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Policy Paper

A Policy Implementation Review of the Free Nutritious Meal (MBG) Program

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Abstract

This study evaluates the early implementation of Indonesia's Free Nutritious Meal Program (Makan Bergizi Gratis/MBG) through a multidimensional policy review. Anchored in health, education, economic, and socio-environmental aspects, the study synthesizes national data, international best practices, and case comparisons with similar programs in Brazil, India, and Finland. The findings highlight that while MBG has significant potential to improve human capital, its direct impact on stunting and anemia remains unverified due to limited targeting of the first 1,000-day window and the absence of formal outcome tracking. The program demonstrates positive signs of improved school attendance and MSME engagement, yet faces implementation challenges related to food safety, logistics, and regulatory coherence. A SWOT analysis is employed to identify key strategic levers, indicating that realignment of program focus, multisectoral integration, and enhanced monitoring are essential to achieving the MBG's long-term objectives. The study offers critical insights for policymakers to refine MBG and ensure its alignment with national development goals and global nutrition commitments.

Keywords: Free School Meals; Program Evaluation; Indonesia.

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1. Introduction

Indonesia is entering a critical phase of demographic transition, experiencing a demographic bonus projected to peak between 2020 and 2030 (Andriani et al., 2023; Muhyiddin et al., 2024; Ulhaq & Wahid, 2022). This window of opportunity, if managed strategically could catalyze the realization of the Golden Indonesia Vision 2045 by unlocking the country's full human capital potential (Badawi et al., 2024; Eze et al., 2023; Rahmawati, 2025). Yet, despite progress in several indicators, Indonesia continues to face structural bottlenecks in nutrition, education, and healthcare (Andriani et al., 2023; Rah et al., 2021; Suparman & Muzakir, 2023). Its Human Development Index (HDI) ranks 113th globally and 19th among 25 countries in Asia and the Pacific (UNDP, 2025), and lags behind many upper-middle-income countries, especially in key indicators such as stunting, anemia, and education access (WHO, 2025). These indicators collectively suggest that Indonesia's human capital development remains below that of its peer countries.

Globally, free school meal programs have proven to be effective tools to combat malnutrition, enhance school participation, and reduce socio-economic disparities. Large-scale, multisectoral initiatives in Brazil, India, and Finland have demonstrated how structured feeding programs, embedded in education and health systems, can improve child nutrition, boost school attendance, and generate local economic impacts (Sidaner et al., 2013; Natekar et al., 2022; Tikkanen & Urho, 2009). These examples also emphasize the importance of legal frameworks, nutritional standards, and strong monitoring systems to ensure long-term effectiveness and public accountability. In contrast, Indonesia's current nutrition interventions remain fragmented, and coordination challenges continue to impede outcomes, especially in the face of persistent food insecurity and poverty (Purwono et al., 2021; Rah et al., 2021).

In response, the Government of Indonesia established the National Nutrition Agency (*Badan Gizi Nasional*/BGN) through Presidential Regulation No. 83 of 2024, and launched the Free Nutritious Meal (*Makan Bergizi Gratis*/MBG) program as a national priority in early 2025 (BGN, 2025e). The program seeks to improve children's nutrition and school engagement, while also stimulating inclusive economic growth through the engagement of MSMEs and community-based food providers. However, by mid-2025, implementation progress remained modest: only 5.6 million beneficiaries (4.23% of the annual target) were reached through 1,873 Nutrition Service Units (*Satuan Pelayanan Pemenuhan Gizi*/SPPG) (BGN, 2025c). In addition, the program's funding, amounting to IDR 121 trillion in 2025 as a result of the government's fiscal efficiency policy is exposed to considerable management risks. From a policy standpoint, the MBG program also lacks a strong legal foundation in the form of a dedicated law, which is essential as seen in many other countries to ensure program quality, safety, and integration into the education system (Kartika & Hermawan, 2024).

While the MBG initiative marks an ambitious shift toward multisectoral nutritional intervention, its potential impact on stunting reduction, anemia, and human capital development remains uncertain due to weak targeting during the critical first 1,000 days and limited outcome monitoring (CISDI, 2025). This study, therefore, aims to evaluate the early implementation of the MBG program through a multidimensional policy review. By integrating national data, international benchmarks in three countries, and SWOT analysis, the paper identifies key implementation gaps and offers strategic policy recommendations to enhance the program's effectiveness and sustainability. The findings are expected to support evidence-based policymaking and align MBG with Indonesia's broader development agenda and global nutrition commitments.

