



CELIOS

# (Not) Free and (Not) Nutritious Meals

Media Wahyudi Askar, Isnawati Hidayah, Bakhrul Fikri, Jaya Darmawan,  
Aulia Lianasari, Galau D. Muhammad, dan Rizky Dwi Lestari

2025

# **(Not) Free and (Not) Nutritious Meals**

## **Publisher**

Center of Economic and Law Studies (Celios) Jakarta, Indonesia

## **Email**

admin@celios.co.id

## **Website**

www.celios.co.id

## **Copyrights**

All rights reserved. CELIOS holds the copyright for this publication, including text, analysis, logo, and layout design. Requests to reproduce or quote the material in part or in whole should be sent to admin@celios.co.id.

## **Acknowledgements**

We would like to express our deepest appreciation to Media Wahyudi Askar, Isnawati Hidayah, Bakhrul Fikri, Jaya Darmawan, Aulia Lianasari, Galau D. Muhammad and Rizky Dwi Lestari for their contributions as authors in this study. We hope that the results of this study can make a meaningful contribution to the discourse on the Free Nutritious Meals Programme (MBG).

## **Citation**

All publications by CELIOS may be freely quoted, provided the source is properly acknowledged. Suggested Citation: Askar, M. W. et al. (2025). (Not) Free and (Not) Nutritious Meals. Jakarta: Center of Economic and Law Studies. Report.  
Available at: : [www.celios.co.id](http://www.celios.co.id)

## **Designer**

Mohammad Arifin

## **Cover**

The cover image consists of a collection of original photographs of MBG menus from various regions in Indonesia, collected through MBG Watch, most of which are provided to school students and vulnerable groups, including pregnant women, breastfeeding mothers, and children under five.

# Table of Contents

<b>1</b>	<b>Key Findings</b>	<b>2</b>	<b>Checklist of MBG Program Objectives Achieved</b>	<b>3</b>	<b>Moratorium and Comprehensive Overhaul of the MBG Program</b>
<b>4</b>	<b>The Urgency of Evaluating the Free Nutritious Meal Program</b>	<b>8</b>	<b>Methodology</b>	<b>10</b>	<b>About MBG</b>
<b>10</b>				<b>10</b>	A Unified Command Structure for the MBG Program
<b>15</b>	<b>Impacts of the MBG (Free Nutritious Meal)</b>	<b>48</b>	<b>The MBG Implementation Controversy</b>	<b>75</b>	<b>Recommendation</b>
<b>15</b>	MBG Has Yet to Improve Nutrition for Children and Vulnerable Groups	<b>48</b>	Toxic From The Start, Burdened With Losses	<b>81</b>	The MBG Scheme Proposed by CELIOS
<b>22</b>	MBG Has Not Effectively Changed Children's Learning Behavior	<b>54</b>	Poor Governance in Labor Management, Financing, and Partner Administration within the MBG Program	<b>83</b>	Moratorium and Total Overhaul of the MBG Program
<b>27</b>	MBG Has Not Effectively Reduced the Burden on Households	<b>60</b>	The MBG Controversy Has Triggered Additional Social Issues at the Regional Level		
<b>33</b>	MBG Has Not Significantly Involved Local MSMEs	<b>64</b>	The Dominance of Military and Police Veterans Is Also Undermining the Quality of the Program		
<b>36</b>	The Domino Effects of MBG: Economic Losses and the Erosion of Local Food Systems	<b>68</b>	The MBG Menu Quality Crisis: Low Nutritional Value and High Reliance on Ultra Processed Foods		
<b>44</b>	Public Interest Priorities Sacrificed by the Forced Allocation of the MBG Budget				

# Key Findings

## (Not) Free and (Not) Nutritious Meals

MBG Does Not Alleviate the Economic Burden on Households

65%

Respondents reported that they still incurred additional expenses for food to substitute for MBG

MBG Does Not Improve Children's Focus and Activity

52%

Respondents reported no change in children's activeness and focus at school after receiving MBG

MBG Does Not Ensure Children Become More Diligent

55%

Respondents assessed that there was no change in children's diligence at school despite receiving MBG

Cash Transfers Are More Favorable

73%

Parents prefer direct cash assistance programs over MBG

Job Opportunities Benefit Only a Few

40%

Respondents perceived that job opportunities from the MBG program remain limited and have yet to benefit the broader community

The MBG Supply Chain Lacks Transparency

48%

Respondents stated that they did not know about the involvement of small businesses or local food stalls in the MBG food supply chain

Conflicts of Interest in MBG are Unavoidable

79%

Respondents were aware of potential conflicts of interest in the direct appointment of vendors

Nutritionists Face Excessive Workloads

4 out of 5

Nutritionists in SPPG work more than eight hours per day

Actual Food Poisoning Cases

15,117

The number of food poisoning victims since the implementation of MBG up to 15 November 2025 across various regions in Indonesia

Without Comprehensive Reform, Food Poisoning Will Rise

22,747

The projected number of food poisoning victims over the next seven months in the absence of comprehensive governance reform

BGN's Top Leadership is Dominated by Veterans

6 out of 10

High-ranking BGN officials drawn from retired TNI-POLRI personnel

Limited Space for Women's Representation

9 out of 10

BGN's Top Positions Are Occupied by Men

Foregone Benefits

Rp404 T

The estimated value of benefits forgone from potential investments in stunting prevention had Rp24.7 trillion of the health budget not been diverted to MBG

Erosion of Local Food Sovereignty

747

Varieties of local foods at risk of loss due to standardization

Food Sector Workers Are at Risk

1.94 M

The number of people at risk of losing their jobs

Instead of an MBG meal worth Rp10,000, beneficiaries could receive Rp50,000 in daily cash transfers

There is no empirical evidence that parents perceive their children to be more diligent, focused, or active at school after receiving MBG

Empirically, parents report no increase in their children's body weight after receiving MBG

# Checklist of MBG Program Objectives Achieved

After Nearly 1 Year of Implementation

Improving Children's Nutritional Status



Reducing Household Economic Burdens



Empowering Local Economic Actors



Creating New Employment Opportunities

**0 out of 4**

Core MBG Objectives  
Achieved

## A Message for Prabowo Subianto:

# Moratorium and Comprehensive Overhaul of the MBG Program

### 10 Radical Steps to Reform the MBG Program

- 1 Moratorium and Comprehensive Audit.** Halt the expansion of SPPG MBG and focus on a thorough evaluation of the existing system.
- 2 Public Nutrition Fulfillment Service Unit (SPPG) Audit.** Conduct a full audit of food safety, nutritional standards, effectiveness, and financial governance, then disclose the findings publicly.
- 3 Contract Freeze.** Fully resolve all delayed payments before suspending new contracts and disbursements until 2026.
- 4 Leadership Restructuring.** Replace ineffective leaders, appoint independent professional interim leadership, and build a merit and expertise based organization.
- 5 100-Day Reform Task Force.** Establish an inter-agency task force to conduct audits, fix systemic weaknesses, re-screen contractors, and enforce accountability for violations.
- 6 System Decentralization.** Eliminate the centralized kitchen model and replace it with school-based kitchens and local MSMEs serving targeted schools.
- 7 National Menu Standards.** Implement menus based on local, fresh foods, free from ultra-processed products, and with adequate nutritional content.
- 8 Program Transformation.** Following the audit, relaunch MBG under two schemes: (1) direct meals and education scholarships for priority schools in high-stunting areas, remote and underdeveloped regions, and communities experiencing extreme poverty and (2) nutrition vouchers or direct cash transfers combined with household-level training on the provision of nutritious meals for vulnerable groups.
- 9 Budget Reallocation.** Streamline overlapping expenditures, better target MBG beneficiaries, and reallocate education funds back to the education sector.
- 10 Permanent Consolidation.** Build a sustainable MBG system supported by inter-agency oversight, integration with national nutrition initiatives, and a publicly accessible digital dashboard.

# The Urgency of Evaluating the Free Nutritious Meal Program

The free nutritious meal program (MBG) has been promoted as a flagship initiative of Prabowo-Gibran. Indonesia's national development planning agency (Bappenas) has identified four core objectives of the MBG program i.e. improving nutrition among vulnerable populations, enhancing the quality of education, empowering local economic actors, and creating employment opportunities.<sup>1</sup> President Prabowo Subianto has repeatedly emphasized in his speeches that MBG is intended to provide nutritious meals at no cost, improve children's nutritional outcomes, and stimulate economic activity for thousands of farmers, fishers, and small business owners.<sup>2</sup>

The implementation of MBG has drawn substantial criticism due to the lack of clarity in its operational mechanisms, ranging from food supply chains and provider quality to on-the-ground oversight. Public opinion has become divided. Some segments of society view the program as a form of populist policymaking that delivers short-term benefits while neglecting the state's long-term fiscal sustainability. This skepticism is not unfounded. The history of social assistance programs in Indonesia has often been marked by mismanagement, poor targeting, and political manipulation. Against this backdrop, it is understandable that many members of the public approach MBG with suspicion and question the accountability of its implementation.

However, support for MBG cannot be dismissed. Many members of the public back the program for a simple yet fundamental reason i.e ensuring that children receive meals, particularly those who have never had access to free nutritious food. For low-income households, providing nutritionally adequate meals on a daily basis is often a significant burden, making MBG a form of tangible and immediately felt assistance. Supporters argue that the provision of free meals at school not only eases household economic pressures but also helps ensure that children who often arrive at school hungry are better able to learn once their basic needs are met. From this perspective, the urgency of the program outweighs political debates; what matters most is that children eat, remain healthy, and no longer have to learn on empty stomachs. This support reflects the view among proponents that MBG represents one of the most concrete manifestations of the state's presence in fulfilling citizens' basic rights.

Nearly one year into its implementation, the government has yet to release either an independent evaluation study or a comprehensive official evaluation of the MBG program. There is no publicly available and accountable data assessing the quality of implementation, the accuracy of targeting, or the program's social and economic impacts. This is notable, as policy evaluation, in its ideal form, is a systematic process for assessing the content, implementation, and impacts of public policies (Dunn, 2013).<sup>3</sup>

<sup>1</sup> Secretariat of the Presidential Advisory Council; National Nutrition Agency (BGN); IPB University; & UNICEF Indonesia. (2025, February 11). Ministry of PPN/Bappenas, BGN, IPB University and UNICEF Launch National Centre of Excellence for the Free Nutritious Meals Programme. <https://www.unicef.org/indonesia/nutrition/press-releases/bappenas-bgn-ipb-unicef-launch-national-centre-excellence-mbg>

<sup>2</sup> Sekretariat Presiden Republik Indonesia. (2025, 15 October). Presiden Prabowo Subianto: Program Makan Bergizi Gratis adalah investasi untuk masa depan bangsa (Siaran Pers). <https://www.presidentri.go.id/siaran-pers/presiden-prabowo-program-makan-bergizi-gratis-adalah-investasi-untuk-masa-depan-bangsa/>

<sup>3</sup> Dunn, W. N. (2013). Public policy analysis: An introduction (5th ed.). Pearson New International Edition.

### Did you know?

Even with the most basic Google search, the public would struggle to find any official government studies that comprehensively measure the program's impacts, assess its effectiveness, targeting accuracy, or risks. Institutions that should be at the forefront of such efforts, including BRIN, Bappenas, and the Ministry of Health, have yet to produce a rigorous, transparent, and accountable evaluation based on sound methodology. The absence of such analysis indicates that MBG is being implemented without an analytical foundation, without corrective mechanisms, and without credible evidence that the program delivers the benefits it promises. Given the scale of the program, the lack of a credible evaluation is not merely a technical oversight but a fundamental gap in public accountability.

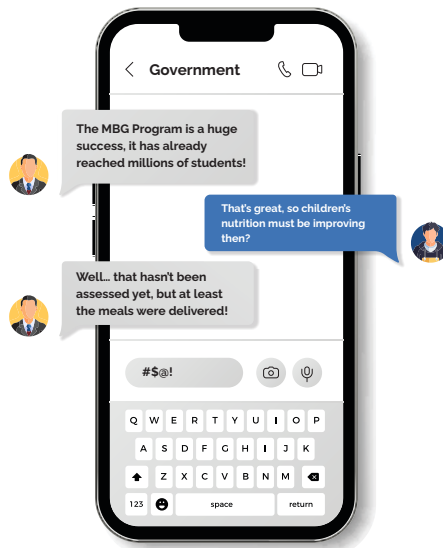
At the same time, the government continues to promote a success narrative around MBG, highlighting that the program has reached 36.7 million students across Indonesia<sup>4</sup> and that approximately 1.41 billion MBG meals have been prepared and distributed since 6 January 2025.<sup>5</sup> President Prabowo Subianto has also claimed that the program has achieved a success rate of 99.99 percent.<sup>6</sup> These figures are then used to publicly justify the assertion that the program has been "successful", even though, from a policy evaluation perspective, such metrics are extremely weak and potentially misleading.

**Coverage of beneficiaries or the number of meals distributed are merely administrative output indicators, not outcome indicators that capture real impacts on nutritional status, health outcomes, or children's learning. A valid and credible policy evaluation should instead assess effectiveness (whether the program genuinely improves children's nutritional status and learning behaviors), efficiency (whether public resources are used optimally), and sustainability (whether impacts are sustained over time and strengthen local systems), rather than simply counting the number of meal boxes distributed.**

<sup>4</sup> Badan Gizi Nasional. (2025, October 20). Setahun pemerintahan Prabowo-Gibran, program MBG telah menyasar 36,7 juta lebih penerima manfaat (Siaran Pers No. SIPERS-291/BGN/10/2025). <https://www.bgn.go.id/news/siaran-pers/setahun-pemerintahan-prabowo-gibran-program-mbg-telah-menyasar-367-juta-lebih-penerima-manfaat>

<sup>5</sup> Kementerian Komunikasi dan Digital. (2025.). Setahun pemerintahan Prabowo: MBG libatkan 18.895 UMKM dan serap tenaga kerja. <https://www.komdigi.go.id/berita/artikel-gpr/detail/setahun-pemerintahan-prabowo-mbg-libatkan-18895-umkm-dan-serap-tenaga-kerja>

<sup>6</sup> Sekretariat Dewan Pertimbangan Presiden Republik Indonesia. (2025.). Prabowo klaim keberhasilan MBG. <https://wantimpres.go.id/id/issue/prabowo-klaim-keberhasilan-mbg/>



Policy evaluation is a systematic analytical process used to assess the extent to which public policies achieve their intended objectives, with a focus on observable policy outcomes and their contribution to overall policy performance.<sup>7</sup> This situation reflects weak policy accountability and raises serious questions about the transparency and credibility of the government's claim of success.

Chairperson of BGN Decree No. 244 of 2025 on the Technical Guidelines for SPPG states that the monitoring and evaluation approach applied by MBG to SPPG relies primarily on qualitative methods, such as field visits and discussions. This approach is clearly inadequate for a program of such massive scale, with a budget of Rp71 trillion in 2025 and projected spending equivalent to Rp1.2 trillion per day in 2026.<sup>8</sup> At this level of expenditure, standards of public governance require rigorous quantitative evaluation, with qualitative methods serving only as a complement. Such evaluation should include systematic measurement of food safety, nutritional effectiveness, program impacts, and distributional and cost efficiency, rather than relying on narrative reports that are difficult to verify and incapable of uncovering the program's structural weaknesses.

Without robust quantitative evaluation, it is impossible for the government to determine whether the program genuinely delivers benefits or instead causes health harms and unprecedented levels of budgetary waste.

“We are not a nation lacking people of conscience, intellect, and professionalism who can help ensure that a program of this scale is implemented properly. On the contrary, Indonesia has the full capacity to carry out robust, measurable, and independent evaluations to meaningfully improve MBG.”

Therefore, the failure to conduct a proper evaluation is not merely a technocratic shortcoming, but a moral failure toward the millions of children who should be protected and served with the highest standards by the state.

<sup>7</sup> Dunn, W. N. (2013). *Public policy analysis: An introduction* (5th ed.). Pearson New International Edition.

<sup>8</sup> CNN Indonesia. (2025, September 27). MBG telan Rp 1,2 triliun per hari mulai tahun depan. <https://www.cnnindonesia.com/ekonomi/20250926202814-92-1278234/mbg-telan-rp12-t-per-hari-mulai-tahun-depan>

This study is the third installment in CELIOS's ongoing research series on the MBG program.



Given the program's massive budget allocation and nationwide scope, with total spending projected to reach Rp335 trillion in 2026, the absence of data-driven evaluation grounded in scientific methodology risks reducing MBG to a populist project that burdens public finances without delivering meaningful improvements in child nutrition or outcomes for vulnerable groups in Indonesia.

This study is conducted not only to address the gap in empirical evaluation of MBG's implementation, but also as an expression of intellectual responsibility amid growing public fatigue with symbolic politics. Rigorous evaluation of MBG is essential to ensure that public policy does not remain trapped in populist rhetoric, but development grounded in evidence, transparency, and accountability. Therefore the objective of this study is to serve as an early intervention, assessing the design and implementation of MBG before deeper and more severe systemic damage becomes entrenched.

**Evaluation should not be conducted after public funds have already been lost. It must take place before corruption and inefficiency occur. If evaluation is only carried out in 2029, after hundreds of trillions of rupiah have been spent and tens of thousands of people have suffered food poisoning, that is no longer policy evaluation, it is a policy autopsy.**

# Methodology

This study adopts a mixed methods approach that combines qualitative and quantitative (see Figure 1) analysis to provide a comprehensive assessment of the implementation and evaluation of the MBG program. The qualitative component is conducted through in depth interviews with a range of stakeholders and beneficiaries. The study also examines field findings indicating that MBG menus are nutritionally inadequate, which are then complemented by detailed nutritional content analysis conducted by qualified nutritionists.<sup>9</sup>

A quantitative approach using a national survey was conducted to capture public views on the MBG program. The survey involved 1,868 respondents from rural areas, suburban communities, and urban centers, reflecting Indonesia's social and demographic diversity. Data were collected digitally through targeted advertisements on Facebook and Instagram, designed to achieve broad national reach. By using the ad targeting features on both platforms, the study was able to reach respondents with specific characteristics, such as location, interests, age, gender, and relevant economic concerns.

To ensure that the study used a robust and methodologically sound approach, weighting procedures as well as validity and reliability tests were applied. Reliability testing was conducted in Stata using Cronbach's Alpha, which yielded a score of 0.75, indicating an acceptable level of internal consistency. In general, values below 0.60 are considered poor. These tests were primarily applied to variables used in the modelling, and the results show that the data have adequate reliability.

Statistical weighting was applied to the survey results to ensure that the data accurately reflect Indonesia's adult population aged 18 and above. The weighting was based on distributions of gender, age, province, educational level, and income, using official data from Statistics Indonesia (BPS) as the reference. This approach provides a comprehensive analytical framework, allowing public perceptions of economic conditions to be examined more clearly in relation to government responses to economic dynamics.

In addition, the study draws on survey data from 691 nutritionists working in Satuan Pelayanan Pemenuhan Gizi (SPPG) across 27 provinces, collected through collaboration with research partners. The data were analyzed using descriptive analysis, multinomial logit regression, logit regression, ordered logit regression, and Propensity Score Matching (PSM). A Cost of Illness (COI) analysis was also conducted to estimate the economic losses associated with food poisoning incidents. Beyond primary data, the study incorporates a review of existing literature and policy analysis from a range of official, academic, and media sources to strengthen contextual understanding and validate the findings.

<sup>9</sup> In addition, the study includes case studies based on the transcription and analysis of recorded meetings between Commission IX of the Indonesian House of Representatives (DPR RI) and BGN during parliamentary hearings held on 10 October 2025 and 12 November 2025.

Figure 1.

## Report Roadmap

This study uses

### Mixed-Methods Approach

Combining qualitative and quantitative analysis to provide a comprehensive picture of the implementation and evaluation of the MBG program

#### Qualitative Approach

- 1 The study conducted in-depth interviews with stakeholders and beneficiaries in Fak-Fak, Sorong, Padang, and Waingapu
- 2 Case study of an MBG coordination meeting with DPR RI (10 October 2025)
- 3 Analysis of nutritionally inadequate MBG menus observed in the field
- 4 In addition to primary data, the study also draws on literature reviews and policy analysis from a range of official, academic, and media sources to strengthen context and validate the findings

#### Quantitative Approach

- 1 A national survey involving 1,868 respondents from rural, suburban, and urban areas
- 2 Data were collected through targeted Facebook and Instagram advertisements
- 3 Reliability and validity tests were conducted. Reliability was assessed using Cronbach's Alpha, which yielded a value of 0.75 (classified as acceptable), and statistical weighting based on data from Statistics Indonesia (BPS) was applied to ensure that the survey results are representative of Indonesia's adult population

#### Nutritionists Survey

An additional survey of

**691 Nutritionists**

from 691 SPPG units across

**27 provinces**

conducted in collaboration with research partners

#### Research Question

How is the implementation and evaluation of the Free Nutritious Meals (MBG) program in Indonesia after almost 1 year of implementation?

#### Data Analysis

The data were analyzed using descriptive analysis, multinomial logit regression, logit regression, ordered logit regression, and Propensity Score Matching (PSM). A Cost of Illness (COI) analysis was also conducted to estimate the losses associated with food poisoning

The authors also examined field findings on MBG menus that were considered nutritionally inadequate and complemented them with nutritional content analysis conducted by nutritionists to provide stronger context for the study

In addition to primary data, the study also draws on literature reviews and policy analysis from a range of official, academic, and media sources to strengthen contextual understanding and validate the findings

# 1

## About MBG

### 1.1

#### A Unified Command Structure for the MBG Program

From the outset, the MBG program has been accompanied by various controversies and challenges. The argument that “large-scale programs inevitably face obstacles” cannot serve as an adequate justification, as any mistakes or lack of preparedness in implementation carry the risk of harming public finances and misusing taxpayers’ money. One of the fundamental problems lies in the lack of clarity surrounding the program’s design, legal basis, and the implementation of the MBG scheme itself.

It is important to note that as of 15 November 2025, a Presidential Regulation (Perpres) specifically governing the MBG program has yet to be issued. This means that a program involving trillions of rupiah in public funding has been implemented without a clear legal framework at the presidential regulation level. Since its launch in January, the MBG program has operated solely on the basis of Presidential Regulation No. 83 of 2024 on the National Nutrition Agency (BGN), without the supporting implementing regulations that would normally ensure clarity, orderliness, and consistency in execution. There are no comprehensive technical guidelines or standard operating procedures outlining how the program should function in reality. The technical guidelines issued by BGN have also been ad hoc and subject to frequent changes. The latest version, dated 27 October 2025, is Chairperson of BGN Decree No. 244 of 2025 on the Technical Guidelines for SPPG, which already represents the third revision. Ironically, despite multiple revisions, these technical guidelines were drafted without being anchored in a dedicated Presidential Regulation on the MBG program.

#### Did you know?

Presidential Regulation of the Republic of Indonesia No. 115 of 2025 on the Governance of the MBG Program was only enacted on 17 November 2025, almost a year after the MBG program had already been rolled out.

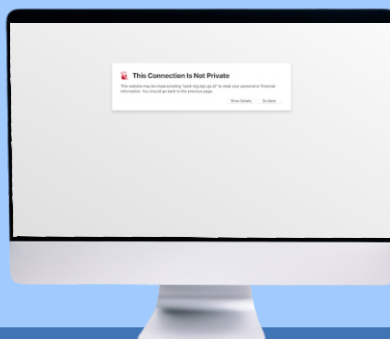
### Did you know?

This raises a fundamental question: for nearly one year, while MBG operated without a dedicated Presidential Regulation, what legal basis did BGN's technical guidelines actually rely on? If the legal framework was only established in November 2025, then all prior technical guidelines, standard operating procedures, and implementation mechanisms effectively functioned within a regulatory grey area. This situation reflects not merely an administrative oversight, but a fragile governance structure that creates space for budget misuse, weak accountability, and technical decisions lacking strong legal legitimacy.

Moreover, after nearly one year of MBG implementation, comprehensive information about the program remains difficult to obtain. The public has had to rely on fragmented and sporadic information from media coverage, in the absence of a single, official, and integrated government source that provides a complete picture of the program's performance and impacts. For this reason, the opening section of this study is designed to offer an initial overview of how the MBG program has operated over the past year.

Information on the MBG program, including data, studies on its progress and achievements, and implementation outcomes, remains highly limited and difficult for the public to access (see Figure 2).

Figure 2. Screenshot showing failure to access MBG performance reports on the official BGN website<sup>10</sup>



Source: BGN official website, bgn.go.id

### Did you know?

As of 12 November 2025, the MBG program involved 14,863<sup>11</sup> SPPG units.<sup>12</sup> The budget allocated to MBG reached Rp71 trillion in 2025 and is set to increase to Rp335 trillion in 2026. Each SPPG unit is allocated a budget ranging from Rp900 million to Rp1 billion.<sup>13</sup>

<sup>10</sup> This webpage was accessed on 19 November 2025

<sup>11</sup> Al Fiqri, A. (2025, November 12). Kini ada 14.863 SPPG, BGN targetkan 25.400 dapur MBG beroperasi. SINDOnews. <https://nasional.sindonews.com/read/1643307/15/kini-ada-14863-sppg-bgn-targetkan-25400-dapur-mbg-beroperasi-1762927868>

<sup>12</sup> Shabrina, D. (2025, October 21). BGN: Program MBG sudah jangkau 36,7 juta warga. Tempo. <https://www.tempo.co/politik/bgn-program-mbg-sudah-jangkau-36-7-juta-warga-2081734>.

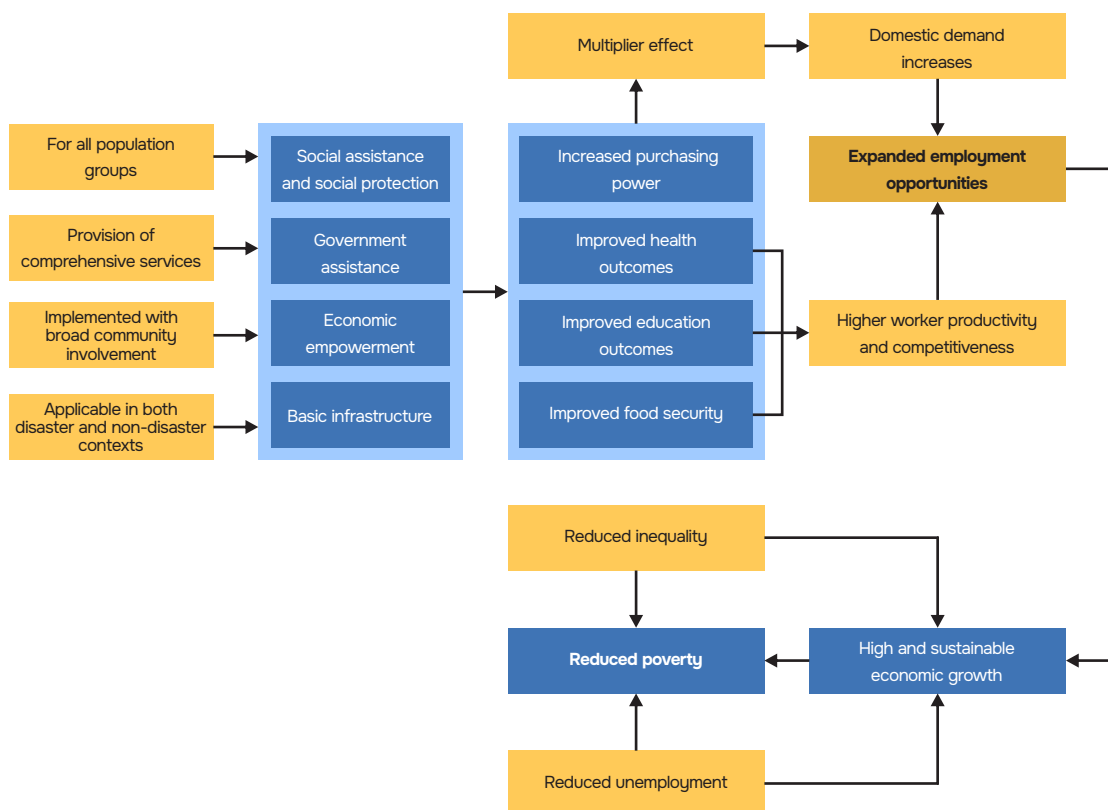
<sup>13</sup> Rajendra, R. (2025, October 16). BGN Refund Rp70 Triliun, Anggaran MBG 2026 Tetap Rp335 Triliun?. Bisnis.com. <https://ekonomi.bisnis.com/read/20251016/12/1921012/bgn-refund-rp70-triliun-anggaran-mbg-2026-tetap-rp335-triliun>

The MBG program was implemented using a “rush-through” approach. It was rolled out without a prior pilot phase, and its scheme and operational mechanisms were effectively built while the program was already underway. A comparison between Figures 3a and 3b highlights a significant gap between the idealized technocratic design and the realities of MBG implementation after nearly one year. The conceptual framework adopted by BGN in its technical guidelines and communicated to the public (Figure 3a) reflects a linear logic and an overly optimistic roadmap, as if the program were a one-size-fits-all<sup>14</sup> policy and a magic bullet<sup>15</sup> capable of automatically improving nutrition, health, productivity, and inclusive growth.

However, this framework overlooks governance realities, as it lacks mechanisms for oversight, evaluation, and accountability, all of which are essential prerequisites for the success of public programs. In contrast, on-the-ground implementation (Figure 3b) reveals that the program has been constrained by poor governance and distorted incentives, including indications of corruption and the dominance of certain groups, food poisoning incidents, delays in distribution, and unequal economic benefits that favor large businesses. The implementation has also been marked by overlapping roles and confusion over authority among institutions.

Figure 3. Gaps between program design and field implementation

Figure 3a. Program framework in BGN’s MBG technical guidelines



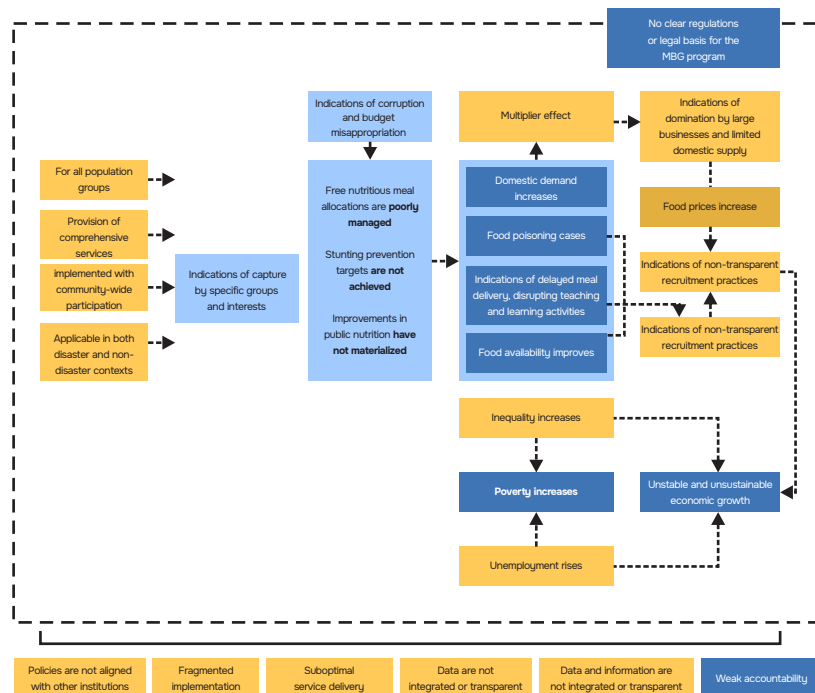
Source: Technical Guidelines From BGN (2025)

14 A uniform policy applied across all contexts, without taking into account differences in regional conditions, population groups, or specific needs.

15 The belief that a single intervention can solve all complex problems.

Figure 3b.

General Overview of Program Implementation and Indications of Issues Over the Past Year



Source: Author's analysis

66

**Speeches about feeding the people mean little if the program itself is flawed. Gimmicks and jargon merely serve as a cover for a range of underlying problems. Without honest implementation and proper targeting, MBG risks becoming a rent-seeking vehicle for a small group of beneficiaries.**

As a result, the original goals of reducing stunting and improving nutrition have shifted into new sources of inefficiency, marked by opaque implementation chains, fragmented data systems, and weak inter-agency coordination. These conditions have led to uneven implementation across regions. In practice, MBG has often been carried out in a haphazard manner, with insufficient attention to food safety, nutritional content, and hygiene standards that should have been upheld. Field evidence shows that just ten days after the MBG program was launched, the first food poisoning case emerged in Sukoharjo Regency, Central Java, where ten students at SD Negeri Dukuh 03 experienced stomach pain and nausea after consuming an MBG meal on 16 January 2025.<sup>16</sup>

The current state of the MBG program already shows clear signs of policy failure, as breakdowns in the policy process most often occur at the implementation stage, when the complexity of cross-sectoral and multi-level governance challenges is not effectively managed.

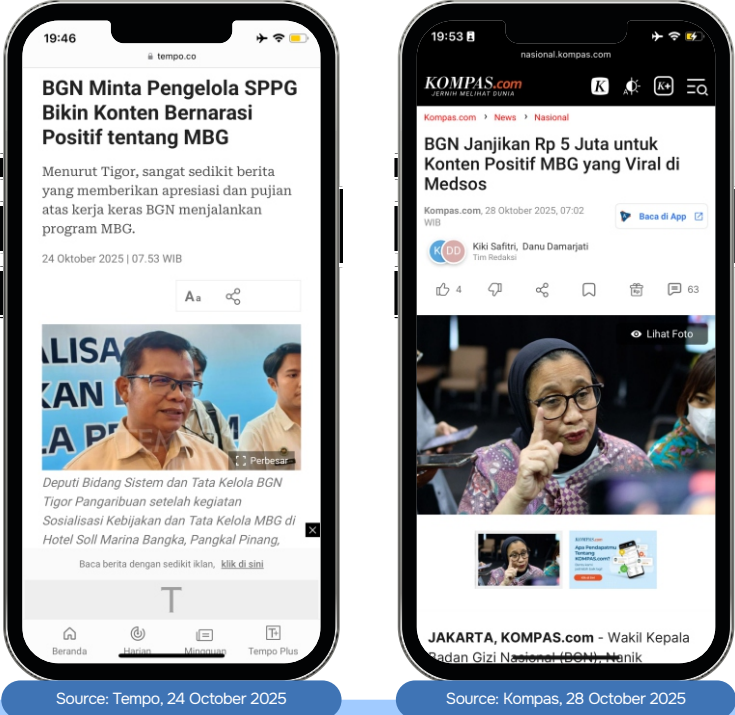
The MBG program also reflects a second type of failure, namely political failure. This occurs when decision-makers place greater emphasis on political gains and blame avoidance rather than on substantive policy outcomes (Vince J., 2015).<sup>17</sup>

<sup>16</sup> Nugroho, N. P. (2025, September 26). List of MBG Food Poisoning Cases Across Indonesia, January-September 2025. Tempo. <https://en.tempo.co/read/2052072/list-of-mbg-food-poisoning-cases-across-indonesia-january-september-2025>

<sup>17</sup> Vince, J. (2015). Integrated policy approaches and policy failure: The case of Australia's Oceans Policy. *Policy Sciences*, 48(2), 159-180. <https://doi.org/10.1007/s11077-015-9215-z>

Almost one year into its implementation, the MBG program has instead revealed a failure of the technocratic space, as state institutions with strong capacities in research, planning, and public health, such as BRIN, Bappenas, and the Ministry of Health, have been barely involved in a substantive way in either the formulation or implementation of the policy. Control of the program has been concentrated almost entirely within the National Nutrition Agency (BGN), which operates primarily in an administrative and operational capacity rather than on a technocratic or scientific basis.

