CURRICULUM VITAE
BUDI GUNADI SADIKIN

<table>
<tr><td>Family name (surname):
Sadikin

First/other names:
Budi Gunadi</td><td></td></tr>
<tr><td colspan="2">Gender: Male</td></tr>
<tr><td>Place and country of birth: Bogor, Indonesia</td><td>Date of birth (Day/Month/Year):
06/05/1964</td></tr>
<tr><td colspan="2">Citizenship: Indonesian</td></tr>
<tr><td colspan="2">If you have ever been found guilty of the violation of any law (except minor traffic violations) give full particulars: N/A</td></tr>
<tr><td>Civil status: Married</td><td>Number of dependants: 3</td></tr>
<tr><td>Address to which correspondence should be sent:</td><td>Telephone:
Mobile phone: -
Fax: -
E-mail:</td></tr>
</table>

Degrees/Certificates obtained:
Please indicate here the principal degrees/certificates obtained, with dates and names of institutions. Additional pages may be added.

Bachelor of Science, Physics, Bandung Institute of Technology, Indonesia (1988)

Knowledge of Languages		Mother Tongue	Speak	Read	Write
For languages other than mother tongue, enter the appropriate number from the code below to indicate the level of your language knowledge. If no knowledge, please leave blank. **CODE:** 1. Limited conversation, reading of newspapers, routine correspondence. 2. Engage freely in discussions, read and write more difficult material 3. Fluent (nearly) as in mother tongue	**Arabic**				
	Chinese				
	English	-	3	3	3
	French				
	Spanish				
	Russian				
	Others (please specify): Indonesian [mother tongue]				

POSITIONS HELD

Please indicate here the positions and work experience held during your professional career, with the corresponding dates, duties, achievements/accomplishments and responsibilities. Additional pages may be added.

I. National Experience

Minister of Health, Indonesia (December 2020 – present)

I lead reform of Indonesia's decentralised health system, serving 280 million people—the world's fourth-largest population—across 7,000 inhabited islands and three time zones. It spans 38 provinces, 514 cities and 85,000 villages, with 2.1 million health workers and 500,000 health facilities and community posts. I oversee an annual Ministry budget of USD 7 billion, which peaked at USD 17 billion during COVID-19. Appointed at the pandemic's height, I led the national response and turned the crisis into long-term reform.

- **COVID-19 response and health security.** Led the national vaccination programme, delivering 453 million doses; expanded genomic-surveillance from 16 to 41 laboratories and 800 to 2,700 weekly samples; and coordinated a public-private effort during the Delta surge distributing 5,000 tonnes of liquid oxygen to 500 hospitals.
- **Health-system transformation.** Established a six-pillar agenda covering primary care, referral services, resilience, financing, workforce and health technology; culminating in the 2023 Health Law, which consolidated 11 laws and established the foundation for nationwide transformation.

- **Prevention and access to care.** Revitalizing and reorienting 10,337 primary health centres and public-health laboratories from disease-siloed services towards a standardised life-course approach; launched annual Free Health Screening, reaching 100 million people in 15 months and identifying 16.8 million requiring follow-up; and expanded immunisation from 11 to 14 antigens by introducing HPV, pneumococcal and rotavirus vaccines.
- **Health financing and partner alignment.** Mobilised USD 8.75 billion externally: USD 3.75 billion in grants and USD 5 billion in multilateral development-bank financing for health-system strengthening; introduced national Health Sector Master Plan defining outcomes, multi-year resource needs and financing gaps to align government and partner investments.
- **Digital health, biotechnology and local manufacturing.** Advancing SATUSEHAT, connecting electronic health records across more than 42,000 facilities, with its citizen application exceeding 100 million downloads; established the Biomedical and Genome Science Initiative, enrolling 20,000 participants and generating 16,000 human whole-genome sequences; and helped expand annual vaccine-production capacity from 2 billion doses in 2018 to 3.5 billion in 2026, with domestic manufacturers increasing from one to four.