2. Methods

This study employs multidimensional descriptive analysis and a Systematic Literature Review (SLR) to identify the current conditions of MBG implementation in Indonesia as well as similar programs in other countries. The findings were then further analyzed using a SWOT framework. The study utilizes secondary data sourced from the National Nutrition Agency (BGN), Statistics Indonesia (BPS), Ministry of Finance (Kementerian Keuangan), and online mass media.

a. Multidimensional Descriptive Policy Analysis

This study adopts a multidimensional descriptive policy analysis to assess the implementation of the Free Nutritious Meal Program (MBG) in Indonesia. The analysis systematically reviews policy documents, official reports from the National Nutrition Agency (BGN), and secondary data sources to evaluate the program across four key dimensions: (i) health; (ii) education; (iii) economic; and (iv) socio-environmental aspects. Each dimension is examined through a set of relevant indicators to identify implementation gaps, assess progress toward mid-2025 targets, and inform evidence-based policy recommendations.

b. Systematic Literature Review (SLR)

The SLR method is used to identify and synthesize experiences from the implementation of similar free meal programs in other countries. This method follows three stages as outlined by Kitchenham & Charters (2007): (i) review planning; (ii) conducting the review and synthesis; and (iii) reporting the review findings. During the planning stage, the key research question was defined: How have free lunch/meal programs been implemented and what impacts have they had in other countries? Literature was collected from online sources (Google Scholar and Scopus). The search used the keywords "evaluation of universal free meal program" and "economic impact of free meal program". The literature included in this study was selected based on specific criteria, specifically its focus on the implementation of national-scale free lunch or meal programs and their associated economic impacts, with particular attention given to universal free meal initiatives in Brazil, India, and Finland-three countries chosen for their welldocumented outcomes and relevance as international benchmarks (Natekar et al., 2022; Sidaner et al., 2013; Tikkanen & Urho, 2009). Relevant sources were subsequently examined through a structured review and synthesis process. To strengthen the comparative dimension, a targeted document analysis was also undertaken to map the policy instruments of Brazil, India, and Finland. Government regulations, official program guidelines, and policy briefs were prioritized as primary sources, while peer-reviewed articles and reports from international organizations (e.g., WFP, WHO, World Bank) were used for triangulation.

c. SWOT Analysis

The SWOT (Strengths, Weaknesses, Opportunities, and Threats) approach was applied to further analyze the findings as a tool for program evaluation. The SWOT framework was also used to categorize findings into internal and external dimensions, providing a structured map of key insights to support the formulation of policy recommendations.

3. Results and Discussions

a. Implementation of Free Nutritious Meal Program in Indonesia

The MBG program was launched on January 6, 2025, under the coordination of the BGN as part of the government's effort to improve the nutritional status of the Indonesian population in support of the Golden Indonesia 2045 vision. The implementation of MBG involves cross-sectoral collaboration at both central and local levels. At the national level, BGN, as the lead institution, collaborates with the Ministry of Primary and Secondary Education, Ministry of Religious Affairs, Ministry of Health, Ministry of Home Affairs, Ministry of Villages and Development of Disadvantaged Regions, Ministry of Marine Affairs and Fisheries, Ministry of Finance, Ministry of National Development Planning, Ministry of Cooperatives and SMEs, as well as the Indonesian National Armed Forces (*Tentara Nasional Indonesia*/TNI) and the National Police (*Polisi Republik Indonesia*/POLRI) (BGN, 2024). At the local level, stakeholders include local governments, village-owned enterprises (BUMDes), MSMEs, schools, and community health workers (Posyandu cadres).

For the full year of 2025, the MBG program requires a budget of IDR 121 trillion, with 80 percent sourced from the education budget and 20 percent from the health budget. The target for the year is to operate 30,000 SPPG and to reach 82.9 million beneficiaries. However, as of the first semester of 2025, the program's achievements remain below target (Table 1). As of June 2025, the number of operational SPPGs and beneficiaries reached only 93.9 percent of the monthly target, or 6.2 percent of the annual target. To address this challenge, BGN plans to accelerate MBG implementation in the second semester of 2025 (BGN, 2025c; Putranto, 2025). Additional operational SPPGs will be established through two

schemes: direct development by the government and partnerships with community-based businesses or MSMEs, such as restaurants and catering services. These partners must meet the SPPG requirements, including the capacity to serve up to 3,000 beneficiaries per partner (BGN, 2025a). BGN is also ensuring that applicants are located in areas with insufficient SPPG coverage. As of June 2025, a total of 22 thousand businesses have registered to become MBG partners (BGN, 2025f). These applications will be processed further by BGN and are scheduled for rollout in the second half of 2025.

