



# Multilateral Health Diplomacy of Indonesia through Indonesia's Leadership in the G20 Forum during COVID-19 Pandemic

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## ABSTRACT

This research analyzes Indonesia's implementation of multilateral health diplomacy (HD) during the COVID-19 crisis, with emphasis on its leadership in the 2022 G20 Presidency. Using a qualitative case study approach based on secondary data, this research examines "How did the Indonesian government implement multilateral HD at the G20 to strengthen global health architecture and resilience during the COVID-19 pandemic?" The findings described that Indonesia adopted a multi-level diplomatic strategy involving government ministries, international organizations, regional institutions, and national pharmaceutical industries (Bio Farma). Through these collaborations, Indonesia successfully advocated equitable access to vaccines, strengthened global health governance, and advanced pandemic preparedness. Key initiatives—including the establishment of the Pandemic Fund, co-chairmanship of the COVAX AMC Engagement Group, and development of the One Health framework—demonstrate Indonesia's growing role as an emerging power in GHD. This study contributes to the operationalization of GHD theory by describing health diplomacy strategies that bridge national interests and global solidarity in a multilateral context in facing current and future pandemics.

## Kata Kunci

COVID-19;  
Diplomasi  
Kesehatan; G20;  
Kepemimpinan  
Indonesia;  
Multilateral

## ABSTRAK

Penelitian ini menganalisis implementasi diplomasi kesehatan multilateral Indonesia selama krisis COVID-19 dengan penekanan pada presidensi Indonesia di G20 tahun 2022. Dengan menggunakan pendekatan studi kasus kualitatif berdasarkan data sekunder, penelitian ini mengkaji "Bagaimana pemerintah Indonesia menerapkan diplomasi kesehatan multilateral di G20 untuk memperkuat arsitektur dan ketahanan kesehatan global selama pandemi COVID-19?" Temuan penelitian ini menggambarkan bahwa Indonesia mengadopsi strategi diplomasi multi-tingkat yang melibatkan kementerian, institusi regional dan internasional, industri farmasi nasional (Bio Farma). Melalui kolaborasi ini, Indonesia berhasil mengadvokasi akses vaksin yang adil, memperkuat tata kelola kesehatan global, dan memajukan kesiapsiagaan pandemi. Inisiatif-inisiatif utama—termasuk pembentukan Dana darurat pandemi, keterlibatan dalam COVAX AMC Engagement Group, dan pengembangan kerangka kerja One Health—menunjukkan peran Indonesia yang semakin besar sebagai emerging power di ranah GHD. Riset ini berkontribusi pada operasionalisasi teori GHD dengan menggambarkan strategi diplomasi kesehatan yang menjembatani kepentingan nasional dan solidaritas global pada konteks multilateral dalam menghadapi pandemi di masa kini dan mendatang.

## INTRODUCTION

Health diplomacy (HD) has not been a critical topic before the COVID-19 pandemic, but recently health cooperation has become crucial in providing solutions as countries struggle with the pandemic. In the international relations studies, HD is explored through the frameworks of security, economics, politics, diplomacy, and governance, to understand the health crisis from an international relations perspective (Davies et al., 2014). Resolving the health crisis and cooperation can be achieved through three main options: bilateral, regional, and multilateral, depending on the relevant regime. This is not limited to the role of state actors but also requires increased contributions from the private sector and other non-governmental institutions to protect the public and meet national needs in implementing public health policies (Kuriakose, 2020).

The discourse on foreign policy and health issues in this case is a multifaceted matter in terms of health, development, and how the dynamics of the relationship between health issues and diplomacy tend to play on two sides of the same coin, namely in the aspects of low politics and high politics (Fidler, 2010). Consequently, resolving health issues will require state participation on a broader platform, and have a significant impact in addressing the broad interconnectedness of health issues with diplomacy that is coherent with the domestic situation and the interests of developed and developing countries (Rosenbaum et al., 2025).

One of the HD strategies that might be expanded, with the COVID-19 pandemic, is through multilateral partnerships in international forum, including the United Nations (UN), ASEAN, ASEAN Plus Three, Mexico, Indonesia, Korea, Turkey, and Australia (MIKTA), South-South Cooperation, the Group of Eight (G8), and Group of Twenty (G20) (Bachmann, 2019). HD that prioritizes a multilateral framework is the appropriate option, in accordance with previous studies that investigated how health issues transcend national borders, necessitating the expansion of sectors involved in public health crisis response under a global multilateral regime (Amul et al., 2022). This is considered the appropriate approach since the international community is in control of generating acceptable health legal instruments in the multilateral scope (Inayah et al., 2023).

Examining the commitment to implementing HD across all countries, in 2019, when the pandemic began to spread, Indonesia scored 56.6 on the Global Health Security Index, with the US scoring the highest at 83.5. This index represents the responsibility of each country to reduce the potential for a national outbreak and strengthen collective cooperation to save lives regionally and globally (Ravi et al., 2019). However, Indonesia has transformed its health sector, as outlined in its foreign policy. First, the Indonesian government facilitated the repatriation of migrant workers abroad. Second, the Indonesian government enhanced global health governance by learning and collaborating with ASEAN countries and welfare states through regional and international negotiation forums. Third, Indonesia also considered its national interests in regulating foreign policy amidst regional and global geopolitical dynamics (Kadewardana, 2021).

Regarding partnerships within ASEAN, Indonesia also coordinates with ASEAN counterparts in the ASEAN Plus Three (APT) forums. Indonesia proposed the establishment of ASEAN's COVID-19 Response Fund through collaboration with Japan, China, and South Korea (Gill, 2020). In addition, a Plan of Action (PoA) has been released as a framework for fulfilling pledge from APT countries to assist ASEAN nations in decreasing the outbreak effects. China contributed to the distribution of medical equipment and the acceleration of vaccinations. Japan has concentrated on medicine and food supply. Then, personal protection equipment (PPE) and CPR testing equipment are supplied by South Korea (Febreani, 2022).