**Figure 4. Controversial statements from BGN**



As a result, the MBG program has lost its analytical foundation and the data-driven policy basis that should be the core strength of any public intervention. The limited involvement of BRIN's research capacity, Bappenas's strategic planning role, and the Ministry of Health's nutrition and health standards has made MBG resemble a poorly designed populist rather than a sound policy initiative.

The absence of these technocratic institutions may be explained by two possible factors. First, it may reflect the government's limited capacity to manage complex policy processes. Second, it may be deliberate, aimed at limiting transparency and concealing vested interests (see Figure 4). A study by Transparency International Indonesia (2025)<sup>18</sup> finds that the program continues to suffer from weak governance transparency, particularly in areas such as oversight mechanisms, public complaint systems, and the appointment of partners.

<sup>18</sup> Transparency International Indonesia. (2025). The Corruption Risk Behind Free, Nutritious Meals. <https://ti.or.id/books/risiko-korupsi-dibalik-hidangan-makan-bergizi-gratis/>

## 2

# Impacts of the MBG (Free Nutritious Meal)

### 2.1

## MBG Has Yet to Improve Nutrition for Children and Vulnerable Groups

We assess the extent to which the MBG program delivers benefits in improving the nutrition of school-aged children in Indonesia and vulnerable 3B groups (breastfeeding mothers, pregnant women, and children under five who are not enrolled in early childhood education programs). The analysis focuses in particular on whether MBG addresses key challenges such as stunting and the double burden of malnutrition, including both underweight and overweight conditions. Field evidence suggests that concepts such as stunting and malnutrition remain poorly understood and relatively inaccessible among grassroots communities.<sup>19</sup>

### Did you know?

Weight-for-age (WFA) is applied to children aged 0-60 months to assess whether a child's body weight is appropriate for their age. Through this indicator, children can be classified as underweight, severely underweight, or overweight.

As a result, WFA is relatively easy for parents to monitor through routine weight measurements to check a child's day-to-day nutritional status. However, this measure cannot distinguish between acute and chronic forms of malnutrition (Skinner et al., 2023).<sup>20</sup>

Stunting reflects a long-term (chronic) nutritional problem that restricts linear growth. This condition develops due to sustained nutritional deficiencies beginning in the prenatal period and continuing through the first two years of life, commonly referred to as the first 1,000 days of life.<sup>21</sup>

The government claims that by early October 2025, the MBG program had reached around 1.3 million pregnant women, breastfeeding mothers, and toddler,<sup>22</sup> key groups within the first 1,000 days of life that are central to stunting prevention efforts. However, this coverage remains heavily concentrated among students, representing only about 3.1 percent of the total 41.6 million students nationwide.<sup>23</sup> This situation indicates that the most vulnerable groups have not yet been prioritized in MBG implementation, despite the fact that nutritional interventions during the first 1,000 days of life have the greatest impact on stunting prevention and long-term human capital development.

<sup>19</sup> Prasetyo, A. (2021, March 11). Literasi gizi di Indonesia masih rendah. Media Indonesia. [https://mediaindonesia.com/humaniora/390045/literasi-gizi-di-indonesia-masih-rendah#goog\\_rewarded](https://mediaindonesia.com/humaniora/390045/literasi-gizi-di-indonesia-masih-rendah#goog_rewarded)

<sup>20</sup> Skinner, A., Tester-Jones, M., & Carrieri, D. (2023). Undernutrition among children living in refugee camps: a systematic review of prevalence. *BMJ Open*, 13. <https://doi.org/10.1136/bmjopen-2022-070246>

<sup>21</sup> Ministry of Health Republic Indonesia. (n.d.). Stunting. AyoSehat. <https://ayosehat.kemkes.go.id/topik-penyakit/defisiensi-nutrisi/stunting>

<sup>22</sup> Prameswari, L. B. (2025, October 2). Over 1.3 mln mothers, toddlers receive Indonesia's free meal aid. *Antara News*. <https://en.antaranews.com/news/383905/over-13-mln-mothers-toddlers-receive-indonesias-free-meal-aid>

<sup>23</sup> Setuningsih, N., Dirgantara, A., & Tim Redaksi. (2025, November 12). Bos BGN sebut penerima MBG capai 41,6 juta orang, ada 11.640 orang alami keracunan. *Kompas.com*. <https://nasional.kompas.com/read/2025/11/12/22590541/bos-bgn-sebut-penerima-mbg-capai-416-juta-orang-ada-11640-orang-alami>

### Did you know?

“School feeding programs do not directly reduce stunting, as the most critical window for stunting prevention occurs during the first 1,000 days of life.”<sup>24</sup>

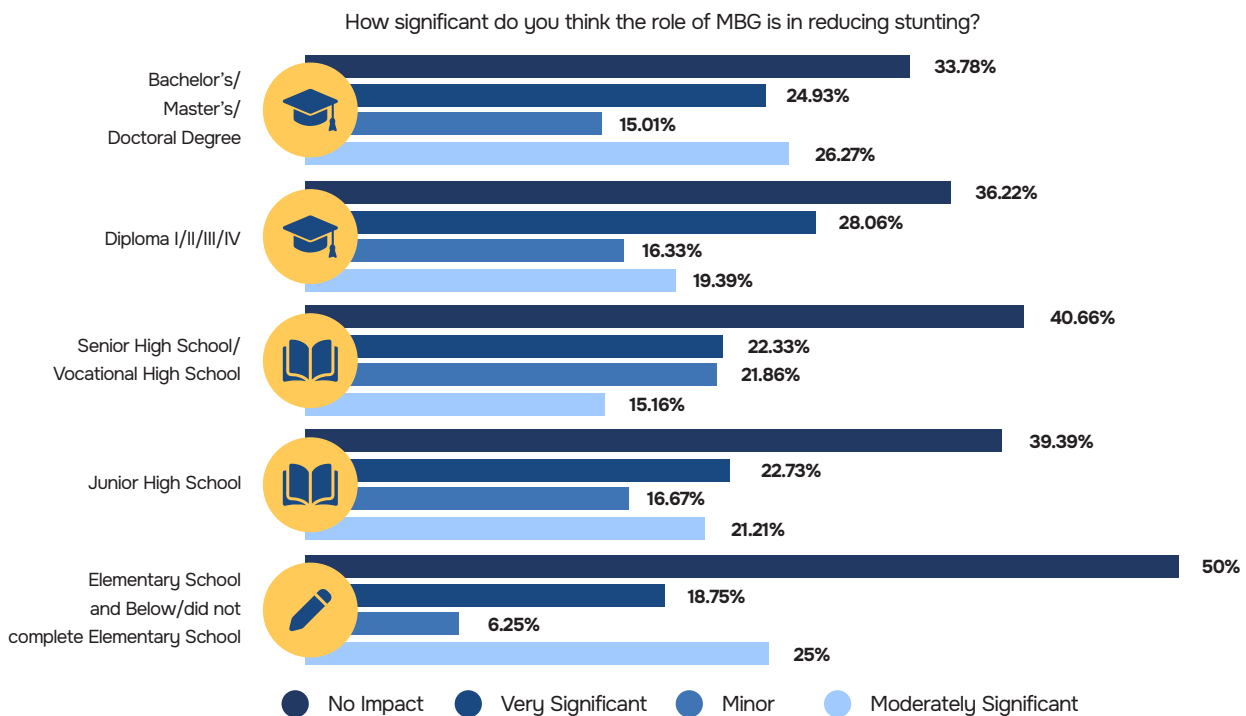
This situation is particularly concerning when food poisoning cases affect pregnant women, breastfeeding mothers, and toddlers (the 3B groups), who are among the most vulnerable populations and should be afforded the highest level of protection. Such incidents not only threaten immediate safety but also risk disrupting child growth and development during the first 1,000 days of life, a critical period for stunting prevention.

## Assessing public perceptions of the impacts of the free nutritious meal program on child stunting

The study shows that respondents’ perceptions of the MBG program’s impact on stunting prevention vary by educational attainment (see Figure 5). Respondents with undergraduate to doctoral education (S1-S3) recorded the highest share in the “no impact” category (26.27 percent), followed by those with primary education or incomplete primary schooling (25 percent) and junior secondary education (21.21 percent). Meanwhile, respondents with diploma-level education (D1-D4) and senior secondary education (SMA/SMK) recorded 19.39 percent and 15.16 percent, respectively.

Figure 5.

Assumptions that MBG can prevent stunting based on education level

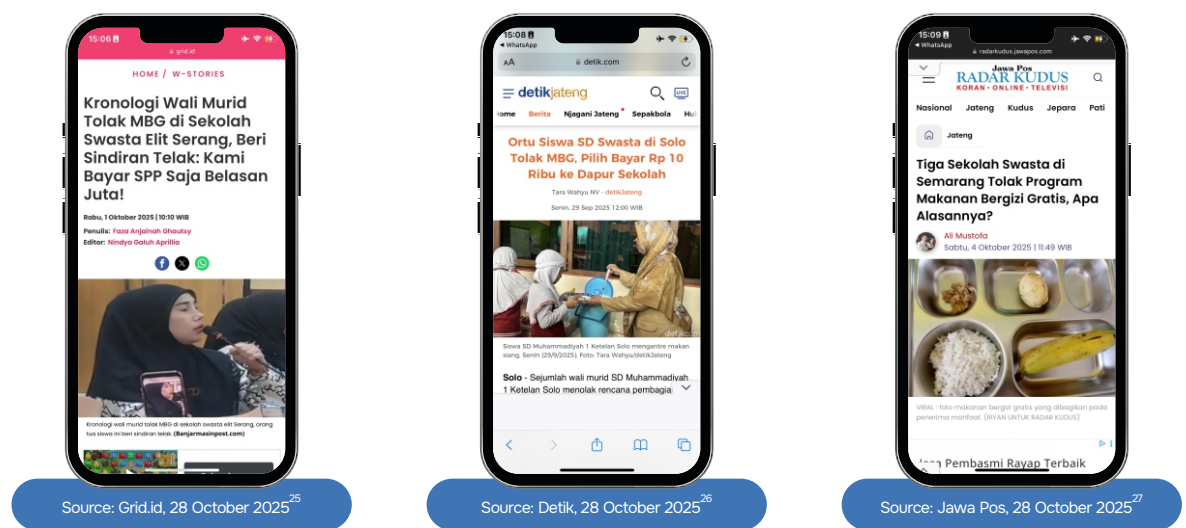


Source: CELIOS Survey. N = 1,721. Respondents were asked, “How significant do you think the role of MBG is in reducing stunting?” Response options included “Very significant,” “Moderately significant,” “Minor,” and “No impact.”

<sup>24</sup> Chakrabarti, S., Scott, S., Alderman, H., Menon, P., & Gilligan, D. (2021). Intergenerational nutrition benefits of India’s national school feeding program. *Nature Communications*, 12. <https://doi.org/10.1038/s41467-021-24433-w>

The high proportion of highly educated respondents who believe that the MBG program has no impact may reflect a more critical view of the program's targeting fairness. Many in this group may feel that a program like MBG should focus on those who genuinely need support, such as low income households or children at high risk of stunting, rather than being distributed uniformly without considering recipients' economic conditions or actual needs.

From this perspective, MBG is seen as drifting away from its purpose as a well targeted social intervention, as it risks generating budget inefficiencies and reducing policy effectiveness. This critique highlights the awareness among the middle class and highly educated groups about the importance of targeted policies, in which public assistance is delivered selectively to generate real impacts on stunting reduction, rather than merely creating a superficial impression of equal distribution.



## Is MBG Really a Priority?: Estimating the Lost Benefits for Stunting Prevention Programs

To assess the impact of MBG in greater depth, we estimate the opportunity costs needed to reveal the hidden economic consequences of the government's budget allocation choices. As is widely understood, the MBG program absorbs a very large share of public spending and has forced a reallocation of funds toward MBG at the expense of sectors that are far more critical such as health services, most notably stunting prevention programs.

The portion of the MBG budget taken from the health sector amounts to Rp24.7 trillion. This creates an opportunity cost, which refers to the value of benefits forgone as a result of the trade off with stunting prevention programs. The opportunity cost is calculated using the current MBG inclusion error, which is 34.2 percent of beneficiaries who should not have been targeted.<sup>28</sup> The estimated value is then calculated using the approach of Hoddinott, John et al. (2013), who estimate that every USD1 invested in stunting prevention generates USD47.9<sup>29</sup> in the future benefits.

25 Grid.ID. (2025, October 1). Kronologi wali murid tolak MBG di sekolah swasta elit Serang, beri sindiran telak: Kami bayar SPP saja belasan juta! Grid.ID. <https://www.grid.id/read/044302549/kronologi-wali-murid-tolak-mbg-di-sekolah-swasta-elit-serang-beri-sindiran-telak-kami-bayar-spp-saja-belasan-juta?page=all>

26 Detik.com. (2025, September 29). Ortu siswa SD swasta di Solo tolak MBG, pilih bayar Rp 10 ribu ke dapur sekolah. Detik.com. <https://www.detik.com/jateng/berita/d-8135372/ortu-siswa-sd-swasta-di-solo-tolak-mbg-pilih-bayar-rp-10-ribu-ke-dapur-sekolah>

27 Mustofa, A. (2025, October 4). Tiga sekolah swasta di Semarang tolak program Makan Bergizi Gratis, apa alasannya? RadarKudus. <https://radarkudus.jawapos.com/jateng/696658638/tiga-sekolah-swasta-di-semarang-tolak-program-makanan-bergizi-gratis-apa-alasannya>

28 CELIOS. (2025). A Better Idea, Mr. President: Smart Budget Cuts For Fiscal Justice and Public Welfare. [https://celios.co.id/wp-content/uploads/2025/02/CELIOS\\_Budget-Cuts.pdf](https://celios.co.id/wp-content/uploads/2025/02/CELIOS_Budget-Cuts.pdf)

29 Hoddinott, J., Alderman, H., Behrman, J. R., Haddad, L., & Horton, S. (2013). The economic rationale for investing in stunting reduction. *Maternal & Child Nutrition*, 9 Suppl 2(Suppl 2), 69–82. <https://doi.org/10.1111/mcn.12080>

Table 1.	Opportunity Cost Simulation for Stunting Prevention Programs	
MBG Budget Reallocation from the Health Sector (Rp)	<b>A</b>	24,700,000,000,000.00
MBG Inclusion Error	<b>B</b>	34.20%
Opportunity Cost of Budget Waste (Rp)	<b>C = A x B</b>	8,447,400,000,000.00
Opportunity Cost of Budget Waste (USD) <sup>30</sup>	<b>C = A x B</b>	506,925,108.02
Benefits of Stunting Prevention from the Opportunity Cost (USD)	<b>D = C x USD47,9</b>	24,281,712,674.03
Benefits of Stunting Prevention from the Opportunity Cost (Rp)	<b>E = D x Rp16.664</b>	404,630,460,000,000.00

Source: Analyzed by the Research Team

This study shows that of the total MBG budget of Rp24.7 trillion, approximately 34.2 percent is at risk of mistargeting. This translates into an estimated waste of around Rp8.4 trillion (see Table 1), which could have been redirected to more essential health programs such as stunting prevention. If the wasted funds were allocated to stunting prevention efforts, the potential economic benefits could reach approximately Rp404.6 trillion, both through improved child health outcomes and long term productivity gains. These findings demonstrate that evidence based and well targeted budget allocation generates far greater economic returns for Indonesia compared to reallocating health sector funds to finance the MBG program.

## The Problem with the Government's Claim that MBG Effectively Increases Children's Weight

Since July 2025, the government has continued to promote the narrative that MBG can increase Body Mass Index (BMI)<sup>31</sup> as a basis for justifying the program and responding to growing public criticism of its benefits. It is important to note that BMI is only used to estimate whether a person falls into the categories of underweight, normal weight, overweight, or obesity.<sup>32</sup>

We investigate whether the MBG program is associated with, and potentially leads parents to perceive, changes in their children's weight. Body weight is one of the key components used in calculating BMI. The study uses multiple approaches, including descriptive statistics, causality analysis, and correlation analysis.

This study finds that the majority of women, approximately 62 percent, reported that their children did not experience any weight gain<sup>33</sup> (see Figure 6). This indirectly suggests that the MBG program has not produced a noticeable impact on improving family nutrition, particularly when assessed through parental perceptions of child weight, most of which come from women. This point is important because women play the central role in childcare and in meeting children's nutritional needs (CELIOS, 2024).

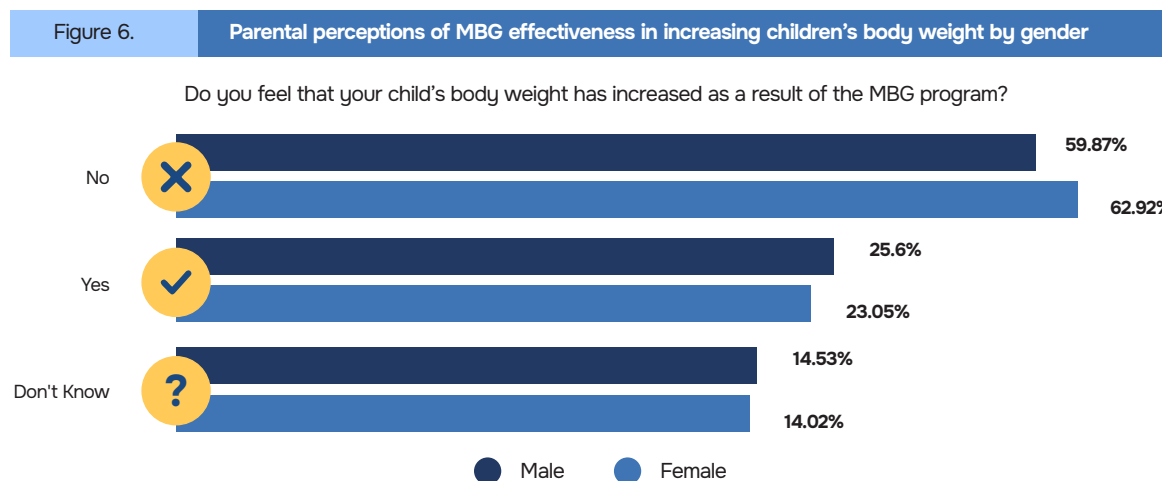
<sup>30</sup> Bank Indonesia. (2025). Kurs JISDOR 3 November 2025 Rp16,664. <https://www.bi.go.id/en/statistik/informasi-kurs/jisdor/default.aspx>

<sup>31</sup> Portal Informasi Indonesia. (2025, July 16). Dampak positif MBG, Indeks Massa Tubuh anak meningkat. <https://indonesia.go.id/kategori/sosial-budaya/9696/dampak-positif-mbg-indeks-massa-tubuh-anak-meningkat?lang=1>

<sup>32</sup> Komdigi. (2025, August 15). Satu Piring MBG Bawa Sejuta Harapan Baru Perbaikan Gizi Anak Negeri. <https://www.komdigi.go.id/berita/artikelgpr/detail/satu-piring-mbg-bawa-sejuta-harapan-baru-perbaikan-gizi-anak-negeri>

<sup>33</sup> In this survey, one limitation is that the analysis relies on parental perceptions of child weight. Body weight reflects short term nutritional status, while height represents long term nutritional status and a child's past nutritional history (Gallegos, D. (2020).

Previous research also shows that women, especially mothers, often assume the primary caregiving role and are more actively involved in monitoring their children's health, including weight tracking. This is closely tied to their responsibilities within the household and their daily role in managing food intake and nutrition (Xhonneux et al., 2022).<sup>34</sup>



Source: CELIOS Survey. N = 1,721. Respondents were asked, "Do you feel that your child's body weight has increased as a result of the MBG program?" Response options included "Yes," "No," and "Don't know."

The government's claim that MBG is successful based on increases in children's BMI needs to be questioned, because serving ultra processed foods in schools can lead to artificial weight gain that does not align with the goal of improving nutritional quality.

We estimate the extent to which the MBG program actually contributes to improving children's nutritional status based on parental perceptions. The analysis shows that the presence of MBG in a household is consistently associated with negative parental perceptions regarding their children's weight gain, although the strength of the effect varies across models.

**Why does this study use a multi analysis approach?**

To assess whether MBG is truly related to parents' perceptions of their children's weight gain, the study applies several analytical methods. Descriptive analysis is used to outline general patterns in parental perceptions. Correlation analysis examines whether children who receive MBG are more frequently perceived as gaining weight compared to those who do not receive the program. In this context, causality analysis such as Propensity Score Matching (PSM) helps determine whether changes in parental observations of weight gain are actually linked to MBG. PSM works by matching important characteristics between MBG recipient households and non recipient households. When the underlying assumptions are met, PSM produces causal impact estimates that can be considered reliable.

<sup>34</sup> Xhonneux, A., Langhendries, J., Martin, F., Seidel, L., Albert, A., Dain, E., Totzauer, M., Grote, V., Luque, V., Closa-Monasterolo, R., Dionigi, A., Verduci, E., Gruszfeld, D., Socha, P., & Koletzko, B. (2022). Parental Perception of Body Weight Status of Their 8-year-old Children: Findings from the European CHOP Study. *Maternal and Child Health Journal*, 26, 1274 - 1282. <https://doi.org/10.1007/s10995-021-03334-w>

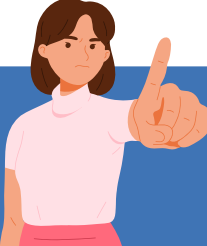
The results from the three analytical approaches (see Table 2), namely Model 1, Model 2, and Model 3, show a consistent pattern. The presence of a child receiving MBG does not increase the probability that parents perceive their child to have gained weight. In fact, it tends to reduce that probability. In Model 1, the Average Marginal Effect (AME) is recorded at -2.1404 with a 95% confidence interval (-3.0748; -1.2060). This indicates a decrease of 2.14 percentage points and is statistically significant. Model 2 also shows a similar direction of effect, with an AME of -0.081 and a 95% confidence interval (-0.2487; 0.0866). Although this result is not statistically significant, it still reflects a consistent negative trend. This pattern is further reinforced by Model 3, which uses PSM. The model produces an AME of -0.13 with a standard error of 0.019, and the result is statistically significant at the  $p < 0.01$  level. This indicates that even after the matching process, households with children receiving MBG continue to have a lower likelihood of reporting weight gain in their children.

**Taken together, the three models deliver the same policy message. The MBG program does not show a positive impact on parental perceptions of children’s weight gain, and is instead associated with a lower probability across all analytical approaches.**

These findings are considered robust because they remain consistent even after controlling for geographic and socioeconomic variables, applying matching with trimming and common support, and using survey weights and provincial clustering to ensure unbiased estimates.

Model	Analysis	AME	CI 95% (Upper bound, Lower bound)	S.E
Model 1	MLOGIT + IV	-2.1404+	(-3.0748, -1.2060)	
Model 2	MLOGIT	-0.081	(-0.2487, 0.0866)	
Model 3	PSM	-0.13***	-	0.019

*Note: The use of pweight and vce(cluster prov\_id) is appropriate for cluster-structured survey data and helps reduce the underestimation of standard errors. Model 1 employs a multinomial logit regression with an Instrumental Variable (IV), with the outcome defined as the perception that the child’s weight has increased. Model 2 uses a multinomial logit regression with the same outcome. Model 3 applies Propensity Score Matching (PSM). The analysis uses 1-nearest neighbor matching with robust standard errors, implementing trimming and dynamic common support by category. Covariate balance is assessed using tebalance summarize. The analysis also includes control variables for geographic location and socioeconomic characteristics.*



**The data speak for themselves, not assumptions.  
Parents do not observe weight gain in their children after receiving MBG**

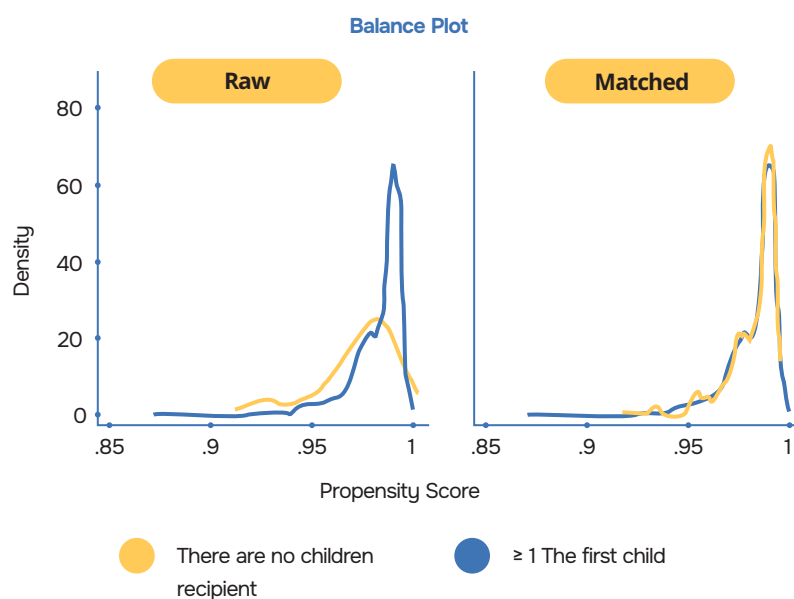
## Justification for Using PSM<sup>35</sup>

Covariates	SDiff Raw	SDiff Matched
Income group	0.12	0.19
Age	0.1	0.29
Education	-0.41	0.20
Gender=Female	0.44	-0.08
Java=Outside Java	0.14	0.14

A brief elaboration of the analytical process for Table 3 is as follows. A rule of thumb for the Standardized Difference (SDiff) is used to assess the degree of balance between the treatment and control groups. In general, an SDiff < 0.1 indicates very good balance, while values between 0.1-0.25 indicate acceptable balance. In this analysis, prior to matching, the education and gender variables exhibited substantial imbalance, with SDiff values exceeding 0.4. After the application of PSM, all SDiff values fall within the range of 0.08-0.29, indicating a significant improvement in covariate balance between groups. The age variable approaches 0.3 but remains tolerable given the limited number of control observations. Consequently, the groups receiving MBG and not receiving MBG become more apple-to-apple compared to the pre-PSM (raw) sample.

**“Every ladle of rice is a small political decision made in the kitchen. When the state fails to strengthen the hands that hold it, nutrition becomes nothing more than a slogan. The ones who should be empowered are the fathers and mothers, so they can earn a decent income and provide nutritious food for their children.”**

Figure 7. Tebalance summary from before (raw) and after PSM (matched)



<sup>35</sup> This analysis refers to a working paper authored by the research team entitled “Exposure to the Free School Meals (MBG) Program and Parents’ Perceptions of Its Benefits for Children and Households: A Case Study on Food Security and Nutrition in Indonesia.” For further discussion regarding this analysis, please contact the authors.

## MBG Has Not Effectively Changed Children's Learning Behavior

The success of a free school meal program can be assessed by looking at how well it supports children's overall development. This includes not only improvements in nutritional status, but also enhanced learning readiness and the formation of positive behaviors in school, such as increased engagement, better focus (Metwally et al., 2020)<sup>36</sup>, and greater diligence. To understand the extent to which the MBG program produces changes that are noticeable to parents, we analyze parental perceptions regarding shifts in children's activeness, focus levels, and diligence at school after participating in the program.

**This study indicates that most parents have not observed any significant changes in their children's activeness or focus. Although a small number of parents reported slight improvements, the scale of these changes is too limited to demonstrate any meaningful success of the program.**

### Why does this study use a multi analysis approach?

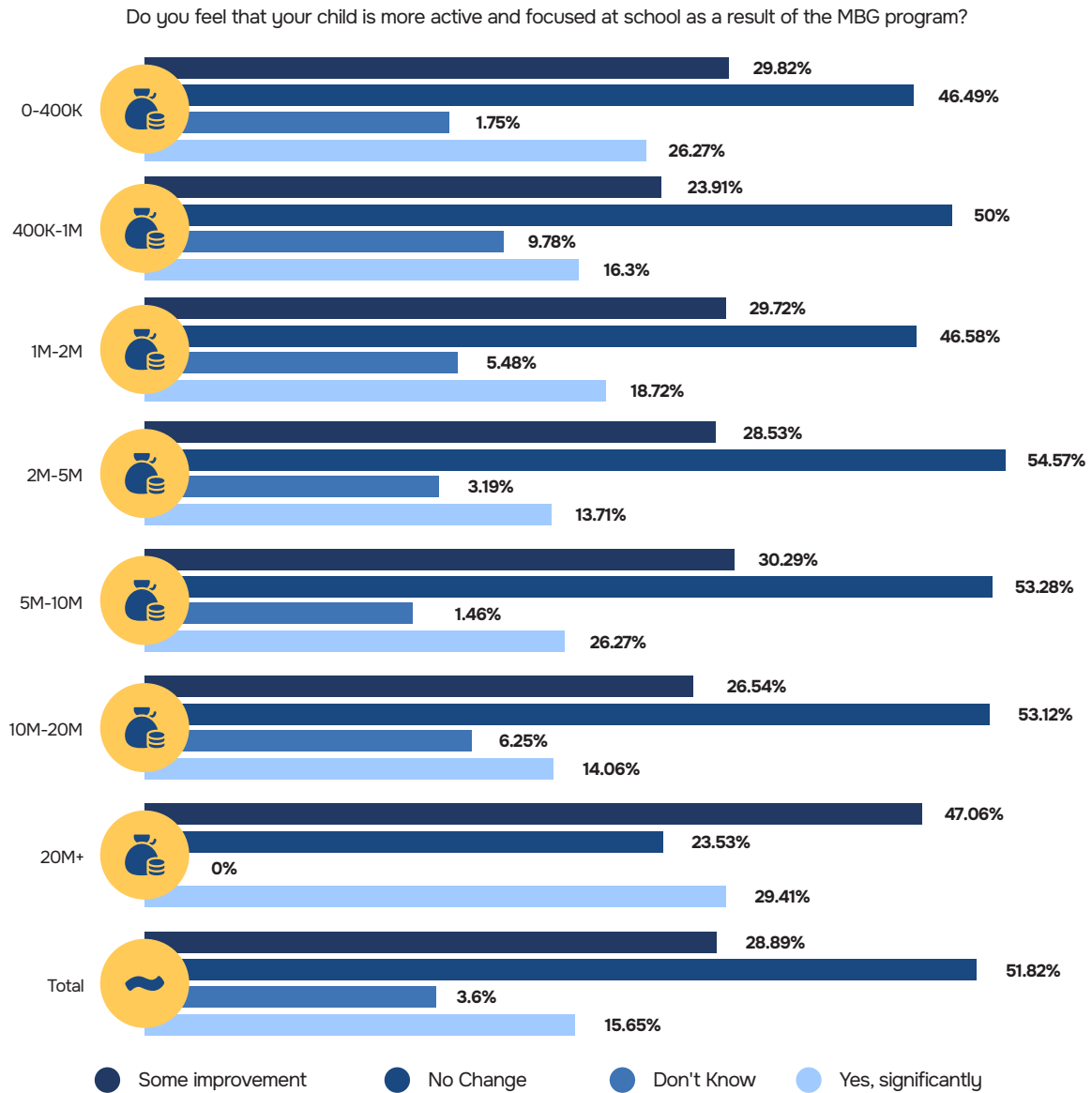
To determine whether the MBG program leads parents to perceive their children as more focused, active, or diligent at school after receiving MBG, the study applies multiple analytical methods. Descriptive analysis is used to identify basic patterns in parental perceptions. Correlation analysis examines whether children who receive MBG are more likely to be perceived as active, focused, and diligent. Causality analysis is then applied to assess whether these perceptions are actually caused by MBG rather than by other factors such as socioeconomic conditions.

This study finds that 51.86 percent of respondents reported no change in their children's level of activeness or focus at school after receiving MBG. On the other hand, around 29 percent of respondents observed slight improvements. Only 16 percent stated that their children became more active and focused. Another notable finding from the descriptive analysis is that respondents across nearly all income levels reported no change in their children's learning behavior after participating in the MBG program (see Figure 8). This pattern is especially prominent among respondents earning 2-5 million rupiah per month, a lower middle income group, which most frequently reported that their children did not experience any improvement in activeness or focus at school. These findings underscore the need for a deeper evaluation to ensure that the MBG program genuinely benefits children living in economically vulnerable households.

<sup>36</sup> Metwally, A., El-Sonbaty, M., Etreby, L., El-Din, E., Hamid, N., Hussien, H., Hassanin, A., & Monir, Z. (2020). Impact of National Egyptian school feeding program on growth, development, and school achievement of school children. *World Journal of Pediatrics*, 1-8. <https://doi.org/10.1007/s12519-020-00342-8>

Figure 8.