Month/ Year	MBG Budget Realization (in Billion Rupiah)	Operational SPPG Units		Total Beneficiaries*	
		Realization	Target	Realization	Target
January	45	245	190	735,000	570,000
February	324	570	726	1,710,000	2,178,000
March	1,058	941	1,009	2,823,000	3,027,000
April	2,375	1,102	1,286	3,306,000	3,858,000
May	3,298	1,588	1,286	4,764,000	3,858,000
June	5,000	1,873	1,994	5,619,000	5,982,000
Full Year 2025	121,000	-	30,000	-	90,000,000

Table 1. MBG Program Implementation Targets and Achievements

The implementation of the MBG program at the regional level faces several strategic challenges. Infrastructure limitations, particularly the availability of SPPG kitchens, are being addressed through the addition of new facilities involving MSMEs and the renovation of existing ones. Human resource readiness and the availability of equipment in each service unit also require early preparation and improved procurement processes (BGN, 2025d). Other challenges include uneven distribution of food ingredients, which requires coordination with local governments and outreach to local producers. Nutrition education for children who are picky eaters also requires creative approaches, such as nutrition campaigns and attractive meal presentations. Food safety remains a critical issue that demands close cooperation between BGN and the Food and Drug Monitoring Agency (Badan Pengawas Obat dan Makanan/BPOM) (Askar et al., 2025; BGN, 2025d). Ensuring program effectiveness requires systematic monitoring, including regular data collection on children's health and development, to achieve measurable gains in human capital quality.

On the other hand, BGN recorded more than 1.3 thousand cases of food poisoning across 10 provinces in Indonesia (CNN Indonesia, 2025; Safitri & Ramadhan, 2025; Yulika, 2025). This indicates weak oversight of food safety, inadequate kitchen sanitation, and unequal food distribution. In addition, both CISDI (2025) and Indonesia Corruption Watch (2025) found that the program lacks a strong regulatory framework and is overly centralized within BGN and the Ministry of Defense. The process of appointing SPPG partners is also seen as lacking transparency and carries potential conflicts of interest. Moreover, a survey by Celios (Askar et al., 2025) reported that 40 percent of recipients complained about the quality of the food, and 46 percent highlighted uneven distribution. Regarding waste, it is estimated that each student generates between 50–100 grams of food waste per day. This equates to approximately 2,400 tons per day, or 624,000 tons annually.

The program demonstrates strong potential to improve access to nutrition (Jessiman et al., 2023; Long et al., 2021). However, challenges related to food quality, distribution, food safety supervision, governance, and cost efficiency must be addressed urgently. Current data remain preliminary and require routine updates to ensure the program yields tangible impacts on the health and educational quality of Indonesia's younger generation. The MBG program is designed with ambitious targets and aims to deliver broad-scale impact in a relatively short time. Thus, it requires careful planning and strengthened institutional capacity at all levels. So far, most performance indicators focus on coverage and service quantity, while long-term outcomes—such as improved nutritional status—require more time to be assessed accurately. In terms of operations, the program faces challenges in scaling up human resource capacity to support expansion across diverse regions. Therefore, the development of phased and adaptive implementation models should be considered, such as integration with existing programs, leveraging local

^{*)} Total number of beneficiaries is calculated based on the service capacity of each SPPG unit, which is 3,000 individuals. Source: BGN, 2025b; DPR RI, 2025 (processed)

networks, or launching community-based pilot projects. These strategies may help ensure the program's nutrition objectives are achieved effectively and sustainably.