Based on previous explanations, this research proposes to examine process and deliberation of multilateral HD to strengthen the global health resilience through Indonesian leadership in the 2022 G20 presidency with the theme "Recover Together, Recover Stronger" (ERIA, 2022). Related to this narrative, previous research elaborated HD, which is basically textually studied both thematically and

country-specifically or narrowly in a case study of a country. Several research on Indonesian HD emphasize groups of literature from the scope related to the formulation of diplomatic strategies, correlations of HD and foreign policy, global health architecture, and normative analysis in handling outbreaks (Bjola & Coplen, 2023; Youde, 2010, 2016).

The research of by Alwan (2014) has been examined the correlation of HD and foreign policy. He argued that with WHO's guidance, countries in the area should get more engaged in reinforcing the connections between foreign policy and health both domestically and internationally. Countries might investigate novel ways to reinforce support for GHD. To create HD more viable and progress the concerns, this might involve establishing unit for GHD in the Ministry of Foreign Affairs (MoFA) or enhancing the departments of international relations in Health Ministries (Alwan, 2014). To overcome health issues, Indonesia conducts health diplomacy through bilateral, regional, and multilateral collaborations with other countries, particularly in the G20 multilateral forum. Indonesia's participation in various forums has yielded tangible results, promoting vaccine equality and health medicines for all countries, welfare-, developing, to poor countries (Djalal et al., 2021).

Furthermore, increasing national health resilience, which is a priority of the government's public health policy, also focuses on increasing adaptation to the pressures of health crises, emphasizing supervision and field technical support in accordance with the recommendations of WHO (Sulistiadi, 2023). The implementation of the recommendations from the 2014 WHO regional workshop in Southeast Asia needs to be carefully examined to obtain accurate data for public health policy analysis and reorientation of the health protection system (Hosseinpoor et al., 2018).

Current multilateral HD tends to be influenced by regional interests, with norm setting increasingly oriented toward non-traditional development issues within the securitization of human rights. The COVID-19 pandemic has brought about multidimensional changes in international relations, particularly in the political, economic, and international development landscape. These changes require countries to be more resilient and implement measures to address transnational issues that directly impact populations (Jose & Putri, 2021). Forums like the G8 have increased attention to global health governance, with health issues becoming a focal point in negotiations. The G20, in this regard, serves as a more inclusive forum, allowing important voices from the global South to be heard in global and regional decision-making. The G20's success in collectively responding to the global financial crisis underscores the urgency for this forum to also become an arena for HD (McBride et al., 2019).

Understanding this issue is crucial to trace how Indonesia's HD at the G20 can be implemented, given its position and character as an emerging power in conducting HD. Therefore, the research question to be further explored is, "How did the Indonesian government implement multilateral HD at the G20 to strengthen global health architecture and resilience during the COVID-19 pandemic?"

Indonesia learned much from the G20 forum related to the importance of strengthening the global health architecture through its 2022 G20 presidency, which provided a momentum to encourage innovation and multi-stakeholder cooperation in realizing inclusive and resilient HD. It is crucial to collectively examine how Indonesia leverages public attention and political momentum to advance the G20's role in supporting the WHO's work through cross-sectoral agreements across economics, health, development, and diplomacy. This research is expected to yield insights into key areas of concern and identify potential problems, and how Indonesia can strategically navigate the G20 from its current position to achieve its concrete role as a multilateral forum.

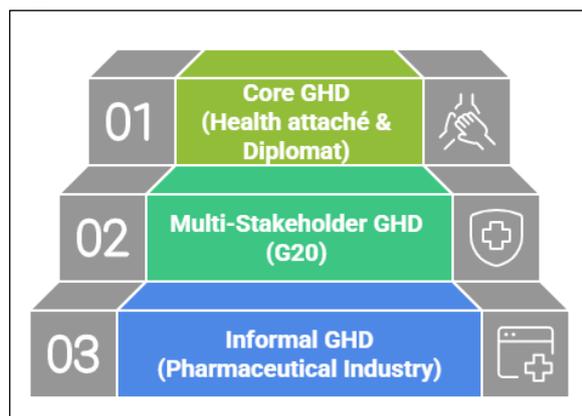
## CONCEPTUAL FRAMEWORK

### The Theory of Global Health Diplomacy

Global Health Diplomacy (GHD) explains the process of multi-stakeholder negotiations between foreign policy and health issues, and how sociopolitical practices manifest in diplomatic action (Drager et al., 2007). The GHD theory in its application, is generally conceptualized within the smart power paradigm, considering the nature of GHD, which can be a low-politics issue but can also have high-politics content even though it does not have traditional hard power manifestations (Khazatzadeh-Mahani et al., 2018).

Subsequently, according to Birn et al. (2017), the term of GHD reflects to organizational framework, communication, and negotiating approaches to affect the global health policy framework (Birn et al., 2017). Basically, this theory is multi-level, so there are three segmentations of GHD itself, based on the actors involved and the level of diplomacy carried out linearly with the activities conducted by the actors at each level. As for the three segmentations are depicted in the form of a pyramid proposed by Katz et al (2011) and become an academic consensus and textually used as the main framework for interpreting GHD (Katz et al., 2011). The proposition of the GHD pyramid study is then reviewed also in the context of social relations between actors and politics that are transnational in nature and how the challenges of the 21<sup>st</sup> century has been discussed classification and functions of actors in the global order perspective (Almeida, 2020).