**MBG and parents' perceptions that children are more focused and active at school by income level**

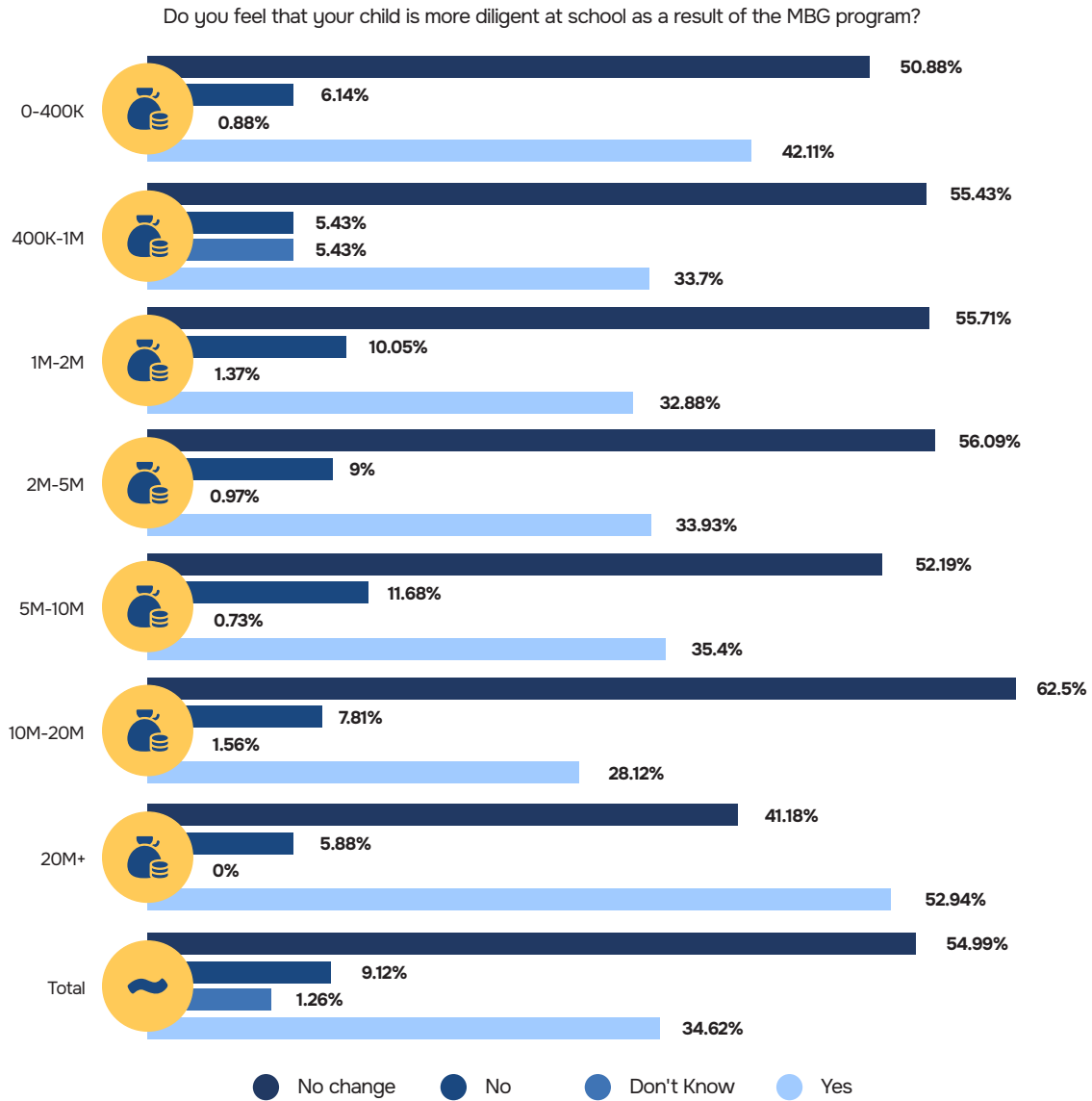


Source: CELIOS Survey. N = 1,721. Respondents were asked, "Do you feel that your child is more active and focused at school as a result of the MBG program?" Response options included "No change," "Some improvement," "Yes, significantly," and "Don't know."

In addition to showing no meaningful impact on children’s activeness or focus at school, the MBG program also does not appear to produce any significant change in children’s diligence. A total of 55 percent of respondents stated that their children’s level of diligence remained the same, with no noticeable improvement. This study suggests that the program has limited effectiveness in encouraging more diligent learning behavior among beneficiary children, based on parental observations. This pattern is consistent across nearly all income groups, where the majority of respondents reported no change in their children’s behavior (see Figure 9).

Figure 9.

**MBG and parents' perceptions that children are more diligent at school by income level**



Source: CELIOS Survey. N = 1,721. Respondents were asked, "Do you feel that your child is more diligent at school as a result of the MBG program?" Response options included "No change," "No," "Yes," and "Don't know."

The influence of MBG participation on parents' perceptions that their children have become more diligent, active, and focused at school is not statistically significant and is supported only by weak empirical evidence. Overall, the MBG program has not demonstrated convincing proof that it improves parents' positive perceptions of their children's learning behavior.

## MBG and Parental Perceptions of Children’s Learning Behavior: Are Children More Active Focused, and Diligent at School?

The results in Table 4 indicate that having a child who receives MBG does not provide strong empirical evidence that the program improves children’s activeness or focus at school. In Model 1, the estimated AME is negative and statistically significant, with AME = -1.2637+ with 95% CI (-1.8823; -0.6450). This suggests that parents of MBG recipient children are more likely to report that their children did not become more active or focused. Model 2 also shows a negative effect (AME = -0.1158+) with a 95% CI (-0.2322; 0.0005), although the level of significance is weak. Meanwhile, Model 3 produces a very small and statistically insignificant estimate (Coefficient = 0.028, SE = 0.066), reinforcing the conclusion that there is no empirical evidence that MBG improves children’s ability to stay active or focused in school. The consistent negative direction in two out of the three models raises serious doubts about the claim that MBG enhances children’s learning performance or readiness.

For diligence, Model 1 detects a small but marginally significant positive effect (AME = 0.1158+, CI 0.0267-0.2049). Model 2 shows a seemingly large coefficient (AME = 0.5107+), but it is not statistically significant because the confidence interval crosses zero (95% CI = -0.0401; 1.0615). Model 3 produces a coefficient of 0.395 with SE of 0.295, which is also not significant. Overall, most estimates do not indicate any improvement in children’s diligence as a result of MBG. Therefore, the available empirical evidence is not strong enough to conclude that the program positively influences children’s learning behavior.

This study highlights the urgency for the government to re-evaluate the design of the MBG intervention. When a large-scale national program with substantial funding fails to yield improvements in children’s learning behavior, and even show negative indications related to activeness and focus, the meal provision approach requires reassessment. This includes revisiting menu quality, nutritional adequacy, distribution mechanisms, timeliness of delivery, and the program’s alignment with children’s learning needs. The government must ensure that MBG is not merely achieving distribution targets, but is genuinely supporting the teaching and learning process in schools. Without fundamental improvements in quality and implementation, MBG risks becoming a high-cost program with minimal educational benefits, and may even create counterproductive effects on child development.

Table 4.		MBG and parents’ perceptions that children are more active and focused at school <sup>37</sup>				
Variable	Active & Focus			Diligent		
	Model 1 AME	Model 2	Model 3 Coef / SE	Model 1 AME	Model 2	Model 3 Coef / SE
<b>There are children receiving MBG (dummy)</b>	-1.2637+	-0.1158+	0.028 / 0.066	0.1158+	0.5107+	0.395 / 0.295
<b>CI 95% (Upper bound, Lower bound)</b>	(-1.8823, -0.6450)	(-0.2322, -0.0005)		(0.0267, 0.2049)	(-0.0401, 1.0615)	

Note: The estimates above are based on a logit model with significance thresholds defined as follows:  $z \geq 1.65$  corresponding to  $p < 0.10$  (+, weak evidence);  $z \geq 1.96$  corresponding to  $p < 0.05$  (\*); and  $z \geq 2.58$  corresponding to  $p < 0.01$  (\*\*). Estimates not meeting these thresholds are considered statistically insignificant. Logit estimations employ raked survey weights ( $pweight = rake$ ) and province-clustered robust standard errors ( $vce(cluster\ prov\_id)$ ). The analysis applies 1-nearest neighbor matching with robust standard errors, implementing trimming and dynamic common support by category. Covariate balance is assessed using `tebalance summarize`. The full table is not reported due to space constraints. Model 1 uses an ordered logit regression with an instrumental variable (3T); Model 2 uses an ordered logit regression without an instrumental variable; and Model 3 applies Propensity Score Matching. The analysis also includes control variables for geographic location and socioeconomic characteristics.

<sup>37</sup> This analysis refers to a working paper authored by the author entitled “Exposure to the Free School Meals (MBG) Program and Parents’ Perceptions of Its Benefits for Children and Households: A Case Study on Food Security and Nutrition in Indonesia.” For further discussion regarding this analysis, please contact the author.

At the same time, there is a reality we cannot simply ignore. Many school-age-children remain out of school and are even working because of the pressures of extreme poverty. In this context, it is worth questioning whether the education budget of Rp223 trillion, which should be used to expand access to free schooling and break the cycle of poverty, is instead being absorbed to finance MBG in 2026, a program whose implementation has been pushed forward without adequate evaluation. This raises a critical question about whether the policy truly prioritizes the most vulnerable groups, or whether it ends up undermining their rights to education and a more dignified life in Indonesia. It is an unacceptably high price to pay for the future of these children.

Figure 10.

Illustration of Age Gaps Among Children in Indonesia



Source: unknown (circulating on social media, accessed on 19 November 2025, adapted).

### Did you know?

The National Nutrition Agency (BGN) has announced that in 2026, public funds amounting to Rp1.2 trillion per day<sup>38</sup> will be allocated to MBG.

With an allocation of Rp1.2 trillion for MBG in just a single day, the state could actually afford to pay every honorary teacher in Indonesia approximately Rp1.7 million per month, a far more humane amount compared to the current situation, where many teachers receive wages even below Rp300 thousand per month. This raises a critical question. How can the education sector progress if teachers, the very foundation of learning quality, continue to be overlooked? Does this not reveal a stark reality that our education policy is being diminished and sidelined by budget priorities that are misaligned with the basic needs of the education system?

**In 2026, the budget allocated for just 12 days of the MBG program would be enough to pay all honorary teachers in Indonesia a monthly salary of Rp1.7 million for an entire year.**

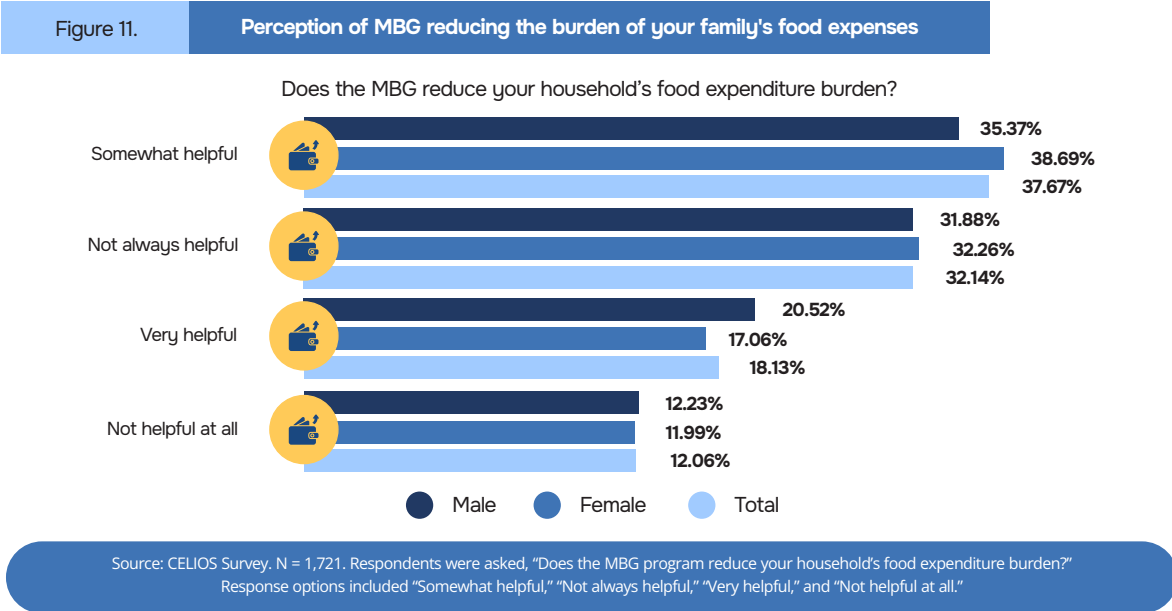
<sup>38</sup> Setiawan, D. (2025, November 19). Tahun depan BGN akan gelontorkan Rp 12 triliun per hari untuk MBG. Kompas.com. <https://nasional.kompas.com/read/2025/11/19/16584111/tahun-depan-bgn-akan-gelontorkan-rp-12-triliun-per-hari-untuk-mbg>

## 2.3

# MBG Has Not Effectively Reduced the Burden on Households

The MBG program is often promoted as an effective solution for reducing household expenses, based on the simple assumption that parents no longer need to cover the cost of their children’s lunch. However, the reality on the ground is far more complex. MBG covers only one of the three daily meals, while families must still pay for breakfast, dinner, weekend nutrition, and school snacks that have long been part of children’s consumption patterns. This burden becomes even heavier when meal portions are too small or of low quality. As a result, claims of substantial savings are far from accurate.

This study finds that a considerable proportion of respondents do not experience significant benefits from MBG in reducing their household food expenses. Some even report that the program does not help at all. The findings show that more than 30 percent of beneficiary households do not feel any meaningful reduction in their food expenditure burden (see Figure 11).

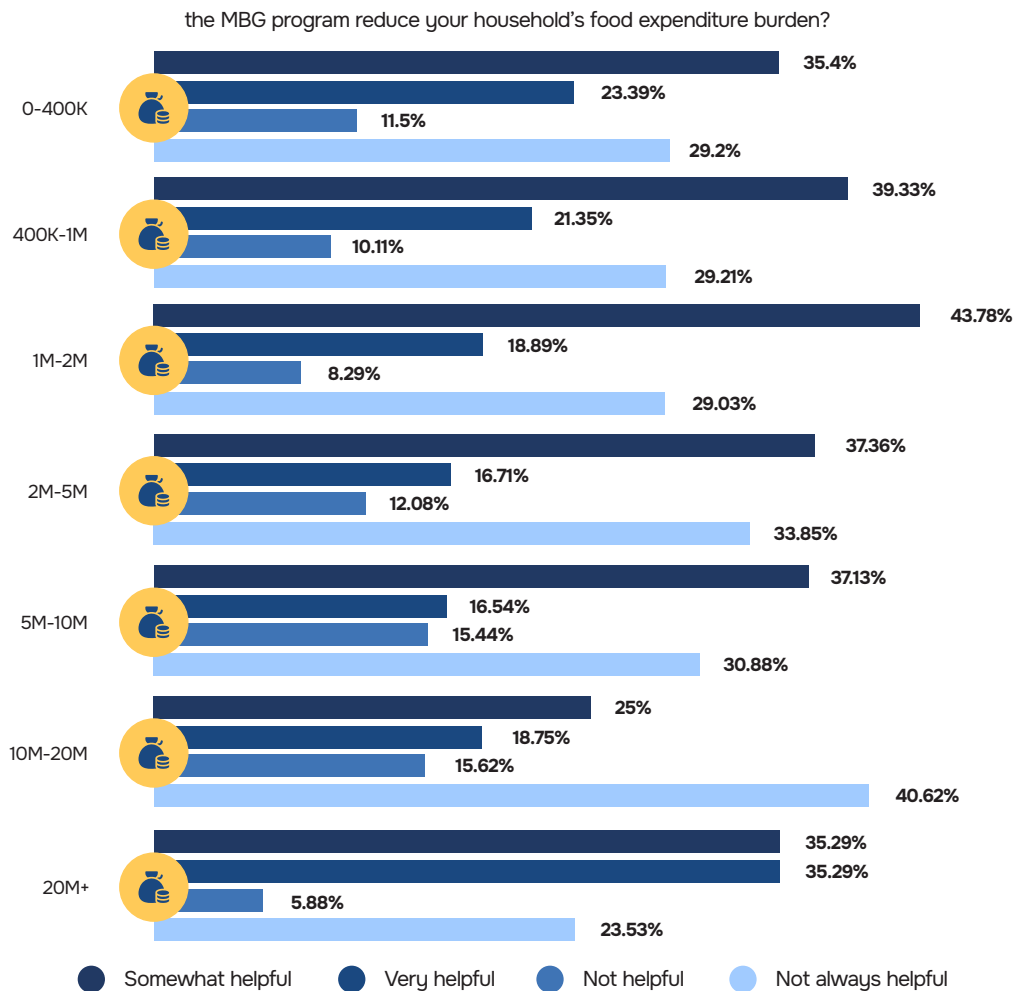


Another notable finding from this study is that among households earning below 400 thousand rupiah per month, 29.2 percent feel that MBG does not provide meaningful relief in reducing household expenses (see Figure 12). The group that reports the most noticeable reduction in expenditure burden is households earning Rp1-2 million. However, even within this income bracket, 29.03 percent still say that MBG is not very helpful.

Figure 12 therefore suggests that among low income households, a significant share feels that the program has not sufficiently eased their financial burden because their daily needs are far greater than the assistance they receive. This occurs because the reduction in spending applies only to children’s lunch, which is relatively minor compared to the broader range of daily food costs. Families still need to provide pocket money, breakfast, dinner, food for children who refuse MBG meals, and weekend meals. Given these conditions, the government needs to design a more sensible program that genuinely supports the most vulnerable groups who need assistance the most.

Figure 12.

Perceptions of MBG reducing household food expenditure burdens by income level



Source: CELIOS Survey. N = 1,721. Respondents were asked, "Does the MBG program reduce your household's food expenditure burden?" Response options included "Somewhat helpful," "Not always helpful," "Very helpful," and "Not helpful at all."

### There is an Additional Economic Burden Due to Low Children's Acceptance of MBG Meals

This study shows that most parents still have to spend additional money because their children do not always like the meals provided through the MBG program (see Figure 13). A total of 64.6 percent reported that they continue to buy replacement meals even though their children receive MBG. Meanwhile, only 35.4 percent of respondents said they never needed to spend extra money to replace MBG meals. This indicates an inefficiency in program implementation, driven largely by low acceptance of the meals among children. For example, MBG meals distributed to students often consist only of packaged bread and sweetened milk (categorized as UPF), which are neither healthy nor filling.

Such menus not only fail to meet children's nutritional needs, but also force parents to continue spending additional money to provide a proper lunch. Instead of reducing household burdens, the low quality of the meals prevents the program from achieving its objectives and ends up imposing a double burden on families: through taxes that finance the program and through out-of-pocket costs to compensate for its shortcomings.

Figure 13. Perceptions that MBG generates additional economic burdens

As a result of the MBG program, do you have to spend additional money to purchase substitute food because your child does not like the MBG meals?

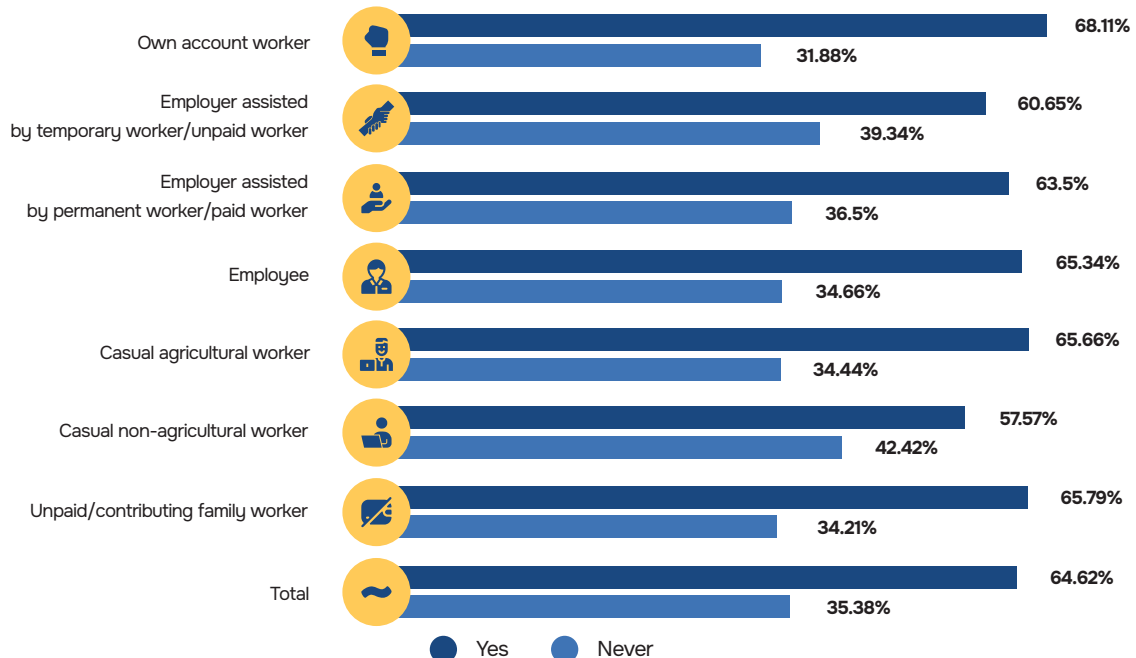


Source: CELIOS Survey, N = 1,721. Respondents were asked, "As a result of the MBG program, do you have to spend additional money to purchase substitute food because your child does not like the MBG meals?" Response options included "Yes" and "Never."

Respondents across different types of occupations show a similar pattern, where parents continue to provide additional money even though their children receive MBG meals (see Figure 14). Most respondents still purchase replacement food because their children do not like the meals provided by MBG. The highest proportion is found among self-employed workers at 68 percent. Unpaid family workers also report spending additional money, reaching 65.8 percent. The most likely reasons include unappealing taste or appearance, inappropriate portion sizes, and limited menu variety<sup>39</sup>, which make children reluctant to eat MBG meals and lead parents to supplement or replace them with other foods. This indicates that the need to buy replacement meals is a widespread phenomenon across various occupational sectors.

Figure 14. Perceptions of additional economic burdens due to low children's acceptance of MBG menus by parents' employment status

As a result of the program, do you have to spend additional money to purchase substitute food?

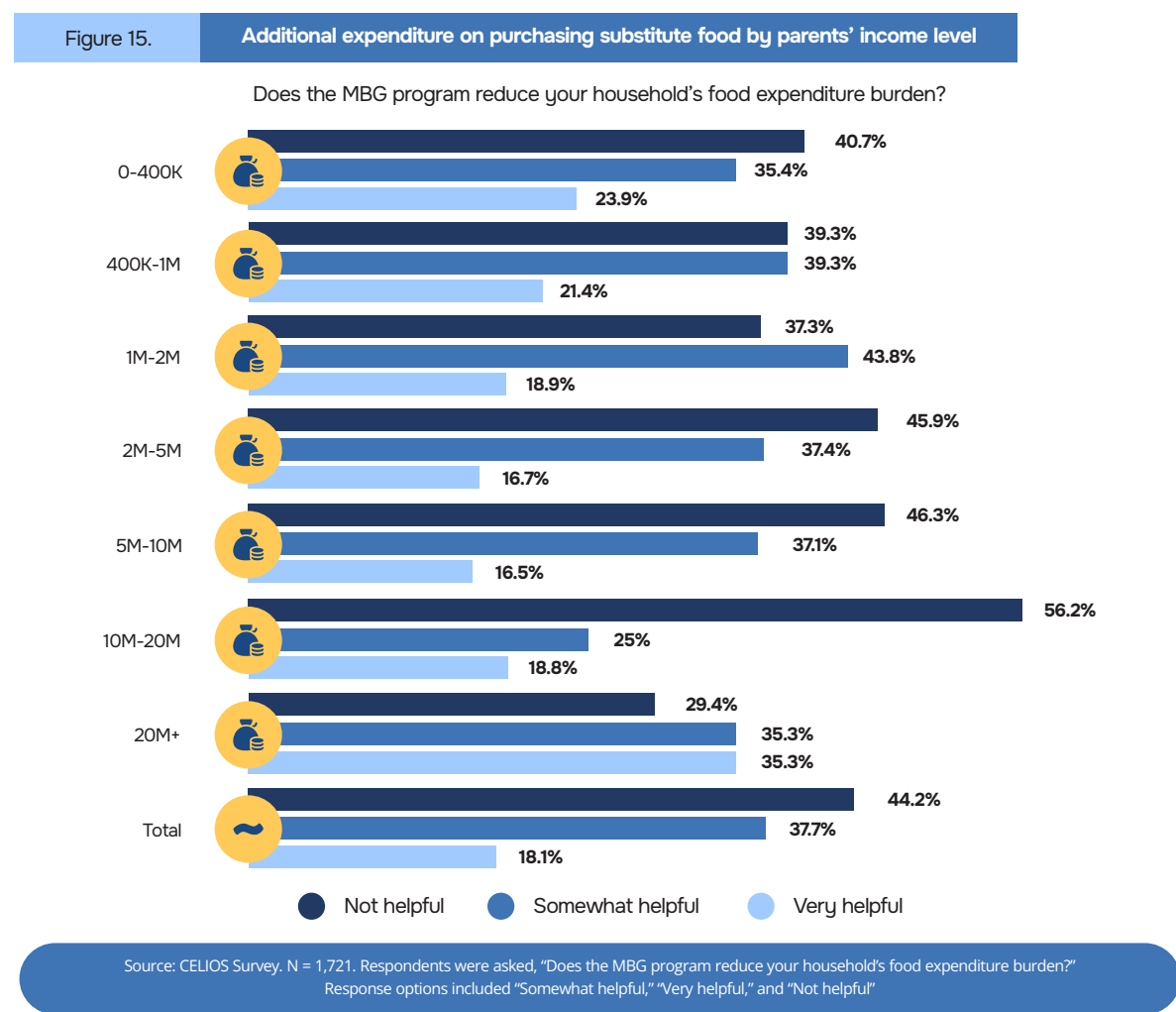


Source: CELIOS Survey, N = 1,721. Respondents were asked, "As a result of the MBG program, do you have to spend additional money to purchase substitute food because your child does not like the MBG meals?" Response options included "Yes" and "Never."

<sup>39</sup> Henriques, P., Alvarenga, C. R. T. de, Menezes, M. M. S., Ferreira, D. M., Burlandy, L., & Soares, B. D. (2025). Adequate Food and Nutrition in School: Acceptability and Consumption by Students of a Brazilian Municipality. *Nutrients*, 17(3), 528. <https://doi.org/10.3390/nu17030528>

**Non permanent workers and those in the informal sector are the groups that spend the most additional money.**<sup>40</sup> This is concerning because these types of work generally come with more unstable incomes and higher vulnerability to financial pressure. The need to buy replacement meals can therefore become a significant economic burden for them. Many parents reported that their children often came home hungry or did not finish their meals because the MBG food tasted bad, the menu was monotonous, or the quality was not suitable for consumption. As a result, parents felt compelled to spend extra money to buy nutritious food for their children. This situation effectively shifts the financial burden from the state back onto households, and even creates new expenses that did not previously exist.

The majority of respondents believe that MBG does not help reduce their family's food expenditure, reaching 44.2 percent. Among respondents earning Rp10-20 million per month, 56.2 percent stated that MBG does not help reduce food costs, followed by 46.3 percent of those earning Rp5-10 million, and 45.9 percent of those earning Rp2-5 million. This indicates that MBG provides limited relief for food expenses among middle income households. Consequently, the MBG program not only fails to achieve its goal of reducing household economic burdens, but also creates hidden costs that further deepen social vulnerability (see Figure 15).




<sup>40</sup> In the chart, groups such as freelance or non permanent workers and laborers show very high proportions in the "yes" categories, while the "never" category remains relatively small.

Besides using descriptive analysis, we also apply an econometric approach to examine how food quality and MBG participation status influence household expenditure burdens. Testing the causal effects of these two aspects is important because the economic impact of a social program is not only reflected in the amount of assistance provided, but also in its ability to maintain stability or alter household spending patterns.

This study employs logit regression, with results reported in the form of Average Marginal Effects (dy/dx). This approach allows us to estimate how much the probability of an outcome changes when an independent variable increases by one unit, while holding all other variables constant.

The results from Model 1 show that both food quality and MBG recipient status significantly influence the probability that households perceive a reduction in their food expenditure burden due to MBG (see Table 5). Lower food quality in the MBG meals increases the likelihood that parents will need to purchase additional food (AME = -0.2466, p = 0.004), while households with children receiving MBG are also more likely to incur extra costs (AME = -0.2482, p = 0.000). In Model 2, a similar pattern emerges for the program’s net effectiveness. Better food quality increases the probability that households view the program as having the intended net benefit (AME = -0.2466, p = 0.004). Overall, these findings underscore that the economic benefits of MBG remain far from optimal. The program has not delivered the promised reduction in household spending, particularly when food quality does not meet expectations and MBG recipients still require additional expenditures. To achieve higher effectiveness, improving food quality and ensuring menu relevance for children must be prioritized as key areas for reform.



**This study shows that the poorer the quality of MBG meals in terms of taste, nutrition, and hygiene, the greater the likelihood that families will need to spend additional money.**

Table 5. MBG and perceptions of alleviating household burdens<sup>41</sup>

Model 1: Additional expenses			Model 2: Net- Effectiveness <sup>42</sup>		
Variable	AME	Significance (p)	Variable	AME	Significance (p)
Food quality (1–4)	-0.2466***	0.004	Food quality (1–4)	0.2466***	0.004
Child received MBG (1=yes)	-0.2482***	0.000	Child received MBG (1=yes)	0.2482***	0.000

*Note: The analysis employs weighted logistic regression (p-weight) with province-clustered robust standard errors. Results are reported as Average Marginal Effects (dy/dx) to facilitate interpretation of changes in predicted probabilities associated with each factor. The analysis also includes control variables such as geographic location and socioeconomic characteristics.*

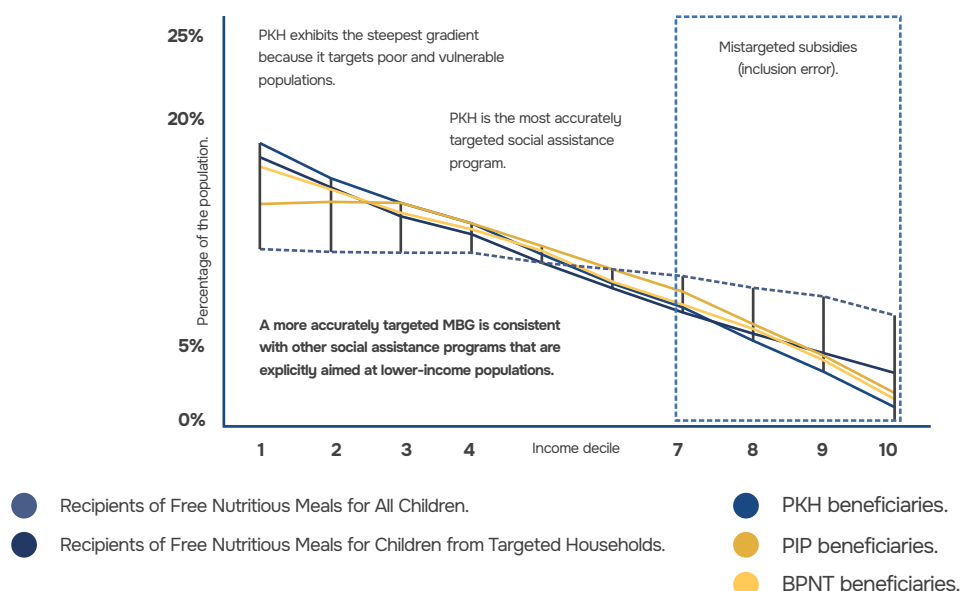
<sup>41</sup> The findings in this study are based on a working paper for a scientific article analyzed by the research team. For further discussion regarding this study, readers may contact the researchers.  
<sup>42</sup> Net effectiveness refers to the overall outcome of a program, that is, whether it truly benefits households after accounting for both the gains and the losses. It is similar to checking the final balance in a small shop’s ledger: even if the flour is subsidized, but the shop has to buy more gas, what matters is the final balance after everything is added and subtracted. In this context, “net” does not refer to hygiene or cleanliness of the food, but to the final effect after considering all positive and negative impacts.

## MBG is Prone to Targeting Errors

The MBG program needs to effectively reach households in the lower income deciles. However, in practice, implementing MBG as a universal scheme carries a high risk of mistargeted subsidies, also known as inclusion errors.

The findings indicate that a universal MBG design would simply channel large amounts of public funds without achieving meaningful outcomes in reducing malnutrition or poverty. This occurs because the benefits of MBG are disproportionately captured by households in the middle and upper-income deciles. Therefore, MBG should adopt a more selective and targeted approach by prioritizing beneficiaries who experience malnutrition and reside in disadvantaged, remote, and outermost regions (3T).

Figure 16. MBG program inclusion error



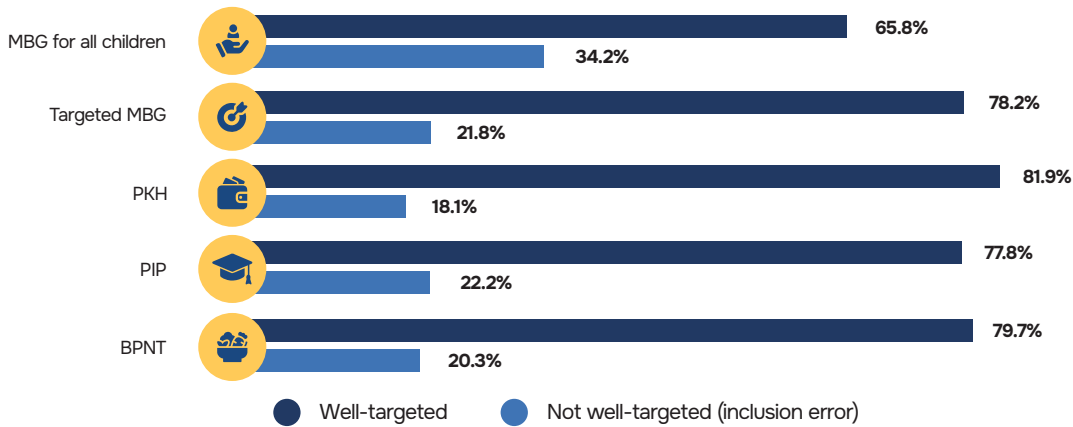
Source: BPS, 2023 National Economic Survey Micro Data. Processed by researchers.

Social assistance programs such as the Family Hope Program (PKH) and the Non-Cash Food Assistance (BPNT) are more accurately targeted (see Figure 17). A targeted MBG scheme is more effective in reaching lower-income households compared with a universal model. PKH has the sharpest distribution toward the lowest income deciles, while universal MBG (for all children) tends to be more evenly spread across income groups. However, when MBG is directed specifically to poor households, its distribution pattern becomes more similar to other social assistance programs, indicating higher targeting efficiency.

Ideally, the MBG program should be implemented in a more selective and well-targeted manner by prioritizing children who need it the most, particularly those experiencing malnutrition and stunting, living below the extreme poverty line, and residing in disadvantaged, frontier, and outermost regions (3T).

Figure 17.

