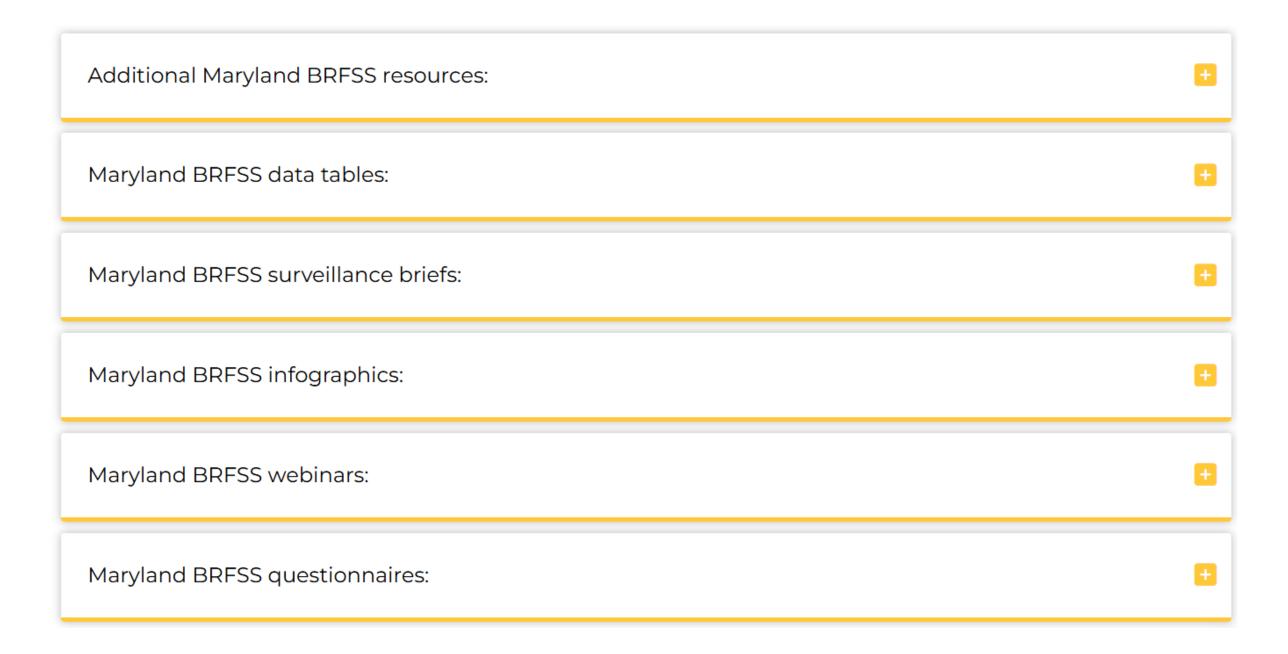
# Final Thoughts

- Public health surveillance is essential for tracking health behaviors, informing programs, and guiding equity-focused decisions.
- Data from systems like BRFSS, YRBS/YTS, and special studies (e.g., Veterans Ethnography) reveal tobacco-related disparities and emerging trends.
- Partners can use this data to inform strategic planning, policy development, and community outreach.
- Training on key data concepts—like significance and age adjustment—enhances confidence in interpreting surveillance data.
- Sharing data publicly via reports and presentations boosts transparency and impact.
- The ultimate goal: use surveillance insights to advance health equity and reduce tobacco initiation, increase tobacco cessation, and reduce youth cannabis use among Marylanders.

## Resources



## **BRFSS Webpage**





2024 Data Set to Be Released Publicly Early 2026!



# YRBS/YTS Webpage



#### Data Products

Explore the Maryland YRBS/YTS data results from 2013 to the present.

View More >



#### Current and Past Questionnaires

Please review this page for current and past questionnaires and rationale for questions.

View More >



#### Frequently Asked Questions (FAQs)

Find answers to frequently asked questions about the survey.

View More >



#### Instructional Videos

Three videos were created: survey overview, teacher roles, and school contact roles.

View More >



#### Parental/Guardian Opt-Out Forms

Complete this form only if a parent/guardian declines their child's survey participation.

View More >



#### Methodology and Sample Description

This report offers an overview of the CDC's Youth Risk Behavioral Surveillance System.

View More >



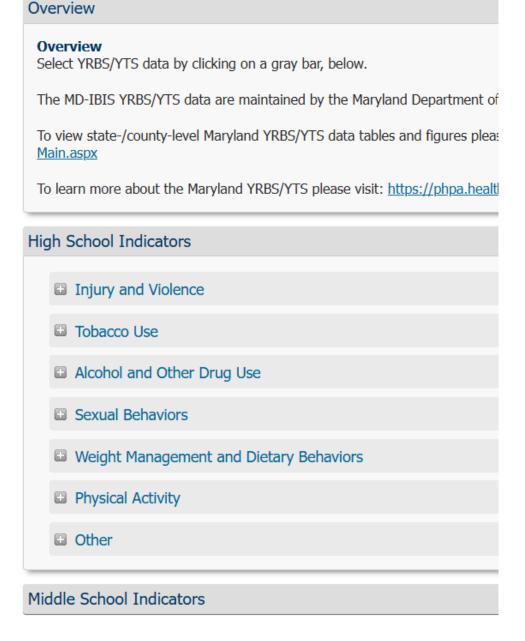
2024-2025 School Year Data Set to Be Released Spring 2026!