**Figure 1. Actors' Positions of the GHD's Theory**



Source: Adopted by Katz et al (2011) and Designed by Researchers (2025)

Figure 1 illustrates three rungs of the stairs, each occupied by several state and non-state actors. The first position is occupied by state actors related to the health sector, such as health attachés and diplomats (Katz et al., 2011). In the case of Indonesia, these are the Health Ministry and the MoFA. Meanwhile, non-state actors occupy the second position, typically regional, multilateral, and international institutions, or forums. Multilateral institutions or forums are considered critical because they serve as a forum for diplomacy and represent the interests of both the institution and the countries within them (Kickbusch & Told, 2013).

In the G20 forum, Indonesia is a leader that has utilized this multilateral forum to negotiate with various countries' leaders to fight the pandemic using the vaccination method (Kickbusch et al., 2022). Even at the regional level, Indonesia is strengthening coordination within ASEAN to prioritize collective regional needs for pandemic survival. The pharmaceutical industry ranks last (Katz et al., 2011). Indonesia appointed Bio Farma Enterprise and its subsidiaries to conduct research, negotiate vaccine quotas, and distribute vaccines (Bio Farma, 2024). The second rung is typically filled by non-state actors such as regional, multilateral institutions, international organizations (IOs), and NGOs. The

G20 multilateral forum, in this case, could be positioned on the second rung. The forum or institution could serve as an effective diplomatic platform for regulating joint agreements to find solutions to mitigate the impact of the pandemic by integrating them into foreign policy (Kelly, 2021).

## **RESEARCH METHODOLOGY**

This research uses a qualitative research method from secondary sources with an inductive pattern, which is a method that focuses on the elaboration of case studies and literature reviews on abstraction and analysis that are appropriate to the research scope. In this research itself, qualitative analysis is studied as one of the common methods in the scope of social science (Urrieta & Hatt, 2019).

This research has been classified as a case study, specifically the Indonesian G20 presidency in 2022, which focuses on the agenda of strengthening global health resilience. The researchers used secondary data sources that collected through data collection technique of literature studies across articles, books, and journals of research results from previous researchers (Neuman, 2014). Due to the theory of GHD, the researchers also collected secondary data from documents and websites of NGOs, Bio Farma, and academics to analyze capacity of non-state actors in negotiating pandemic issues.

Subsequently, for the data analysis process, the researchers conducted some aspects: data reduction, analysis, verification, to conclusions. The data reduction stage culminated in the selection, focusing, and simplification of data from various data acquisition sources, for instance official government documents, journal articles, seminar transcripts, and so forth (Denzin & Lincoln, 2018). In the data reduction stage, the author sorts through data on HD, focusing on the three main elements of health diplomacy according to the GHD theory: core, multi-stakeholder, and informal. Then, in the data presentation stage, various reduced data are presented through in-depth analysis using the GHD theory previously explained here. The final stage is the verification or conclusion stage. At this stage, the researchers extracted the essence or summary of the writing into a complete conclusion that describes the entire research substances.

## **RESULTS AND DISCUSSIONS**

### **Indonesia's Leadership in GHD: The G20 Presidency and Multilateral Responses to the COVID-19 Pandemic**

Indonesia is the only ASEAN country invited to join the G20. For the first time, Indonesia has been selected as President of the G20. Since then, the nation has offered substantial contributions to some G20 initiatives. The G20, led by Indonesia, specifically addresses the health sector as one of its main concerns. The Indonesian government proposed some priority issues in the G20 forum, including global health architecture and resilience, digital transformation, and sustainable energy transition. The G20 will be critical in building a more resilient and equitable global health system to handle future pandemics by fortifying some aspects of global health. The G20's character as a global health actor continues to be further defined by the health sector priority obstacle advocated by the Indonesian government (Naqsabandiyah et al., 2022).

The principles of freedom and movement constitute a successful foundation for Indonesia's leadership in multilateral health forums. Indonesia concentrated on enhancing good governance as part of the G20 reform agenda. The reformation of Indonesia's bureaucracy has been granted prominence in accordance with the reformation on governmental concerns (Roza, 2022). The Financial Stability Board (FSB), IMF, UN, World Bank, WHO, and other organizations need to be involved in the G20 to coordinate global resilience and readiness to comply the global health governance framework. The objective is to evaluate an institution's ability to adapt to a pandemic of common policy readiness in diverse governance contexts (G20 Task Force, 2022a).

Consequently, Indonesia empowers the G20 forum to join the COVID-19 Vaccines Global Access or COVAX as an initiative to reinforce Indonesia's role in advocating fair, affordable and efficient access to vaccines for developing nations. Moreover, Indonesia successfully acts as a Co-Chair in the COVAX Advanced Market Commitment Engagement Group (AMC EG). Through this role, Indonesian government conducted negotiations to the welfare states, for instance the US, the UK, European countries, the United Arab Emirates, Canada, Germany, etc. The normative conceptualization of HD at the multilateral level has been the basis for Indonesia's position in multilateral negotiations and programs for health crisis response (Lisa, 2020).

Indonesia has obtained more than 516 million vaccine doses, both commercially and through grants from partner countries and the COVAX Facility. Of these, 137 million doses were obtained through bilateral and multilateral cooperation. Through its multilateral track, Indonesia continues to advocate for equal access to vaccines for all countries through its co-chairmanship in the COVAX AMC Engagement Group. As of December 2022, COVAX had distributed 1.88 billion vaccine doses to 146 countries, including 103 million doses to Indonesia (MoFA of Indonesia, 2022). The achievement of foreign policy is fundamentally related to Indonesia's HD success. Indonesia prioritizes the following areas to collaborate in the health sector, such as strengthening the health system, enhancing human resources, developing health technology (e-Health), deploying health workers, and pharmaceuticals and medical devices (Maryadi et al., 2018).