Comparison of the targeting accuracy of MBG and other social assistance programs



Source: BPS, 2023 National Economic Survey Micro Data. Processed by researchers.

## 2.4

### MBG Has Not Significantly Involved Local MSMEs

**Although the MBG program involves some local actors, their share remains far from optimal and is still supplemented by suppliers from outside the area.**

This study finds that only around 27.6 percent of respondents believe that MBG suppliers are predominantly local MSMEs. This indicates that while the program does engage local MSMEs, their role is still limited and continues to be complemented by external providers. Approximately 30.05 percent of respondents stated that some MBG suppliers come from local MSMEs while others come from outside the region. Meanwhile, 28.9 percent reported not knowing whether local MSMEs were involved at all. This suggests a lack of transparency or public communication regarding which economic actors are participating in the MBG supply chain (see Figure 18).

Figure 18.

Public views on the involvement of local MSMEs in school meal provision

Does the MBG program in your area involve local MSMEs (such as home-based catering services, small food stalls, cooperatives, or local farmers)?



Source: CELIOS Survey. N = 1,721. Respondents were asked, "Does the MBG program in your area involve local MSMEs (such as home-based catering services, small food stalls, cooperatives, or local farmers)?" Response options included "Yes, predominantly-most providers are local MSMEs," "Yes, partially-some providers are local MSMEs while others are from outside the area," "No-all providers are large companies from outside the area," and "Don't know."

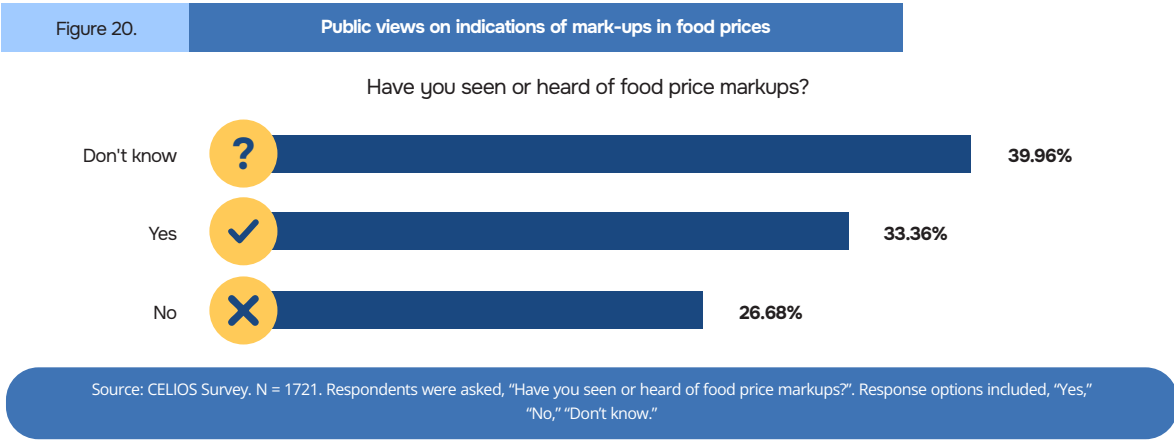
This study highlights the link between education levels and knowledge about school catering providers. A total of 48.2 percent of respondents stated that they did not know who provides catering and food supplies at their children’s schools (see Figure 19). Another 35.58 percent reported knowing only partially, while just 16.17 percent knew for sure. As a result, the capacity for social oversight is extremely weak because most families lack even the most basic information about who supplies food to the schools. This situation creates a significant accountability gap, making it difficult to challenge price irregularities or poor nutritional quality.

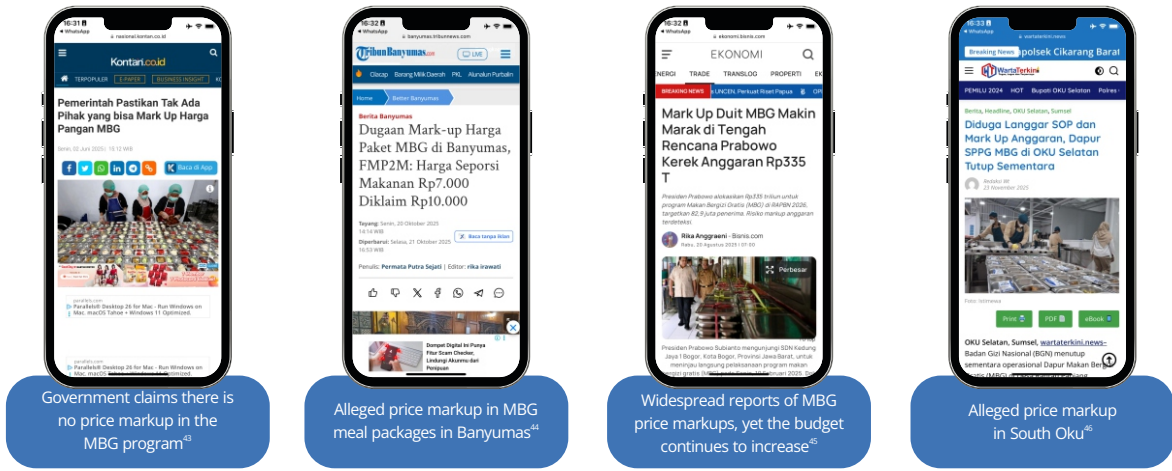


These findings indicate weak transparency and limited public communication regarding MBG’s engagement of local economic actors. The low level of community awareness reflects a potential information asymmetry that can hinder the program’s effectiveness in fostering local participation and community involvement.

**Indication of Food Ingredient Markups**

The vulnerability of MBG’s implementation becomes even more concerning as opportunities for price markups on food supplies begin to surface. This study finds that 33.4 percent of respondents reported having seen or heard indications of such markups. However, a larger share, around 40 percent, demonstrated low awareness of potential price manipulation in food procurement. This limited level of public knowledge reflects weak community participation in oversight, which undermines efforts to ensure provider compliance and strengthen program governance (see Figure 20).





Government claims there is no price markup in the MBG program<sup>43</sup>

Alleged price markup in MBG meal packages in Banyumas<sup>44</sup>

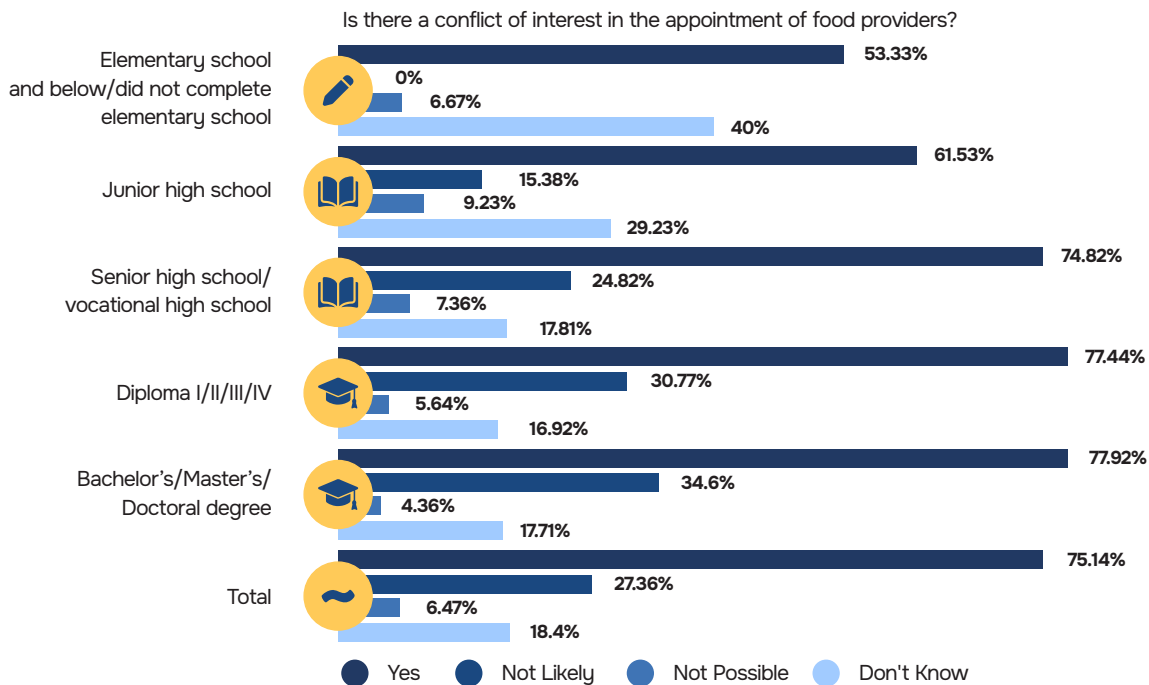
Widespread reports of MBG price markups, yet the budget continues to increase<sup>45</sup>

Alleged price markup in South Oku<sup>46</sup>

### Conflict of Interest in Vendor Selection

The risk of conflicts of interest in the MBG program has become increasingly critical as direct appointments are frequently used to select food vendors. A total of 79.2 percent of respondents stated that conflicts of interest are present in the appointment process. Meanwhile, only 6.5 percent stated there is no such conflict of interest. A similar pattern appears across different education levels. Respondents with primary school education or below reported a perceived likelihood of conflicts of interest at 53.3 percent, while those with senior high school or vocational education reported 50 percent. These findings show that public perception of potential conflicts of interest is strong across all education groups, indicating an urgent need for greater transparency and accountability in vendor selection mechanisms within the MBG program (see Figure 21).

Figure 21. Public views on conflicts of interest in appointing food providers



Source: CELIOS Survey. N = 1721. Respondents were asked, "Is there a conflict of interest in the appointment of food providers?". Response options included, "Yes," "Not likely," and "Don't know."

43 Kontan. (2025). Pemerintah pastikan tak ada pihak yang bisa mark-up harga pangan MBG. Kontan. <https://nasional.kontan.co.id/news/pemerintah-pastikan-tak-ada-pihak-yang-bisa-mark-up-harga-pangan-mbg>

44 Tribunnews.com. (2025). Dugaan mark-up harga paket MBG di Banyumas: FMP2M, harga seporsi makanan Rp7.000 diklaim Rp10.000. Tribunnews Banyumas. <https://banyumas.tribunnews.com/better-banyumas/83687/dugaan-mark-up-harga-paket-mbg-di-banyumas-fmp2m-harga-seporsi-makanan-rp7000-diklaim-rp10000>

45 Bisnis.com. (2025). Mark-up duit MBG makin marak di tengah rencana Prabowo kerek anggaran Rp335 T. Bisnis.com. <https://ekonomi.bisnis.com/read/20250820/12/1903904/mark-up-duit-mbg-makin-marak-di-tengah-rencana-prabowo-kerek-anggaran-rp335-t>

46 Wartaterkini.news. (2025). Diduga langgar SOP dan mark-up anggaran dapur SPPG MBG di OKU Selatan tutup sementara. Wartaterkini.news. <https://wartaterkini.news/diduga-langgar-sop-dan-mark-up-anggaran-dapur-sppg-mbg-di-oku-selatan-tutup-sementara/>

2.5

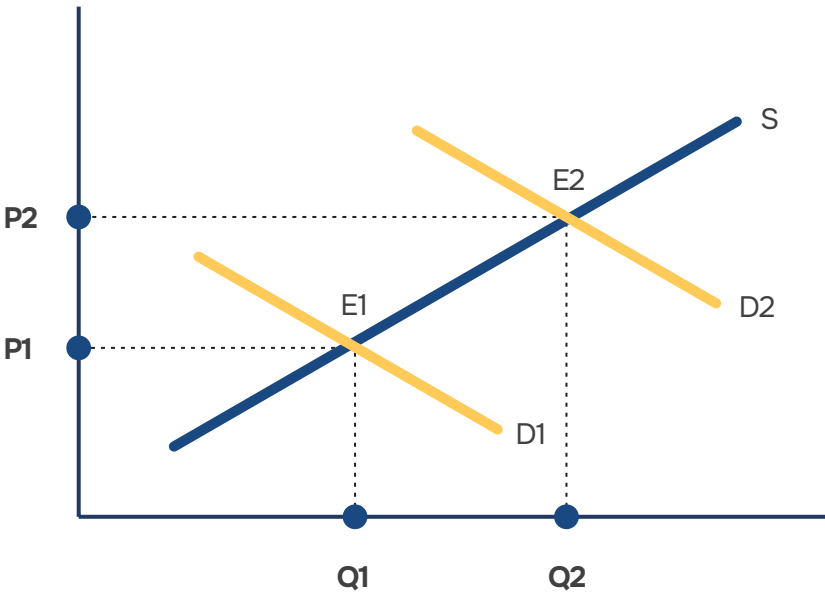
## The Domino Effects of MBG: Economic Losses and the Erosion of Local Food Systems

### MBG is Starting to Drive Up Food Prices, Hurting Consumers and Local Small Enterprises

Rising food prices in several regions following the implementation of the MBG program can be explained through a demand-pull inflation mechanism, where inflation occurs because demand for goods increases significantly while supply remains fixed, pushing prices upward. The MBG program created a sudden spike in demand for staple foods such as rice, chicken, eggs, and vegetables to supply large centralized kitchens across different areas. Meanwhile, local food production capacity could not immediately expand due to production and distribution constraints. This imbalance, demand rising while supply remains unchanged, places upward pressure on prices. Large procurement orders from MBG suppliers also absorb a substantial portion of market stock, causing higher food prices to be felt by ordinary consumers and local small enterprises.

Figure 22 illustrates this mechanism: the demand curve shifts to the right from D1 to D2 due to increased demand from MBG, while the supply curve remains at S. This shift moves the equilibrium point from E1 to E2, marked by an increase in price (from P1 to P2) and in the quantity demanded (from Q1 to Q2).

Figure 22. Shift in Demand Due to the Implementation of the MBG Program

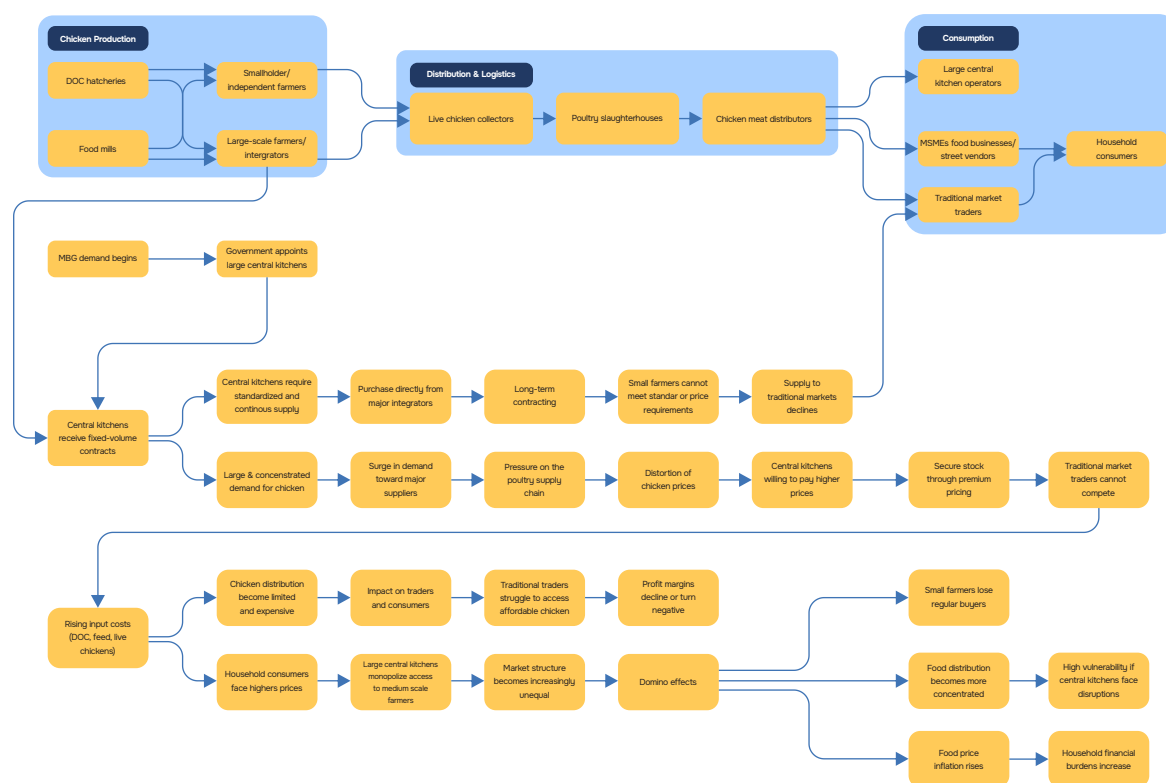


## Case Example:

The implementation of the MBG program has in fact created new economic distortions. The scheme to provide millions of meals per day is centralized through large-scale communal kitchens operated by foundations, with raw materials supplied by major agribusiness companies. This structure creates a closed supply chain: key ingredients, particularly chicken, are sourced directly from large poultry corporations through long-term contracts, while traditional markets and smallholder farmers are pushed aside. As a result, a program meant to empower local economies instead reinforces the dominance of large corporations in the food sector.

The concentration of chicken procurement by MBG communal kitchens has reduced supply in local markets. As stocks decline, chicken prices rise from around Rp35,000 to between Rp38,000 and Rp50,000 per kilogram, weakening household purchasing power. Small-scale enterprises and micro businesses that process poultry lose customers because much of the demand is absorbed by the MBG large-kitchen system. The spike in chicken prices illustrates the domino effect of a policy that fails to account for local supply chains (see Figure 23), where public nutrition goals end up clashing with food price stability and the livelihoods of small-scale economic actors.

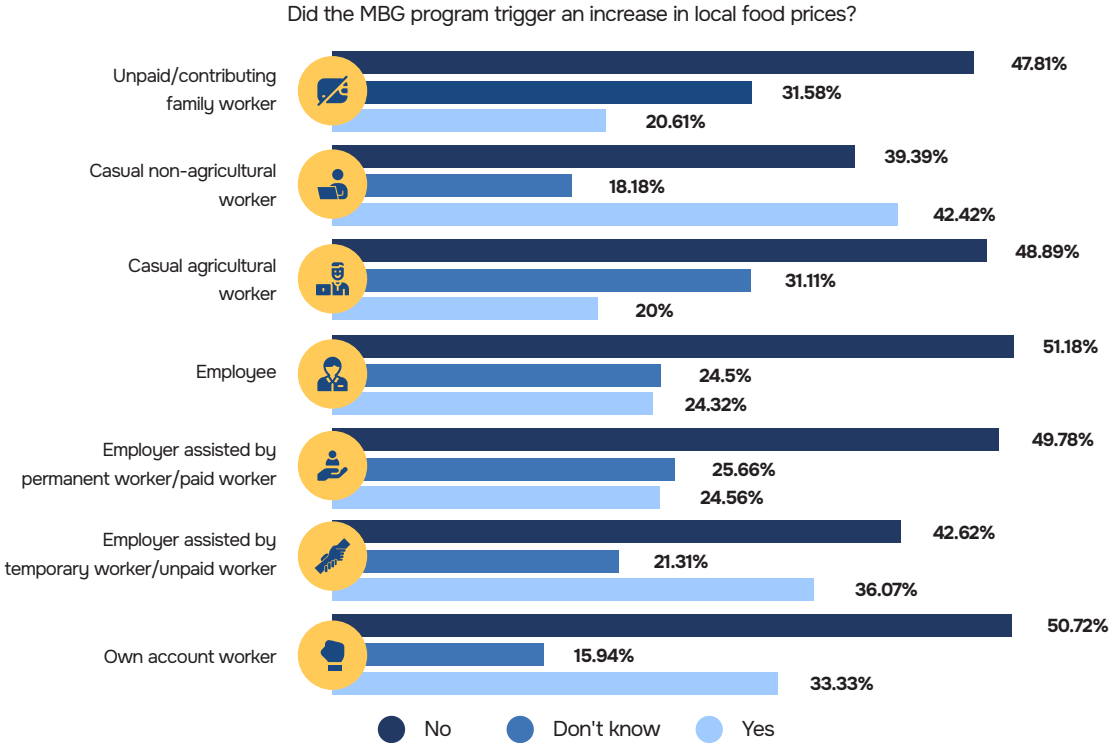
Figure 23. Supply Chain Distortions Caused by the MBG Food Provisioning Scheme



Source: CELIOS Press Release, October 2, 2025

The impact of the MBG program on rising food prices in local markets is felt most strongly by informal workers and unpaid family workers (see Figure 24). Approximately 36.07 percent of respondents who reported being self-employed with assistance from casual workers or unpaid family workers, and 20.61 percent of unpaid family workers, stated that food prices in local markets had increased due to the MBG program. Meanwhile, groups with more stable forms of employment, such as laborers, employees, and civil servants, as well as business owners assisted by permanent workers, were more likely to respond “no” at 51.18 percent and 48.78 percent respectively. This pattern suggests that food price pressures are more quickly felt by informal workers, who generally have weaker purchasing power and greater dependence on traditional markets. The unstable and unpredictable incomes of informal workers make this group more vulnerable to food price fluctuations triggered by the MBG program.

**Figure 24. Public views on the increase in food prices due to MBG by employment type**

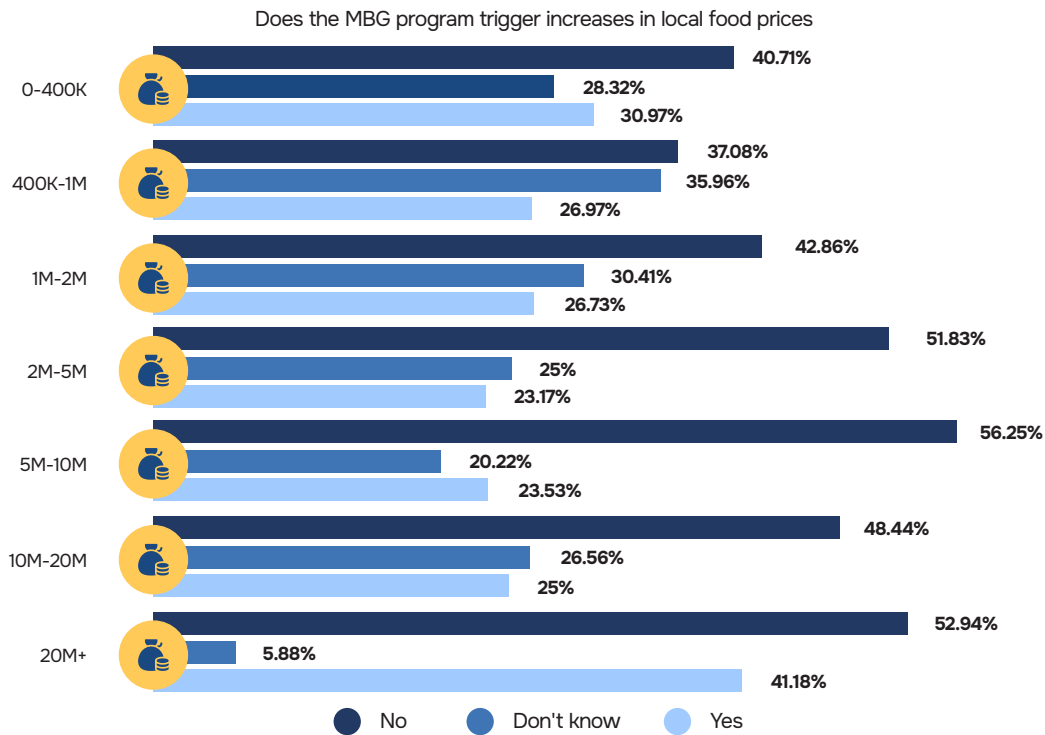


Source: CELIOS Survey. N = 1721. Respondents were asked, “Did the MBG program trigger an increase in local food prices?”. Response options included, “Yes,” “No,” and “Don’t Know.”

The proportions of respondents who stated that the MBG program triggered increases in local food prices tends to decline as income rises (see Figure 25). Among lower-income groups (those earning between 0-400 thousand and 1-2 million rupiah per month), around 27 to 31 percent reported that local food prices increased due to the MBG program. However, this proportion steadily decreases among middle- and higher-income groups, falling to only about 20 to 26 percent among those earning 2-20 million rupiah.

**These findings indicate that lower-income households feel the impact of rising food prices more acutely, as a large share of their spending is allocated to essential food needs.**

Figure 25. Public views on food price increases attributed to MBG by income level



Source: CELIOS Survey, N = 1,721. Respondents were asked, "Does the MBG program trigger increases in local food prices?" Response options included "Yes," "No," and "Don't know."

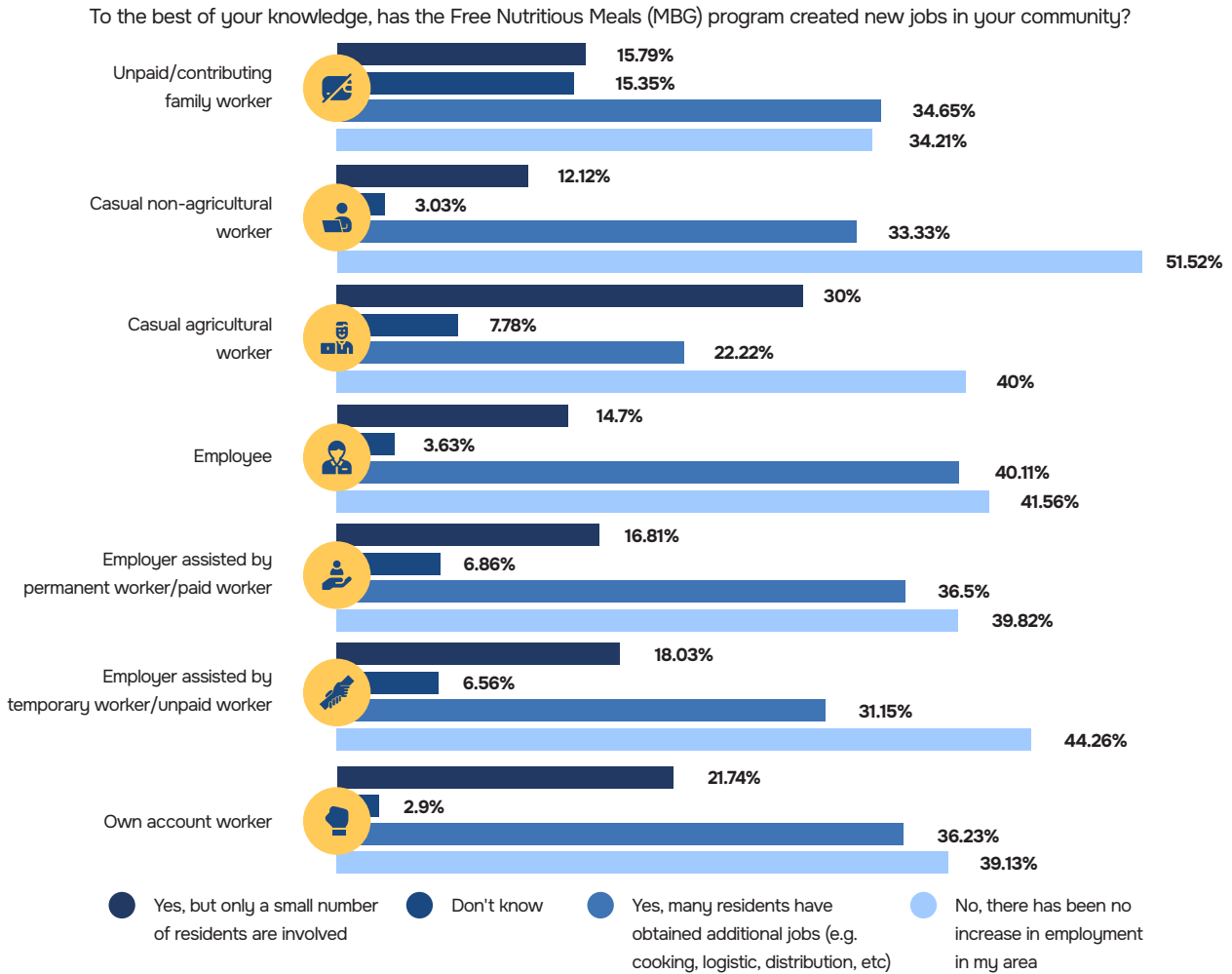
## The Illusion of Job Creation

Across various social groups in this study, the majority of respondents agreed that the MBG program created new job opportunities, yet only a small portion of community members were actually involved. This indicates that the employment generated by the program is narrow, temporary, and exclusive. In other words, although the MBG program is often promoted as a driver of job creation and local economic activity, the reality shows that the benefits are concentrated among only a limited few.

Workers in formal or semi-formal employment (laborers, employees, and civil servants) were the most likely to report economic gains, with 40.81 percent stating that many residents had obtained additional work and 41.46 percent saying that only a small number of residents were involved. However, agricultural casual workers and unpaid family workers showed the starkest disparities, with more than 30 percent in both groups reporting no increase in employment opportunities in their area.

This pattern reveals that the economic activity generated by MBG tends to cluster around groups with more formal employment. Meanwhile, informal workers and small independent producers assisted by unpaid family labor, groups that are typically the intended targets of local economic empowerment, are still not experiencing meaningful direct benefits from the MBG program (see Figure 26).

Figure 26. Public views on job creation resulting from MBG by employment type

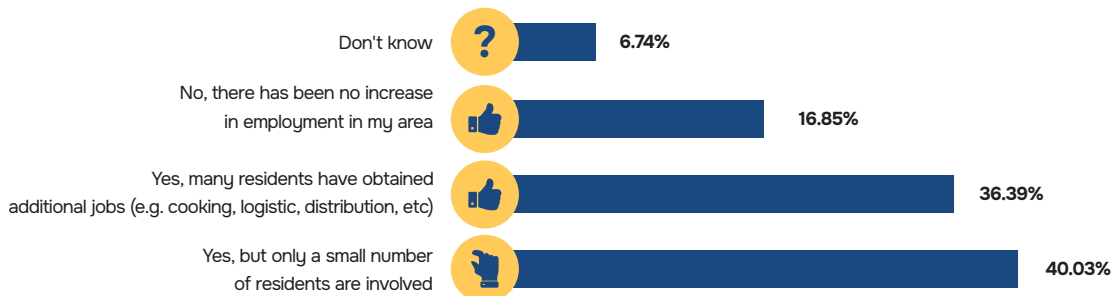


Source: CELIOS Survey, N = 1,721. Respondents were asked, "To the best of your knowledge, has the Free Nutritious Meals (MBG) program created new jobs in your community?" Response options included "Yes, many residents have obtained additional jobs (e.g., cooking, logistics, distribution, etc)," "Yes, but only a small number of residents are involved," "No, there has been no increase in employment in my area," and "Don't know."

The jobs created through the MBG program have not been felt evenly across communities. The study shows that around 40 percent of respondents stated that the employment generated by the program involved only a small portion of local residents (see Figure 27).

Figure 27. Public views on job creation resulting from the MBG program

To the best of your knowledge, has the Free Nutritious Meals (MBG) program created new jobs in your community?



Source: CELIOS Survey, N = 1,721. Respondents were asked, "To the best of your knowledge, has the Free Nutritious Meals (MBG) program created new jobs in your community?" Response options included "Yes, many residents have obtained additional jobs (e.g., cooking, logistics, distribution, etc)," "Yes, but only a small number of residents are involved," "No, there has been no increase in employment in my area," and "Don't know."

## Food and Beverage MSMEs Threatened by the MBG Program's Business Model

Based on Statistics Indonesia (BPS) data from the 2023<sup>47</sup> Food and Beverage Services Statistics, there are a total of 3,014,597 MSMEs operating in the non-restaurant food and beverage sector across Indonesia, employing 6,496,025 workers (see Table 6). If the MBG program is implemented through a centralized system of 30,000 Nutrition Service Centers (SPPG), the potential economic displacement, from millions of local MSMEs to a nationally centralized food provisioning model, must be taken into serious consideration.

MSME Category	Number of Unit	Employment
Catering	166,878	485,394
Mobile/Non-permanent food & beverage providers	70,660	1,099,669
Other food & beverage providers (Stall, Restaurant, Canteens)	2,777,059	4,910,962
<b>Total</b>	<b>3,014,597</b>	<b>6,496,025</b>

**More than 6.4 million Indonesian workers depend on the local food provision sector**, the majority of whom are employed in food stalls, canteens, and home-based microenterprises supplying daily meals.

The thing is, nowadays there is a direct competition between school canteens and nearby neighborhood food stalls and the large centralized kitchens appointed by the government to provide the MBG program. School canteens and local food vendors, which previously served as the primary source of students' daily meals, have experienced a sharp decline in sales. Unfortunately, the government has not provided any buffer mechanism or alternative support for affected small businesses, such as training for new business models, collaborative distribution schemes, or a fair compensation system. This has created inequality and a sense of unfairness at the local level.

This situation has emerged because the MBG scheme relies on large-scale kitchens backed by hundreds of millions to billions of rupiah in capital, rather than integrating micro-enterprise actors into the system.

## Debunking Prabowo's Claim of Revitalizing the People's Economy: A Simulation of MBG's Impact on Local MSMEs and Employment


In a speech at the National Congress of the Keadilan Sejahtera Party (PKS) on 29 September 2025, Prabowo Subianto claimed that the MBG program would stimulate the people's economy, projecting the creation of 1.5 million new jobs (30,000 SPPGs x 50 workers). Given the lack of transparency in SPPG operations, weak accountability, and emerging labor-related issues, this claim requires careful scrutiny. If MBG replaces the existing local school supply chain, school canteens, neighborhood vendors, and local food suppliers, the risk of income displacement for these MSMEs could be significant. To assess this, we use a proportional scenario based on the number of MBG-targeted schools (30,000 locations) relative to the total 3,014,597 MSMEs nationwide, and then estimate the potential job losses.

Loss Scenarios	Percentage of MSMEs around schools	Estimated employment
Moderate	10%	648,000
Distortive	30%	1,944,000

<sup>47</sup> Statistics Indonesia. (2024). Statistik Penyediaan Makanan dan Minuman 2023. <https://www.bps.go.id/id/publication/2024/12/23/f2c7743c4712aaeaa4abf694/statistik-penyediaan-makanan-dan-minuman-2023.html>

<sup>48</sup> The basic assumption behind this calculation starts from an estimate that around 10 percent of food and beverage MSMEs operating around schools, equivalent to 301,459 businesses, are likely to be affected by the implementation of the MBG program. Using the average labor-to-MSME ratio of 2.15 workers per unit (derived from dividing the total 6.2 million MSME workers by roughly 3 million MSMEs), the number of workers potentially affected directly, either through income loss or job displacement, is estimated at around 648,000 people.