Program governance remains a critical unresolved issue. The absence of a robust legal framework and the lack of transparency in appointing SPPG partners create risks of access inequality and potential monopolies. The 1,300 recorded food poisoning cases also underscore the urgency of improving food safety standards, including kitchen hygiene, food quality, and distribution monitoring. To achieve full implementation by the end of 2025, the government must strengthen data-based monitoring and evaluation systems, ensure that all performance claims are independently verified, and manage the program with transparency, accountability, and evidence-based practices.

b. Implementation of Free Meal Program in Peers Countries

Several countries have implemented programs similar to MBG. As of 2022, universal school meal programs (Universal Free Meals/UFM) had reached nearly 418 million children worldwide (WFP, 2023). Studies by Bundy et al. (2024), Sarjito (2024), and WFP (2025b) highlight that UFMs can improve education outcomes through increased student attendance and participation. These programs have also helped combat malnutrition, reduce stunting, improve incomes in the agriculture sector, and shorten food supply chains. Table 2 shows reference for UFM implementation in Brazil, India, and Finland. The three case countries were selected as comparative cases due to their long-standing, large-scale school meal programs that have demonstrated measurable impacts on nutrition, education, and social equity through multisectoral integration and strong policy frameworks.

Country **Program Name Key Characteristics Outcomes** Brazil National School Launched in 1954 and expanded in 2003; Covers over 45 million students; supports local family farming; Feeding Program integrated into national food and (PNAE) nutrition security strategy; multisectoral increased income of small farmers by 23% to 106%. coordination; universal right for all public school students from daycare to adult education. India Mid-Day Meal Initiated in 1995; renamed PM POSHAN Reaches 118 million children; Scheme (PM POSHAN) improved child nutrition (13in 2021; provides at least 300 calories and 8-12g protein per meal for students 32% increase in HAZ); boosts in public and aided schools and religious enrollment and attendance schools; funded with approx. US\$1.5 among poor, marginalized, and billion (2024-25). girls. Finland Finnish Free School Operating since 1948; integrated into Benefits 850 thousand students Meal Programme national curriculum; budget of €302.9 daily: reduces burden on lowmillion in 2022 (€572 per student income families; supports local annually); emphasizes food quality, economy through procurement nutrition education, and environmental from local farmers. sustainability.

Table 2. References of Free Nutritious Meal Programs in Other Countries

Source: Bandoni et al. (2024); de Amorim et al. (2022); Fagundes et al. (2022); Finland Education Hub (2023); Guio (2023); Hock et al. (2022); IBEF (2025); Kaur (2021); Kuusipalo & Manninen (2023); Natekar et al. (2022); NEXT IAS (2021); Patil (2022); Raveenthiranathan et al. (2024); Sidaner et al. (2013); Simanjuntak (2025); Tikkanen & Urho (2009); Toossi (2024); Velawati et al. (2021); WFP (2025a); Author's Analysis, processed

Although implemented in different institutional settings, the free meal programs in Brazil, India, and Finland offer valuable policy lessons that Indonesia can adapt to strengthen the MBG initiative. Brazil's National School Feeding Program (PNAE) guarantees universal access for all public-school students through a strong legal mandate, while requiring a portion of food to be procured from local farmers—enhancing both nutrition and rural livelihoods (Sidaner et al., 2013; de Amorim et al., 2022). India's PM POSHAN program applies a decentralized approach supported by national nutrition standards and third-party evaluations, enabling broad coverage including remote and underserved areas (Natekar et al., 2022; Raveenthiranathan et al., 2024). Both models highlight the importance of clear legal frameworks, transparent procurement, and results-based monitoring elements currently underdeveloped in Indonesia's MBG program (Kartika & Hermawan, 2024; Indonesia Corruption Watch, 2025).

Finland, on the other hand, offers a mature model that integrates free meals into the national education system since 1948, combining nutrition quality, food literacy, and student participation in menu planning (Tikkanen & Urho, 2009; Kuusipalo & Manninen, 2023). This approach has proven effective in

reducing food waste and increasing student satisfaction, largely due to the program's emphasis on early behaviour change and shared responsibility. If MBG is to deliver long-term impact on Indonesia's human capital, the integration of nutrition education into the school curriculum and student-centered meal designs should be prioritized. Drawing from these three country models, Indonesia can address current weaknesses in MBG, ranging from legal foundations and operational design to evaluation systems while adapting best practices to suit its own sociopolitical context.

c. An Evaluation of Free Nutritious Meal Program in Indonesia

To ensure the effectiveness and impact of the MBG program, comprehensive evaluation indicators are needed, covering the dimensions of health, education, economy, and socio-environment (Carlisle et al., 2023; Cohen et al., 2021; Jessiman et al., 2023; Long et al., 2021; Spill et al., 2024). Monitoring these indicators provides measurable and tangible benefits for both the public and the government, particularly in the allocation of the MBG program budget for 2025 and in supporting the achievement of the Golden Indonesia 2045 vision, including reducing stunting prevalence.