Numerous internal variables influence Indonesia's proactive attempts to promote international cooperation. When the COVID-19 pandemic occurred, issues with the health system—inadequate medical facilities, staff safety supplies, testing, medicines availability, updated information—became significant obstacles in Indonesia's COVID-19 responses (Mahendradhata et al., 2021). To address these shortcomings, the Indonesian government regulated some national policies. Some of the regulations are: 1) Presidential Instruction No.4/2020 about refocusing operations, redistributing funds, and performing purchases; 2) Presidential Regulation No.82/2020 and No.108/2020 related to the committee establishment for mitigating pandemic and economic recovery; 3) Lieu of Law (PERPPU) No 1/2020 about state financial policy and financial system stability for handling the pandemic (Ministry of State Secretariat, 2020).

Related to manage pandemic, Indonesia places a high priority on some principles that serve as the fundamental guidelines for Indonesia's HD, such as (1) guaranteeing fair access to reasonably and efficient COVID-19 treatment tools (vaccines, medications, and diagnostic tools); (2) COVID-19 treatment resources; and (3) long-term national resilience to have better preparedness in response to the potential outbreaks. The G20 itself is needed in Indonesia's HD, because the G20 has several important modalities as informal multilateral cooperation, such as: (1) coordinating the establishment of international standards in the domains of development, governance, and funding; (2) integrating the development agenda into its priority agenda; and (3) functioning as a global steering committee for the selection of multilateral funding platforms or references and emergence of mechanisms that work in collaboration with other international agencies (G20 Task Force, 2022b).

### **Building Health Architecture and Resilience through Vaccine Hubs and Multilateral Financing**

The G20 itself may facilitate cooperative negotiations with the 20 biggest corporations in the world through this mechanism to exchange experiences and solidify perspectives. This forum ensures that a range of voices are represented in policymaking by bringing a diversity of viewpoints. The presidency of Indonesia in the G20 Indonesia also emphasized the significance of multilateral development banks (MDBs) as essential organizations to generate more essential finance for sustainable development to reinforce the global-south cooperation (Bradford & Coulibaly, 2025).

During its leadership, Indonesia also sought to revitalize South-South and Triangular Cooperation. In 2025, South Africa will oversee the G20 presidency, which also coincides with the Asia-Africa Conference. This is certainly strategic for Indonesia to rebuild solidarity and cooperation among emerging economies. The African Union's accession to the G20 in 2023 provides a chance for emerging economies to voice development agendas at the G20. Therefore, Indonesia has the potential to promote stronger and more ambitious South-South and Triangular Cooperation (Larionova, 2023). Since the outbreak has increased economic gaps, state isolationism and protectionism, exacerbated inequality, and disturbed international cooperation, cooperation through the G20 should be more essential (Lal et al., 2022).

To support the implementation of HD, Indonesian government initiated the establishment of a pandemic fund aimed at funding prevention, preparation, and response systems for future pandemics. Furthermore, Indonesia intends to be a regional hub for vaccine research and production. Amidst the dynamic economic situation, to support economic recovery efforts, economic diplomacy prioritizes strengthening cooperation through the agreement of various bilateral and regional cooperation projects. Indonesia's leadership in multilateral forums during its G20 presidency has also resulted in agreements that prioritize Indonesia's national interests and the spirit of solidarity with developing countries (Ahmada, 2024).

The pandemic fund was established on September 8, 2022, and to date, more than 24 donor countries and three philanthropic organizations have committed USD 1.4 billion. This is a positive step and promises to welcome more contributors to the fund (Harini, 2022). Indonesia's G20 presidency has reinforced to address a variety of new issues during its one-year term. This multilateral forum culminated in the production of a document called the Declaration of G20 Bali Leaders. Furthermore, the G20 is an excellent venue for discussing new ways to boost economic growth. The G20 has facilitated foreign investment in Indonesia and expanded investment networks (MoFA of Indonesia, 2022).

Under Indonesia's G20 presidency, with the theme "recover together and stronger", the Indonesian government fully recognizes the importance of building a more resilient health system. However, multilateral funding is also needed to ensure that future pandemics are no longer hampered by funding gaps. Therefore, the Indonesian government proposed a mechanism such as the Financial Intermediary Fund (FIF), which would be connected by the World Bank. Currently, under Indonesia's leadership, the G20 has successfully supported the FIF, and discussions on the mechanism are ongoing ahead of the G20 Summit in November 2022 (Nishizawa et al., 2020).

Indonesia, in this regard, continues to strengthen its multilateral diplomatic activities by promoting one of the priorities at the G20 Health Ministers Meeting, held once in June 2022, which produced several important outcomes. First, implementing the G20 member countries' commitment to encourage the development of the G20 One Health Policy Brief. This policy recommendation paper can serve as a reference for G20 member countries in the WHA as a national position in developing One Health solution modalities, particularly for preventing future pandemics (G20 Working Group, 2022).

Through G20 Co-financing, the G20 Health Ministerial Meeting, and the Health Ministerial Task Force, the "One Health Approach" can be jointly negotiated. The Indonesian government coordinated to prepare an initial draft of the joint communique for discussion of each article. This approach is then monitored through the One Health Joint Plan of Action (2022-2026) (OH JPA) mechanism, which is useful for analyzing the overview of One Health implementation carried out by G20 member countries. The One Health system should strengthen capacity and build more resilient and responsive health systems to address complex and multidimensional health risks (G20 Task Force, 2022c).