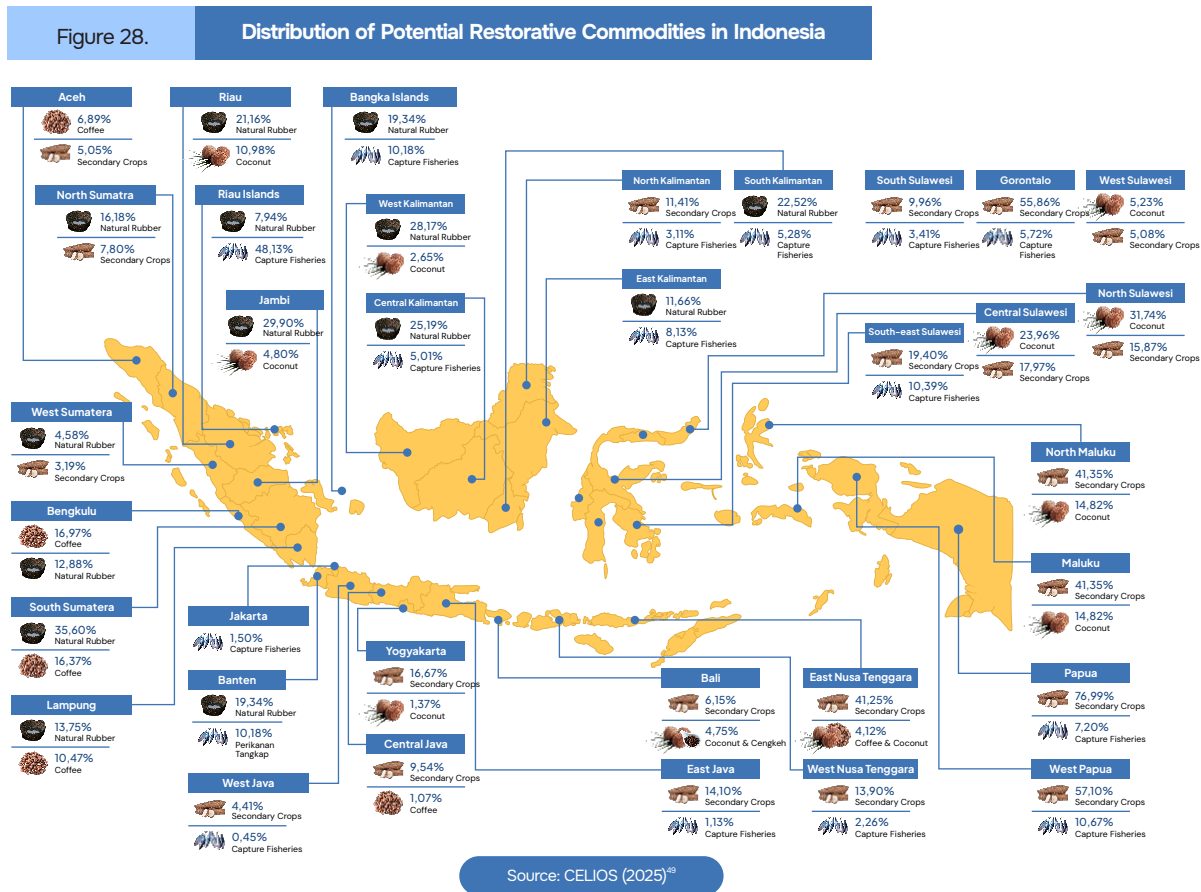
The claim of creating 1.5 million new jobs has never accounted for the risk of job shifting, because the jobs generated through MBG essentially substitute for those previously provided by local food and beverage MSMEs.



**AS A CONSEQUENCE OF MBG, THE RISK OF JOB LOSS IN THE FOOD AND BEVERAGE MSME SECTOR COULD BLOW UP TO 1.94 MILLION WORKERS**

### MBG: A Political Decision that Marginalizes Local Food Systems

MBG should not be viewed merely as a standard food provision policy. It reflects a broader form of food politics that sidelines local food systems. Indonesia’s diverse local foods should be an integral part of its social and cultural identity as well as a foundation for a resilient and sustainable restorative economy. However, the government has chosen to continue the New Order’s legacy under Soeharto, which narrowed the concept of food self-sufficiency into rice self-sufficiency. A massive food homogenization agenda known as the Green Revolution became the flagship approach at the time, boosting rice production through the use of selected high-yield varieties and pesticides. In reality, according to findings from CELIOS (2025), Indonesia has significant potential in restorative economic commodities, particularly those categorized as local foods such as secondary crops, various types of fish, coconut, coffee, and many others (see Figure 28).

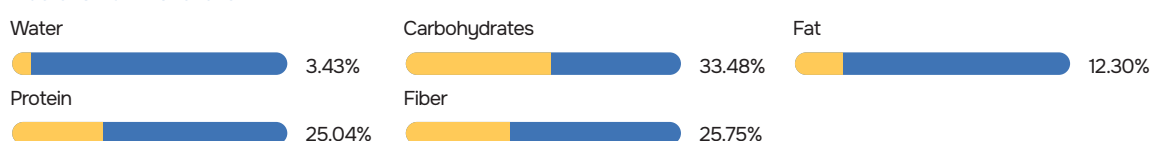


49 CELIOS. (2025). Cultivating a Restorative Rural Economy: A Solution Against the Empty Promises of Self Sufficiency. Jakarta. [https://celios.co.id/wp-content/uploads/2025/03/CELIOS\\_Membangun-Ekonomi-Restoratif-di-Desa-Solusi-Melawan-Janji-Semu-Swasembada.pdf](https://celios.co.id/wp-content/uploads/2025/03/CELIOS_Membangun-Ekonomi-Restoratif-di-Desa-Solusi-Melawan-Janji-Semu-Swasembada.pdf)

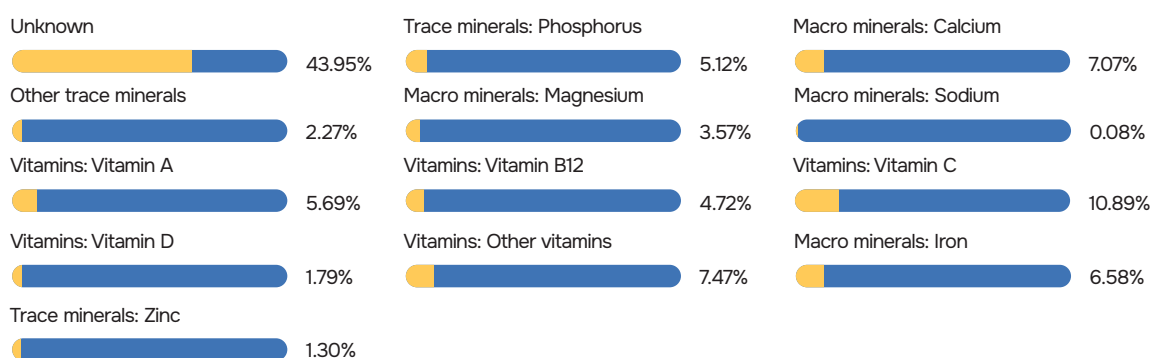
The implementation of MBG, which tends to rely on uniform food compositions such as rice, wheat, and UPFs, repeats the same policy approach used during the New Order era. This poses a significant risk to Indonesia's food resilience. Such an approach undermines food diversification efforts that have long been supported and sustained by local food systems, both within Indigenous communities and among local populations more broadly. In fact, diversified local food sources are more sustainable and align closely with restorative economic principles that offers stronger resilience.

Data from Nusantara Food Biodiversity<sup>50</sup> shows that Indonesia has 822 varieties of local foods, ranging from staple crops, animal-based and plant-based dishes, drinks, spices and seasonings, to medicinal ingredients. Notably, these local foods are capable of meeting nutritional needs both at the macro and micro levels.

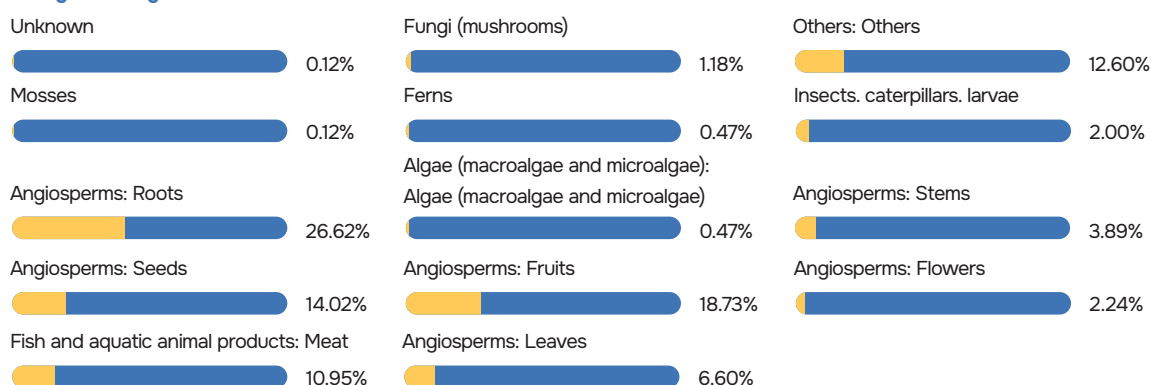
#### Macronutrient Functions



#### Micronutrient Functions



#### Biological Categories



A total of 698 local food items are still recorded as being consumed by communities. Of these, 77.39 percent are classified as indigenous in ecological status, while 22.61 percent are categorized as introduced. However, it is important to note that 94 local food items fall into the category of limited availability, and 8 are already unknown or no longer exist. Even though 747 local food items remain, if policy approaches continue to rely on standardization and fail to protect food diversity, as seen in programs like MBG and food estate initiatives, the availability of local foods in Indonesia will be at serious risk of disappearing.

<sup>50</sup> Nusantara Food Biodiversity (2025), Statistik sistem pangan lokal di Indonesia. <https://nusantarafoodbiodiversity.org/data/statistics>

## Public Interest Priorities Sacrificed by the Forced Allocation of the MBG Budget

### What Could the 2026 MBG Budget of Rp335 Trillion Be Used For?

- 1 Family Hope Program (PKH)**  
A budget allocation of Rp39.17 trillion (Rp39,166,730,830,000) could support 13,143,198 beneficiary households (KPM), assuming assistance of Rp2.98 million per household.
- 2 Smart Indonesia Program (PIP)**  
A budget of Rp17.68 trillion (Rp17,681,128,730,000) would allow PIP to reach out 24,368,269 student scholarships recipients, based on an assumed benefit of Rp725,580 per student.
- 3 Sembako Program**  
An additional Rp59.23 trillion (Rp59,233,715,740,000) could reach 24,680,715 households, assuming assistance of Rp2.4 million per household.
- 4 University Scholarship**  
A new budget allocation of Rp18.69 trillion (Rp18,687,057,280,000) could expand coverage to 1,340,535 university students, assuming a benefit of Rp13.94 million per student.
- 5 Wage Subsidy Assistance (BSU)**  
A budget of Rp6.42 trillion (Rp6,422,466,890,000) could increase BSU coverage to 1,784,019 workers, assuming a subsidy of Rp300,000 per month for one year.
- 6 Direct Cash Assistance (BLT)**  
A new allocation of Rp13.95 trillion (Rp13,954,034,490,000) could reach 3,886,918 households, based on an assumed benefit of Rp3.59 million per year per household.
- 7 Assistive Device Subsidy for Persons with Disabilities (wheelchairs, eyeglasses, prosthetics, etc.)**  
An additional Rp574.94 billion (Rp574,939,750,000) could support 5.83 million beneficiaries, assuming a fixed subsidy of Rp98,500 per person.
- 8 Public Transportation Subsidy**  
An additional Rp573.78 billion (Rp573,779,070,000) could subsidise public transport for 57.38 million people, based on a fixed subsidy of Rp10,000 per person.
- 9 Fertilizer Subsidy**  
A budget of Rp70.85 trillion (Rp70,750,307,980,000) could be converted into subsidies totaling 12.51 million tons of fertilizer, supporting an additional 21.79 million hectares of farmland and benefiting 12.87 million farmers.

- 10 National Health Insurance (BPJS Kesehatan, PBI JKN)**  
 An additional RP60.88 trillion (Rp60,884,470,280,000) could fully cover BPJS health insurance premiums for 126.84 million people, substantially improving access to healthcare.
- 11 Third Party Liability (TPL) Subsidy**  
 A budget allocation of Rp5.49 trillion (Rp5,486,444,507,668) could subsidize motor vehicle insurance for 157.4 million vehicles across Indonesia, assuming a premium subsidy of Rp34,856 per vehicle per year
- 12 Planning, Development, and Supervision of Renewable Energy and Energy Conservation Infrastructure**  
 An expanded budget of Rp246.49 billion (Rp242,607,367,000) could support 32 integrated solar power units, 5 micro-hydro units, 1 mini-hydro unit, and the revitalization of 5 community-based renewable energy plants.
- 13 Water and Sanitation Facility Acceleration Program**  
 An additional Rp5.42 trillion (Rp5,416,538,340,000) could finance approximately 430,601 household connections (SR). With an average cost of Rp12.6 million per connection, this expansion could serve between 3,444 and 5,741 villages in 3T regions.
- 14 Housing Subsidy for Low-Income Households (MBR)**  
 A budget of Rp35.46 trillion would enable the expansion of the Housing Finance Liquidity Facility (FLPP) to 415,520 housing units, assuming a fixed subsidy of Rp85.34 million per unit.

Program	Budget (Rp Trillion)	Program	Budget (Rp Trillion)	Program	Budget (Rp Trillion)
Family Hope Program (PKH)	39.17	Smart Indonesia Program (PIP)	17.68	Sembako Program	59.23
University Scholarship	18.69	Wage Subsidy Assistance (BSU)	6.42	Direct Cash Assistance (BLT)	13.95
Assistive Device Subsidy for Persons with Disabilities	0.57	Public Transportation Subsidy	0.57	Fertilizer Subsidy	70.75
National Health Insurance (BPJS Kesehatan, PBI JKN)	60.88	Third Party Liability (TPL) Subsidy	5.49	Renewable Energy and Energy Conservation Infrastructure	0.24
Water and Sanitation Facility Acceleration Program	5.42	Housing Subsidy for Low-Income Households (MBR)	35.46		

Total Budget (Rp Trillion)

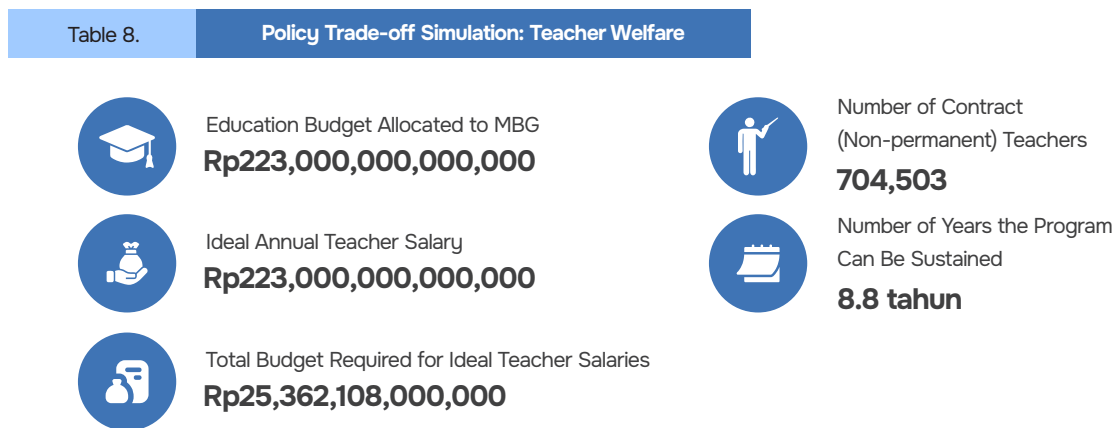
335

## Predatory Budgeting Education Budget by MBG

The MBG program has become one of the national priority agendas that requires a very large fiscal allocation. Based on the 2026 State Budget Financial Note that was recently approved, the total MBG program budget of Rp335 trillion is financed largely through the reallocation of funds from the education sector, reaching Rp223 trillion, or about 29 percent of the total education budget of Rp769 trillion.

In detail, Rp223 trillion (83.4 percent) of the MBG budget is drawn from the education function. These funds were previously allocated for improving the quality of learning, procuring school facilities, and supporting operational education programs. Meanwhile, Rp24.7 trillion (9.2 percent) comes from the health sector, which risks reducing fiscal space for community nutrition programs, stunting prevention, and basic health services. Another Rp19.7 trillion (7.4 percent) is taken from the economic function, including budgets for MSME empowerment and food security.

The scale of this predatory budgeting across three fundamental sectors, especially education, raises an important question. Is it justifiable to sacrifice such a large portion of the education budget for an MBG program whose impact remains unclear and whose governance risks are significant? This reallocation also undermines the quality of education policy due to trade-offs with improvements in teacher incentives, the quality of education assistance, and basic school infrastructure. This situation unfolds while Indonesia continues to face a high number of honorary or temporary teachers, reaching 794,593 individuals.<sup>51</sup>



By diverting 29 percent of the 2026 education budget to finance MBG, a significant policy trade off has been created, particularly regarding efforts to improve the welfare of honorary teachers. With an allocation of that size, the government could provide every honorary teacher in Indonesia with a monthly salary of Rp3 million (equivalent to Rp36 million per year). In fact, this policy could be sustained for up to 8.8 years, which exceeds a full presidential term (see Table 8).

<sup>51</sup> Narus, Ernest. (2024, October 5). Jumlah Guru Honorer di Indonesia Begini Caranya untuk Menjadi Guru Tetap. Media Indonesia. <https://mediaindonesia.com/humaniora/706359/jumlah-guru-honorer-di-indonesia-begini-caranya-untuk-menjadi-guru-tetap>

## MBG Budget Cuts Education Funding for the Kartu Indonesia Pintar (KIP) College Program (The Case of Gadjah Mada University (UGM) and Muhammadiyah Yogyakarta University (UMY))

Concerns about budget efficiency impacts from Presidential Instruction (INPRES) No.1 of 2025 on scholarships and social assistance programs such as KIP resurfaced earlier this year, although the Minister of Finance<sup>52</sup> and Minister of Research, Technology, and Higher Education<sup>53</sup> at the time immediately denied them. The government rejected claims of a 9% percent budget reduction from the Rp14.69 trillion allocated for KIP.

However, in recent months the issue has emerged again after several university representatives and student groups reported a decrease in KIP quotas for 2025 or reductions in KIP benefit amounts during the academic year. According to the Brevis Notitia<sup>54</sup>, or statements obtained by ANSTRAT BEM KM, MWA-UM, FORMAD, dan KAMADIKASI Gadjah Mada University (UGM), the policy has resulted in no increase in the number of KIP beneficiaries at UGM. This diverges from the usual trend, as the UGM rectorate has consistently been able to negotiate additional quotas, reaching > 1,600 recipients each year.

A similar impact occurred at Muhammadiyah Yogyakarta University (UMY), where KIP funding was reduced by 45 percent. Previously, students received an average of Rp8.5 million per semester, but the amount has now dropped to around Rp4.5 million. Unlike UGM, the UMY rectorate responded immediately by issuing an “Official Statement from the Rector on the Reduction of KIP Scholarship Funding for 2025.” This situation poses serious risk to the continuity of studies for KIP beneficiaries who rely on the scholarship to access higher education. The case at UGM may undermine the hopes of incoming students who expect KIP to ease the cost of attending university. Meanwhile, the situation at UMY could hinder students’ ability to continue their studies mid-year if no alternative sources of funding are provided.

### Similar situations may also arise at other universities across Indonesia.

<sup>52</sup> Ministry of Finance. (2025). Menkeu Sri Mulyani: Beasiswa KIP, LPDP, hingga UKT Perguruan Tinggi Tidak Terdampak Efisiensi Anggaran. <https://www.kemenkeu.go.id/informasi-publik/publikasi/berita-utama/Beasiswa-KIP-LPDP-UKT-Perguruan-Tinggi>

<sup>53</sup> Wulandari, Trisna. (2025, February 13). KIP Kuliah Kena Efisiensi Anggaran, Mendikti dan Komisi X DPR Bilang Begini. Detik.com. <https://www.detik.com/edu/ Perguruan-Tinggi/d-7776379/kip-kuliah-kena-efisiensi-anggaran-mendikti-dan-komisi-x-dpr-bilang-begini>

<sup>54</sup> ANSTRAT BEM KM UGM, MWA-UM, FORMAD, dan KAMADIKASI UGM. (2025). Brevis Notitia.

# 3

## The MBG Implementation Controversy

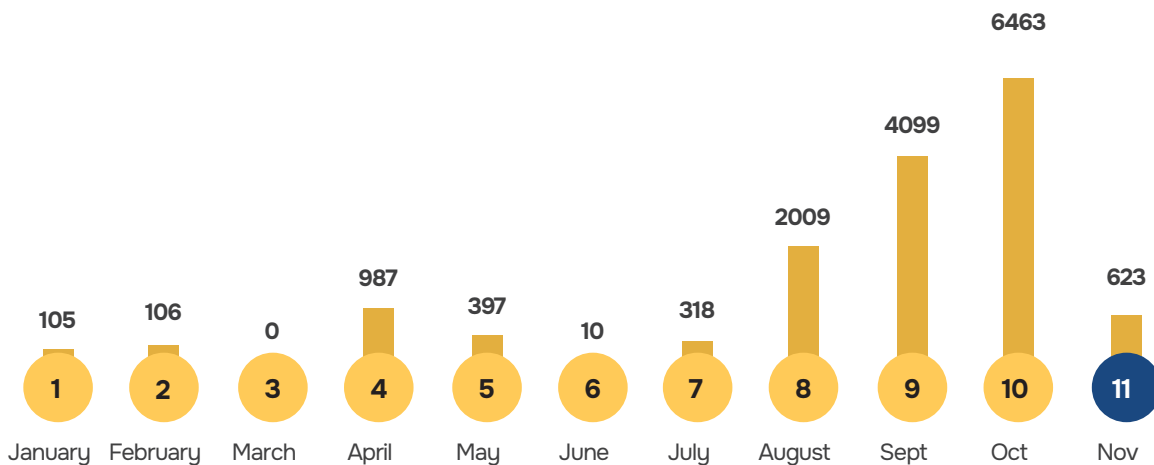
### 3.1

### Toxic From The Start, Burdened With Losses

The study reveals a series of mass food poisoning incidents and recurring problems related to food quality. Since the first implementation through 15 November 2025, the program has caused mass poisoning cases affecting 15,117<sup>55</sup> beneficiaries across various regions in Indonesia (see Figure 29). Monthly data show an increasingly alarming pattern: MBG-related poisoning surged from small incidents early in the year to thousands of cases in August and September, reaching its peak in October with 6,463 victims. This sharp escalation indicates a system failure in MBG's food safety oversight rather than isolated incidents, as the pattern of occurrences continued without meaningful improvement. The string of cases demonstrates that BGN and the government have not taken adequate measures to ensure that proper food safety standards are enforced in the implementation of MBG.

**These poisoning cases are not isolated incidents, but rather the result of a systemic pattern of failure**

Figure 29. MBG Poisoning Cases, January–November 2025



Source: Media Data Compilation, January–November 2025 (Processed by CELIOS)

<sup>55</sup> CELIOS' compilation of mass-media reports on the number of food-poisoning victims linked to the MBG program from January to November 2025.



**CELIOS had warned from the start that MBG was vulnerable to becoming a political project, prone to corruption, inefficiency, and questionable food quality. Today, all those concerns have materialized.**

## **Estimating the Total Costs Borne by the Public Due to MBG Related Food Poisoning<sup>56</sup>**

This study uses a Cost of Illness (COI) analysis to estimate the economic losses resulting from foodborne illness caused by the MBG program. COI is a method used to measure the economic burden of a disease by calculating the total costs, both direct and indirect, that arise from its negative impacts.<sup>57</sup> The economic loss attributed to the disease is assumed to be equivalent to the potential economic benefits that would be gained if the illness were prevented. The COI approach aggregates direct medical costs and short term productivity losses. Productivity losses are assessed using a simplified Human Capital Approach (HCA)<sup>58</sup>, with the Friction Cost Approach serving as an alternative. Medical costs refer to Acute Gastroenteritis (GEA) treatment costs reimbursed through the Indonesia Case Based Groups (INA CBG)<sup>59</sup> system under BPJS Kesehatan.

Table 9 shows that the economic burden from MBG related food poisoning cases is far greater than the medical costs alone. Even under the most conservative scenario (no inpatient care), total losses reach nearly Rp4 billion, driven primarily by lost productivity. In the baseline and upper scenarios, where the proportion of hospitalizations increases, total losses rise sharply to Rp8.4 billion and Rp14 billion, indicating that even a small increase in case severity magnifies the total cost exponentially. The fact that productivity losses exceed medical costs illustrates that the impact of MBG foodborne illness is not limited to the health system, but also undermines household income and the local economy. These figures demonstrate that each food poisoning incident is not a minor event, but a tangible economic burden that could be prevented through quality control, proper hygiene training for food handlers, and stricter food safety systems.

Preventing a single case of child food poisoning is equivalent to protecting health, safeguarding household income, and saving public resources worth billions of rupiah. Investing in food safety within the MBG program is not an additional expense, but an economic and social safeguard for thousands of children and beneficiary families.

<sup>56</sup> This analysis refers to and adopts a working paper written by the author team entitled 'Estimated Economic Losses from Foodborne Illness Cases Associated with the Free Nutritious Meal (MBG) Program in Indonesia.' For further discussion regarding this analysis, please contact the authors.

<sup>57</sup> Tarricone, R. (2006). Cost-of-illness analysis: What room in health economics? *Health Policy*, 77(1), 51–63. <https://doi.org/10.1016/j.healthpol.2005.07.016>

<sup>58</sup> Pike, J., & Grosse, S. D. (2018). Friction cost estimates of productivity costs in cost-of-illness studies in comparison with human capital estimates: A review. *Applied Health Economics and Health Policy*, 16(6), 765–778. <https://doi.org/10.1007/s40258-018-0416-4>

<sup>59</sup> RSUD Undata Palu. (2024, October). INA-CBG GEA. IJHESS.

Table 9.

First Assumption: Medical Costs and Productivity Losses<sup>60</sup>

## Scenario | Conservative

Number of case	% Hospitalized	Average Medical Cost per Case	Total Medical Cost	Productivity Loss per Case	Total Loss per Person	Total Productivity Loss
15117	0%	Rp150,000	Rp1,670,791,308	Rp110,524	Rp260,524	Rp2,267,550,000
<b>Total Loss (Medical Costs &amp; Productivity Loss)</b>						<b>Rp3,938,341,308</b>

## Scenario | Base

Number of case	% Hospitalized	Average Medical Cost per Case	Total Medical Cost	Productivity Loss per Case	Total Loss per Person	Total Productivity Loss
15117	12%	Rp448,392	Rp1,670,791,308	Rp110,524	Rp558,916	Rp6,778,341,864
<b>Total Loss (Medical Costs &amp; Productivity Loss)</b>						<b>Rp8,449,133,172</b>

## Scenario | Top

Number of case	% Hospitalized	Average Medical Cost per Case	Total Medical Cost	Productivity Loss per Case	Total Loss per Person	Total Productivity Loss
15571	16%	Rp768,736	Rp2,065,166,159	Rp132,629	Rp901,365	Rp11,969,988,256
<b>Total Loss (Medical Costs &amp; Productivity Loss)</b>						<b>Rp14,035,154,415</b>

Note: The calculations above are based on three scenarios: a conservative scenario (N = 12,104; all cases treated as outpatients at IDR 150,000; one day of caregiver time); a base scenario (N = 12,104; 12% hospitalized; INA-CBG GEA tariff of IDR 2,636,600; outpatient cost of IDR 150,000; one day of caregiver time); and an upper-bound scenario (N = 12,467; 16% hospitalized; severe INA-CBG GEA tariff of IDR 3,492,100; outpatient observation cost of IDR 250,000; one day of caregiver time valued at IDR 132,629). The figures above do not include the costs of food recalls or destruction, kitchen closures, inspections, laboratory testing, litigation, non-medical compensation, or longer-term impacts (such as school absenteeism, supplier reputational damage, or willingness to pay to avoid risk).

Table 10.

Second Assumption: Inpatient and Outpatient Costs plus Out-of-Pocket (OOP) Expenditures<sup>61</sup>

## Scenario | Low

Number of case	% Hospitalized	Per Case (RT)	Total Household Economic Losses <sup>62</sup>	Per Case (Social) <sup>63</sup>
15117	8%	Rp222,293.00	Rp3,360,403,281	Rp571,221.00
<b>Total (Social)</b>				<b>Rp8,635,147,857</b>

## Scenario | Baseline

Number of case	% Hospitalized	Per Case (RT)	Total Household Economic Losses	Per Case (Social)
15117	12%	Rp239,435.00	Rp3,619,538,895	Rp687,827.00
<b>Total (Social)</b>				<b>Rp10,397,880,759</b>

## Scenario | High

Number of case	% Hospitalized	Per Case (RT)	Total Household Economic Losses	Per Case (Social)
15117	20%	Rp273,717.00	Rp4,137,779,889	Rp921,037.00
<b>Total (Social)</b>				<b>Rp13,923,316,329</b>

<sup>60</sup> This analysis refers to and adopts a working paper written by the author team entitled 'Estimated Economic Losses from Foodborne Illness Cases Associated with the Free Nutritious Meal (MBG) Program in Indonesia'. For further discussion regarding this analysis, please contact the authors.


<sup>61</sup> This analysis refers to and adopts a working paper written by the author team entitled 'Estimated Economic Losses from Foodborne Illness Cases Associated with the Free Nutritious Meal (MBG) Program in Indonesia'. For further discussion regarding this analysis, please contact the authors.

<sup>62</sup> This is from the 'victims' families' perspective: how large are the economic losses directly borne by households when their children are affected by an MBG food poisoning outbreak.

<sup>63</sup> The social cost perspective is defined as the total economic burden from the viewpoint of society as a whole, regardless of who bears the cost. In this study, the social perspective includes: (i) direct non-medical costs incurred by households (transportation, caregiver meals, and accommodation); (ii) indirect costs in the form of productivity losses of parents or caregivers accompanying the child; and (iii) direct medical costs represented by INA-CBG claim tariffs at referral health facilities.

Table 10 reinforces that each MBG related food poisoning incident generates a very substantial economic burden, even at the lowest hospitalization rate. Under the low scenario (8% hospitalized), the losses borne directly by households already reach Rp3.36 billion, while the total social burden which includes non medical costs, lost productivity, and medical expenses rises to Rp8.63 billion. When the hospitalization share increases to 12% and 20%, household losses climb to Rp3.62 billion and Rp4.13 billion, while total social losses rise more sharply to Rp10.40 billion and Rp13.92 billion.

The fact that social losses consistently exceed household level losses by a wide margin shows that MBG related mass food poisoning does not only burden affected families, but also generates broader economic pressure on communities and the health system. In other words, each food poisoning case is not only a health tragedy but also creates a shadow economic cost that is far greater than what appears on the surface, indicating that weaknesses in MBG oversight produce a systemic economic burden that cannot be ignored.



**Preventing a single food poisoning case is far less costly than bearing the full burden; investing in food safety not only protects children’s health but also saves billions of rupiah and helps maintain household economic stability.**

### Total Losses Based on BGN’s Reported Number of Victims

To provide a proportional analysis, the author also calculated the economic losses using data from BGN. According to BGN, as of 11 November 2025 there were 636 hospitalized victims of food poisoning caused by MBG and 11,004 outpatient cases.<sup>64</sup> BGN also reported that MBG accounted for 48% of all food poisoning cases in Indonesia in 2025. Although the number of poisoning victims curated by BGN is relatively small compared with other sources such as CELIOS, JPPI, and other institutions, the losses remain substantial, reaching Rp5.79 billion (see Table 11).

Table 11. Losses Based on BGN-Reported Poisoning Cases			
Number of Patient	Hospitalized	Outpatient	Total
636	Rp3,253,146		Rp2,069,000,856
11004		Rp338,010	Rp3,719,462,040
<b>Total</b>			<b>Rp5,788,462,896</b>

<sup>64</sup> CNN Indonesia. (2025, November 12). Bos Badan Gizi ungkap alasan keracunan MBG sering terjadi di Jabar. <https://www.cnnindonesia.com/ekonomi/20251112154604-92-1294782/bos-badan-gizi-ungkap-alasan-keracunan-mbg-sering-terjadi-di-jabar>

## Distribution of Current Food Poisoning Number of Cases and Projected Victims in the Next Six Months

Figure 30 illustrates the scale and severity of food poisoning incidents linked to the implementation of MBG across various provinces, with 103 recorded Number of Cases as of 15 November 2025 and more than 15,117 affected victims. West Java, Central Java, East Java, and the Special Region of Yogyakarta recorded the highest numbers of victims, signaling a failure of food safety within the MBG implementation. Even smaller provinces such as Bengkulu, East Nusa Tenggara, and Lampung reported hundreds of victims, showing that this problem is systemic rather than local or sporadic. These numbers are not merely statistics, they serve as a clear warning that the MBG program carries serious public consequences and requires a comprehensive structural evaluation before even greater harm occurs.

