Dear Colleagues,

Thinking over public health, we believe there are many ways to determine it. For instance, a majority perspective can be underpinned by two keywords: science and art, by its approach to health in the community.1,2 Therefore, we would like to invite all of you, each of our colleagues, to recall the “true color” of public health scholars in the present issue of Kesmas. In Volume 18, Issue 4, November 2023, the last issue of the year, Kesmas emphasizes current substantial topics that apply as public health implications as approaches and interventions to mitigate global issues, particularly in developing and low-resource-setting countries.

From a scientific perspective, a public health scholar is established as a scientist who identifies, assesses, and produces relevant information to support health policies in the community. Zamrudiani, et al., determined a relationship between the Composite Index of Anthropometric Failure and early childhood cognitive development (ECCD) in Indonesian children aged 36-59 months. In the 2018 Indonesian Basic Health Research, the authors later found a significant relationship between various anthropometric failures and ECCD as well as a combination of their relevance with other variables, such as access to drinking water and sanitation. The implication is that this study provided evidence that needs to be considered to prevent delays in the ECCD as it impacts people’s health and life expectancy (pp. 235-243).

Although fertility rates have fallen in some developed countries, a demographic bonus will be experienced in developing and low-resource-setting countries. Supriatin, et al., examined a correlation between the Composite Index of Anthropometric Failure and early childhood cognitive development (ECCD) in Uzbekistan. By using the national secondary data analysis, the authors found that collaboration between partners and health workers could effectively raise the use of modern contraceptives. Nevertheless, further study still needs to be convinced that separating contraceptive methods into long and short-acting is the most relevant thing to do. Also, which women are considered instrumental in their decision is the most relevant factor in determining contraceptive choices (pp. 244-251).

Good knowledge also means a “color” in public health issues. Knowledge improvement plays a crucial role in behavioral changes at the primary level, targeting the general public, but it is also at the secondary and tertiary levels, such as knowledge in health workers about effective medication management that could minimize disability and cost-effectiveness. Ummee, et al., statistically proved that educating caregivers of end-stage renal disease patients undergoing hemodialysis affected their knowledge of controlling excess fluid before and after education. Although further study is needed to ensure optimal outcomes for patients and their quality of life, this study illustrates the importance of education in improving healthcare workers’ skills (pp. 258-264).

Simultaneously, the impact of social media on public health becomes an important concern if reminded that its largest users, such as college students, are at risk of experiencing social media disorder (SMD). Amelia, et al., assessed social media use behavior and the prevalence of SMD and determined the relationship between the number of social media accounts and duration of social media use and SMD among the students. They found the must-have platforms: WhatsApp, YouTube, Line, and Instagram, which were widely used for interaction and entertainment, had a statistically significant relationship with the SMD. Although the duration of social media use contains no effect, the authors suggest further study to distinguish between the duration of social media use and the SMD when studying the impact of social media on mental health (pp. 265-270).

Besides, Khansa, et al., evaluated solid medical waste management at the regional public hospitals in Bogor District, West Java Province, Indonesia. This case study design was conducted at four public hospitals according to the national standards, mainly for waste segregation and treatment. The study concludes that all the hospitals studied generate similar types of medical waste, e.g., infectious waste, pathological, sharp, pharmaceutical, and chemical waste; however, there is a hospital that delivers chemotherapeutic waste. Although the hospitals have already obtained an officially licensed government permit to manage such solid medical waste, complying with the standards, adequate standard operating procedures, such as providing the plastic bags with an appropriate color code and symbol as well as the medical waste trolley with sufficient amount, equipping emergency facilities in temporary storage, and providing comprehensive trainings to all the medical waste-related
workers about medical waste management are therefore essential for reduction activities implied to waste reduction in hospitals (pp. 217-225).

On the other hand, public health is said to be an art in the sense that it not only provides proof for evidence-based policymaking but also practically develops the tools. Yap, et al., developed and validated a questionnaire based on the Person-Environment-Occupation (PEO) model and investigated the influence of personal, environmental, and occupational factors on the perception of seating ergonomics among drivers. The authors applied the PEO model to assess drivers’ perceptions of seating ergonomics, which was developed to provide a framework for delivering services that embrace a client-centered approach. The tool then can be used as a reliable instrument to measure and determine the influence of each personal, environmental, and occupational factor on the drivers’ perceptions of seating ergonomics, except for the psychometric properties that will be preferred to be overlooked further (pp. 226-234).

At the same point, Isworo, et al., provided a tool to measure tuberculosis (TB) vulnerability in the community and guidance to prioritize and determine health system responses to TB based on different risk factors in communities. Identifying TB, particularly by finding active cases in vulnerable populations, has become a pivotal strategy arranged by developing countries, which include the Indonesian government.3 The authors then employed a facet analysis of TB vulnerability components. Although the tool has not yet explored the validity of the instrument and the framework components in measuring the TB vulnerability level in the community, its application by big data, data linkage, and machine learning can potentially strengthen the identification and reduce TB (pp. 252-257).

Moreover, Sudiarno & Ma’arij applied a study at the warehouse in its daily activities and evaluated the abilities to maintain the flow and workers’ safety based on the four pillars of resilience (Safety-II). This study used the Functional Resonance Analysis Method (FRAM) to discover higher variability in performance and safety occurring in activities that required a lot of individual or group effort and used a Resilience Analysis Grid (RAG) to assess the organization’s potential for handling risks. Combining FRAM and RAG provides a new depth of perspective for safety analysis and addresses resilience factors in daily operations (pp. 271-278).

In the end, public health scholars are not only scientists with ability to discover science-based public health issues, but also as practice-based actors in the making; therefore, in this way, they navigate health in the community. Thus, it is not too much to consider that a public health scholar is well-fitted as a health leader rather than limiting them to either being a scientist or a single profession only.

Al Asyary*, Meita Veruswati, Putri Bungsu Machmud, Indri Hapsari Susilowati
The Editorial Board Members

References