Vice Minister of State-Owned Enterprises, Indonesia (2019 - 2020)

I oversaw restructuring and long-term planning of 64 major state-owned enterprises, in petroleum, electricity, mining, telecommunications, pharmaceuticals and healthcare. My work focused on governance, financial discipline, investment and performance management. I also consolidated 69 state-owned-enterprise hospitals with 7,000 beds under Indonesia Healthcare Corporation, improving coordination and service standards.

Group CEO MIND ID (2017 - 2019)

I led Indonesia's newly formed state mining holding, integrating three largest, publicly listed, national mining companies. Within 15 months, I completed a USD 3.85 billion transaction that increased Indonesia's ownership of PT Freeport Indonesia from 9.36% to 51.23%, securing control of Grasberg, the world's second-largest copper and gold mine. I coordinated government bodies, negotiated with Freeport-McMoRan, Rio Tinto and international financiers, and raised USD 4 billion in global bonds to finance the deal.

President Director, PT Bank Mandiri (Persero) Tbk (2013-2016)

I led Indonesia's largest bank through economic and commodity-market volatility, overseeing nearly 2,500 branches and 100,000 personnel. Assets grew 43%, from Rp636 trillion to Rp910 trillion—over USD 65 billion at year-end 2015. In my final full year, net profit reached USD 1.5 billion while lending grew 12.4%. I accelerated digital banking, with electronic channels accounting for 92% of transactions, and established Mandiri Capital Indonesia, making Bank Mandiri a pioneering investor in Indonesia's fintech sector.

Please state any other relevant facts that might help in the evaluation of your application. List your activities in civil, professional, public or international affairs.

II. Regional and Global Experience

Co-Chair, Accra Reset High-Level Panel (2026 - present)
I co-chair the 18-member panel developing proposals to reform global health governance and financing, through country-owned plans, sustainable domestic financing, aligned external support, stronger regional capacity and shared responsibility for global public goods.

Board member, Gavi, the Vaccine Alliance (2024 - present)
I represent South-East Asia and the Western Pacific on Gavi's Board. As Implementing Country Caucus Chair (2024–2026), convened ten consultations to advance stronger support and representation for implementing countries.

Co-chair, TB Vaccine Accelerator Council (2023 - present)
I co-chair the Council with Brazil's Minister of Health, advancing political support, financing and country readiness for new TB vaccines. We aim to have vaccines ready by 2028 and begin global rollout in 2029 to help end TB by 2030.

ASEAN Health Leadership, Indonesia's ASEAN Chairmanship (2023)
I championed the ASEAN Leaders' Declaration on One Health Initiative, committing ten member states to establish a regional network and a measurable, time-bound action plan across human, animal and environmental health. I also led the ASEAN Diagnostics Security and Self-Reliance (ADxSSR) initiative, addressing ASEAN's 70–90% reliance on imported diagnostic tools through local manufacturing and regional cooperation.

G20 Health Leadership, Indonesia's G20 Presidency (2022)
I led G20 health negotiations and co-chaired the Joint Finance and Health Ministers' Meeting with Indonesia's Finance Minister, securing consensus to establish the Pandemic Fund—the first multilateral fund for pandemic prevention, preparedness and response. Launched in Bali with USD 1.4 billion from 24 contributors, it now supports 128 countries and has catalysed over USD 10 billion in additional financing.

Additional Positions:
- Commissioner, The Lancet Commission on Health System Performance Assessment, (2026–present)
- Member, Strategic Advisory Board, Regionalized Vaccine Manufacturing Collaborative (2024–present)
- Co-Chair, UN High-Level Meeting on TB (Panel 1) (2023)
- Board member, Stop TB Partnership (2021-present)
- Executive Board, Global Coalition for Value in Healthcare (2021-2022)
- Chair, ASEAN Health Sector (2020-2022)

PUBLICATIONS

Please list here a maximum of 10 publications - especially the main ones in the field of public health, with names of journals, books or reports in which they appeared. An additional page may be used for this purpose, if necessary. (Please feel free also to attach a complete list of all publications.) Do not attach the publications themselves.