Figure 30. Map of the Distribution of MBG Food Poisoning Number of Cases in Indonesia



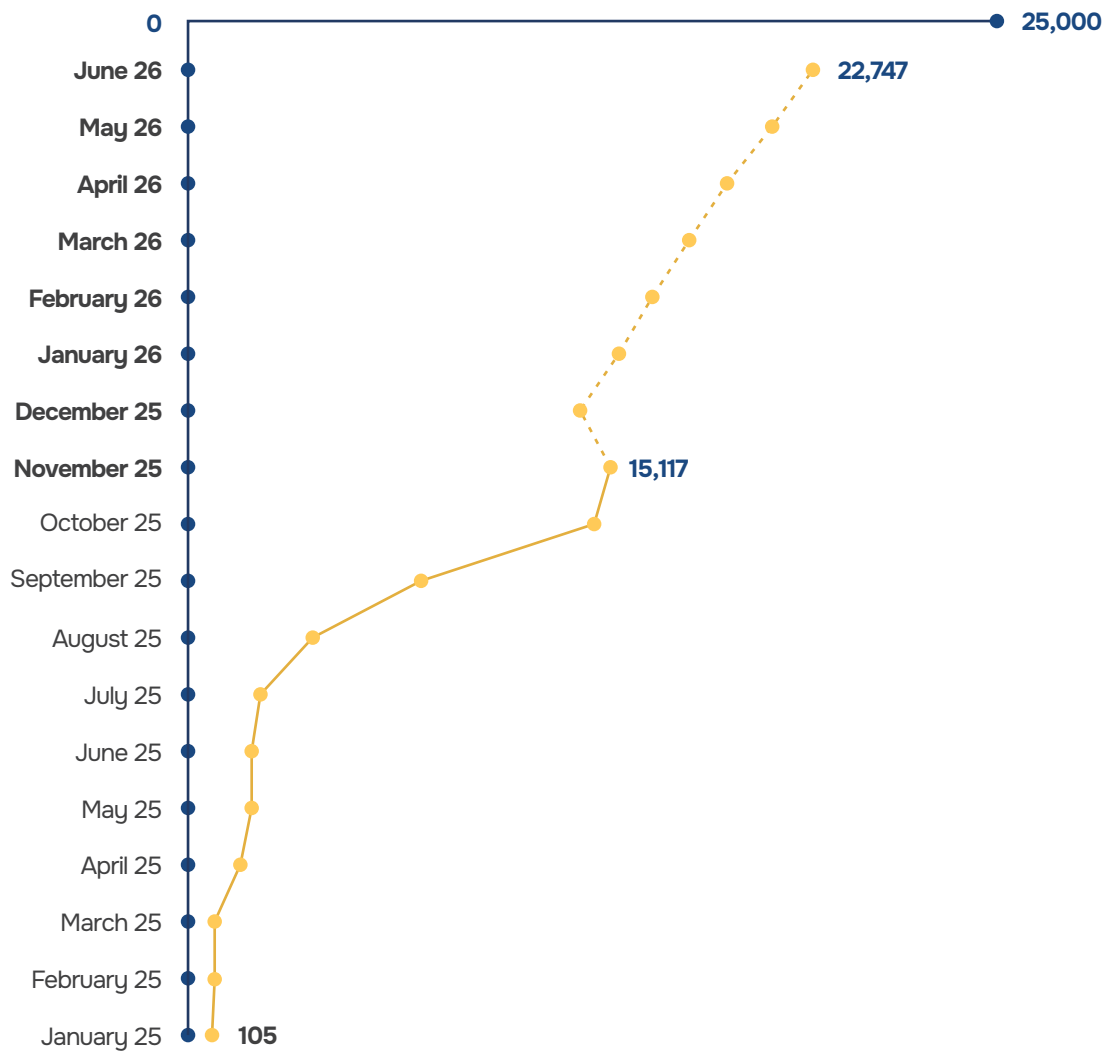
Source: Media Data Compilation, January - November 2025 (Processed by CELIOS)



The spread of cases from Aceh to West Papua indicates that the MBG supply chain and oversight system are not functioning as they should, creating a domino effect of health risks for children across Indonesia.

From November 2025 to June 2026, the number of food poisoning victims is projected to rise from 15,117 to 22,747 (see Figure 31). This represents an increase of 7,630 cases, or about 50.48 percent growth over a seven month period. The surge is highly significant and indicates a rapidly escalating problem that may stem from weaknesses in the management, oversight, or distribution systems within the MBG related poisoning cases. If this pattern reflects real conditions, urgent intervention is needed to prevent the sharp spike that is expected to exceed 22 thousand cases by mid 2026.

Figure 31. Projected Number of Food Poisoning Victims over the Next Six Months



Source: Processed by the Research Team

### The disbursement of MBG project funds violates procurement and reporting regulations

Based on the Technical Guidelines for Implementation of Government Assistance for the MBG Program, Fiscal Year 2025<sup>65</sup>, the MBG Program is administered through a government assistance mechanism rather than direct procurement of goods and services. Therefore, the government should treat SPPG/foundations solely as beneficiaries, not as service providers. In practice, however, the service provider function is effectively carried out by kitchen partners paid by the SPPG/foundation. This arrangement can be categorized as a form of procurement bypass. Such a practice circumvents the formal procurement procedures that require competitive bidding and service contracts.

The vulnerabilities of the government assistance mechanism have become evident in various cases on the ground. Under this mechanism, oversight, payment timelines, and budget accountability are far more lenient. This creates room for unilateral changes in contract value by service providers, with varying adjustments. Over time, the initial allocation of Rp15,000 per portion has been reduced to as low as Rp13,000.<sup>66</sup> Meanwhile, the government is shielded from claims of breach of contract related to operational losses incurred by kitchen partners, because there is no formal work contract with fixed payment schedules. Consequently, the elimination of tender processes and their replacement with direct appointments have further muddied the process of selecting SPPG/foundations and kitchen partners.

### Inefficient fund disbursement bureaucracy and vulnerability to delays

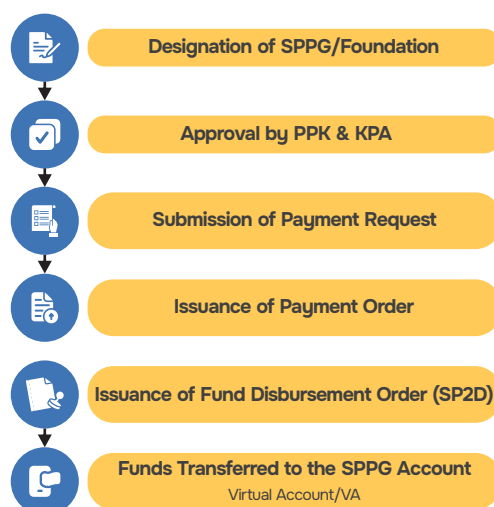
The fund disbursement mechanism for government assistance is complex and multi layered (see Figure 32). According to the Technical Guidelines for the Implementation of Government Assistance for the MBG Program for Fiscal Year 2025, partner kitchens must submit their operational fund proposals no later than two weeks or ten active school days before program implementation. The government assistance disbursed through the State Treasury Service Office (KPPN) must first be transferred to the account of the SPPG or foundation before it can be distributed to partner kitchens.

If there are administrative deficiencies at any stage of the verification process, partner kitchens are highly likely to experience payment delays. At the same time, the tracking system is neither transparent nor up to date in confirming the status of payment submissions. Field partners rely only on manual updates through private messages. Additionally, the reimbursement based payment mechanism, rather than upfront payment, creates further strain. When partner kitchens have limited capital for operational needs, both volunteers and kitchen staff become vulnerable to delayed honoraria.

<sup>65</sup> Badan Gizi Nasional Republik Indonesia. (2024). Keputusan Deputi Bidang Penyediaan dan Penyaluran Badan Gizi Nasional Republik Indonesia Nomor 2 Tahun 2024 tentang Petunjuk Teknis Penyelenggaraan Bantuan Pemerintah untuk Program Makan Bergizi Gratis Tahun Anggaran 2025. Jakarta: Badan Gizi Nasional Republik Indonesia

<sup>66</sup> Rachmadina, R., & Hidayat, F. (2025, April 18). Pemilik Dapur MBG duga Yayasan MBN sunat anggaran per porsi Rp 15.000 jadi Rp 13.000. Kompas.com. <https://megapolitan.kompas.com/read/2025/04/18/22595991/pemilik-dapur-mbg-duga-yayasan-mbn-sunat-anggaran-per-porsi-rp-15000-jadi>

Figure 32. MBG Program Fund Disbursement Flow



Source: Technical Guidelines for the Implementation of Government Assistance for the MBG Program, Fiscal Year 2025.

Based on the diagram, the disbursement process begins with the appointment of the SPPG or foundation, which requires approval from the Commitment Making Officer (PPK) and the Budget User Authority of BGN (KPA). The process then moves forward while awaiting the submission of the Payment Request Letter (SPP) and the Payment Order (SPM) through the SAKTI application. The next step still requires additional time until the Issuance Order for Fund Disbursement (SP2D) is released. At this stage, the disbursement period also varies, as the technical guidelines only state a maximum limit of two working days after the SP2D is issued.

The technical guidelines do mandate that SPPGs maintain a virtual account (VA), particularly in operational areas without network constraints. However, the risk of delayed payments will continue as long as the approval bureaucracy remains inefficient. Even though the VA mechanism is promoted as a solution to disbursement delays, it merely shifts the bottleneck to the initial verification stages without resolving the underlying bureaucratic barriers. Thus, the efficiency of payments depends not only on account digitalization but also on improving administrative procedures and coordination among budget-managing institutions. Ultimately, the duration of fund disbursement remains uncertain because the process does not specify the time required at each stage.

### Kitchen Partners Put at Risk

Delays in payments under the MBG program create serious pressure on the food supply chain (see Figure 33). Kitchen partners, who serve as the operational frontline, are highly vulnerable to financial strain because they must cover the costs of ingredients, labor, and logistics with their own funds while waiting for uncertain disbursements. Under these circumstances, many kitchens are forced to reduce portion sizes, substitute ingredients, or delay distribution schedules, which lowers nutritional standards and disrupts service continuity. The uncertainty surrounding payment timelines also erodes partner motivation and trust, creating potential conflicts between the implementing foundations (SPPGs) and kitchen partners, as well as between SPPGs and local governments.

Figure 33.

## Impact Pathway of the Financial Crisis on Kitchen Partners



The domino effect of delayed payments generates significant inefficiencies in distribution costs, particularly when kitchens must reschedule deliveries or purchase food ingredients at already elevated prices. In more severe cases, partners face direct financial losses, including late-payment penalties to local suppliers, lost business opportunities, and additional expenses required to keep operations running. For the government, these inefficiencies reduce the overall effectiveness of public spending. At the same time, weak financial management within the program results in funds intended to improve community nutrition remaining unutilized.

## Worker Exploitation: BGN Delays Salary Payments for SPPG Workers<sup>67</sup>

Beyond issues of food poisoning and militarization, MBG also faces serious labor problems. The first case was identified in Kediri, East Java. SPPG workers, or Sarjana Penggerak Pembangunan Indonesia (SPPI), were found to be working without written employment contracts and were required to work more than 20 hours per day. Several graduates of the SPPI Batch 3 training program were employed by SPPG as interns and had been working since early August. However, their October salary, which should have been paid in early November, had not been received, and no clear information was provided on when it would be paid. This situation was addressed only with a vague statement from BGN leadership referring to an “administrative budget shift”.

This situation highlights two critical issues. First, the MBG project was not planned thoroughly from the outset, resulting in significant problems, including budget distribution delays that undermine workers’ operations. Second, MBG has failed to deliver on its long-standing claim that the program would create meaningful employment opportunities for the public. Instead, it has resulted in the creation of precarious jobs and new problems in the form of labor exploitation.

## Weak Oversight Mechanisms in the MBG Program

Compared with Brazil, India, and Colombia, the oversight system for Indonesia’s Free Nutritious Meal Program (MBG) is still far behind, particularly in terms of independence, transparency, and public participation (see Table 12). Brazil has an independent local oversight council (CAE) that directly involves community members. Colombia goes even further by allowing citizens to actively monitor the program through public oversight mechanisms and open external audits. In contrast, oversight of the MBG program in Indonesia remains closed and internal, carried out solely by government institutions without public access and without external monitoring. As a result, Indonesia’s oversight system is reactive, taking action only after problems emerge, whereas other countries have embedded independent monitoring into the policy design from the very beginning.

<sup>67</sup> Processed from MBG Watch (2025), [bbc.com \(2025\)](https://www.bbc.com/indonesia/articles/cm27rj2k4zdo). Pengakuan petugas MBG 'Tak punya kontrak kerja, jam kerja tak menentu, dan telat terima gaji', <https://www.bbc.com/indonesia/articles/cm27rj2k4zdo>

Figure 32.

Comparison of Monitoring Systems for School Feeding Programs in Brazil, Colombia, and Indonesia

**Country | Brazil**

Independent Oversight Body	Member Composition	Oversight Functions & Mechanisms	Public Transparency
Conselho de Alimentação Escolar (CAE)	Parents Teachers Civil society Local government	Financial and nutrition audits Verification of menus and ingredient quality At least 30% of ingredients sourced from local farmers Routine field inspections	Very high; studies and vendor data are published annually

**Country | Colombia**

Independent Oversight Body	Member Composition	Oversight Functions & Mechanisms	Public Transparency
Veedurías Ciudadanas & Contraloría General	Local citizens NGOs Public auditors Local governments	External audits Community-based monitoring Online reporting and contract publication	High; community reports are processed openly

**Country | Indonesia**

Independent Oversight Body	Member Composition	Oversight Functions & Mechanisms	Public Transparency
No independent task force	Government officials (internal)	Administrative audits (ex post) Oversight limited to financial documents	Low; studies and vendor data are not publicly disclosed. Details of the foundations managing SPPGs are not made public

Source: Analysis by the research team

The government urgently needs to establish an Independent Task Force for the Evaluation of the MBG program before the situation deteriorates further. This task force must be formed now, while the problems are still manageable and before a wider wave of food poisoning or large-scale corruption takes hold. The task force should include representatives from law enforcement, academia, nutrition experts, public health physicians, anti-corruption NGOs, and parent associations. The involvement of these diverse groups is essential to ensure that oversight does not focus solely on finances and documentation, but also covers food safety, nutritional quality, and distribution effectiveness. With an independent structure and full authority, the task force would be able to act swiftly to conduct investigations, audits, and issue recommendations without political interference.

The second step, which is equally critical, is to impose a temporary moratorium on the entire MBG program implementation, while conducting a comprehensive and systemwide audit. This audit must examine the distribution chain, the procurement process for food ingredients, vendor selection, and implementation at the school level. Such action is urgent and must be taken now, before more children fall ill and before corruption becomes entrenched. By temporarily suspending the program and conducting a thorough audit of all mechanisms, the government can ensure that every rupiah of public funds is genuinely used to improve children's health, rather than enrich certain parties. Taking this decisive step would demonstrate that the state prioritizes public safety and integrity, not political interests or short-term projects.

## Nutritionists on the Brink: Unreasonable Workloads and Poor Management

### Actual Findings

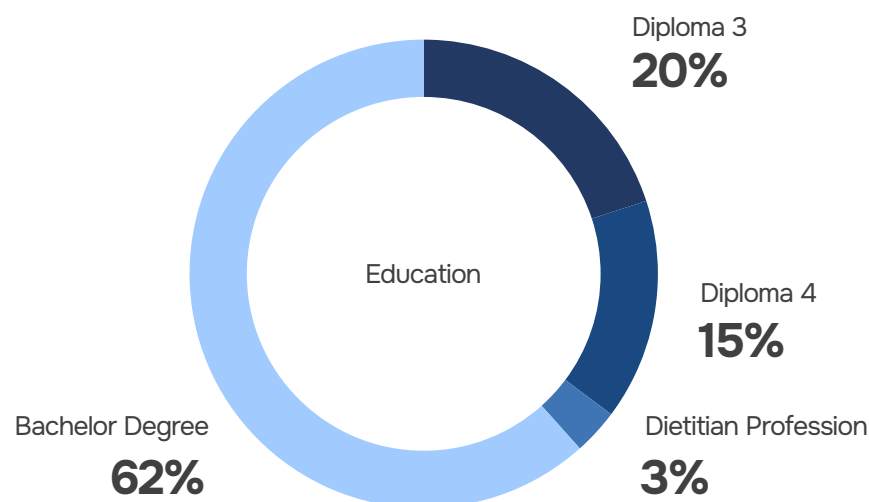
The latest findings from the account of a 27-year-old observer and nutritionist in Samarinda reveal a major gap between university training and the actual demands placed on nutritionists in the MBG program. During their studies, nutrition students typically receive internship experience in catering services with a workload of roughly 100 portions per person. This increases dramatically under the SPPG, which requires a single nutritionist to handle 3,000 to 4,000 portions per day while simultaneously supervising around 30 kitchen volunteers.

In the field, nutrition workers face intense pressure. When food poisoning occurs, public criticism is directed primarily at the nutritionist, even though they work continuously with very limited rest. Such exhaustion can lead to errors in food handling and elevate the risk of contamination. So far, the implementation of the MBG program has not treated nutritionists and other health professionals appropriately. Their roles are often seen as merely administrative or technical, with little regard for workload or occupational safety. Additionally, technical guidelines that permit nutritionist positions to be filled by graduates from non-nutrition backgrounds are considered to undermine competency standards and increase the burden on certified nutrition personnel.

Based on nutritionist data processed from the figure, among the 692 nutritionists in SPPG, around 46 individuals or 6.7 percent are indicated to be non-nutrition graduates. This means that one out of every fifteen people occupying a nutritionist position does not have the appropriate educational background (see Figure 34).

Figure 34.

Educational Background of MBG Nutritionists



Source: Processed by the Research Team

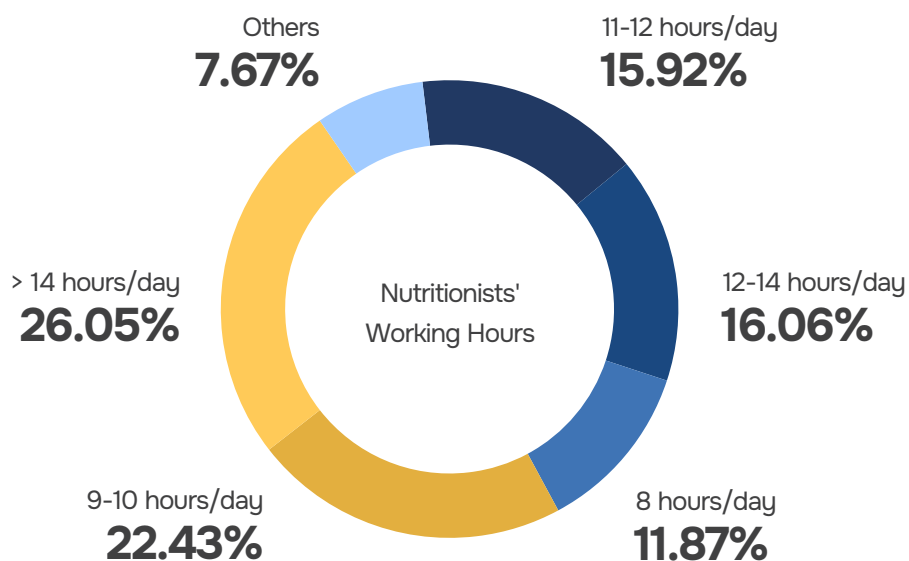
The recruitment of nutrition personnel who do not have a nutrition background clearly contradicts Law Number 36 of 2014 on Health Workers, which explicitly defines nutritionists as a professional category that requires specific competencies and educational qualifications. Although BGN has attempted to deflect responsibility by blaming the SPPG for recruitment errors, the regulatory facts indicate otherwise. The Decree of the Head of BGN RI No. 244 of 2025, issued on 27 October 2025 as the third revision of the official technical guidelines, states:

**“Production and quality supervisors should preferably be graduates of D3/D4/S1 nutrition programs and or have at least one year of experience in the field supported by relevant documentation.”**

This ambiguous provision creates confusion at the implementation level, while responsibility is shifted to field actors when errors occur. Such a situation is too serious to overlook, as it concerns the integrity of health professions and the overall quality of the MBG program’s implementation.

This study shows that the working hours of nutritionists in the field far exceed normal employment standards (see Figure 35). 4 out of 5 nutritionists work beyond regular working hours. Only 11.87 percent work within the standard 8 hour workday. In contrast, a large share work excessive hours, with 22.43 percent working between 9 and 10 hours. Another 15.92 percent work 11 to 12 hours, and 16.06 percent work 12 to 14 hours per day, reaching 26.1 percent. These findings indicate a significant work overload and an imbalanced labor system within SPPG and the MBG program. This situation reflects a heavy workload and a high risk of fatigue, which in turn threatens the hygiene and nutritional adequacy of the meals provided.

Figure 35. Workload of MBG Nutritionists



Source: Processed by the Research Team

Reorganizing the work system for nutrition personnel needs to be carried out immediately. A more balanced work schedule, clearer shift arrangements, and the addition of competent staff would help maintain food quality and protect public health. With adequate institutional support, nutrition professionals can work more effectively and contribute meaningfully to improving the quality of nutrition services in Indonesia.

At the end of the day, the erosion of professionalism in the actual practice of nutrition work has serious consequences for accuracy and the quality of food safety oversight. Exhausted nutritionists are more prone to making mistakes in nutrient calculations, food storage procedures, and kitchen sanitation supervision. This indirectly increases the risk of foodborne illness outbreaks.

### 3.3 The MBG Controversy Has Triggered Additional Social Issues at the Regional Level

The controversy surrounding the implementation of the MBG program has also spread across multiple regions. Poor governance and disorganized implementation have affected social, cultural, and even political dynamics at the regional level. To enrich the analysis in this study, we conducted qualitative research through in depth interviews with residents and parents of MBG beneficiaries in various areas, particularly outside Java, to understand their experiences and perceptions of the program. The interviews revealed a range of issues, including the program’s relevance to community needs, the sensitivity of its design to geographic and local food culture contexts, its direct impact on local food systems due to menu standardization, and the ways MBG has influenced existing food consumption traditions.

#### When Centralized Policies Ignore Local Needs

Since the early planning stages of the MBG Program, public resistance has already begun to surface. Communities, especially those in the regions, questioned the urgency of MBG compared with other essential educational needs, such as improving school facilities and providing more fundamental social support, as well as the lack of meaningful local participation in both planning and implementation.

“  
*It doesn't seem so. Personally, I think what would really help ease the burden on families is free schooling and improving school facilities, because some of the roofs are already full of holes.*  
Male, Lusiperi Village resident, Fakfak

Communities view the MBG program as non-inclusive and overly centralized because it often disregards local needs and contexts. The program was designed without considering regional infrastructure, social conditions, or the priorities of local communities.

“  
*Sumba is not the same as Java. If the food is cooked only in the city and then sent to schools in the villages, with long distances and damaged roads that you already know about, the food that arrives will definitely not be fresh. What we need more are improvements in education quality, infrastructure, and the construction of dormitories. Children here have to walk 10 kilometers to get to school, going up and down hills. If they had dormitories, they could focus more on their studies.*  
Male, Kambata Bandung Village, East Sumba

More broadly, many residents believe the government has fallen into the trap of seeking instant and symbolic results, as if providing meals would automatically resolve problems of nutrition and poverty. The program was designed with a context-intensive approach that fails to recognize the real needs on the ground, especially in regions outside Java. These criticisms were predictable from the start, given that the program was formulated without a proper feasibility study or an adequate evidence-based assessment.

“

*This program feels like everything is designed in Jakarta. The food is cooked in the center, then the people of Papua are simply told to eat it without anyone asking whether we even want it or not.*

Male, Lusiperi Village, Fakfak

These findings illustrate that when national policies fail to understand local needs, programs intended to improve quality of life instead risk running into systemic failure.

“

*.....Papua needs more than just being given food.*

Male, Lusiperi Village, Fakfak

### **From Mothers' Kitchens to the State's Kitchen: The Transformation of Local Food Traditions**

The MBG program is not only reshaping the eating patterns of children at school, it is also displacing local food traditions that have long been central to community identity. The menu choices, which tend to be Java-centric, reveal how national policies often fail to recognize the diversity of Indonesia's food cultures. Local foods are gradually pushed aside and distanced from children's preferences. Ironically, despite the government's rhetoric about promoting local foods and empowering regions, this policy reflects the opposite in practice.

“

*We have always lived on local foods. When it comes to meat and milk, some people may consume them and some may not, because they are used to what they normally eat.*

Male, Lusiperi Village, Fakfak

Instead of harnessing the potential of local food, the program introduces a new supply chain that is not rooted in the communities it serves. In the end, what used to come from “a mother's kitchen” in the village, prepared with care and local knowledge, has now shifted to a standardized “state kitchen” that distances children from their own local foods. This shift is not merely about changing menus, it represents the erosion of cultural space, local economies, and community food sovereignty.

“

*In East Sumba we are used to eating fresh and nutritious local foods. If we want chicken, we simply slaughter it, and the rice we eat is organic. Now we are told to eat frozen chicken from Jakarta and non-organic rice.*

Male, Kambata Bandung Village, East Sumba

## Old Rules, New Problems: Rethinking an Alternative Design for the MBG Scheme

In the midst of the chaotic implementation of the MBG program, communities have proposed redesigning the delivery mechanism so that it becomes more contextual and accountable. Many residents believe that the core issue is not only the quality of the food but also the disorderly governance and the lack of transparency in budget management. Communities want meaningful participation, not merely to be passive recipients of policy, but to be directly involved as co-managers of the program.

“

*Instead of having this budget managed by actors we do not even know, it would be better if it were managed directly by the community. People want to oversee it themselves together with parents and teachers. Many residents say there is no need to provide food, just return the funds to the schools.*

Male, Lusiperi Village, Fakfak

This statement underscores the community's desire for meaningful participation, not merely to act as passive recipients of policy, but to be directly involved as co-managers.

“

*Formerly in Waingapu, we used to have a local nutritious meal program run by the school committee, the school, and nutritionists from the community health center. We usually pooled contributions and used fresh local food. The program was similar to the PNPB Generasi Sehat model, where the committee served only as supervisors while the community and the school were directly involved in its implementation.*

Male, Kambata Bandung Village, East Sumba

By channeling funds directly to schools or community groups, residents believe that public oversight would become stronger, transparency would improve, and the food ingredients used would genuinely reflect local needs and preferences. If the government were willing to open space for dialogue and entrust part of the decision-making to communities, the MBG program could shift from a symbolic policy into a movement for food self-reliance that is more equitable and sustainable.

## Blurred Governance and Accountability

In many regions, the existence of production kitchens remains unclear, oversight mechanisms are weak, and the individuals responsible on the ground are often unknown to the community. These conditions illustrate public doubts about the transparency and integrity of program implementers, who frequently operate without open information and without effective monitoring mechanisms.

“

*This kitchen does not yet exist, it is still in the preparation stage. We need to see who is responsible, whether they truly support the program or are merely seeking profit. Oversight must be tightened.*

Male, Nagari Air Haji Barat, Padang

Suspected technical negligence has also emerged in many locations, ranging from the cooking process to the distribution of the meals.

“

*There may have been technical errors in the kitchen during cooking, storage, and preservation. We need to make sure where the food comes from and who is entrusted with the responsibility.*

Male, Warmon Kokoda, Sorong

These two statements reinforce one central point: without a strong oversight system and a clear accountability mechanism, a program as large as MBG is highly vulnerable to corrupt practices and deviations at the implementation level. In such circumstances, the public not only loses trust but also its right to safety and adequate nutrition.

## Why Are SPPGs Reluctant to Operate in 3T Areas, and Why Has the Government Not Expanded Implementation in These Regions?

SPPGs tend to concentrate in urban areas, particularly on the island of Java, because the cost per meal is lower, demand is high and stable, and operational risks are smaller compared with outer-Java regions, especially 3T areas. In 3T regions, costs surge due to inter-island logistics, port access limitations, insufficient cold-chain infrastructure, higher food prices, dispersed demand, weather and shipping uncertainties, restricted access to energy such as LPG, and cash-flow pressures (see Table 13). Although the government has repeatedly promised that MBG will be expanded into 3T areas, progress has remained very slow and largely invisible as of November 2025. The following are the main reasons why SPPGs are reluctant to operate in 3T regions:

Table 13. Key Factors Behind SPPGs' Reluctance to Operate in Disadvantaged, Frontier, and Remote Areas"

High National Logistics Costs		National logistics costs have declined but remain high compared to many countries; the impact is most pronounced for food commodities shipped to eastern Indonesia and 3T areas.
Uneven Regional Food Prices		Food prices in 3T areas, especially in eastern Indonesia, are higher; a margin of IDR 10,000 per portion in Java is not equivalent in 3T regions.
Limited Cold Chain		Cold-chain capacity is limited, leading to high food-waste risk; additional costs are required for ice gel, insulated boxes, and cold storage.
First-Last Mile Gap		Maritime connectivity programs have not covered first-mile and last-mile costs from ports to inland areas.
Low and Dispersed Demand		Low population density results in thin and geographically dispersed demand.
Geographic Fragmentation		Indonesia's archipelagic geography fragments markets, raising the cost of kitchens and micro-hubs.
Volume and Routing Inefficiencies		Without volume contracts of at least 200 portions per site per day and scheduled routes, unit costs remain inefficient.
Weather and Transport Risks		Weather and shipping schedules create stock-out risks, requiring buffer stocks and substantial working capital.
Energy Supply Instability		Access to 3-kg LPG cylinders is unstable, increasing production costs and downtime.
Food Safety Risks		Limited cold-chain capacity raises compliance costs and the risk of foodborne outbreaks.
Procurement Administrative Burden		Accountability requirements add administrative overhead.
High Unit Costs in 3T Areas		Unit costs are higher; the government tends to prioritize lower-cost regions.
High Monitoring and Governance Costs		Monitoring and governance costs are high in 3T areas.
Low Supplier Absorptive Capacity		Supplier capacity is limited; tenders in 3T areas are often undersubscribed.

Source: Processed by the Research Team (2025)

The BGN Technical Guidelines set out in the Head of BGN Decree No. 244 of 2025 provide only a superficial description of “Remote SPPGs” and lack the technical instruments needed to address the real challenges in 3T regions. Yet these are precisely the areas most in need of state intervention, whether due to extreme geographic conditions, limited infrastructure, or high levels of food insecurity. The guidelines merely list general descriptions such as an estimated 1,000 beneficiaries and locations in mountainous, island, coastal, or inland areas.

The guidelines offer no meaningful operational direction, such as standardized logistics requirements, 3T-specific food safety protocols, additional financing for difficult routes, or monitoring mechanisms tailored to remote-area conditions. This lack of substantive guidance indicates that the approach to 3T regions is more symbolic than strategic. As a result, the MBG policy risks widening existing inequalities by failing to reach the communities most in need of government protection.

### Why is MBG Implemented in Major Cities Instead of Villages?

The decision to prioritize large urban areas in the early rollout of the MBG program can be understood as a political strategy that combines electoral calculation with the need to showcase quick performance. Major cities are not only significant vote bases for Prabowo-Gibran but also key arenas where national public opinion is shaped through the media, digital middle classes, and concentrations of swing voters. Managing public perception and controlling the supply chain is also considerably easier in major cities. Most Indonesian National Armed Forces (TNI) posts are likewise located in urban centers.

Focusing initial implementation in these areas provides a double advantage: it strengthens political loyalty while generating easily viral narratives of success. Yet this approach carries a distributional fairness problem, as 3T regions and rural areas, which often face greater nutritional vulnerabilities, are left behind in the early stages.

This choice illustrates how political rationality can overshadow social-needs rationality, leading to public policy implementation that is biased toward electoral considerations rather than the urgency of community vulnerability.

#### 3.4

### The Dominance of Military and Police Veterans is Also Undermining the Quality of the Program

The dominance of military institutions, including military veterans, the TNI, and the National Police within the MBG program demonstrates a shift in public policy from a technocratic approach toward one that is more political and militaristic. The program involves a significant number of retired officers, from the top levels of the BGN institutional structure to field-level implementers, including within the ownership of SPPG units (see Figure 36). This aligns with what is often described as a Leviathan Economy<sup>68</sup>, in which state capitalism is marked not only by strong state control over economic resources but also by military penetration into civilian policy domains.

<sup>68</sup> Musacchio, A., & Lazzarini, S. G. (2012). Leviathan in Business: Varieties of State Capitalism and Their Implications for Economic Performance. Harvard Business School. <https://www.hbs.edu/ris/Publication%20Files/12-108.pdf>

<sup>69</sup> Sen, K., Pritchett, L., Kar, S., & Raihan, S. (2017). Democracy Versus Dictatorship? The Political Determinants of Growth Episodes. Harvard Kennedy School. <https://appext.hks.harvard.edu/publications/getFile.aspx?id=1509>

Such conditions risk undermining economic performance in the medium and long term.<sup>69</sup> Military organizations that are professionally trained for defense and security are being placed in roles far outside their core competencies. Over time, this erodes military professionalism, which should remain separate from politics and civilian policymaking.

Presidential Regulation No. 83 of 2025<sup>70</sup> on the National Nutrition Agency opened space for appointing members of the Governing Board from among retired TNI and National Police personnel. Moreover, TNI personnel were among the first to be sent to Singapore for Institutional Food Management Training as part of efforts to reinforce commitment to the MBG program.<sup>71</sup> This involvement further expands the military's auxiliary role in civic and social affairs. The TNI has taken on active roles ranging from providing thousands of hectares of land for SPPG construction<sup>72</sup>, laying building foundations<sup>73</sup>, and even operating the kitchens.<sup>74</sup>



This pattern has been evident since Joko Widodo era, which used the State Civil Apparatus Law (UU ASN)<sup>75</sup> to involve TNI-POLRI personnel in civilian posts. Prabowo Subianto has further normalized military involvement in public policy through other initiatives, such as the food estate program.<sup>76</sup> The belief that bureaucratic efficiency will improve through military participation is a myth in public policy, because professionalism and meritocracy tend to weaken under a command-driven structure.

A military-tinged institutional posture places the BGN within a hybrid civil-military bureaucracy. This bureaucratic configuration reflects what Huntington (1957)<sup>77</sup> described as a “civil-military imbalance,” where public policy control is reduced to administrative coordination without substantive authority to execute programs on the ground. Continued military involvement in civilian politics and governance risks eroding military professionalism<sup>78</sup>, since true military professionalism is only possible when a clear boundary exists between the civilian political sphere and the military domain (see Figure 37).