Table 3. Key Evaluation Indicators of the MBG Program

Indicators	Description	Existing Condition/ Achievements	Reference
I. Health Aspects			
Stunting Prevalence	Assessment of chronic nutritional status in children	The reported decline in stunting prevalence—from 21.5% in 2023 to 19.8% in 2024—reflects national-level progress, though not yet directly attributable to the MBG Program.	Indonesia's stunting reduction target under the Stunting Reduction Acceleration Program aligns with the WHA goal of a 40% reduction by 2025.
Anemia Rate among Pregnant Women and Adolescents	A key women's health indicator with intergenerational impact	The decline in anemia rates among pregnant women from 37% in 2023 to 34% in 2024 is largely attributed to existing maternal health programs such as TTD and PMT led by the Ministry of Health.	International best practices show that multisectoral approaches can effectively reduce anemia; for instance, India's Anaemia Mukt Bharat Campaign lowered anemia prevalence from 50% to 45% (2015–2020) through coordinated efforts across health and education sectors.
Nutrition Knowledge and Behavior	Behavioral change toward healthy eating and improved nutrition literacy among students and parents	No data yet	Brazil's Programa Nacional de Alimentação Escolar (PNAE) has reshaped students' views on food by promoting balanced diets and healthy eating habits through integrated nutrition education within the school system.
II. Education Aspect			
Student Participation Rate	Student engagement in formal education	Reports from several schools in Bogor Regency and South Lampung indicate a 2–3% increase in student attendance following the implementation of the MBG program.	India's Mid-Day Meal (MDM) program significantly improved school attendance following the introduction of the lunch scheme. It also led to a marked increase in enrollment and attendance among primary school children, particularly those from poor households and marginalized caste groups.
National PISA Score (Programme for International Student Assessment)	Educational outcomes and learning quality as proxies for the long-term productivity of human capital	Teachers have observed improved classroom concentration among students, although academic impacts—such as changes in PISA	According to the National Medium-Term Development Plan (RPJMN), Indonesia's national PISA target scores for 2025 are: 396 in reading, 404 in mathematics, and 416 in science. In comparison, the 2022 national

Indicators	Description	Existing Condition/ Achievements	Reference	
		scores—cannot yet be measured in the short term.	PISA scores were: 359 in reading, 366 in mathematics, and 383 in science.	
III. Economic Aspect				
Efficiency and Transparency of Budget Allocation	Cost per meal relative to FAO standards, along with public reporting on MBG fund management	No data yet	Meal costs under the MBG program (IDR 8,500–14,000) exceed initial estimates and pose budget efficiency challenges, despite being lower than the FAO's nutritious diet benchmark of IDR 22,126 per day.	
Engagement of MSMEs and Local Communities	Number of MSMEs and local community groups engaged	The program successfully engaged over 700 local MSMEs and cooperatives. According to a study by INDEF, this engagement led to a monthly income increase of up to 33.68% for participating MSMEs.	Estimates of the MBG program's multiplier effect, based on pilot project implementation, indicate substantial economic impact. The projected MBG budget allocation of IDR 71 trillion in 2025 is expected to contribute to GDP growth by 0.06%, equivalent to an increase of IDR 14.61 trillion in nominal GDP for that year.	
IV. Socio-Environme	nt Aspect			
Satisfaction Level of MBG Beneficiaries	Satisfaction levels of students, parents, and teachers with the program	No data yet	The Finnish Free School Meal Programme integrates free meals with nutrition education in the national curriculum, fostering healthy eating habits and student involvement—resulting in nearly 100% primary school participation and high satisfaction among students and parents.	
Volume of Food Waste	Volume of leftover food as an indicator of consumption efficiency	No data yet	Based on prior study, there's a correlation between food waste—particularly of staple foods, plant-based side dishes, and vegetables—and satisfaction with meal services. Higher satisfaction among students is associated with a decrease in leftover food.	
Resilience of SPPG and Food Distribution	Continuity of SPPG operations and reliability of food logistics over a 6–12 month period	No data yet	First launched in 1948, Finland's Free School Meal Programme has been running for over 77 years, contributing significantly to the long-term development of the country's human capital.	
Grievance and Response Mechanism	Responsiveness of grievance channels related to MBG reporting	The Ministry of Administrative and Bureaucratic Reform (KemenPAN-RB) facilitated public complaints regarding the MBG Program through the SP4N-LAPOR! app, which recorded 27 reports between October 2024 and January 2025, with a follow-up rate of 31.8%.		