Furthermore, Indonesia expresses serious commitment to support financial inclusion through credit development and digitalization of Micro, Small, and Medium Enterprises (MSMEs), attracting

investors, and promoting fiscal stimulus to drive economic recovery during and after the pandemic. Indonesia is also working to negotiate cooperation on economic transformation towards a green and sustainable economy (Lisbet, 2022). Through its oversight function, the Indonesian House of Representatives (DPR RI) needs to oversee and ensure that Indonesia can demonstrate its leadership as G20 President properly. The DPR RI has capacity to do its strategic role through its oversight function by supporting its partners in relevant commissions whose work programs align with Indonesia's role as G20 President. In this regard, the technical ministries, and relevant institutions for working groups must organize own hearings and prepare reports in the proceedings (Lisbet, 2022).

Subsequently, based on the theory of GHD, some actors in the three rungs of GHD play roles according to their respective authorities. The Health Ministry and the Ministry of Foreign Affairs (MoFA) are the two most representative ministries directly involved in handling the pandemic and Indonesia's negotiations at the multilateral level. However, these two ministries also need assistance from non-state entities such as NGOs, Bio Farma, Kalbe Farma, academics, and the public (Sari et al., 2024). One of the leading producers of vaccines in Southeast Asia, Bio Farma is a well-known business entity with WHO certification. It works to bridge the gap in vaccine production quantity and quality between welfare states, developing countries (DCs), less-developed countries (LDCs), and countries with high abilities (Dellepiane & Wood, 2015).

In the Global Health Summit Forum attended by G20 member countries, President Joko Widodo expressed Indonesia's readiness to become a vaccine hub in the region. Indonesia's readiness to become a COVID-19 vaccine hub is also shown through the vaccine production by Bio Farma approximately 20 million doses per month (Wicaksono et al., 2022). The Indonesian government formed the State-Owned Enterprises (SOEs) Health Holding Company by integrating three SOEs that already had advantages in respective fields: Bio Farma in the field of life science products, Kimia Farma in the field of chemical medicines, and Indofarma in the field of herbal medicines & medical devices. The goal of combining these three SOEs is to offer holistic resolutions to Indonesia's disease issues and to expand in the regional and global spheres (Bio Farma, n.d.-a).

For the distribution of the vaccine itself, Bio Farma already has 48 warehouses throughout Indonesia. In terms of technology, Bio Farma has prepared an end-to-end digital solution starting from the production plant, the distribution process and reaching the final destinations, for instance health facilities for the community. The distribution process can also be monitored in real time at the Command Center Holding SOEs Pharmacy (Bio Farma, n.d.-b). Indonesia through Bio Farma was selected as the recipient of mRNA vaccine technology (spoke) from WHO on 24<sup>th</sup> February 2022. The official release of the IndoVac COVID-19 vaccine in October 2022 has been the good trajectory of Bio Farma's partnership with Baylor College of Medicine in the US (Bio Farma, 2022).

International forums can be used as a communication medium more practically. The state may pursue its interest in a global organization while also pursuing bilateral cooperation through private meetings. For instance, during the G20 Foreign Ministers Meeting and the UN General Assembly meeting in New York, Indonesia, Japan's Foreign Affairs Minister arranged a small gathering to examine the dose-sharing cooperation (Rakhra, 2023). Bio Farma has been recognized as the largest vaccine company, after those in the US, Europe. Bio Farma has the capacity to produce 3 billion doses of vaccine, divided into 14 types. This production capacity is even considered the largest in Southeast Asia (Jakarta Globe, 2022).

Moreover, after receiving 15 million doses of bulk COVID-19 vaccine from Sinovac on 12<sup>th</sup> January 2021, Bio Farma continued the production process from raw materials, at the fill and finish facility located at Bio Farma to become the final product. The raw materials for the Covid-19 vaccine have begun to be produced in mid-January 2021. The results of the raw material production process will complete the supply of the COVID-19 vaccine, in finished product packaging of three million doses that were previously received in December 2020. As of 21<sup>st</sup> January 2020, 4 million doses of the vaccine

have been produced. The status of these products is in the quality control process stage, which is sent to the POM Agency to be safely distributed (Setiawan, 2021). Collaboration between Bio Farma and Sinovac, through two mechanisms, namely imports in the form of finished single-dose products intended for front liners in Indonesia, and imports in the form of bulk or vaccine concentrate. This bulk is further processed at Bio Farma in the fill and finish facility at Bio Farma (Setiawan, 2021).

Based on the discussions, there are three main strands of Indonesian multilateral diplomacy, reflecting on Indonesia's leadership in the G20 on priority health issues to improve national health sector, global health-, architecture and resilience. Indonesia encourages synergy. First, to produce a multi-stakeholder and collaborative multilateral HD for Indonesia as an emerging power. Second, to provide leadership space for Indonesia as an ideal precondition for channeling interests in improving domestic health resilience and building adequate capacity for health crisis response. Third, as a manifestation of multilateral diplomacy that encourages advocacy for Indonesia's role through priority government programs in multilateral forum in the WHO, the UN, the Southeast Asia region (ASEAN) related to strengthening the global health architecture and resilience.

## CONCLUSION

After a comprehensive analysis of the realization of HD by the Indonesian government, the researcher presents conclusions from three aspects, namely the operationalization of theory, empirics, and policy. This research reinforces and expands the analytical relevance GHD by demonstrating how health issues can simultaneously inhabit the spheres of low and high politics. Indonesia's experience during the COVID-19 pandemic illustrates the multidimensional nature of GHD, where state and non-state actors engage across multiple levels of diplomacy. This research confirms the usefulness of the GHD stairs in explaining actor dynamics within multilateral forums and contributes to the literature by situating Indonesia as an emerging power capable of shaping global health governance through cooperative and inclusive diplomatic frameworks.