<sup>70</sup> Republik Indonesia. (2024, August 15). Peraturan Presiden Nomor 83 Tahun 2024 tentang Badan Gizi Nasional. Lembaran Negara Republik Indonesia Tahun 2024 Nomor 173. <https://peraturan.bpk.go.id/Details/295857/perpres-no-83-tahun-2024>

<sup>71</sup> Dinas Penerangan Angkatan Darat. (2025, October 12). Tunjukkan komitmen sukseskan program makan bergizi, TNI AD kirim tim ke Singapura. TNI Angkatan Darat. <https://tniad.mil.id/tunjukkan-komitmen-sukseskan-program-makan-bergizi-tni-ad-kirim-tim-ke-singapura/>

<sup>72</sup> Badan Gizi Nasional. (2025, October 30). TNI AD dukung penuh program MBG [Foto]. Badan Gizi Nasional. <https://www.bgn.go.id/news/foto/tni-ad-dukung-penuh-program-mbg>

<sup>73</sup> Divisi Humas Polri. (2024, October 21). Terus dukung program MBG, Kapolri resmikan 32 SPPG dan groundbreaking 27 SPPG di Jateng. Humas Polri. <https://humas.polri.go.id/news/detail/2133946-terus-dukung-program-mbg-kapolri-resmikan-32-sppg-dan-groundbreaking-27-sppg-di-jateng>

<sup>74</sup> Dinas Penerangan TNI Angkatan Udara. (2025, November 4). Wujud nyata dukung program makan bergizi gratis, Lanud Anang Busra laksanakan ground breaking dapur SPPG pertama. <https://tni-au.mil.id/berita/detail/wujud-nyata-dukung-program-makan-bergizi-gratis-lanud-anang-busra-laksanakan-ground-breaking-dapur-sppg-pertama/>

<sup>75</sup> Indonesia at Melbourne. (2023, November 7). Indonesian military back in the bureaucracy: The return of dual function. University of Melbourne. <https://indonesiaatmelbourne.unimelb.edu.au/indonesian-military-back-in-the-bureaucracy-the-return-of-dual-function/>

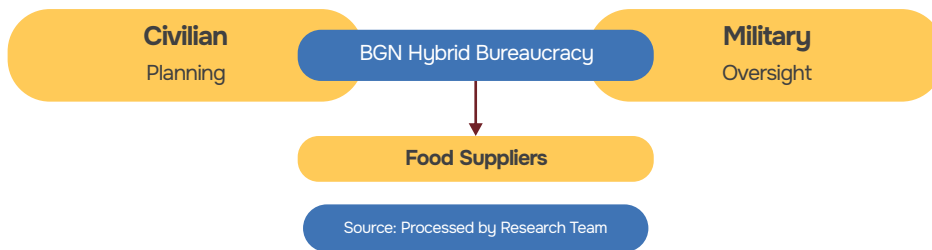
<sup>76</sup> Dirgantara, A., & Prabowo, D. (2025, October 29). Orang Barat Bingung Polri Buka Dapur, Prabowo: Ini Indonesia, Bung! Kompas.com. <https://nasional.kompas.com/read/2025/10/29/15571991/orang-barat-bingung-polri-buka-dapur-prabowo-ini-indonesia-bung>

<sup>77</sup> Huntington, S. P. (1957). *The Soldier and the State: The Theory and Politics of Civil–Military Relations*. Harvard University Press.

<sup>78</sup> Nix, Dayne E. (2012). American Civil-Military Relations: Samuel P. Huntington and the Political Dimensions of Military Professionalism. *Naval War College Review*: Vol. 65 : No. 2 , Article 7. <https://digital-commons.usnwc.edu/nwc-review/vol65/iss2/7>

Figure 37.

**Civil–Military Hybrid Bureaucracy in BGN**



The initial involvement of the TNI was intended solely to accelerate and support the implementation of MBG in frontier, outermost, and remote regions that were not yet conducive.<sup>79</sup> However, there are still no clear regulations defining which areas are permitted to receive TNI assistance. As a result, military involvement has become relatively flexible and unbounded, creating consequences for the program’s accountability.

The government needs to ensure that military participation in the MBG program can be measured through clear performance indicators. In addition, independent audits must be strengthened, alongside the development of a monitoring system based on real-time data to enhance community participation.

**The Involvement of the TNI and POLRI in Managing the MBG Program**

TNI and POLRI involvement in the MBG program reflects a structurally dominant role in the public policy sphere. These institutions are not only involved in distribution and logistics, but also play a significant role in the establishment and management of SPPGs across regions. Interestingly, some foundations affiliated with the TNI and POLRI have received special treatment by being exempted from financial transaction audits. According to the PPAK Circular Letter No. 7 of 2025 on Indicators of Suspicious Financial Transactions Related to the Misuse of Funds in the Free Nutritious Meal Program, commercial banks are required to conduct enhanced due diligence on profiles and transactions. This regulation applies to foundations or legal entities that establish more than ten SPPGs. However, fifteen foundations have been exempted from this oversight, several of which are affiliated with military and police institutions.

When a commercial bank identifies a foundation or other legal entity that has established more than ten SPPGs after February 2025, the bank is required to conduct enhanced due diligence on the profile and transactions of that foundation or entity. This is to determine whether the elements of suspicious financial activity, as defined in Article 1 point 5 of the Anti-Money Laundering Law (UU TPPU), are present. This obligation does not apply to fifteen specific foundations designated by BGN, listed as follows:

- |   |  |   |   |
|---|--|---|---|
| <b>1</b> Adi Upaya Foundation                             | <b>5</b> Persyarikatan Muhammadiyah Foundation             | <b>9</b> Kartika Purna Yudha Foundation     | <b>13</b> Pemberdayaan Perempuan Umi Indonesia – PPUMI Foundation |
| <b>2</b> Kemala Bhayangkari Foundation                    | <b>6</b> Pundi Amal Nusantara Foundation                   | <b>10</b> Manunggal Kartika Jasa Foundation | <b>14</b> Bina Bangsa Foundation                                  |
| <b>3</b> Patriot Solidaritas Nusantara Foundation         | <b>7</b> YPPSDP Foundation                                 | <b>11</b> Supra Merah Putih Foundation      | <b>15</b> Bhakti Mitra Widyatama Foundation                       |
| <b>4</b> Perjuangan Untuk Kesejahteraan Rakyat Foundation | <b>8</b> Purnawirawan Perjuangan Indonesia Raya Foundation | <b>12</b> Elsyte Peduli Bangsa Foundation   |   |

<sup>79</sup> Kementerian Pertahanan Republik Indonesia. (2025, October 29). Program makan bergizi gratis, Kemhan bersama Satgas Yonif 733/Masariku hadir di pedalaman Papua Pegunungan. <https://www.kemhan.go.id/2025/10/29/program-makan-bergizi-gratis-kemhan-bersama-satgas-yonif-733-masariku-hadir-di-pedalaman-papua-pegunungan.html>

These exemptions effectively relax oversight for transactions that may carry high risks or appear suspicious. The inclusion of these foundations on the exemption list raises serious questions about the fairness of financial supervision across different foundations. In the absence of any official explanation for the exemptions, this arrangement risks creating perceptions of unequal treatment and conflicts of interest, particularly given that several of these foundations have access to public funds through the MBG program.

The involvement of the military and police is also reflected in the presence of foundations affiliated with these state institutions in the establishment of SPPGs. One example is the Kemala Bhayangkari Foundation (YKB), a social organization under the direct guidance of the Indonesian National Police (POLRI).<sup>80</sup> According to official government records, YKB was established on 5 May 1980 and has been legally recognized by the Ministry of Law and Human Rights. Its organizational profile explains that YKB was founded within the Bhayangkari and POLRI community with the aim of providing social support to the extended POLRI family as well as to the general public.

The Kartika Jaya Foundation (YKJ) was established by Ny. Siti Hartina Soeharto as part of Persit Kartika Chandra Kirana, the organization of spouses of Indonesia Army (TNI AD) personnel.<sup>81</sup> The foundation is headquartered at the Indonesian Army Headquarters in Jakarta and oversees numerous social and educational institutions. In addition, the Kartika Purna Yudha Foundation (YKPY) is linked to retired Indonesian Army personnel through the Persatuan Purnawirawan Angkatan Darat (PPAD).<sup>82</sup> This foundation is also recorded as supporting SPPG kitchen operations in several regions. YKPY maintains close ties with the community of retired TNI AD personnel under the PPAD umbrella.

The urgency of ensuring transparency in the governance of the MBG program has become even more critical given the significant expansion of military and police involvement. The government must therefore safeguard clear accountability mechanisms, transparent budgeting processes, and well-defined institutional boundaries. It is equally important to prioritize the involvement of communities and professional groups with expertise in nutrition and public health to ensure that the effectiveness of MBG is not compromised by institutional interests or security-driven political considerations.

This situation has emerged while much of the public remains unaware that the MBG program, which has been co-opted by military actors and their networks, is funded through the state budget sourced from taxpayer money. Over the past ten years, the contribution of Value Added Tax (VAT) to total tax revenues has remained highly dominant, consistently above 30 percent. This indicates not only that Indonesia's tax system continues to rely heavily on regressive taxation, but also that the allocation of public spending is increasingly problematic. The MBG business model, which guarantees profits because its products are assured distribution to beneficiaries as captive consumers, coupled with the inclusion of margin fees, has turned what should be a strategic social program into a driver of economic inequality.

**“They say the MBG program creates jobs...  
But why are those jobs going to police officers, military personnel,  
politicians, and their children? What about ordinary citizens?”**

<sup>80</sup> Yayasan Kemala Bhayangkari. Tentang kami. <https://yayasankemalabhayangkari.or.id/tentang-kami>

<sup>81</sup> Yayasan Kartika Jaya. Profil Yayasan Kartika Jaya. <https://www.yayasankartikajaya.org/halaman/profil>

<sup>82</sup> Minangsatu.com. (2025, April 5). Dinaungi Yayasan Kartika Purna Yudha PPAD, dapur SPPG Sari Bulan Selayo segera launching program MBG. [https://minangsatu.com/dinaungi-yayasan-kartika-purna-yudha-ppad--dapur-sppg-sari-bulan-selayo-segera-launching-program-mbg\\_37850](https://minangsatu.com/dinaungi-yayasan-kartika-purna-yudha-ppad--dapur-sppg-sari-bulan-selayo-segera-launching-program-mbg_37850)

3.5

# The MBG Menu Quality Crisis: Low Nutritional Value and High Reliance on Ultra Processed Foods<sup>83</sup>

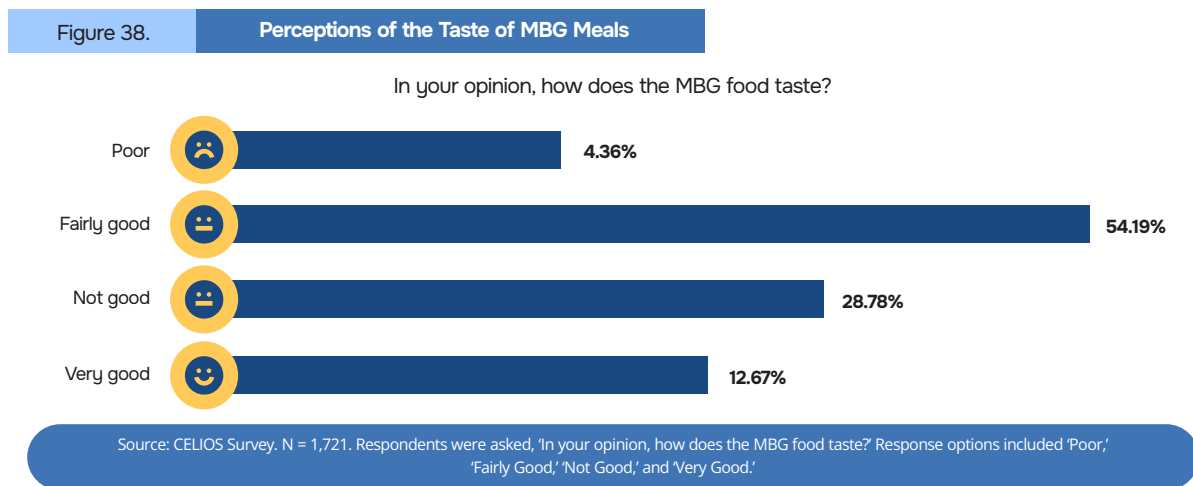
The food provided to pregnant women, breastfeeding mothers, and young children largely consists of UPFs, low-nutrient items that fall far below balanced nutrition standards. This approach is misguided, because such processed foods cannot possibly prevent or reduce stunting, which is the program's primary objective.

<sup>83</sup> This image is a compilation of original MBG menu photos from various regions in Indonesia, most of which were served to vulnerable groups such as pregnant women, breastfeeding mothers, and young children.

## Taste, Hygiene, and Nutrition

Images of MBG meals have circulated widely over the past year, flooding social media timelines as a form of protest by students and parents. The meals served are often considered unfit to eat, low in nutritional value, and frequently fail to meet basic food safety standards. This wave of protest did not emerge without cause, communities were uncertain about where to file complaints because BGN had no transparent reporting mechanism and only launched the 127 call center in mid-November 2025, after thousands of children had already experienced food poisoning and UPF-based menus had been served almost daily for nearly a full year. This situation underscores that the program’s problems extend beyond implementation, revealing a lack of basic accountability to its beneficiaries.

For this reason, this study evaluates MBG meal quality using three core indicators that are widely recognized in existing research: taste, hygiene, and nutritional content. Taste determines whether children are willing to consume the food provided (Cohen et al., 2021; Henriques et al., 2025).<sup>84</sup> Hygiene is directly related to food poisoning risk (Henriques et al., 2025).<sup>85</sup> Nutritional content forms the foundation of health and academic benefits (Johnson et al., 2016; Cohen et al., 2021).<sup>86</sup> By systematically measuring public perceptions of these three dimensions, this study aims to provide a more objective picture of the actual quality of MBG meals based on community experience. Good taste does not necessarily mean that the food is healthy or appropriate for children. Many sweet or salty foods and beverages such as nuggets, strawberry-flavored milk drinks, and similar products may be appealing to children, but they do not provide the nutritional quality needed for healthy growth and development. The majority of respondents rated the taste of MBG meals as fairly good at 54.19 percent, while 28.78 percent considered the taste less satisfactory and 4.36 percent rated it poor (see Figure 38).

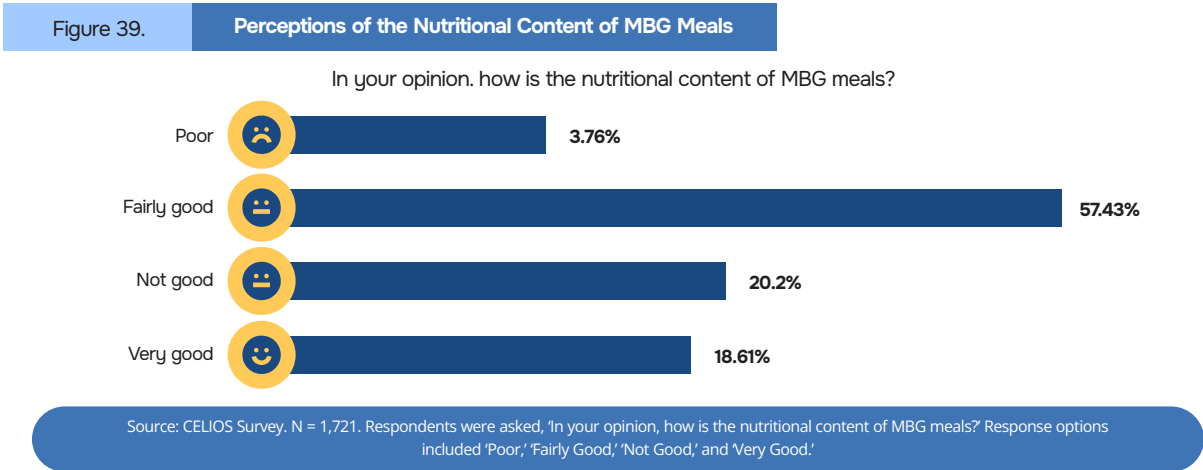


<sup>84</sup> Cohen, J., Hecht, A., Mcloughlin, G., Turner, L., & Schwartz, M. (2021). Universal School Meals and Associations with Student Participation, Attendance, Academic Performance, Diet Quality, Food Security, and Body Mass Index: A Systematic Review. *Nutrients*, 13. <https://doi.org/10.3390/nu13030911>; Henriques, P., Alvarenga, C., Menezes, M., Ferreira, D., Burlandy, L., & Soares, B. (2025). Adequate Food and Nutrition in School: Acceptability and Consumption by Students of a Brazilian Municipality. *Nutrients*, 17. <https://doi.org/10.3390/nu17030528>

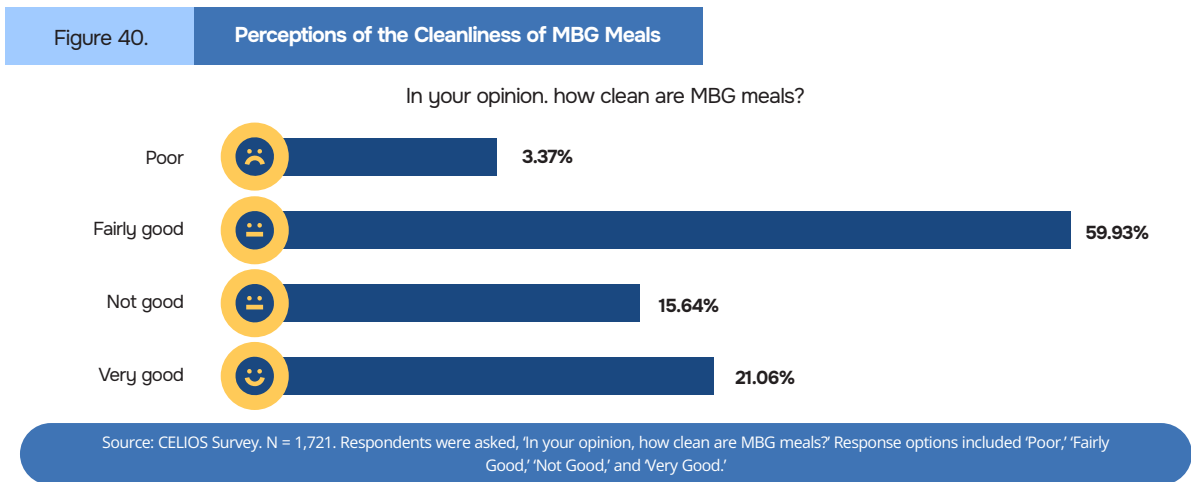
<sup>85</sup> Henriques, P., Alvarenga, C., Menezes, M., Ferreira, D., Burlandy, L., & Soares, B. (2025). Adequate Food and Nutrition in School: Acceptability and Consumption by Students of a Brazilian Municipality. *Nutrients*, 17. <https://doi.org/10.3390/nu17030528>

<sup>86</sup> Johnson, D., Podrabsky, M., Rocha, A., & Otten, J. (2016). Effect of the Healthy Hunger-Free Kids Act on the Nutritional Quality of Meals Selected by Students and School Lunch Participation Rates. *JAMA pediatrics*, 170 1, e153918. <https://doi.org/10.1001/jamapediatrics.2015.3918>; Cohen, J., Hecht, A., Mcloughlin, G., Turner, L., & Schwartz, M. (2021). Universal School Meals and Associations with Student Participation, Attendance, Academic Performance, Diet Quality, Food Security, and Body Mass Index: A Systematic Review. *Nutrients*, 13. <https://doi.org/10.3390/nu13030911>

The majority of respondents rated the nutritional content of MBG meals as fairly good at 57.4 percent and very good at 18.6 percent. However, the study also found that nutritional quality was still lacking, with 20.2 percent of respondents rating it as poor and 3.76 percent rating it as very poor. These findings indicate inconsistencies in nutritional quality across implementation sites. Many respondents assessed the meals only as moderately nutritious, suggesting that the program’s nutritional standards have not yet reached an optimal level. The government needs to ensure tighter oversight and stricter control over food quality so that the intended nutritional benefits can be achieved more evenly (see Figure 39).



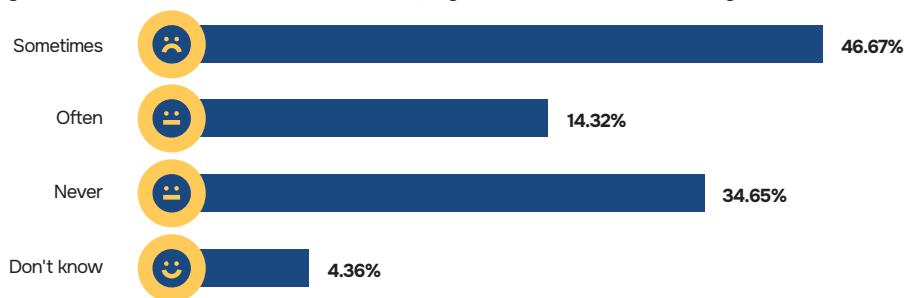
The study shows that most respondents rated the cleanliness of MBG meals as fairly good (59.93 percent) and very good (21.06 percent). Even so, 15.64 percent rated the cleanliness of the food as poor and 3.37 percent rated it as very poor. This indicates that the cleanliness of MBG meals is not yet uniform or consistent across beneficiaries’ experiences. It also suggests that the overall acceptability of MBG meals still needs improvement to ensure they are well received by beneficiaries (see Figure 40).



Survey results show that respondents reported their children sometimes refused MBG meals because they found them unappetizing or unfamiliar (see Figure 41). Parental perceptions are important, as children may be more honest or more likely to complain to their parents. A total of 46.7 percent of respondents said their children occasionally refused MBG meals, and 14.3 percent reported that their children often refused them. The high rate of refusal is a serious indicator that the taste and acceptability of MBG meals remain low. This situation is further worsened by the continued prevalence of food poisoning incidents and complaints of digestive problems after consuming MBG meals. In many cases, children deliberately refuse MBG meals due to trauma from previous mass poisoning events. These findings underscore the need for a comprehensive evaluation by BGN of all SPPG units, particularly regarding food safety standards, production processes, and the quality of the menus provided.

**Figure 41. Experiences of Children Refusing MBG Meals They Do Not Like**

Has your child ever refused food from the MBG program because it did not taste good or was unfamiliar?

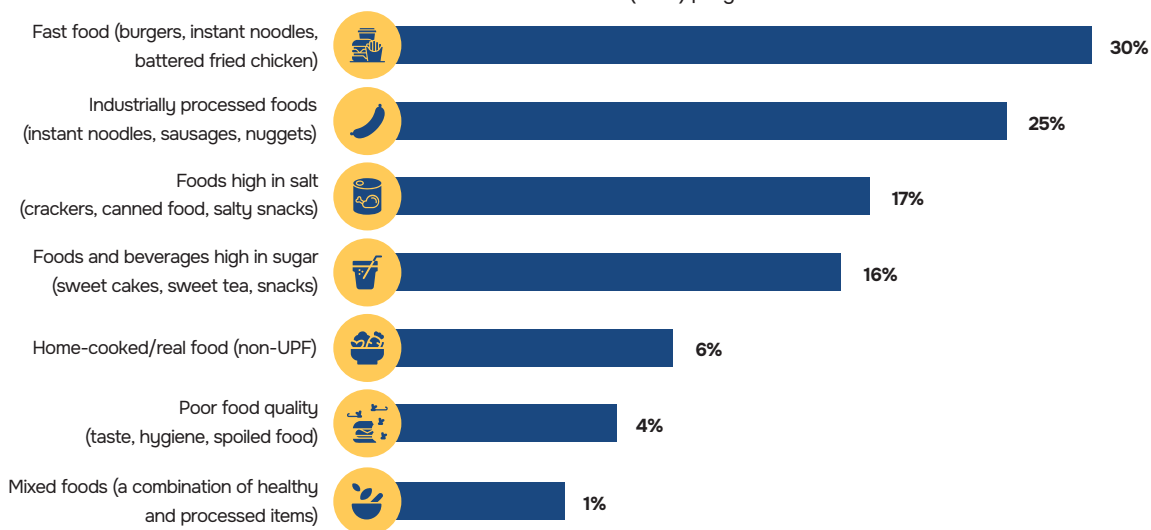


Source: CELIOS Survey. N = 1,721. Respondents were asked, 'Has your child ever refused food from the MBG program because it did not taste good or was unfamiliar?' Response options included 'Sometimes,' 'Often,' 'Never,' and 'Don't know.'

The study shows that among all respondents, 30 percent stated that the meals provided through the MBG program fall into the category of fast food, 25 percent described them as factory-processed foods, 17 percent identified them as high-salt foods, and 16 percent as foods or drinks high in sugar (see Figure 42). Meanwhile, only 6 percent reported that the meals served resembled home-cooked or real food (non-UPF). Overall, the pattern of food provision under MBG leans more toward cheap and convenient items rather than balanced, nutritious meals. This contradicts the program's goal of improving children's nutrition and instead risks worsening long-term health outcomes.

**Figure 42. Types of Food Most Frequently Provided in the MBG Program**

Based on your observation or experience, what types of food are most frequently provided in the Free Nutritious Meal (MBG) program?



Source: CELIOS Survey, N = 1,721. Respondents were asked, 'Based on your observation or experience, what types of food are most frequently provided in the Free Nutritious Meal (MBG) program?' Response options included 'Foods and beverages high in sugar (sweet cakes, sweet tea, snacks),' 'Foods high in salt (crackers, canned foods, salty snacks),' 'Industrially processed foods (instant noodles, sausages, nuggets),' 'Fast food (burgers, instant noodles, battered fried chicken),' and 'Others.' The 'Others' option was open-ended and subsequently categorized into 'Home-cooked/real food (non-UPF),' 'Poor food quality (taste, hygiene, spoiled food),' and 'Mixed foods (a combination of healthy and processed items).'

This situation shows that the implementation is not focused on providing high quality and nutritious food, but rather on meeting the program's daily output targets. As a result, the meals served in the MBG program are often fast food items that also fall into the category of ultra-processed foods (UPF), which have been shown to increase the risk of diseases such as type 2 diabetes, obesity, heart disease, can trigger mental health disorders, and even cancer.<sup>87</sup>

**66 The MBG program must be carried out with scientific integrity and firm ethical commitments, otherwise the only responsible choice is to “Stop This Program”.**

<sup>87</sup> Mutebi, N. (2024). Health impacts of ultra-processed foods. Parliamentary Office of Science and Technology, <https://doi.org/10.58248/PB59>

## Case Study

The research team found that many community members submitted complaints about MBG food through MBG Watch.<sup>88</sup> The cases we analyze here represent only the tip of the iceberg. Below are several examples of menus that we examined in greater detail. We also identified menus with inadequate nutritional content that were served to young children, pregnant women, and breastfeeding mothers.

Based on our nutritional analysis, these menus indicate the following:

### Case 1: SPPG in Sukabumi

Figure 43. MBG Menus in Sukabumi, West Java



### Kasus 2: SPPG in Parungkuda District, Sukabumi, West Java

Figure 44. MBG Menus in Sukabumi, West Java



### Case 3: SPPG in Sleman, Special Region of Yogyakarta

Figure 45. MBG Menus in Sleman, Special Region Yogyakarta



<sup>88</sup> MBG watch is a civil society coalition that monitors the Free Nutritious Meal (MBG) program through an independent public complaint platform. See: <https://mbgwatch.org/>

## Nutritional Content Analysis<sup>89</sup>

### Case 1

Table 14.		Nutritional Content Analysis of MBG Menus in Sukabumi, West Java				
Foods	Quantity	Calories (kcal)	Carbohydrates (g)	Protein (g)	Fat (g)	Description
Longan	4 pcs	20	4.84	0.4	0.04	-
Burger bun (Berna**)	1 pcs	150	25	5	4	-
Beef burger patty (Bernar**)	1 pcs	70	4	6	3.5	-
Tomato sauce	5 gram	5.5	1.2	0.1	0	-
Indom*lk vanila	115 ml	80	12	3	2.5	Sugar 10 gram
		<b>325.5</b>	<b>47.04</b>	<b>14.5</b>	<b>10.04</b>	

### Case 2

Table 15.		Nutritional Content Analysis of MBG Menus in Parungkuda District, Sukabumi, West Java				
Foods	Quantity	Calories (kcal)	Carbohydrates (g)	Protein (g)	Fat (g)	Description
Custard cake bread (God*)	28 gram	130	17	2	7	-
Biscuits (Mar* Regal)	2 pcs	50	9	1	1.5	-
Strawberry milk (Fri*)	110 ml	70	10	2	2.5	-
Orange fruit	1 pcs	62	15.39	1.23	0.16	Sugar 9 gram
		<b>182</b>	<b>34.39</b>	<b>4.23</b>	<b>4.16</b>	

### Case 3

Table 16.		Nutritional Content Analysis of MBG Menus in Sleman, Special Region of Yogyakarta				
Foods	Quantity	Calories (kcal)	Carbohydrates (g)	Protein (g)	Fat (g)	Description
Biscuit (Rom*)	4 pcs	180	26	4	8	-
Plain milk (Fri*)	110 ml	60	7	3	1.5	Sugar 7 gram
Orange fruit	1 pcs	62	15.39	1.23	0.16	-
		<b>302</b>	<b>48.39</b>	<b>8.23</b>	<b>9.66</b>	

The analyzed menus reveal a consumption pattern dominated by ultra-processed foods (UPF) such as bread, biscuits, cakes, processed meat, flavored milk, and packaged sauces. UPFs typically contain added sugar, refined oils, high levels of salt, and various food additives (preservatives, colorants, synthetic flavorings, artificial sweeteners) that are associated with increased risks of obesity, diabetes, digestive disorders, and metabolic inflammation.<sup>90,91,92</sup> These risks are particularly concerning for vulnerable groups such as young children, pregnant women, and breastfeeding mothers.

<sup>89</sup> The analysis of nutritional content is conducted by a nutritionist.

<sup>90</sup> Hoffman, D., Leffa, P., Sangalli, C., Valmórbida, J., Rauber, F., & Vitolo, M. (2020). Ultra-Processed Foods Consumption and Lipid Profile in Brazilian Children. *Current Developments in Nutrition*. [https://doi.org/10.1093/cdn/nzaa053\\_047](https://doi.org/10.1093/cdn/nzaa053_047)

<sup>91</sup> Petridi, E., Karatzi, K., Magriplis, E., Charidemou, E., Philippou, E., & Zampelas, A. (2023). The impact of ultra-processed foods on obesity and cardiometabolic comorbidities in children and adolescents: a systematic review. *Nutrition reviews*. <https://doi.org/10.1093/nutrit/nuad095>

<sup>92</sup> Rauber, F., Campagnolo, P., Hoffman, D., & Vitolo, M. (2015). Consumption of ultra-processed food products and its effects on children's lipid profiles: a longitudinal study. *Nutrition, metabolism, and cardiovascular diseases : NMCD*, 25 1, 116-22. <https://doi.org/10.1016/j.numecd.2014.08.001>

In the first menu (see Figure 43), the food provided is a burger, which falls into the UPF and junk-food category. It is high in saturated fat, sugar, salt, and calories, yet very low in essential nutrients such as fiber, vitamins, and minerals (see Table 14). This is clearly far from the principles of balanced nutrition.

The second and third menus (elementary school student menus) (see Figure 44 and 45) also show an imbalanced nutritional composition. They are dominated by high-carbohydrate UPFs and lack adequate sources of quality protein and fiber. The protein content is relatively low (only 4 to 8 grams per menu, whereas the average daily protein requirement for children aged 7 to 9 is 40 grams) (see Tables 15 and 16).

All three menus also contain high amounts of sugar from UHT milk and other sweetened products (7 to 10 grams of sugar per milk carton, not including hidden sugars from bread and biscuits), and provide very little fruit and vegetables. This raises the risk of deficiencies in vitamins, minerals, and fiber. Moreover, the packaged milk used contains only around 35 percent fresh milk, with added sugar and other food additives, making it unsuitable for meeting optimal nutritional needs. **Overall, the menus not only fail to meet the principles of balanced nutrition, but may also negatively affect child growth, maternal health during pregnancy, and breast milk quality. For these reasons, UPFs are not recommended as a primary food source for these groups.**

## MBG Watch<sup>93</sup>: A Civil Society Collaboration for Transparency in the Free Nutritious Meals Program (MBG)

MBG Watch is a civil society initiative established to ensure that the MBG program is implemented transparently, reaches the intended beneficiaries, and remains free from misuse. This initiative emerged from public concern over the importance of collective oversight so that state budget funds genuinely benefit the community, particularly the children who rely on the program.

Through cross-institutional collaboration involving CELIOS, Unitrend, Transparency International Indonesia, Lapor Sehat, LBH Jakarta, and Bareng Warga, MBG Watch serves as a participatory platform that creates space for communities to be directly involved in monitoring the program's implementation.

Beyond functioning as a monitoring tool, the platform also serves as a space for public education and citizen review to strengthen accountability and transparency in program delivery. With a spirit of collaboration, MBG Watch aims to ensure that every child's right to nutritious, healthy, and safe food is genuinely fulfilled.

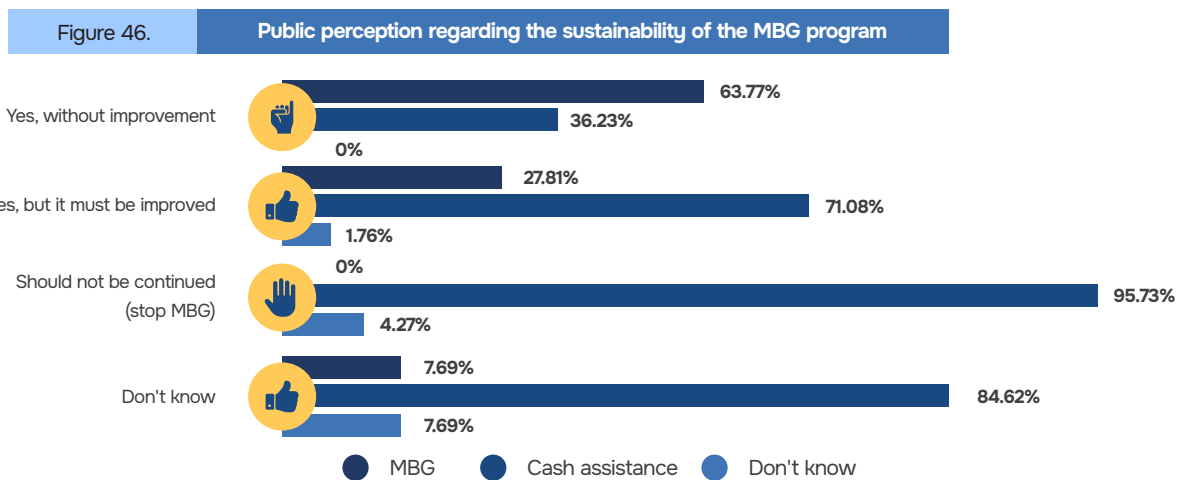
<sup>93</sup> <https://mbgwatch.org/>

# 4

## Recommendation

### THE PUBLIC IS CALLING FOR A COMPLETE OVERHAUL, AND EVEN FOR THE MBG PROGRAM TO BE STOPPED ENTIRELY IF THE CURRENT SCHEME IS MAINTAINED

This study shows that among respondents who prefer MBG over cash assistance, nearly one third (27.81 percent) want changes and improvements, and none selected “stop the program”. By contrast, respondents who prefer cash assistance over MBG strongly support continuing MBG only with reforms (71.08 percent), while 36.23 percent want it continued without any changes, and 95.73 percent would choose to stop MBG if that option were available. Among the “don’t know” group, only a small share wants MBG to continue with improvements (1.76 percent) or to be discontinued (4.27 percent). Overall, these findings indicate that public support for MBG is highly dependent on assistance preferences: those who prefer MBG tend to want the program maintained, while those who prefer cash assistance are far more critical and lean toward discontinuation or major reforms to the MBG program (see Figure 46).