1. **Sadikin BG.** Indonesia's health reform: from pandemic mandate to the six pillars of transformation. *The Lancet*. 2026.
2. Kaberuka D, Pate MA, **Sadikin BG**, Solberg E, Cárdenas M, Carlsson G. A new paradigm for global health financing. *Project Syndicate*. 2026.
3. **Sadikin BG**, Pate MA, Herbosa TJ, Motsoaledi PA. To end TB, time for us to own our disease response and financing for health. *Devex*. 2025.
4. **Sadikin BG.** Promoting health, preventing illness. Interview/contribution in *Health: A Political Choice – The Future of Health in a Fractured World*. London: Economist Impact; 2024.
5. **Sadikin BG.** How Indonesia's leap in clinical trials can transform the nation. *Jakarta Post*. 2024.
6. **Sadikin BG.** Mengalahkan kusta. *Kompas*. 2024.
7. **Sadikin BG**, Guzman J, Ray K, Febrianora M. Precision medicine as the future of public health. *Population Medicine*. 2023.
8. **Sadikin BG.** Indonesia's critical role in reforming global health system. *The Jakarta Post*. 2022.
9. **Sadikin BG.** Invest in collective health for future collective wealth. *China Daily*. 2022.
10. **Sadikin BG.** G20 after the pandemic: Recover together, recover stronger. *Al Jazeera*. 2022.

RELEVANT FACTS

Please list hobbies, sports, skills and any other relevant facts that might help in the evaluation of your application.

I lead by example through running and healthy eating. At age 60, I completed my first marathon with my wife, Ida, in Berlin in 2024, followed by the London Marathon in 2026. I often run with communities, including runners with visual impairments, reflecting my belief that healthy living should be inclusive. On social media, I promote practical healthy-living messages that have attracted millions of views. My advocacy for simple steamed whole foods helped amplify a healthy-eating trend and the growth of street vendors offering them.

Selected Recognitions

- **Devex Power 50 (2026)**, named among 50 leaders shaping global development.
- **Special Mention, Digital Leader of the Year (2026), GovInsider Festival of Innovation Awards, Asia-Pacific**, for leadership in digital health.
- **Goalkeepers (2025), Gates Foundation**, speaker on Indonesia's health transformation and child survival.
- **Bintang Mahaputera Utama (2024), Republic of Indonesia**, a national honour conferred by Indonesia's President for distinguished service.
- **CEO of the Year, Indonesia and Asia-Pacific (2022), IDC Future Enterprise Awards**, for digital transformation in health-system delivery.

WRITTEN STATEMENT:

1. *Please evaluate how you meet each of the "Criteria for candidates for the post of the Director General of the World Health Organization". In so doing, please make reference to specific elements of your curriculum vitae to support your evaluation. The criteria adopted by the World Health Assembly in resolution WHA65.15 are the following:*

(1) A Strong Technical Background in a health field, including experience in public health

My technical background in public health comes from nearly six years as Minister of Health, leading one of the world's largest and most complex, decentralized health systems, serving 280 million people across 38 provinces, 514 cities, 85,000 villages and 7,000 inhabited islands. From directing the COVID-19 response to addressing major communicable and non-communicable diseases, I have worked with scientists and technical experts to translate evidence and population-health data into policy and large-scale implementation.

At the heart of Indonesia's health transformation is a shift from treating illness to keeping people healthy so they can live longer, healthier lives. I have led reforms across primary care and prevention, referral services, resilience, financing, workforce, and health technology, anchored in a Health Law that consolidated 11 fragmented laws into one. This required translating technical evidence into national policy—experience directly relevant to WHO's norm-setting and convening roles.