Empirically, this study highlights Indonesia's concrete achievements in the 2022 G20 presidency, including its leadership in establishing the Pandemic Fund, advancing the One Health framework, and advocating equitable access to vaccines through mechanisms such as COVAX. The research documents the interaction between government ministries, multilateral institutions, and national pharmaceutical industries such as Bio Farma, emphasizing the operational synergy needed to address complex health crises. Indonesia's mobilization of multilateral support and its enhancement of domestic health capacities demonstrate how diplomacy and national policy reform can be effectively integrated.

From a policy perspective, this study emphasizes the importance of sustained multilateral engagement to strengthen global health resilience. Indonesia's G20 leadership provides a model for integrating health priorities into broader economic and development agendas, underscoring the need for predictable financing, cross-sectoral cooperation, and multi-stakeholder governance. The findings suggest that Indonesia should continue expanding its diplomatic leadership, invest in health technology and production capacity, and deepen cooperation with regional and global partners. These steps are essential to ensure preparedness for future pandemics and to reinforce Indonesia's long-term role in shaping global health architecture and resilience.

## REFERENCES

- Ahmada, S. F. (2024). Indonesia Interest toward G20 Pandemic Fund: Global Health Diplomacy Perspective. *Jurnal Hubungan Internasional*, 17(1), 62–77.
- Almeida, C. (2020). Global Health Diplomacy: A Theoretical and Analytical Review. In *Oxford Research Encyclopedia of Global Public Health*. Oxford University Press. <https://doi.org/10.1093/acrefore/9780190632366.013.25>
- Alwan, A. (2014). *Summary of the Third Seminar on Health Diplomacy* (WHO-EM/HHR/003/).

- Amul, G. G., Ang, M., Kraybill, D., Ong, S. E., & Yoong, J. (2022). Responses to COVID-19 in Southeast Asia: Diverse Paths and Ongoing Challenges. In *Asian Economic Policy Review* (Vol. 17, Issue 1, pp. 90–110). John Wiley and Sons Inc. <https://doi.org/10.1111/aepr.12362>
- Bachmann, V. (2019). (Trans)regionalism and South-South cooperation: Afrasia instead of Eurafrique? *Third World Quarterly*, 0(0), 1–21. <https://doi.org/10.1080/01436597.2019.1573634>
- Bio Farma. (n.d.-a). Bio Farma: About Us. *Bio Farma Group*.
- Bio Farma. (n.d.-b). *Bio Farma, WHO, MPP and Cepi Collaborate To Increase Vaccine Accessibility In The Global South Region*. <https://medicinespatentpool.org/>
- Bio Farma. (2022). Phase 3 Clinical Trial of Bio Farma's Covid-19 Vaccine Commencing Soon, Indonesia Will Be Independent in Making Covid-19 Vaccine. *Bio Farma*, 1–7.
- Bio Farma. (2024, October 17). *Memberikan Kontribusi Aktif di Masa Pandemi: Peneliti Bio Farma Menerima Penghargaan dari Kemenkes RI*.
- Birn, A. E., Muntaner, C., & Afzal, Z. (2017). South-South cooperation in health: Bringing in theory, politics, history, and social justice. In *Cadernos de Saude Publica* (Vol. 33). Fundacao Oswaldo Cruz. <https://doi.org/10.1590/0102-311X00194616>
- Bjola, C., & Coplen, M. (2023). Digital Diplomacy in the Time of the Coronavirus Pandemic: Lessons and Recommendations. *Studies in Diplomacy and International Relations*, 323–342. [https://doi.org/10.1007/978-3-031-10971-3\\_16](https://doi.org/10.1007/978-3-031-10971-3_16)
- Bradford, C. I., & Coulibaly, B. S. (2025). Strengthening Cooperation For A Changing World: The Evolving Role Of The G20 In Global Economic Governance. *Global Economy and Development at Brookings*, 1–26.
- Davies, S. E., Elbe, S., Howell, A., & McInnes, C. (2014). Global health in international relations: Editors' introduction. In *Review of International Studies* (Vol. 40, Issue 5, pp. 825–834). Cambridge University Press. <https://doi.org/10.1017/S0260210514000308>
- Dellepiane, N., & Wood, D. (2015). Twenty-five years of the WHO vaccines prequalification programme (1987-2012): lessons learned and future perspectives. *Vaccine*, 33(1), 52–61.
- Denzin, N. K., & Lincoln, Y. S. (2018). *The SAGE Handbook of Qualitative Research*. SAGE Publications Inc.
- Djalal, D. P., Subagyo, A., & Delanova, M. O. (2021). Health Diplomacy as an Instrument of Indonesian Foreign Policy in the Era of Covid-19 Pandemic. *Journal of Global Strategic Studies*, 1(2), 1–17. <https://ejournal.fisip.unjani.ac.id/index.php/JGSS/article/view/849/294>
- Drager, N., David, & Fidler, P. (2007). Foreign Policy, Trade and Health: At the Cutting Edge of Global Health Diplomacy. In *Bulletin of the World Health Organization* (Vol. 85, Issue 3).
- ERIA. (2022). [Op-ed] Indonesia's Challenge in Reviving G20 for (a stronger and inclusive) Global Economic Recovery. *Economic Research Institute for ASEAN and East Asia*, 1–6. <https://www.eria.org/database-and-programmes/op-ed-indonesias-challenge-in-reviving-g20-for-a-stronger-and-inclusive-global-economic-recovery>
- Febreani, Y. K. (2022). Penguatan Kerjasama ASEAN Plus Three (APT) untuk Penanganan dan Mitigasi Dampak Negatif Ekonomi dari Pandemi Covid-19. *Jurnal Hubungan Internasional*, 15(1), 1–19. <https://doi.org/10.20473/jhi.v15i1.31254>
- Fidler, D. P. (2010). Asia's Participation in Global Health Diplomacy and Global Health Governance. *Asian Journal of WTO & International Health Law and Policy*, 1–33.
- G20 Task Force. (2022a). *G20 Bali Leaders-Declaration*. 1–19. <https://g20.utoronto.ca/2022/G20%20Bali%20Leaders-%20Declaration,%2015-16%20November%202022,%20incl%20Annex.pdf>
- G20 Task Force. (2022b). *G20 Health Ministers' Action to Strengthen Global Health Architecture*. [https://g7g20-documents.org/fileadmin/G7G20\\_documents/2022/G20/Indonesia/Sherpa-Track/Health%20Ministers/1%20Ministers'%20Language/Chair%E2%80%99s%20Summary%20Health%20Ministers'%20Meeting%20of%20the%20G20\\_28102022.pdf](https://g7g20-documents.org/fileadmin/G7G20_documents/2022/G20/Indonesia/Sherpa-Track/Health%20Ministers/1%20Ministers'%20Language/Chair%E2%80%99s%20Summary%20Health%20Ministers'%20Meeting%20of%20the%20G20_28102022.pdf)
- G20 Task Force. (2022c). *The Lombok G20 One Health Policy Brief Context*. <https://www.consilium.europa.eu/media/52730/g20-leaders-declaration-final.pdf>
- G20 Working Group. (2022). G20 Presidency Chair's Summary. *The Second G20 Joint Finance and Health Ministers' Meeting*.
- Gill, B. (2020). China's Global Influence: Post-COVID Prospects for Soft Power. *The Washington Quarterly*, 43, 97–115.

