

Subsequent role of environmental and public health tracking in promoting global health.

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Abstract

Ecosystems have been degraded as a result of global environmental change. Climate change, resource depletion (with major implications for human health and wellbeing), and persistent social inequities in health have all been characterised as global public health challenges that affect both communicable and noncommunicable diseases. This puts a strain on healthcare systems as well as societal structures that influence health. To protect the population's health, an innovative method to address these diverse, interacting, and interdependent sources of change is necessary.

Keywords: Public health tracking, Human bio monitoring.

Introduction

Building strong, long-lasting interdisciplinary relationships across disciplines has proven to be a successful approach for addressing environmental and public health challenges, according to public health specialists, as has constructing Environmental and Public Health Tracking (EPHT) systems.

Environment and public health tracking

EPHT can also be used to reinforce the DPSEEA (Driving Forces, Pressures, State, Exposures, Health Effects, and Actions) architecture. EPHT encourages a systematic integration of the aforementioned DPSEEA components in the context of realistic causes, pressures, and states, taking into account both environmental and health characteristics [1,2].

The EPHT strategy aims to realise its goal of "Healthy Informed Communities" by empowering environmental and public health practitioners, healthcare providers, community members, policymakers, and others to make data-driven health decisions while preserving adequate data security measures. A global perspective is now required, requiring "new coalitions and partnerships across many different disciplines." These difficult goals must be met in the context of providing comprehensive integration within a "planetary" framework for environmental and public health outcomes; this must be the ultimate goal [3].

EPHT attempts to combine, integrate, analyse, and interpret environmental risks, exposures, and health data in order to deliver information to public health decision-makers in order to reduce disease burden from the environment.

Public health authorities can use accurate and timely surveillance data to establish disease impacts and trends,

recognise clusters and outbreaks, identify the most impacted demographics and geographic areas, and assess the success of public health measures. EPHT can help to protect the public's health by effectively integrating standardised environmental and health data in a continuous manner and turning it into meaningful information.

EPHT is a sophisticated monitoring system that is at the heart of proactive public health practise, with the ultimate purpose of guiding public health prevention [4]. Exposure tracking should, in theory, involve a systematic measurement of dangerous environmental chemicals to which people are exposed. By recording changes over time, exposure tracking also aids in evaluating the efficacy of public health measures. It must be well-coordinated with regular danger monitoring. Human Bio Monitoring (HBM) investigations are used to monitor individuals, communities, or demographic groups for the presence of an environmental chemical or its metabolites.

Health impacts tracking, which represents traditional public health surveillance efforts, is the final component of environmental public health surveillance. Lead poisoning, bronchiolitis hospitalizations, and various congenital deformities are examples of these conditions. The primary prevention of chronic disease is the main goal of such a strategy. In the twenty-first century, public health has the ability to detect the environmental precursors of non communicable and communicable diseases [5].

The emphasis on data integration across hazard, exposure, and health information systems distinguishes EPHT from traditional surveillance; this could also be referred to as "risk tracking," which entails quantifying and monitoring trends in the relationship between environmental hazards, exposures,

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and health indicators at the population level. To ensure the effectiveness of an EPHT programme, various different constituencies must be involved in public health activities. For the public, media, researchers, and policymakers, there is a demand for timely, accessible, reliable, representative, and interpretable information regarding our environment and health, including input from specific interest and community groups, as well as the public health community at large.

Conclusion

Environmental public health problems are becoming more complicated. Globalisation, population growth, and overconsumption are putting huge strains on the environment and human health. Socioeconomic variety must be considered around the world, which is linked to geographic differences in data/information availability and ability to utilise these resources to support decision-making.

EPHT can help communities, governments, and regions reduce socioeconomic and environmental inequity through exchanging experiences, knowledge, information, and data. As a result, EPHT networking activities must support local, regional, national, and global environmental improvements and reductions in their impact on health, which will be accomplished by strengthening and sharing a common philosophy among public health professionals working

in environmental health all over the world. It necessitates governance initiatives to integrate a diverse range of scientific fields and people, ranging from institutional decision-makers and public health authorities to civil society representatives.

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