

TEACHING-SERVICE INTEGRATION IN ONE HEALTH: ZOOSES SURVEILLANCE EXPERIENCE IN A BRAZILIAN MUNICIPALITY

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RESUMO

The consolidation of the One Health approach requires operational models capable of integrating human, animal, and environmental health within real-world health systems, particularly in territories lacking formal zoonosis surveillance structures. This study reports the experience of an academic nucleus linked to a Veterinary Medicine program, acting in partnership with the municipal health surveillance service as consultative and operational support in the absence of a dedicated zoonosis unit. This is an experience report describing actions developed since 2022 through integrated teaching, research, and extension in territorial and institutional contexts. From the animal health perspective, actions included continuous rabies vaccination across rural, urban, household, and fixed-point settings; population-based animal census; case follow-up of suspected zoonosis; and systematic zoosanitary field assessments. From the human health perspective, interventions comprised pre- and post-exposure rabies prevention strategies, including vaccination and serological monitoring of at-risk groups; strengthening of clinical management capacity through training of primary care, emergency, and field health workers; and qualification of health services for zoonosis-related case detection and response. From the environmental health perspective, activities involved active and passive surveillance of vectors, synanthropic and venomous fauna; implementation of ovitrap-based entomological monitoring; school-based geohelminth surveillance; and territorial risk mapping via community-based and environmental approaches. From the governance, education, and system-strengthening perspective, actions included community health education in schools and public spaces; development and dissemination of technical materials; structured field training of undergraduate students within surveillance services; optimization of disease notification systems; participation in public hearings and institutional training processes; and policy advocacy through formal proposals in municipal health conferences, culminating in the organization of a regional One Health forum. Results demonstrate expanded service coverage, improved surveillance sensitivity, workforce qualification, and strengthened intersectoral coordination. The initiative enhanced competency-based veterinary training aligned with public health demands. Teaching-service integration proved effective for operationalizing One Health in resource-limited settings.

Palavras-chave: Community engagement; Epidemiological surveillance; Intersectoral collaboration; Public health practice; Veterinary education.

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