I have translated this system's approach into stronger service delivery at national scale. I expanded routine immunisation from 11 to 14 antigens through the introduction of PCV, rotavirus and HPV vaccines. I launched the annual Free Health Screening, reaching 100 million people within 15 months and aims to cover 280 million people by 2029. I began revitalising 10,000 primary health centres and 500 public-health laboratories, while upgrading 468 district hospitals and equipping 578 hospitals for advanced cancer, cardiac, stroke and kidney services. I strengthened resilience by expanding annual vaccine-production capacity from 2 billion doses in 2018 to 3.5 billion in 2026 and domestic manufacturers from one to four. Centralised procurement saved USD 553 million on advanced medical devices and cut selected medicine costs by 32%. I expanded specialist training through hospital-based residency programmes and 2,800 scholarships annually to improve workforce distribution. I also built SATUSEHAT, connecting electronic health records across 42,000 facilities, with its citizen application exceeding 100 million downloads, and established the Biomedical and Genome Science Initiative, enrolling 20,000 participants and generating 16,000 human whole-genome sequences.

(2) Exposure to and extensive experience in international health

During Indonesia's 2022 G20 Presidency, together with Finance Minister Sri Mulyani, I helped secure consensus among G20 health and finance ministers to establish the **Pandemic Fund—the first multilateral financing dedicated to pandemic prevention, preparedness and response**. Launched in Bali with USD 1.4 billion from 24 contributors, its first three rounds have supported 128 countries, catalysing more than USD 10 billion.

I championed **geographically diversified research and production of vaccines, therapeutics and diagnostics.** Under Indonesia's G20 leadership, seven countries committed to collaborative research, manufacturing, technology transfer and regulatory cooperation. Biofarma, Indonesia's state-owned vaccine manufacturer, has since developed technology-transfer partnerships with Ghana and Senegal, alongside cooperation with Pakistan, Kenya, Ethiopia and Nigeria.

On the Gavi Board, I have turned country concerns into institutional change. As Implementing Country Caucus Chair (2024-2026), I convened ten consultations and brought implementing-country concerns into Board deliberations—including those of Papua New Guinea, Solomon Islands, and Lao PDR, contributing to dedicated support for Small Island Developing States and a revised eligibility threshold. I proposed a **Gavi Alumni concept** to maintain graduated countries' access to pooled procurement and negotiated vaccine prices, while potentially broadening Gavi's donor base. I also advocated for **stronger implementing-country representation** in Gavi's governance, including the appointment of the first implementing-country representative as Board Vice-Chair and Governance Committee Chair.

As Co-Chair of the Accra Reset High-Level Panel, I advocate for **a reform in global health architecture** built on country ownership, sustainable domestic financing, stronger regional capacity and shared responsibility for global public goods.

(3) Demonstrable leadership skills and experience

I set direction through evidence and consultation. A comprehensive review of Indonesia's health sector, stakeholder input and global benchmarks informed measurable priorities, timelines, accountable owners and costed plans. These became **one National Health Plan (RIBK)**, linking country priorities and financing gaps to aligned external support.

I drive execution through accountability. Every management meeting ends with actions, owners and deadlines, systematically recorded and reviewed to resolve bottlenecks.

I build coalitions beyond the Ministry of Health. I established the Health Sector Policy Committee to align government stakeholders behind RIBK's shared objectives and resolve implementation bottlenecks. In a decentralised country, securing agreement is only the beginning: leading governors across 38 provinces and local leaders across 514 districts and cities—from different political parties and backgrounds—to execute one National Health Plan requires sustained political leadership. During major emergencies, including floods in Sumatra that displaced 900,000 people and the recent 7.7-magnitude earthquake in East Nusa Tenggara, I led the Ministry in coordinating national and local governments, humanitarian organisations, private-sector partners and volunteers to deploy medical teams and field hospitals, deliver essential supplies and restore health services.

