

# TUFH 2025 Declaration Framework

## Philadelphia Declaration

**Theme:** *Reframing Access to Health: Challenging Assumptions and Reimagining Solutions*

### I. Preamble: A Decade of Direction, A Decade to Deliver

In 2012, the [Thunder Bay Communiqué](#) called for a transformation of health systems through community-led, access-oriented, and socially accountable education. In 2022, the [Vancouver Vision](#) reaffirmed these principles, outlining four strategic themes and setting the path toward **TUFH 2032**, when we expect to see systems fully reshaped by community voices, fit-for-purpose health workforces, immersive education, and systems thinking.

The [Sharjah Consensus \(2023\)](#) deepened this strategic alignment by operationalizing measurable goals and key performance indicators, while the [Ubuntu Declaration \(2024\)](#) reminded us of the moral imperative to center people, place, and policy in health—especially in rural and marginalized contexts.

Now in 2025, we find ourselves at the **midpoint of that vision**. This declaration is both a recommitment and a reckoning: Are we truly on track to meet our 2032 goals? Are we bold enough to challenge embedded assumptions? And can we reimagine the systems, structures, and power dynamics that still block **universal access to health**?

### II. Vision Statement

We reaffirm our belief that **access to health** is a universal right—not a privilege, not a commodity, but a shared societal responsibility.

We envision health systems where **communities guide education**, where **policies emerge from practice**, and where **diverse knowledge systems** shape training, care, and innovation.

The road to 2032 demands courage, collaboration, and accountability across all sectors.

### III. Strategic Commitments: Subthemes and Action Areas

#### ◆ 1. Innovative Approaches to Reduce Health Disparities for Vulnerable, Marginalized, and Complex Populations

**Commitment:** Accelerate inclusive, community-informed innovation to dismantle structural barriers and increase access to health for marginalized, complex, and neurodivergent populations.

**Actions:**

- Advance interdisciplinary research into context-specific health barriers and solutions.
- Support culturally grounded education, care delivery, and innovation pipelines.
- Leverage technology to bridge geographic and systemic gaps in service.
- **Strengthen [TUFH's Communities of Practice](#)** on projects related to Intellectual and Developmental Disabilities (IDD), Autism, Mental Health, Indigenous, Migrant and Refugee, Remote and Rural, Ageing, and Women's Health to foster cross-institutional collaboration, idea exchange, and the scaling of promising models globally.

#### ◆ 2. Community Engagement to Promote Physical and Mental Health and Wellness

**Commitment:** Deepen meaningful partnerships with communities, including individuals with Intellectual and Developmental Disabilities (IDD), Autism, and co-occurring behavioral health needs, to co-create strategies that are responsive, inclusive, and resilient.

**Actions:**

- Co-design governance structures with community advisory voices, including self-advocates and caregivers from IDD/Autism communities, embedded across planning and decision-making processes.
- Expand participatory research and citizen-led health promotion efforts that include individuals served by organizations like the Woods System of Care, emphasizing shared measurement and lived experience.
- Build mental health literacy, trauma-informed practice, and cultural humility into all programs, with adaptations to meet the communication and sensory needs of people with IDD and Autism.

### ◆ 3. Partnerships to build Social Accountability Bridges linking Education and Service to advance Community Health

**Commitment:** Rethink health workforce development from recruitment to retirement, emphasizing interprofessional collaboration and community-rooted service.

**Actions:**

- Build inclusive, competency-based, and socially accountable admissions processes.
- Mandate community-based, interprofessional education as a core standard.
- Invest in faculty development, wellness, and retention—particularly in underserved areas.

### ◆ 4. Policy and Collaborations to Advance Community, Planetary, and Environmental Health

**Commitment:** Shape governance systems and intersectoral partnerships that prioritize access to health while protecting our planet and its people.

**Actions:**

- Align national accreditation and policy frameworks with ISAT ([Institutional Self Assessment Social Accountability Tool](#)) standards to drive transformation.
- Build alliances across ministries of health, education, labor, environment, and social affairs.
- Support regional [Centers of Excellence](#) to localize implementation of planetary health, social accountability, and inclusive education.

## IV. Midpoint Reflections and Course Corrections

In 2022, we envisioned a world where, by 2032:

- Communities would lead the implementation of health education.
- Students would be immersed in the realities of the populations they serve.
- Health systems would be grounded in human values, and
- A new generation of socially accountable institutions would flourish.

In 2025, we acknowledge:

- Promising strides have been made in community engagement, inclusion of diverse learners, and global collaboration.
- Yet, disparities persist, and systems change remains fragile in the face of conflict, climate, and unfair access to health.

Thus, we commit to recalibrating efforts with urgency and purpose—guided by the [Ubuntu Declaration \(2024\)](#), the [Sharjah Consensus \(2023\)](#), the [Vancouver Vision \(2022\)](#), and the [Thunder Bay Communiqué \(2012\)](#)—to ensure the next seven years are **transformative, not transactional**.

## V. Calls to Action

We call on:

- **Governments** to co-create social accountability policy with civil society and communities.
- **Institutions** to adopt and apply ISAT to assess and certify their social accountability efforts.
- **Students and Community Leaders** to hold systems accountable—and to lead with innovation, empathy, and vision.
- **TUFH members and partners** to convene, learn, challenge, and collaborate through Communities of Practice, regional centers, and global events.

## VI. Conclusion: Toward 2032, Together

The **Philadelphia Declaration** stands as a shared roadmap for transforming global health education and delivery. By championing **access to health** over privilege, participation over tokenism, and partnerships over silos, we affirm that sustainable change is only possible when led with—and by—those we serve.

The **Philadelphia Declaration** is not just a statement—it is a checkpoint. A recognition of what we’ve built and a challenge for what remains. If the past decade was about setting the direction, the next must be about delivering outcomes that matter.

*Access to health is the measure of our courage to act in solidarity. 2032 is not the destination—it’s the milestone on the journey we take, together.*

This framework is intended for collaborative development and refinement by TUFH 2025 participants and stakeholders.