Source: CELIOS Survey. N = 1,721. Respondents were asked, “if you could choose, would you prefer the Free Nutritious Meal (MBG) program or cash assistance (direct cash subsidies to parents)?” Answer options included “Cash Assistance,” “MBG,” and “Don’t Know.” Respondents were also asked, “Do you feel that MBG should be continued?” Answer options included “Yes, but it must be improved,” “Should not be continued,” “Yes, without improvement,” and “Don’t know.”

This study shows that declining public trust in the MBG program not only reflects weak governance, but also reveals that its substantial economic potential may instead generate losses for communities. The large-scale kitchen model and reliance on industrial vendors hinder the emergence of local economic multiplier effects. By contrast, if the program were implemented through school-based kitchens and involved MSMEs, as well as local farmers, fishers, and livestock producers, it could create new jobs and increase household incomes. A clear example comes from Brazil, where 30 percent of all food for the national school meal program must be sourced from family farmers. This policy has been proven to improve the welfare of small producers, strengthen regional food sovereignty, and stimulate local economic growth.

In other words, an MBG model grounded in local participation has the potential to become a productive economic intervention that delivers direct benefits to both rural and urban communities. Removing the dominance of large centralized kitchens and the involvement of state apparatus that lack relevance would create more space for civil society, schools, and local enterprises to take part in the food supply chain.

### Mismanagement from End to End: Poor Governance Behind the MBG Program’s Turmoil

The primary cause of the MBG program’s chaotic implementation is systemic mismanagement from upstream to downstream, which has led to significant waste of the state budget. The program draws its funding from the education budget amounting to Rp223 trillion (83.4 percent), the health budget at Rp24.7 trillion (9.2 percent), and the economic sector at Rp19.7 trillion (7.4 percent). Worse, the number of children affected by food poisoning continues to rise sharply each day. The government has attempted to introduce quick fixes, but these efforts have been rapid rather than corrective.

Tabel 17. Impacts and consequences of mismanagement in Universal Free Meal School Programs such as MBG	
Field of Impact	Consequences of Mismanagement in the Universal Free Meal School Program
Financial Inefficiency	Rising cost per meal, waste, and budget leakage <sup>94,95,96</sup>
Sacrificing Other Education Priorities	Funds diverted, decline in program effectiveness <sup>97,98</sup>
Children’s Health/Nutrition Not Fulfilled	Poor food quality, inconsistent distribution <sup>99,100</sup>
Mistargeted Beneficiaries	Vulnerable groups neglected or not reached <sup>99,100</sup>

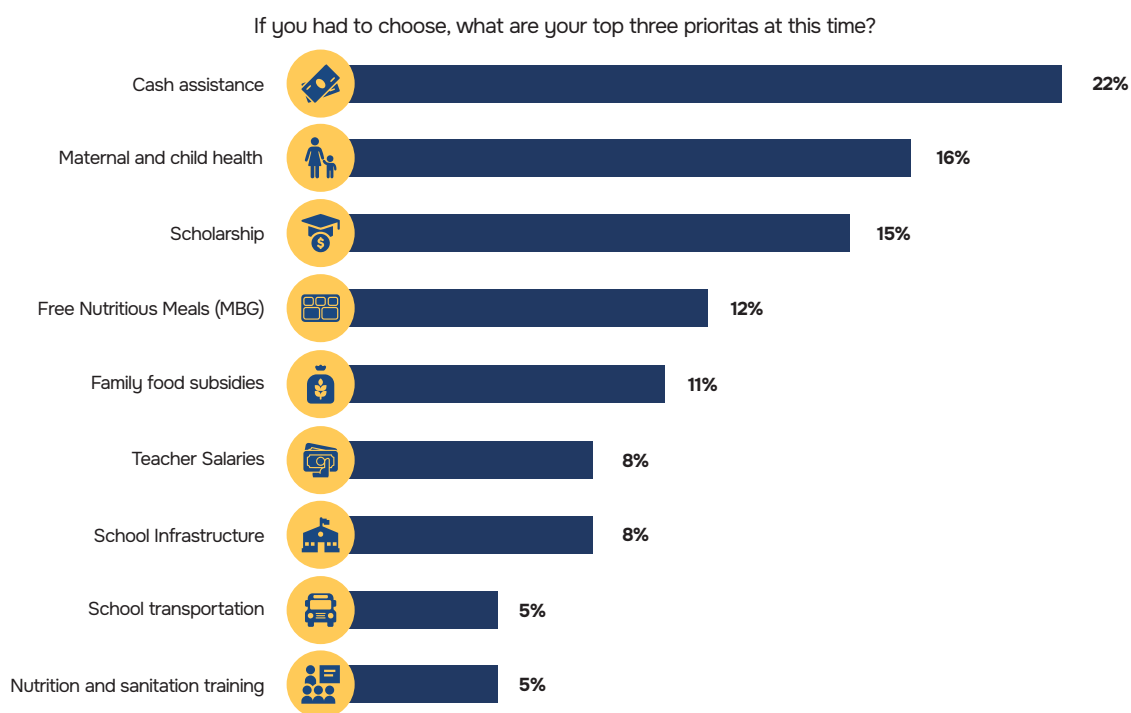
## IF GIVEN A CHOICE, THE PUBLIC PREFERS CASH TRANSFERS OVER THE MBG PROGRAM

If people were given the freedom to choose, it becomes clear that MBG (free nutritious meals) is not viewed as a top priority (see Figure 47). The graph shows that cash assistance ranks highest as the most needed form of support (22 percent), reflecting the strong urgency for direct economic aid at the household level. Maternal and child health (16 percent) and scholarships (15 percent) also emerge as important priorities, indicating that communities see investments in basic health and education as essential for improving family welfare.

- 94 Verguet, S., Limasalle, P., Chakrabarti, A., Husain, A., Burbano, C., Drake, L., & Bundy, D. (2020). The Broader Economic Value of School Feeding Programs in Low- and Middle-Income Countries: Estimating the Multi-Sectoral Returns to Public Health, Human Capital, Social Protection, and the Local Economy. *Frontiers in Public Health*, 8. <https://doi.org/10.3389/fpubh.2020.587046>
- 95 Kristjansson, E., Gelli, A., Welch, V., Greenhalgh, T., Liberato, S., Francis, D., & Espejo, F. (2016). Costs, and cost-outcome of school feeding programmes and feeding programmes for young children. Evidence and recommendations. *International Journal of Educational Development*, 48, 79-83. <https://doi.org/10.1016/j.ijedudev.2015.11.011>
- 96 Aliyar, R., Gelli, A., & Hamdani, S. (2015). A Review of Nutritional Guidelines and Menu Compositions for School Feeding Programs in 12 Countries. *Frontiers in Public Health*, 3. <https://doi.org/10.3389/fpubh.2015.00148>
- 97 Baek, D., Choi, Y., & Lee, H. (2019). Universal Welfare May Be Costly: Evidence from School Meal Programs and Student Fitness in South Korea. *Sustainability*. <https://doi.org/10.3390/SU11051290>
- 98 Essuman, A., & Bosumtwi-Sam, C. (2013). School feeding and educational access in rural Ghana: Is poor targeting and delivery limiting impact?. *International Journal of Educational Development*, 33, 253-262. <https://doi.org/10.1016/j.ijedudev.2012.09.011>
- 99 Roothaert, R., Mpagole, H., Hunter, D., Ochieng, J., & Kejo, D. (2021). Policies, Multi-Stakeholder Approaches and Home-Grown School Feeding Programs for Improving Quality, Equity and Sustainability of School Meals in Northern Tanzania, 5. <https://doi.org/10.3389/fpubh.2021.621608>
- 100 Mideksa, S., Getachew, T., Bogale, F., Woldie, E., Ararso, D., Samuel, A., Girma, M., Tessema, M., & Hadis, M. (2024). School feeding in Ethiopia: a scoping review. *BMC Public Health*, 24. <https://doi.org/10.1186/s12889-023-17613-4>

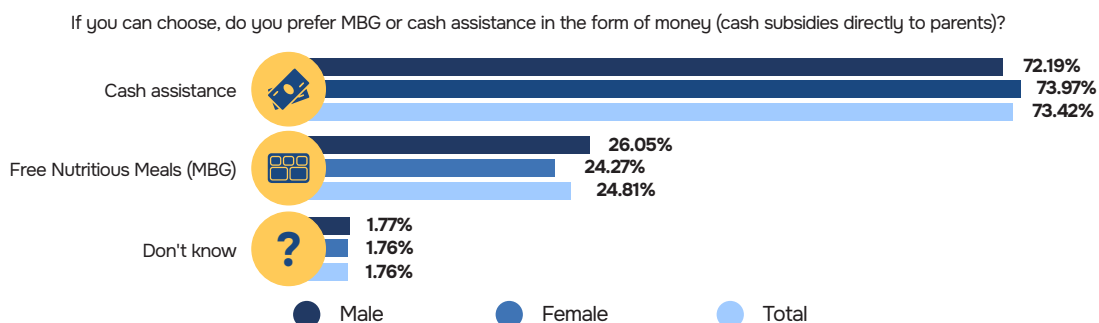
Meanwhile, options such as MBG (12 percent) and household food subsidies (11 percent) suggest that nutritional needs and food security remain relevant, although they do not rank as high as direct financial support. Lower-ranked priorities such as teacher salaries and school infrastructure (each 8 percent), school transportation, as well as nutrition and sanitation training (each 5 percent) show that although education and environmental health are considered important, basic economic needs remain the central concern for most households. Overall, this pattern underscores that cash-based interventions and basic health support are perceived as the most immediate and relevant solutions for addressing household welfare challenges.

Figure 47. **Public Priority Needs**



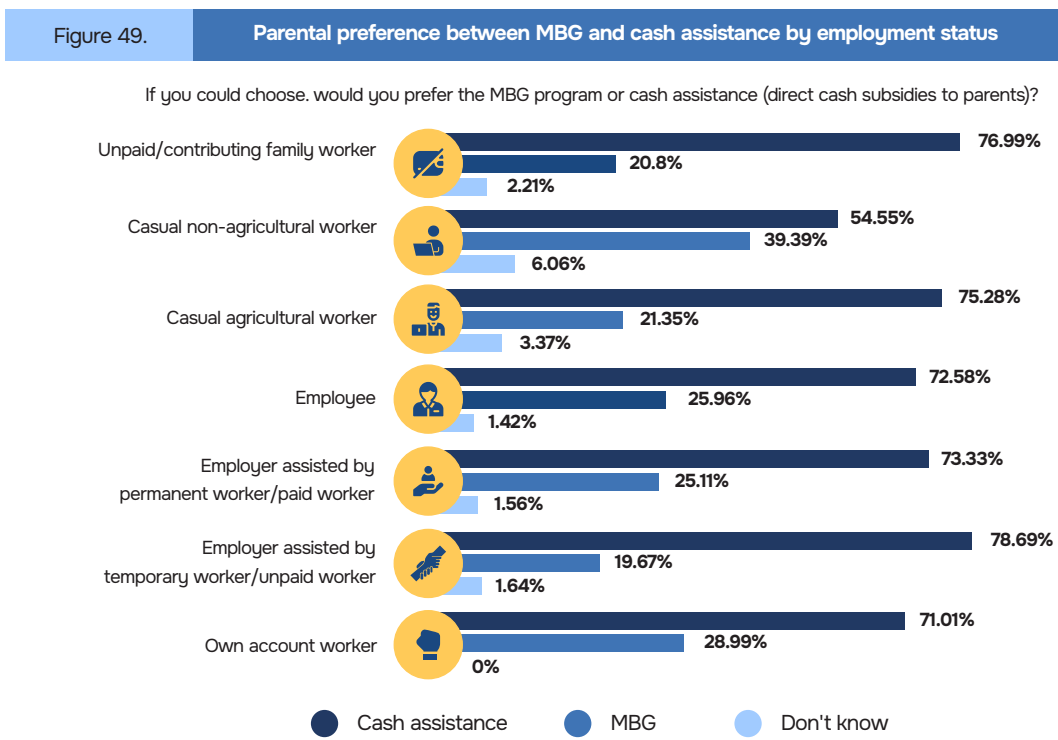
Source: CELIOS Survey. N = 1,721. Respondents were asked, "If you had to choose, what are your top three priorities at this time?" Answer options included: "Free Nutritious Meal (MBG)," "Maternal and child health," "Cash assistance," "School infrastructure," "Teacher salaries," "Scholarships," "School transportation," "Family food subsidies," and "Nutrition and sanitation training."

Figure 48. **Parental preference between MBG and cash assistance**



Sumber: Survei CELIOS. N = 1721. Responden ditanyakan "Jika bisa memilih apakah Anda lebih memilih MBG atau bantuan tunai dalam bentuk uang (subsidi uang langsung ke orang tua)?". Opsi jawaban meliputi: "Bantuan Tunai", "MBG", dan "Tidak Tahu".

The public prefers cash assistance over MBG (see Figure 48). The data show that preference for cash support is overwhelmingly dominant across all occupational categories, with percentages consistently above 70 percent. Cash assistance accounts for 73.42 percent, more than three times higher than support for MBG, which stands at only 24.81 percent. In several groups, such as non-agricultural informal workers, the gap between preferences for cash and MBG is particularly large, and in most other categories, 3 out of 4 respondents tend to choose cash transfers. The low proportion of respondents who prefer MBG indicates that although the program aims to provide nutritious meals for children, parents still perceive that having cash offers greater flexibility in managing household needs, including purchasing nutritious food that aligns with their preferences, eating habits, and their children’s nutritional requirements (see Figure 49).



Source: CELIOS Survey. N = 1,721. Respondents were asked, "If you could choose, would you prefer the MBG program or cash assistance (direct cash subsidies to parents)?" Answer options included "Cash Assistance," "MBG," and "Don't Know."

With cash assistance, parents can decide the type and quality of food most appropriate for their children, adjust to local market prices, and respond to daily changes in household needs that cannot be met through the rigid structure of the MBG program. In addition, the low percentage of "don't know" responses indicates that parents clearly understand their economic needs: they need cash in order to meet their children’s nutritional requirements more comprehensively.

## Does Cash Assistance Get Misused For Online Gambling?

The assumption that poor households are incapable of using money wisely is a misguided and unfounded stereotype, since numerous studies show that when receiving cash assistance, most low income families actually spend it on essential needs such as food, health care, children's education, and household expenses. Wafik and Putra (2023)<sup>101</sup> find that cash transfers are primarily used for essential consumption, particularly increasing rice purchases. Dewi and Andrianus (2021)<sup>102</sup> also show that cash assistance is more effective than in kind aid because it allows households to allocate resources with greater flexibility.

The perspective that they will inevitably use the money for online gambling or wasteful spending is not only demeaning, but also ignores the reality that poor households live under severe economic pressure where every rupiah matters; they are often far more cautious in managing expenses than better off groups. What happens in practice is often the opposite; limited access to stable income forces them to make highly rational financial decisions to ensure family survival. Therefore, rejecting cash assistance on the grounds that recipients will use it irresponsibly disregards both empirical evidence and the lived experiences of poor households who have long struggled to allocate their limited resources as optimally as possible.

In addition, the distribution of cash assistance can be made more effective by channeling it through mothers rather than fathers, since numerous global studies show that when women, especially mothers, receive and manage financial support, the largest share is allocated to children's needs, food, education, and family health (Soegoto et al., 2020).<sup>103</sup> Mothers play a direct role in daily caregiving, which gives them specific insight into nutritional needs and family well being (Telaumbanua and Nugraheni, 2018).<sup>104</sup> Their financial management also tends to be more stable and focused on household welfare, thereby reducing the risk of unproductive spending (Tamimi, 2025).<sup>105</sup>

This approach not only reduces the likelihood of funds being used for less productive purposes, but also strengthens women's position in household decision making. Channeling cash assistance through mothers is therefore an effective and evidence based strategy to ensure that the support is genuinely used to improve the well being of children and families.

International studies show that cash assistance and vouchers have been proven to improve nutritional status, especially when combined within a single intervention package (see Table 18). In Pakistan, the combination of a double cash assistance and food vouchers was the most effective in reducing wasting and stunting. Evidence from Bangladesh, Pakistan, and Niger also shows that cash-food or cash-voucher packages outperform cash alone in reducing acute malnutrition. In Ethiopia, improvements in dietary diversity and reductions in chronic undernutrition only emerged when vouchers were accompanied by nutrition education, underscoring the importance of a comprehensive approach.

<sup>101</sup> Wafik, A. Z., & Putra, I. K. (2023). Mengukur Dampak Program Bantuan Langsung Tunai. *Jurnal Kebijakan Publik*, 14(3), 251.


<sup>102</sup> Dewi, R., & Andrianus, H. F. (2021). Analisis pengaruh kebijakan bantuan langsung tunai (BLT) terhadap kemiskinan di Indonesia periode 2005-2015. *Menara Ilmu: Jurnal Penelitian dan Kajian Ilmiah*, 15(2).

<sup>103</sup> Soegoto, A. S., Lintong, D. N., Mintalangi, S. S., & Soeikromo, D. (2020). Meningkatkan peran ibu rumah tangga dalam pengelolaan keuangan. *JPPM (Jurnal Pengabdian dan Pemberdayaan Masyarakat)*, 4(1), 141-148. <https://doi.org/10.30595/jppm.v0i0.5545>

<sup>104</sup> Telaumbanua, M. M., & Nugraheni, M. (2018). Peran ibu rumah tangga dalam meningkatkan kesejahteraan keluarga. *Sosio Informa*, 4(2).

<sup>105</sup> Tamimi, Y. A. (2025). Analisis Peran Ibu Dalam Pengambilan Keputusan Keuangan Syariah di Rumah Tangga: Sebuah Review Literature Syariah. *Jurnal Ekonomi, Manajemen, Akuntansi dan Keuangan*, 6(3), 19-19. <https://doi.org/10.53697/emak.v6i3.2416>

In Yemen, cash assistance combined with nutrition training improved dietary diversity and children’s height. Meanwhile, in Somalia, both food vouchers and cash-voucher combinations produced positive effects, although their effectiveness varied across contexts. Globally systematic reviews affirm that cash assistance and vouchers generally improve food security and dietary diversity, with outcomes heavily shaped by program design and local conditions.



**Drawing on evidence from these international studies, CELIOS recommends that the universal MBG scheme must be replaced with a targeted approach. Direct meal provision should be concentrated only in priority stunting areas, 3T regions, and pockets of extreme poverty.**

**Table 18. Comparison of the effectiveness of cash transfers, vouchers, and combinations on nutritional status improvement in various countries**

Program/Location	Method	Outcome
Pakistan (REFANI, Action Against Hunger) <sup>106</sup>	Cash, double cash, food vouchers	The combination of double cash transfers and food vouchers improved the reduction of wasting and stunting cases in children; however, food vouchers had several unintended impacts.
Bangladesh, Pakistan, Niger <sup>107</sup>	Cash + food/ vouchers	The combination of cash and food assistance reduced acute malnutrition and stunting; whereas cash assistance alone was less effective.
Ethiopia <sup>108</sup>	Food vouchers + nutrition education	Only an integrated approach succeeded in improving children’s diets and reducing chronic malnutrition.
Yemen <sup>109</sup>	Cash + nutrition training	Improved dietary diversity and height-for-age in the poorest households.
Somalia <sup>110</sup>	Food vouchers, mixed cash/voucher	Impacts on child nutrition were relatively similar, but results varied in the prevention of acute malnutrition.
Global (Systematic Review) <sup>111,112</sup>	Cash/vouchers	Improved food security and dietary diversity, cost-efficient, but highly dependent on the context and program design.

### Cash assistance programs can be accompanied by nutrition education and direct meal provision

Cash assistance paired with nutrition education (nutrition BCC) has been shown to reduce stunting, wasting, and underweight, while also decreasing the incidence of fever, diarrhea, and respiratory infections, and helping lower household poverty levels.

<sup>106</sup> Little, M., Roelen, K., Lange, B., Steinert, J., Yakubovich, A., Cluver, L., & Humphreys, D. (2021). Effectiveness of cash-plus programmes on early childhood outcomes compared to cash transfers alone: A systematic review and meta-analysis in low- and middle-income countries. *PLoS Medicine*, 18. <https://doi.org/10.1371/journal.pmed.1003698>

<sup>107</sup> Ahmed, A., Hoddinott, J., & Roy, S. (2019). Food Transfers, Cash Transfers, Behavior Change Communication and Child Nutrition: Evidence From Bangladesh. *Food Laws*. <https://doi.org/10.2499/p15738coll2.133420>

<sup>108</sup> Han, Y., Kim, H., & Park, S. (2021). The Roles of Nutrition Education and Food Vouchers in Improving Child Nutrition: Evidence from a Field Experiment in Ethiopia. *Journal of health economics*, 80, 102545. <https://doi.org/10.1016/j.jhealeco.2021.102545>

<sup>109</sup> Kurdi, S. (2021). The nutritional benefits of cash transfers in humanitarian crises: evidence from Yemen. *World Development*, 148, 105664. <https://doi.org/10.1016/J.WORLDDEV.2021.105664>

<sup>110</sup> Doocy, S., & Tappis, H. (2017). Cash-based approaches in humanitarian emergencies: a systematic review. *Campbell Systematic Reviews*, 13, 1-200. <https://doi.org/10.4073/CSR.2017.17>

<sup>111</sup> De Groot, R., Palermo, T., Handa, S., Ragno, L., & Peterman, A. (2017). Cash Transfers and Child Nutrition: Pathways and Impacts. *Development policy review : the journal of the Overseas Development Institute*, 35, 621 - 643. <https://doi.org/10.1111/dpr.12255>

<sup>112</sup> Manley, J., Balarajan, Y., Malm, S., Harman, L., Owens, J., Murthy, S., Stewart, D., Winder-Rossi, N., & Khurshid, A. (2020). Cash transfers and child nutritional outcomes: a systematic review and meta-analysis. *BMJ Global Health*, 5. <https://doi.org/10.1136/bmjgh-2020-003621>

The combination of cash assistance and direct meal provision also demonstrates significant improvements, including short term reductions in wasting, long term reductions in stunting, and declines in common illnesses. When cash assistance is linked to primary health care services, the impacts extend to reduction in wasting and underweight, lower risk of illness, and even declines in mortality rates.

Table 19. Impact of various cash intervention combinations on nutrition, health, child development, behavior & parenting, and poverty

Intervention	Nutrition	Child Health	Child Development	Behavior & Parenting	Economy/Poverty
<b>Cash + Nutrition Education (Nutrition BCC)</b>	↓ Stunting, Wasting, Underweight	↓ Fever, Diarrhea, Cough/Cold	-	-	↓ Poverty
<b>Cash + Direct Feeding</b>	↓ Wasting (short-term), ↓ Stunting (long-term)	↓ Common Illnesses	-	-	-
<b>Cash + Primary Health Services</b>	↓ Wasting, ↓ Underweight	↓ Risk of illness, ↓ Mortality	-	-	-
<b>Cash + Psychosocial Stimulation</b>	-	-	↑ Cognitive & General Development	-	-

Source: Adapted by CELIOS from Little et al. (2021)



Based on previous research from various countries, then CELIOS proposes giving cash (can be e-money or vouchers or cash) to vulnerable groups and education on preparing nutritious food in the household.

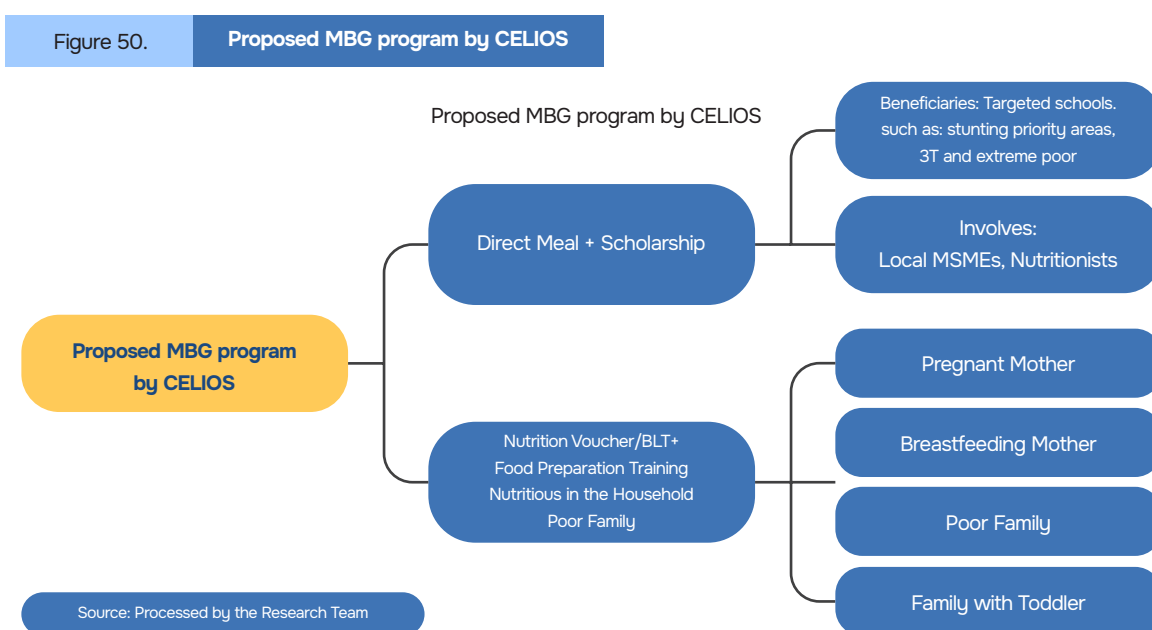
## The MBG Scheme Proposed By CELIOS

CELIOS proposes a more tangible version of the MBG program consisting of two core components: (1) Direct Meals (limited free meals) paired with scholarships, and (2) Nutrition Vouchers/ Cash Transfers, combined with nutrition education for households.

CELIOS's proposed MBG scheme is developed through careful consideration and analysis of field data. The proposal draws on Figure 47, which reflects the top four priority needs identified by the public: cash assistance, maternal and child health, scholarships, and MBG (direct meals). In addition, the proposal integrates insights from Tables 18 and 19, which show that nutrition improvement programs are more effective when accompanied by education and awareness on nutritious food. The shift from a universal to a targeted MBG approach is also informed by the analysis presented in Table 17. This multi-layered analytical approach ensures that CELIOS's proposal is based on data, empirical studies, and comprehensive assessments that can withstand public scrutiny.

For the Direct Meal (limited free meal) and Scholarship component, this scheme focuses on providing free meals only to schools located in priority stunting areas, 3T regions, and areas with extreme poverty. To ensure nutritional quality and implementation efficiency, meal provision is carried out by schools in collaboration with local MSMEs, under the direct supervision of regional nutritionists. In addition to meals, students from low-income families also receive educational scholarships to secure sustained access to learning.

Meanwhile, the Nutrition Voucher/Cash Transfer and Household Nutrition Education component targets pregnant women, breastfeeding mothers, households with young children, and poor families. CELIOS proposes providing nutrition vouchers or cash transfers specifically designated for purchasing nutritious foods. This scheme (see Figure 50) is complemented by education and training on preparing nutritious meals at the household level, ensuring that the intervention not only supplies food but also strengthens family capacity to manage their children’s nutrition.



**If converted into cash,  
beneficiaries could receive up to  
Rp50,000 per day, whereas through  
the MBG program the value is only  
around Rp10,000 per day.**

Using an annual budget of Rp335 trillion and assuming payments are made five days a week, we can estimate the number of beneficiaries, which includes low-income students, the 3B group (pregnant women, breastfeeding mothers, and toddlers), as well as students in 3T regions.

Of the 53.14 million kindergarten to high school students in Indonesia<sup>113</sup>, and with a child poverty rate of 11.8 percent (UNICEF, 2023)<sup>114</sup>, an estimated 6.3 million students are poor. Adding approximately 4.8 million pregnant women per year (BKKBN, 2021)<sup>115</sup>, around 30 million toddlers (BPS, 2023)<sup>116</sup>, and 3 million students in 3T regions (based on 20,573 schools x 150 students)<sup>117</sup>, the total number of beneficiaries reaches roughly 34.07 million people. Although overlaps across these groups are possible, this estimate assumes no overlap to simplify the calculation.

With this total number of beneficiaries, a budget of Rp335 trillion translates to approximately Rp9.8 million per person per year, or about Rp820,000 per month. If distributed evenly across 260 payment days (five days per week), the amount is roughly Rp38,000 per day. However, this daily figure could increase to nearly Rp50,000 per day if the actual number of beneficiaries is smaller due to overlap across groups (for example, toddlers from low-income families or poor students who also live in 3T regions), meaning the effective number of beneficiaries is not 34 million but perhaps only 28 to 30 million people. Under a stricter scenario with fewer beneficiaries or fewer effective payment days, the daily assistance amount could reasonably reach around Rp50,000 per recipient per day.

## Message to Prabowo Subianto:

### MORATORIUM AND TOTAL OVERHAUL OF THE MBG PROGRAM

#### 10 Radical Steps to Reform the MBG Program

##### 1 Nationwide Moratorium and Total Audit

- Temporarily suspend all expansion and the establishment of new centralized kitchens (SPPG).
- Redirect all efforts toward comprehensive evaluation and systemic improvement.

##### 2 Conduct a Comprehensive Audit of All Operating SPPG, covering:

- Food safety and nutritional standards.
- Workforce effectiveness and labor governance.
- Financial governance and contract compliance.
- Publicly disclose the audit findings so the public can clearly assess actual conditions and the level of accountability.

##### 3 Contract Freeze and Settlement of Outstanding Obligations

- Settle all outstanding payment delays (wages and vendor payments) up to November 2025, with priority given to frontline workers and local suppliers. Once all arrears have been cleared, freeze all contracts and new disbursements until the reform process and comprehensive audits are fully completed.

<sup>113</sup> Yonatan, A. Z. (2023, October 16). Ada Lebih dari 50 Juta Murid Indonesia di Tahun Ajaran 2023/2024. GoodStats Data. <https://data.goodstats.id/statistic/ada-lebih-dari-50-juta-murid-indonesia-di-tahun-ajaran-20232024-VmWri>

<sup>114</sup> UNICEF Indonesia. (2024, May 27). Laporan Tahunan 2023 UNICEF Indonesia. <https://www.unicef.org/indonesia/id/laporan/laporan-tahunan-2023-unicef-indonesia>

<sup>115</sup> Rahmawati, D. (2023, February 16). BKKBN: Tak Ada Resesi Seks di Indonesia, 4,8 Juta Orang Hamil pada 2021. Detik.com. <https://news.detik.com/berita/d-6572364/bkkbn-tak-ada-resesi-seks-di-indonesia-4-8-juta-orang-hamil-pada-2021>

<sup>116</sup> Yonatan, A. Z. (2024, July 22). Hari Anak Nasional 2024: Lebih dari 10% Penduduk Indonesia Adalah Anak Kecil. GoodStats. <https://goodstats.id/article/hari-anak-nasional-2024-lebih-dari-10-penduduk-indonesia-adalah-anak-kecil-nNnnQ>

<sup>117</sup> Amaliya, T. M. (2025, May 14). Memperjuangkan pendidikan yang setara di daerah 3T. Antara News. <https://www.antaraneews.com/berita/4832069/memperjuangkan-pendidikan-yang-setara-di-daerah-3t>

#### 4 Leadership Restructuring and Accountability

- Remove the Head of BGN and senior officials who failed to ensure food safety oversight.
- Appoint an independent professional acting leadership drawn from nutrition or public health experts.
- Establish a new organization based on merit and competence, staffed by professionals in nutrition, dietetics, food safety, public administration, and public finance.

#### 5 Establishment of Inter-Agency MBG Reform Task Force

**Members: Corruption Eradication Commission (KPK), Development Finance Comptroller (BPKP), Food and Drug Authority (BPOM), Ministry of Health, Ministry of Education, Indonesian Pediatric Society (IDAI), and Universities.**

**With the following mandates:**

- Conduct audits, system reforms, and corrective actions within a 100 day timeframe.
- Oversee the re-selection of contractors, kitchens, and payment systems.
- Initiate legal proceedings for contract violations, price mark ups, and breaches of food safety standards.
- Publish reform progress reports every 30 days throughout the Task Force's 100 working day mandate.

#### 6 Decentralization of the System and the Introduction of New Implementation Standards, Applied Exclusively to Targeted Schools

- Elimination of the centralized large scale kitchen model.
- Replace it with a decentralized model based on schools and MSMEs, under the supervision of regional nutritionists.

#### 7 Implement National Menu Standards Based on the Following Principles:

- The use of local and fresh foods ingredients, free from ultra processed foods (UPF), and aligned with regional dietary cultures.

#### 8 Transform the Direction of the Program (Post Audit)

Announce a national restart of the MBG program under two targeted schemes:

##### **A. Direct Meals (Limited Free Meals) + Scholarships**

Implemented only in targeted schools located in stunting priority areas, 3T regions, and areas of extreme poverty. Implementation is carried out by schools and local MSMEs, under the direct supervision of regional nutritionists.

##### **B. Nutrition Vouchers/Cash Transfers + Households Nutrition Training**

Targeted to pregnant women, breastfeeding mothers, and households with young children from low-income families. Assistance is delivered through nutrition specific food vouchers or conditional cash transfers, allowing households to choose food ingredients that match local contexts. The objective is to strengthen household nutrition security and reduce the risk of stunting.

## 9 Budget Reallocation and Efficiency

- Conduct budget cleaning to eliminate overlaps and inefficiencies in MBG funding.
- Reallocate approximately Rp335 trillion in a targeted and accountable manner:
  - Rp112 trillion allocated to targeted MBG programs, including direct meals and nutrition vouchers.
  - Approximately Rp223 trillion should be returned to the education budget to support the improvement of human capital quality.

## 10 Permanent Consolidation Phase (Post-100 Days)

- Establish a restructured MBG system that is sustainable and adaptive, featuring:
  - Cross-agency and public oversight.
  - Integration with national nutrition programs coordinated by the Ministry of Health, the Ministry of Education, and the Ministry of Social Affairs.
  - Digital mechanisms for payments, reporting, and continuous auditing.
  - Develop a public digital dashboard that provides daily menus, food safety test results, locations of active kitchens, and accessible public complaint channels.

---

# **(NOT) FREE AND (NOT) NUTRITIOUS MEALS**



**Center of Economic and Law Studies  
(CELIOS)**

Jl. Banyumas, Menteng,  
Central Jakarta

E : [admin@celios.co.id](mailto:admin@celios.co.id)  
W : [celios.co.id](http://celios.co.id)