(4) Excellent Communications and Advocacy skills

I build consensus for difficult reforms. In developing **Indonesia's Health Law**, I worked across nine parliamentary parties and engaged more than 1,200 stakeholders through 115 public consultations, generating over 6,000 inputs from government, the private sector, professional associations and civil society. By listening, explaining complex reforms and reconciling competing interests, I built support to consolidate 11 laws into one within a compressed time frame.

Three decades in banking taught me to translate health priorities into the language of finance. I work with Indonesia's Finance Minister and National Development Planning Minister to secure financing for the National Health Plan. I have mobilized USD 8.75 billion in external financing. This included bringing the World Bank, AIIB, ADB and IsDB behind a government-led USD 4 billion Health Systems Strengthening project—the largest World Bank health-sector investment and MDB co-investment in human development globally. At WHO, I would apply this approach to help Member States engage Finance Ministries and align partners behind country-led priorities.

(5) Demonstrable competence in Organisational Management

I have led large, complex institutions across banking, industry, and health. As CEO of Bank Mandiri, Indonesia's largest bank, I managed 100,000 personnel across 2,500 branches and over USD 65 billion in assets. I later led Indonesia's state-owned mining holding and, as Vice Minister, oversaw major enterprises across petroleum, electricity, mining, telecommunications, pharmaceuticals and healthcare. As Minister of Health, I lead a decentralised system encompassing 2.1 million health workers, 500,000 health-service units, and an annual budget of USD 7-17 billion.

I apply corporate governance and financial discipline to public institutions. As Vice Minister, I oversaw 64 state-owned enterprises, established independent auditors and board-level audit committees, and strengthened commissioner oversight. Quarterly reviews tracked operational and financial performance, focusing on long-term performance, cash-flow resilience and conservative debt management. I applied the same discipline at the Ministry of Health, where centralized procurement saved USD 553 million on advanced medical devices and reduced the cost of selected medicines by 32%.

I put the right people in the right roles, give them clear authority and hold them accountable. As Vice Minister, I instituted merit-based director selection through independent committees of senior experts in human resources, industry and finance. At the Ministry of Health, I extended this through talent scouting, merit-based selection and agile placement based on organisational needs, individual potential and performance. I developed people through greater responsibility, exposure to new roles, and regular performance feedback. At least 13 executives from teams I led have since assumed senior national positions, including vice ministers, a Governor of Bank Indonesia and CEOs of major companies.

(6) Sensitivity to Cultural, Social and Political Differences

I build leadership teams combining expertise with diverse professional, regional and international perspectives. At the Ministry of Health, I built the senior leadership team combining experienced career officials with external experts, from the Ministry of Finance, Food and Drug Authority, academia and UNICEF. The team spans professions, institutions, regions, faiths and generations, with **women holding half of all leadership positions at director level and above.**

I adapt policy to political, social and cultural realities by listening first. Each week, I hold at least six consultations with governors and mayors across political affiliations, as well as leaders from civil society, professional associations, the media and the private sector. During COVID-19, when vaccination uptake among the Baduy, an Indigenous community, remained extremely low, I chose engagement over formal authority. I walked three hours over steep terrain to meet customary leaders, observed local traditions in my dress and conduct, and listened to their concerns to build trust in voluntary vaccination.

(7) Strong Commitment to the Mission and Objectives of WHO

Health is ultimately about people. It is through countries that better health is delivered. WHO must work alongside Member States to build strong, equitable, and resilient national health systems. Yet health security, scientific cooperation and equitable access to essential technologies require **global cooperation that only a trusted multilateral institution can convene.**

WHO's authority depends on trust in its science, independence, transparency and accountability. It must remain focused on its core mandate while adapting to scientific and technological advances, including artificial intelligence, demographic change, climate risks and geopolitical realities.

As Director-General, I would build a stronger, more focused and trustworthy WHO—working as one organisation to support country-led objectives, advance regional cooperation and scale global impact for better health for all.

(8) Good Health required of all staff members of the Organization

I am in good health and maintain a high standard of physical fitness, including completing two major marathons.

