

Closing cervical cancer implementation gaps through coordinated financing in Asia

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AVPN's Dhun Davar discusses how philanthropic capital, cross-sector partnerships and technical assistance can support governments in expanding equitable access to HPV vaccination, screening and early treatment.



Cervical cancer is largely preventable, yet it continues to place a disproportionate burden on women across Asia. The region accounts for 35% of cervical cancer cases worldwide and 58% of global cervical cancer deaths, reflecting persistent gaps in vaccination, screening, diagnosis and access to timely treatment.

Many of the interventions required to address the disease already exist. However, cost constraints, fragmented delivery systems, limited screening coverage and difficulties reaching remote communities continue to prevent these tools from being deployed consistently and equitably.

The Asia Cervical Cancer Financing Platform seeks to complement government-led programmes by mobilising philanthropic capital, technical expertise and cross-sector partnerships. Dhun Davar, Chief of Programmes and Deputy CEO at AVPN, discusses how Indonesia could offer lessons for other high-burden countries, the role of technical assistance and the importance of building sustainable financing models across Asia.

How does AVPN's initiative in Indonesia serve as a blueprint for other high-burden countries across the APAC region to improve health outcomes for women?

Indonesia offers a useful example because it demonstrates an openness to cross-sector collaboration in support of national health priorities. Cervical cancer remains the second most common cancer among women in Indonesia, with around 36,000 cases expected annually and around 21,000 deaths recorded in 2020. Around 70% of cervical cancer cases in the country are diagnosed only at a late stage, when treatment is less effective and mortality rates can reach 50%.

At the same time, Indonesia's National Cervical Cancer Elimination Plan has shown that state-led intervention works. Selected districts achieved first-dose HPV vaccination rates as high as 90%, while national second-dose coverage was estimated at around 58.1% to 60% as of November 2023. This shows that progress is possible when public systems are mobilised at scale.

AVPN's ambition in supporting the Asia Cervical Cancer Financing Platform is to complement government-led efforts by mobilising catalytic philanthropic capital and cross-sector partnerships where gaps remain. This is particularly important, as complementary financing can support the technical assistance needed across the cervical cancer elimination continuum, including expanding access to HPV vaccination, screening and early treatment.

This is why Indonesia can serve as a practical reference point for other high-burden countries across Asia. The region accounts for 35% of all cervical cancer cases and 58% of all cervical cancer deaths globally, and many countries face similar challenges in financing, delivery and equity.

While every country's context is different, the underlying principle is the same: cervical cancer elimination requires proven interventions to be matched with the financing and partnerships needed to deliver them at scale.

The blueprint is therefore not about replicating Indonesia's programme exactly. It is about showing how governments, philanthropy and the private sector can work together to close implementation gaps and improve health outcomes for women who are being left behind.

What specific health-tech or biotech innovations are being prioritised through the Technical Assistance Facility to strengthen Indonesia's health system capacity?

In Indonesia, AVPN aims to mobilise philanthropic capital to strengthen technical assistance across key areas of cervical cancer elimination, including vaccination, early detection, treatment at the primary healthcare level and the broader enabling environment.

As the Technical Assistance Facility is still taking shape, it would be premature to speak about specific health-tech or biotech solutions at this stage. That said, philanthropic fund mobilisation towards the Facility is intended to improve preparedness, strengthen implementation capacity and increase the likelihood that cervical cancer elimination efforts can succeed.

Ultimately, any innovation considered must be grounded in real implementation needs, aligned with national priorities and able to support more equitable access to prevention, screening and treatment.

What are the primary logistical and implementation barriers unique to the APAC region that the Asia Cervical Cancer Financing Platform is currently addressing?

In Asia, the gaps that prevent proven cervical cancer interventions from reaching women and girls consistently are often practical. These include cost barriers and logistical challenges that create difficulties in reaching last-mile populations.

These factors affect whether HPV vaccination can be delivered at scale, whether women can access screening and diagnostics, and whether those who need care can be referred for timely treatment. In many low- and middle-income countries, less than 5% of women receive cervical cancer screening, despite the availability of effective prevention tools.

AVPN's Asia Cervical Cancer Financing Platform is designed to mobilise philanthropic capital to complement government-led programmes and support implementation where additional resources can have the greatest impact.

This includes strengthening delivery around vaccination, early detection, specimen transport, referral laboratories, access to pre-cancer treatment, information systems and community engagement.

Addressing this challenge is especially important in Asia, which accounts for 35% of all cervical cancer cases diagnosed annually worldwide, while 58% of all cervical cancer deaths occur among Asian women.

The platform aims to help finance the equitable delivery of proven cervical cancer prevention tools, so that women are not left behind because of where they live or what they can afford.

How can artificial intelligence be integrated into the platform to enhance screening accuracy or optimise the delivery of HPV vaccinations in remote areas?

At this stage, the Asia Cervical Cancer Financing Platform is focused on mobilising financing and strengthening implementation around proven interventions, including HPV vaccination, screening, early detection and timely treatment.

While AI may have the potential to support cervical cancer elimination over time, any future application would need to be grounded in real implementation needs and help address barriers to equitable delivery.

Looking ahead, how does AVPN plan to involve regional biotech and healthcare stakeholders across Asia to ensure the long-term sustainability of these financing models?

AVPN's role is to bring the right partners, capital and capabilities together in ways that reflect Asia's realities and align with national health priorities.

For cervical cancer elimination, this means engaging healthcare, biotech and technical stakeholders where their capabilities can help address real system gaps, from vaccine production capacity and innovative diagnostics to screening, referral systems, treatment access and information systems.

The long-term sustainability of these financing models depends on coordination across the impact ecosystem. AVPN provides the connective tissue between governments, funders, healthcare stakeholders, technical experts and private-sector partners, so that resources are aligned towards shared outcomes rather than fragmented interventions.

This also requires a continuum of capital, from grants and catalytic philanthropic funding to technical assistance and other financing approaches that help move solutions from intent to implementation, and from isolated programmes to scalable models.

In the case of cervical cancer elimination, every USD 1 mobilised through 2050 is estimated to generate USD 26 in societal and economic benefits.

This is how AVPN sees long-term sustainability: not as a single funding mechanism, but as a trusted ecosystem where Asia-led partnerships, coordinated capital and relevant technical capabilities come together to strengthen prevention, screening and treatment over time.