- Harini, F. (2022). G20 Sepakati Pandemic Fund, Kantongi Komitmen US\$1,4 Miliar. *VALIDNEWS*, 1–3.
- Hosseinpour, A. R., Nambiar, D., Tawilah, J., Schlottheuber, A., Briot, B., Bateman, M., Davey, T., Kusumawardani, N., Myint, T., Nuryetty, M. T., Prasetyo, S., Suparmi, & Floranita, R. (2018). Capacity building for health inequality monitoring in Indonesia: enhancing the equity orientation of country health information system. *Global Health Action*, 11. <https://doi.org/10.1080/16549716.2017.1419739>
- Inayah, A., Hadiawan, A., & Asnasari, T. K. (2023). Study of Indonesian Vaccine Diplomacy at Bilateral, Regional, and Multilateral Levels to Overcome Covid-19 Pandemic. *KnE Social Sciences*, 8(5), 217–235. <https://doi.org/10.18502/kss.v8i5.13000>
- Jakarta Globe. (2022). Indonesia Set to Become mRNA-Based Vaccine Production Hub for Southeast Asia. *Jakarta Globe*, 1–5.
- Jose, H. S., & Putri, I. P. E. (2021). Tatanan Global Pada Pembangunan Dan Ekonomi Politik Internasional Selama Dan Pasca Pandemi Covid-19. *Jurnal Ilmiah Penalaran Dan Penelitian Mahasiswa*, 5(1), 46–70. [https://www.researchgate.net/publication/352038619\\_Tatanan\\_Global\\_Pada\\_Pembangunan\\_Dan\\_Ekonomi\\_Politik\\_Internasional\\_Selama\\_Dan\\_Pasca\\_Pandemi\\_COVID-19](https://www.researchgate.net/publication/352038619_Tatanan_Global_Pada_Pembangunan_Dan_Ekonomi_Politik_Internasional_Selama_Dan_Pasca_Pandemi_COVID-19)
- Kadewardana, D. (2021). Indonesian Foreign Policy and the COVID-19 Pandemic. *Foreign Policy Review*, 14(3), 44–59. <https://doi.org/10.47706/kkifpr.2021.3.44-59>
- Katz, R., Kornblat, S., Arnold, G., Lief, E., & Fischer, J. E. (2011). Defining Health Diplomacy: Changing Demands in the Era of Globalization. *The Milbank Quarterly*, 89(3), 1–21.
- Kelly, L. (2021). Characteristics of Global Health Diplomacy. *K4D (Knowledge, Evidence, and Learning for Development)*, 1–12.
- Khazatzadeh-Mahani, A., Ruckert, A., & Labonte, R. (2018). Global health diplomacy. *Oxford University Press*, 1–24. <https://doi.org/10.1093/oxfordhb/9780190456818.013.7>
- Kickbusch, I., Liu, A., Kazatchkine, M., & Kökény, M. (2022). Global health diplomacy—reconstructing power and governance. In *Global Health Centre*. Elsevier B.V. [https://doi.org/10.1016/S0140-6736\(22\)00583-9](https://doi.org/10.1016/S0140-6736(22)00583-9)
- Kickbusch, I., & Told, M. (2013). *21st Century Global Health Diplomacy* (T. E. Novotny, Ed.; Vol. 3). World Scientific Publishing.
- Kuriakose, S. (2020). Global Health: Global Health Diplomacy. *Journal of Global Health*, 10(2), 1–5. <https://doi.org/10.7189/jogh.10.020354>
- Lal, A., Abdalla, S. M., Chattu, V. K., Erondur, N. A., Lee, T. L., Singh, S., Abou-Taleb, H., Vega Morales, J., & Phelan, A. (2022). Pandemic preparedness and response: exploring the role of universal health coverage within the global health security architecture. In *The Lancet Global Health* (Vol. 10, Issue 11, pp. e1675–e1683). Elsevier Ltd. [https://doi.org/10.1016/S2214-109X\(22\)00341-2](https://doi.org/10.1016/S2214-109X(22)00341-2)
- Larionova, M. (2023). G20 at the Critical Juncture. Indonesia’s 2022 Presidency: Internal and External Shocks, Risks of Power Rebalancing and Eventual Demise, Causes of Resilience and Re-Equilibrium. *International Organisations Research Journal*, 18(1). <https://doi.org/10.17323/1996-7845-2023-01-02>
- Lisa. (2020). *COVID-19 Vaccine Global Access (COVAX) Facility*. 1–32.
- Lisbet. (2022). Manfaat Dan Tantangan Presidensi G-20 Indonesia. *Pusat Penelitian Badan Keahlian DPR RI*, 1–6. [https://berkas.dpr.go.id/pusaka/files/info\\_singkat/Info%20Singkat-XIV-2-II-P3DI-Januari-2022-238.pdf](https://berkas.dpr.go.id/pusaka/files/info_singkat/Info%20Singkat-XIV-2-II-P3DI-Januari-2022-238.pdf)
- Mahendradhata, Y., Andayani, N. L. P. E., Hasri, E. T., Arifi, M. D., Siahaan, R. G. M., Solikha, D. A., & Ali, P. B. (2021). The Capacity of the Indonesian Healthcare System to Respond to COVID-19. *Frontiers in Public Health*, 9. <https://doi.org/10.3389/fpubh.2021.649819>
- Maryadi, L. H. P., Dewi, E. D., Aryadi, T., Santikajaya, A., Fitri, W., & Putri, R. A. (2018). “Kesehatan untuk Semua: Strategi Diplomasi Kesehatan Global Indonesia” *Kajian Mandiri Tahun 2018*. Badan Pengkajian dan Pengembangan Kebijakan Kementerian Luar Negeri Republik Indonesia.
- McBride, B., Hawkes, S., & Buse, K. (2019). Soft power and global health: The sustainable development goals (SDGs) era health agendas of the G7, G20 and BRICS. *BMC Public Health*, 19(1). <https://doi.org/10.1186/s12889-019-7114-5>