(9) Sufficient Skills in at least one of the official working languages of the Executive Board and the Health Assembly

I am fluent in English and experienced in working in international, multilingual environments.

2. Please state your vision of priorities and strategies for the World Health Organization.

Vision Statement

CONTEXT

WHO enters its next chapter under significant **institutional and financial pressure**. Funding constraints, competing priorities and growing demands are testing its ability to fulfil its mandate. The next Director-General must strengthen WHO, sharpen its priorities, and focus its resources where they can deliver the greatest impact—**for eight billion people across all Member States.**

This requires leadership combining **public-health expertise, financial discipline, operational execution and advocacy skills** to translate science, resources and global reach into better health for all.

VISION

Healthy Long Lives for All.

A world where everyone can live a long and healthy life, with the care they need, when and where they need it, at a cost they can afford.

MISSION

BGS — Build. Grow. Scale.

*To build a **stronger**, more **focused**, and **trustworthy** WHO—working as one organization to support country-led objectives, advance regional cooperation, and lead collective action on shared global health challenges.*

B — Build Strong National Health Systems

WHO that stands with countries.

Healthy long lives begin with strong national health systems. WHO works alongside countries to turn national priorities into results through stronger planning, financing, implementation and accountability.

Key priorities

- Support Member States to develop **one credible, country-led National Health Plan** with measurable outcomes, a costed multi-year implementation plan, mapped resources and financing gaps, and a **national coordination platform** aligning partners behind it.
- Support Member States to **mobilize greater domestic financing for health**, improve spending efficiency and accountability, and engage Ministries of Finance and Heads of State and Government.

- Advance **pandemic preparedness** and **universal health coverage (UHC)** by **strengthening health systems** that deliver equitable access to quality services without financial hardship, prioritise prevention and primary care, respond to chronic diseases, mental health needs, demographic change and climate-related health risks, withstand emergencies and use digital technologies ethically.

G — Grow Regional Resilience

WHO that advances regional cooperation.

Many health challenges and opportunities extend beyond national borders. WHO advances regional cooperation by providing an agile platform for coordinated action, public goods, and technical excellence.

Key priorities

- Expand and diversify **manufacturing capacity** for essential health products across regions through know-how and technology transfer, stronger regulatory systems, skilled workforces and predictable demand.
- Improve access to quality-assured medicines, vaccines, and diagnostics through further utilization of **pooled procurement and market shaping**.
- Strengthen **cross-border surveillance**, laboratory and regulatory networks, information sharing, emergency workforces, and coordinated response to detect and contain health threats faster.

S — Scale Global Impact

WHO that leads collective action on shared global health challenges.

WHO's greatest value lies in global functions that no country can deliver alone. Grounded in **science and evidence**, WHO sets trusted norms and standards, **convenes countries and partners**, and leads collective action.

Key priorities

- **Set scientifically independent global norms and standards** that keep pace with evolving health challenges, scientific and technological advances, including health-data governance and artificial intelligence.
- **Convene Member States and global health actors**, such as civil society, the private sector, research institutions and other partners, around shared priorities under clear rules and safeguards that protect WHO’s integrity.
- Promote **equitable and meaningful participation by all Member States** in shaping global health priorities and decision-making.

- Strengthen WHO's **financial sustainability and independence** through a broader funding base, transparent resource management, accountability for results, and sustained investment in scientific and technical expertise essential to its mandate.
- Strengthen WHO's global **early-warning, risk assessment, and emergency coordination** functions to enable rapid, transparent, and effective responses to health threats.

Across all three levels, I will build **One WHO**: focused on its core mandate, accountable for results, transparent in its decisions and resource use, equipped with the right capabilities, and able to act faster. Headquarters will lead on global norms, science and use its convening role to engage countries and stakeholders; regional offices will advance regional and cross-border cooperation; and country offices will help Member States turn national priorities into results.

Further information: www.BGS4WHO.com