Commonwealth needs Commonhealth: A personal view

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In a few months time the Commonwealth's Heads of Government (CHOGM) will meet in St John's, the capital of Antigua and Barbuda (CHOGM 2026, 1–4 November 2026). As a voluntary association of 56 independent national governments representing a total population of 2.7 billion people, the Commonwealth already carries a disproportionate share of the global burden of cervical cancer *(1)*. In February 2023, with the support of the then Commonwealth Secretary General Baroness Patricia Scotland KC, a *Lancet Oncology* (LO) Commission on Cancer in the Commonwealth was launched as a working collaboration between Lancet Oncology and the Commonwealth Secretariat, with the remit to explore how Commonwealth member states could respond individually and collectively to the challenge posed by cancers.

Over the past three years the LO Commission has engaged closely with the Commonwealth Secretariat and with Commonwealth countries, including holding interviews with senior officials of the Secretariat and with focal persons for health. A two-day meeting hosted by the Commonwealth Secretariat at Marlborough House in London facilitated the participation of civil society and Commonwealth professional associations and included a roundtable discussion with leadership and members of the Commonwealth Advisory Committee on Health (CACH). Commission members participated in the Commonwealth Ministers of Health Meetings in Geneva, Switzerland, in 2024 and 2025 and the Commission's preliminary findings were trailed at the inaugural Commonwealth Health Coordination Forum in Geneva on 16 May 2026.

The Commission's work includes a new analysis of the costs of scaling interventions, incorporating estimated health and economic benefits and projected returns on investment. It addresses the need for raising levels of health literacy and quantifies the direct and spillover effects of cancer control investments in adjacent economic sectors and the induced effects on Gross Value Added to Commonwealth economies. The LO Commission is now ready to report but informed sources suggest that it will struggle to gain a hearing in front of the Commonwealth Heads of Government when they meet in November. Why should this be?

Part of the reason is the new Commonwealth Strategic Plan 2025–2030 *(2)* that Commonwealth governments hurriedly endorsed in September 2025. The new Strategic Plan, which carries a Foreword by the Commonwealth's new Secretary General, the Honourable Shirley Botchwey, focuses on three policy pillars: building democratic, economic, and environmental resiliencies. Plans for a fourth policy pillar of social resilience (i.e. strengthening health and education, Commonwealth Core Value 11 declared in the Commonwealth Charter of 2013 *(3)* see Panel 1) has been ditched and the dedicated support team within the Commonwealth

Panel 1: The Commonwealth's Core Principles and Values

1. Democracy
2. Human Rights
3. International Peace and Security
4. Tolerance, Respect and Understanding
5. Freedom of Expression
6. Separation of Powers
7. Rule of Law
8. Good Governance
9. Sustainable Development
10. Protecting the Environment
11. Access to Health, Education, Food and Shelter
12. Gender Equality
13. Importance of Young People in the Commonwealth
14. Recognition of the Needs of Small Island States
15. Recognition of the Needs of Vulnerable States
16. The role of Civil Society

Source: The Commonwealth Charter 2013
https://thecommonwealth.org/charter

Secretariat reduced. Instead, the Plan promises "a new focus on partnerships with international organizations and Commonwealth-accredited organizations, to help address the needs of member countries in areas like education and health" *(2)*. In lay terms, this means that life-saving collective action on health and education by Commonwealth governments is off the table.

It is fair to say that the Commonwealth's new recipe for resilience has caused dismay and puzzlement in equal measure. How can democracy be safeguarded without first having an educated electorate? Have not the COVID-19 pandemic, the resurgence of Ebola, the rising cost of treating NCDs and the global shortage of trained health workforces shown the power of ill health to disrupt national economies? Allegedly, the three new policy pillars will be underpinned by Commonwealth Core Value 12 (gender equality), 13 (youth empowerment) and 14 (support for small and vulnerable states) *(3)*. Along with the limited time originally allowed for consultation, it is this arbitrary cherry picking from the basket of Commonwealth Core Values that has caused concern among the wider Commonwealth family. As David Jones, Chair of the Independent Forum of Commonwealth Organizations, warns "The failure to recognise the centrality of social policy to the achievement of the three pillars leaves the impression, perhaps inadvertently, that the Commonwealth is not really interested in the daily lives of its peoples."*(4)*.

This echoes the anxiety expressed elsewhere in this edition of Cancer Control by HRH Princess Dina Mired as to whether there isn't a fundamental mismatch between what governing structures (in this example, the Commonwealth governments) like to incentivise and what a healthy society needs? "People everywhere want the same fundamentals: to live healthy lives, to protect their children, and to know that if illness strikes, they will receive the care they need. The appetite is there. The real question is whether our political and economic systems share it…." *(5)*.

The Commonwealth's swerve is in line many (but not all) liberal democracies in pursuit of prosperity and economic growth. Clearly the job of government in the 21st century is not enviable. Unstable global economic conditions caused by volatile foreign, (i.e. non-Commonwealth) presidents, mounting sovereign debt, geopolitical inequity, and worsening climatic conditions have had an understandably chilling effect on conventional mindsets intent on maintaining the status quo. Building resilience in democracy, the economy and how we deal with extreme climate change are all laudable objectives but most cancer deaths in Commonwealth countries are due to a failure of equity rather than medical failure.

Good health and an educated population are not luxuries; they are necessary factors for economic growth. Pandering to market forces and following a path that leads to brushing off human suffering and aspirations as inconsequential compared with profit and greatness does little to address persistent inequities. Access to health and education are not only human rights declared generations ago by the United Nations (6); they are the day-to-day concerns of citizens in all countries, who are less interested in parliamentary procedure and advantage and more interested in their family's future. Cancer is one of the four or five conditions grouped under the label "non-communicable diseases" (NCDs) that impose substantial economic and social costs, reducing productivity, increasing health expenditure, and constraining economic growth *(7)*. Elected leaders striving for sustainable economic growth cannot afford to ignore these realities.

HM King Charles III, who is the Head of the Commonwealth, recently quoted Shakespeare's play The Tempest "What's past is prologue" *(8,9)*, to which one should add George Santayana's warning "Those who cannot remember the past are condemned to repeat it" *(10)*. Article V of the 1978 Ala Ata Declaration states that Governments have a responsibility for the health of their people which can be fulfilled only by the provision of adequate health and social measures *(11)*. Through its Good Offices and its convening power the Commonwealth has a unique role to play in helping its members do their duty.

To quote Tancredi Falconeri "If we want things to stay as are, things will have to change" *(12)*. Health and education need to be visible as valued cross cutting issues that cut across the three pillars of the Commonwealth's new Strategic Plan, with their oversight demonstrably being the business of the Offices of the Heads of Government and of a properly funded Commonwealth Secretariat. CHOGM 2026 is the reset that provides the Commonwealth leaders with the opportunity to reaffirm all the fundamentals of the 2013 Commonwealth Charter. They can do this by extending an invitation to the authors of the Lancet Oncology Commission on Cancer in the Commonwealth to present their important findings to the Heads of Government in St John's. A reset that starts with the passive suppression of significant expert evidence does not bode well. ■

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