- Ministry of State Secretariat. (2020). *Peraturan Pemerintah Pengganti Undang-Undang Republik Indonesia Nomor 1 Tahun 2020*. 1–46.
- MoFA of Indonesia. (2022). Laporan Kinerja Kementerian Luar Negeri Republik Indonesia. *Ministry of Foreign Affairs of Indonesia*, 1–286. [www.kemlu.go.id](http://www.kemlu.go.id)
- Naqsabandiyah, A. H., Arfah, M. I., & Al-Ayubi, M. S. (2022). Indonesia's Contributive Role in the G20 to Mitigate the COVID-19 Pandemic. In *Indonesia Post-Pandemic Outlook: Social Perspectives* (pp. 9–34). BRIN. <https://doi.org/10.55981/brin.536.c459>
- Neuman, W. L. (William L. (2014). *Social Research Methods: Qualitative and Quantitative Approaches*.
- Nishizawa, H., Nishimura, Y., Matsumura, H., Horiuchi, H., Higashira, T., Kita, Y., Sahara, Y., & Suzuki, Y. (2020). G20 Okayama Health Ministers' meeting: Conclusions and commitments. *Journal of Global Health*, 10(1). <https://doi.org/10.7189/jogh.10.010320>
- Rakhra, K. (2023). The G20 as a Multilateral Force. *CEBRI Journal*, 8, 77–94.
- Ravi, S., Meyer, D., Snyder, M., Mullen, L., & Warmbrod, L. (2019). 2019 Global Health Security Index. *Center for Health Security: Johns Hopkins Bloomberg School of Public Health*, 1–324.
- Rosenbaum, P., Rehn, C., Wennberg, K., Nordström, A., & Alfvén, T. (2025). Navigating global health diplomacy: challenges and opportunities in building a community of practice. *Globalization and Health*, 21(1). <https://doi.org/10.1186/s12992-025-01100-z>
- Roza, R. (2022). The Focus Of Indonesian Diplomacy In 2022 And The Diplomatic Role Of The Indonesian House Of Representatives. *Info Singkat*, XIII(1), 1–6. [https://berkas.dpr.go.id/pusaka/files/info\\_singkat/Info%20Singkat-XIV-1-I-P3DI-Januari-2022-244-EN.pdf](https://berkas.dpr.go.id/pusaka/files/info_singkat/Info%20Singkat-XIV-1-I-P3DI-Januari-2022-244-EN.pdf)
- Sari, D. S., Halimah, M., Akim, A., Maximillian, R., Muawal, F. S., & Lie, N. J. (2024). Strategic Health Diplomacy: An Indonesia's Approach in Securing COVID-19 Booster Vaccine Supplies. *Jurnal Hubungan Internasional*, 13(1), 17–30. <https://doi.org/10.18196/jhi.v13i1.17829>
- Setiawan, I. (2021, January 25). *Bio Farma Akan Produksi 4,7 Juta dosis Vaksin Covid-19 untuk Digunakan Pada bulan Februari 2021*. Bio Farma.
- Urrieta, L., & Hatt, B. (2019). Qualitative Methods and the Study of Identity and Education. *Oxford Research Encyclopedia of Education*. <https://doi.org/10.1093/acrefore/9780190264093.013.550>
- Wicaksono, R. M. T. A. D., Hirawan, F. B., & Ragamustari, S. K. (2022). An Analysis of Indonesia's Free and Active COVID-19 Vaccine Diplomacy. *Jurnal Hubungan Internasional*, 11(1), 32–45. <https://doi.org/10.18196/jhi.v11i1.13087>
- Yoode, J. (2010). China's Health Diplomacy in Africa. *China: An International Journal*, 08(01), 151–163. <https://doi.org/10.1142/S0219747210000099>
- Yoode, J. (2016). High Politics, Low Politics, and Global Health. *Journal of Global Security Studies*, 1(2), 157–170.

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