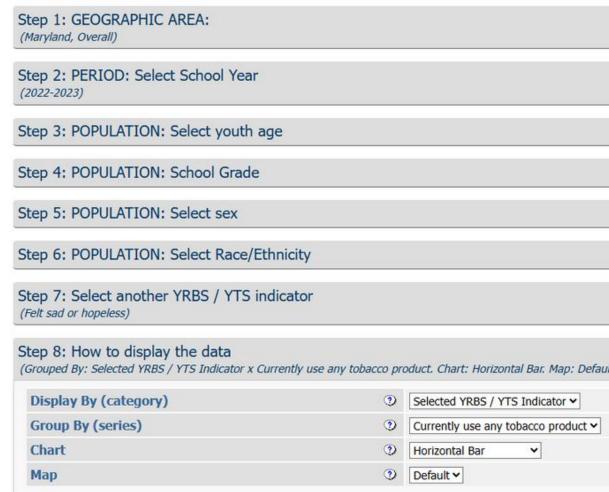


# Indicator Based Information System

#### **BRFSS Questions Configuration Selection** Overview Overview Select Annual BRFSS data by clicking on a gray bar, below. The MD-IBIS BRFSS data are maintained by the Maryland Department of 2023 BRFSS Indicators 2022 BRFSS Indicators 2021 BRFSS Indicators 2020 BRFSS Indicators 2019 BRFSS Indicators 2018 BRFSS Indicators 2017 BRFSS Indicators 2016 BRFSS Indicators 2015 BRFSS Indicators 2014 BRFSS Indicators 2013 BRFSS Indicators 2012 BRFSS Indicators 2011 BRFSS Indicators

#### YRBS/YTS Questions Configuration Selection



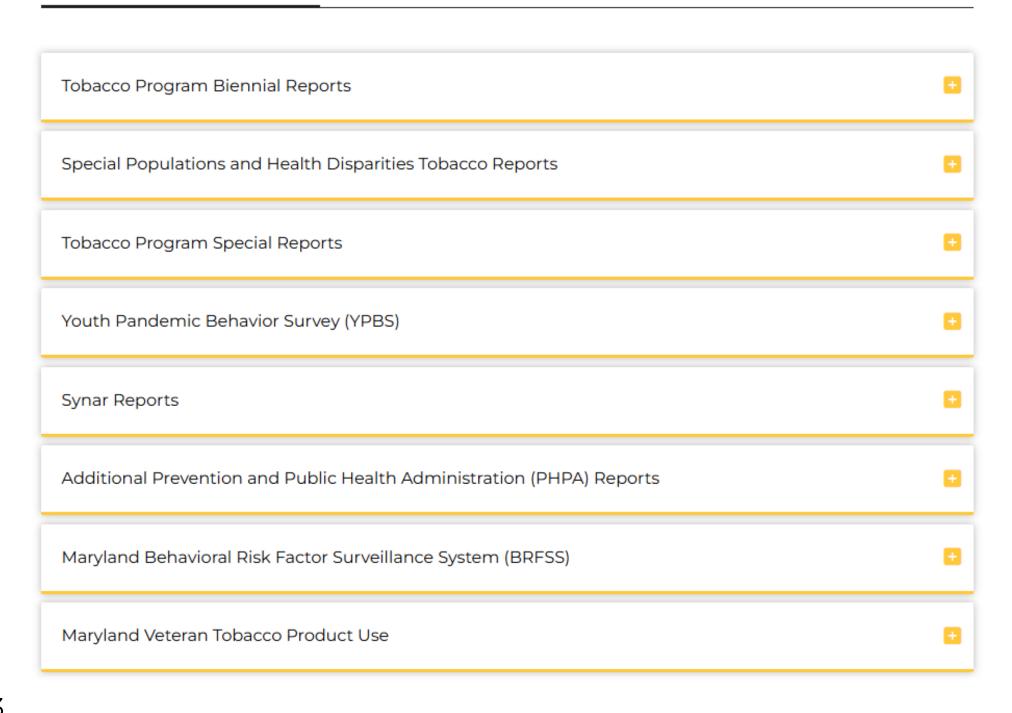


IBIS To Be Replaced by MDAT (Maryland Data and Analytics Tool) This Year!



# CTPC Reports Page

#### **Center for Tobacco Prevention and Control Reports**







## Questions? Comments.



#### Contact Me!

Nikardi Hynes, MPH
Nikardi.Hynes@maryland.gov



# Resources: Youth & Young Adult Cessation Resources



**Live Vape Free Young** 

Adult
Free. Text for confidential, interactive free texts and videos. Access to NRT if you are 18 years or older

https://livevapefree.org/quit-vaping/



#### Truth Initiative, EX

Program
Youth and young adult focused program for quitting;
Teens and young adults can join for free by texting
DITCHVAPE to 88709



## Resources: Substance Use



The Maryland Tobacco Quitline offers free help to quit tobacco for ages 13+.

- Call: 1-800-QUIT-NOW
- Text: 'READY' to 34191

smokingstopshere.com

### **BeCannabisSmart**

BeCannabisSmart is a resource created by the Maryland Cannabis Administration for adults 21 and older who currently use—or are thinking about using—cannabis under Maryland's adultuse cannabis laws. It aims to promote informed decisions, responsible use, and safer consumption practices.

https://cannabis.maryland.gov/



## Resources: Youth & Young Adult Tobacco Educational Resources



The Center for Tobacco Prevention and Control
Online Resources

View Maryland tobacco and vaping statistics and additional local and federal resources available here:

health.maryland.gov/tobacco-prevention-control



Information and resources for tobacco and vape use among the Black, Latino/a/x and LGBTQ+ communities

Live-in-color.org



## Resources: General Health



Visit your local health department website to discover youth programs and community resources designed to support well-being.

https://health.marylan d.gov/pages/departm ents.aspx



211 Maryland connects you to health and human services.

Call 211,
Text your zip code to
898-211 (TXT-211),
or visit

211md.org

