

# THE INSERTION OF THE ENVIRONMENTAL HEALTH SURVEILLANCE IN THE UNIFIED HEALTH SYSTEM

Editorial

The integration of environmental monitoring activities in the Unified Health System (SUS) shows some characteristics that differentiate it from the practice of epidemiological surveillance. This occurs mainly because much data on exposure to environmental factors is obtained outside the health sector and the adoption of actions that seek to control and/or prevent requires, in most cases, an intra and intersectoral understanding and articulation, since the health sector is not able, by itself, to provide answers to environmental health issues.

In recent years, there has been an increasingly consolidation of the field of environmental health, which includes the area of public health, accustomed to scientific knowledge, to the formulation of public policies and the corresponding interventions (actions) related to the interaction between human health and both natural and anthropic environmental factors, which determine, modulate and influence such interaction, in order to improve the quality of human life from the point of view of sustainability<sup>(1)</sup>.

As agreed at the 1<sup>st</sup> Seminar of the National Environmental Health, held in October 2005 and consolidated in the first National Conference on Environmental Health, held in December 2009, it is understood as an area of intersectoral and interdisciplinary practice focused on the outcomes, in human health, of ecogeosocial relations between man and environment<sup>(1)</sup>.

Accordingly, the Ministry of Health has been implementing, throughout the country, a Surveillance System in Environmental Health (SINVISA), seeking the improvement of this “model” of activities, establishing expertise into the three levels of government, aiming to consolidate the practice of Environmental Health within the SUS.

Normative Instruction Nº 1, March 7, 2005, creates SINVISA, establishes the area of action, the scope of the three levels of management within SUS and defines the Environmental Health Surveillance as a set of actions and services provided by agencies and both public and private entities that aim to knowledge and detection or prevention of any change in the environmental determinants and conditioning factors that interfere with human health in order to recommend and adopt measures for prevention and control of risk factors related to diseases and other health problems<sup>(2)</sup>.

Due to the complexity of the situation, some fields have been identified as fields of action of the Environmental Health Surveillance: monitoring of water quality for human consumption; air quality; monitoring of populations exposed to contaminated soils; chemicals; natural disasters and accidents involving hazardous products; physical factors (ionizing and non ionizing radiation); and working environment<sup>(3)</sup>.

There are increasing demands and health problems related to the environment that call for resolution by the state and municipal managers of SUS, which is causing more and more the establishment of partnerships between federal government and agencies and institutions in their respective coverage areas and within the limits of their powers, such as Ministries of Education; Cities; Science and Technology; Labour and Employment; Agriculture; Planning and Management;

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of Foreign Affairs; Development, Industry and Trade; Social Development and Hunger Alleviation; of National Integration; Transport; Defence; Justice; and Culture<sup>(1)</sup>.

Environmental Health Surveillance must be perceived and has been increasingly consolidating its field as an “operative arm” of the health public policy, drawn and strengthened since the Health Sector Reform.

As we seek, in our constitution, Article 225, which says that everyone is entitled to an ecologically balanced environment, a good of common use and essential to a healthy quality of life, we realize the importance given by our legislature to the relationship between health and environment and, therefore, it is possible to realize that health becomes more than just the absence of disease, it is possible to see it as a social and environmental practice, where the interdependent relationship between society and the environment is perceived and increasingly strengthened<sup>(4)</sup>.

In this issue of the *Brazilian Journal of Health Promotion*, we can find two articles that directly address questions related to the Environmental Health Surveillance.

In times of publication of the 2914 ordinance, which establishes procedures for control and surveillance of water quality for human consumption and its potability standards<sup>(5)</sup>, we would like to highlight the article on “*Exposure assessment and risk associated with trihalomethane compounds in drinking water*”. Also, in this issue, we find the article on the “*Environmental Hazard of pesticides prescribed between the Platinum and Amazon basins*,” in such important moment when the National Agency of Sanitary Surveillance reported results of food analysis showing pesticides residues<sup>(6)</sup>.

Therefore, it is noticed that the magazine has been distinguishing, ever more, articles that bring up to the scientific debate current and relevant subjects, showing its

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commitment to the academic community and continuous enhancement in the scientific scenery of this country.

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