Through a comprehensive consultative and participative process of all our members, together with the new Executive Committee, we have worked toward clarifying specific priorities for the work of the IUHPE for the next five years so we can work more concertedly towards excellence in achievement in those areas. The purpose of having these priority action areas is to ensure that the work of the IUHPE is strategically focused and outcomes oriented.

**4 EXTERNAL PRIORITY AREAS:**

**Social Determinants of Health**

including work on Health in All Policies (HiAP) and Health Impact Assessment and including health equity, intersectoriality, the fight against poverty, implementation of the recommendations of the WHO Commission on SDH Report at Global, Regional, National and Local levels, focus on the most disadvantaged groups, whole-of-government approaches, actions on the structural drivers of inequitable distribution of power, money and resources, human rights, support to MDGs, and health promotion in emerging economies.

**Health Promotion in Sustainable Development**

including the work on food systems begun at the Geneva Conference, work on climate change and work on the impact of urbanisation on health, whole systems approaches, partnership across sectors, urbanization, urban planning and poverty, environmental approaches, disaster prevention and post-disaster management.
particularly the role of health promotion in addressing and reducing them globally, including synergies between physical activity, healthy urban planning and design, equitable access to active and sustainable transportation, healthy villages, cities, schools, work places, etc., food availability and affordability, tobacco control, injury prevention, mental health, violence, and alternative health systems.

Health Promotion Systems

a broad category that includes the supporting work and infrastructure that underpins the other health promotion work that the IUHPE does. This includes capacity building, advocacy, health literacy, surveillance, communications, evidence of the effectiveness of health promotion and the work of the global working groups and networks, evaluation frameworks, competencies, accreditation schemes, tools and experiences, research, transferability of implementation evidence and practice knowledge across culture, systems, structures and contexts, health indicators, and new technologies (websites, mobile phones, social networks).

These four priority action areas represent a set of strategic directions that the IUHPE can rally behind, support, and demonstrate considerable global effort toward achievement, bearing in mind what we know of the needs of the field, and of the members (individual and institutional) and partners we serve. The four areas are broad enough to be inclusive of considerable amounts of ongoing IUHPE work but narrow enough to limit the focus of future work.

1 INTERNAL PRIORITY AREA:

Ongoing Operation of the IUHPE

that relates to finance, staffing, governance, supporting regional structures, membership and numerous other tasks that must be done for the IUHPE to maintain organisational effectiveness and efficiency. They are an ongoing requirement and must be taken as a permanent priority action area for the IUHPE.

It is essential that these priority action areas be addressed across the work of the entire Organisation to better demonstrate our global connectedness and achievement.