Source: Alta et al. (2023); Alves Da Silva et al. (2023); Apriliani et al. (2024); Azevedo et al. (2023); Boklis-Berer et al. (2021); Carlisle et al. (2023); de Amorim et al. (2022); De Pee et al. (2021); Fridayani et al. (2024); Guio (2023); IMF Asia and Pacific (2024); Joe et al. (2022); Kementerian Sekretariat Negara RI (2025); Kishore et al. (2020); Kitaoka (2018); Kuusipalo & Manninen (2023); Laitinen et al. (2023); Ludher & Nasution (2024); Nasution (2024); Natekar et al. (2022); Okada (2025); OPSI (2019); Rai et al. (2023); Salsabillah et al. (2023); Tikkanen & Urho (2009); Tuliende et al. (2024); Tuorila et al. (2015); Waling et al. (2016); Wildhani et al., (2023); Author's Analysis, processed

From a health perspective, the reported reductions in stunting and anemia in certain regions represent a positive trend, but current evidence does not support a direct attribution to the MBG Program. The decline in national stunting prevalence—from 21.5% in 2023 to 19.8% in 2024—is more plausibly linked to the pre-existing Stunting Reduction Acceleration Program (*Program Percepatan Penurunan Stunting*/PPS), which has been in effect since 2018 and includes targeted interventions such as the Conditional Cash Transfer (*Program Keluarga Harapan*/PKH) supporting pregnant women and toddlers during the first 1,000 days of life. While MBG holds potential, it has not yet fully prioritized this critical demographic window. Without a strategic realignment toward the first 1,000 days, its contribution to stunting reduction by 2025 is expected to remain limited. Similarly, the observed decrease in anemia

prevalence among pregnant women—from 37% in 2023 to 34% in 2024 in some areas—is largely attributable to established maternal and child health programs under the Ministry of Health, such as Iron Tablet Supplementation (*Pemberian Tablet Tambahan Darah*/TTD) and Supplementary Feeding (*Pemberian Makanan Tambahan*/PMT). No official data has been released by BGN confirming a measurable impact of MBG in this regard. Lessons from international best practices, including India's Anaemia Mukt Bharat Campaign, underscore the importance of multisectoral coordination—particularly across health and education systems—in achieving significant outcomes in anemia reduction.

In terms of the education aspect, preliminary reports from schools in Bogor Regency and South Lampung indicate a 2–3% increase in student attendance following the implementation of the MBG Program. This mirrors the success of India's Mid-Day Meal (MDM) scheme, which significantly improved both enrollment and attendance among primary school children, particularly those from low-income and marginalized communities. In addition to improved attendance, teachers have observed enhanced student concentration during classroom activities. However, broader academic outcomes—such as improved PISA scores—cannot yet be assessed in the short term. According to Indonesia's National Medium-Term Development Plan (RPJMN), the country aims to reach PISA scores of 396 in reading, 404 in mathematics, and 416 in science by 2025. These targets are a significant leap from the 2022 baseline scores of 359, 366, and 383 respectively.

Regarding the economic aspect, while macroeconomic outcomes of the MBG Program are yet to be systematically recorded, cost management remains a pressing issue. Based on the FAO Healthy Diet Basket, the daily cost of a nutritious diet is estimated at IDR 22,126. In contrast, meal provision costs under MBG range from IDR 8,500 to IDR 14,000 per portion—exceeding the original budget assumption of IDR 7,500–10,000, thus posing a challenge to budgetary efficiency. Despite this, the program has demonstrated economic benefits through local empowerment. Over 700 MSMEs and cooperatives have been engaged, and a study by INDEF revealed that participating MSMEs experienced a monthly income increase of up to 33.68%. Additionally, estimates based on pilot implementation suggest that the MBG Program's 2025 budget allocation of IDR 71 trillion could generate a 0.06% increase in national GDP—equivalent to IDR 14.61 trillion in nominal terms.

From the perspective of the socio-environmental aspect, although comprehensive domestic data on the MBG Program's social and environmental impact is still limited, international models offer valuable lessons. The Finnish Free School Meal Programme, for instance, integrates free meals with nutrition education as part of the national curriculum. Schools actively involve students in menu planning and foster healthy eating habits, resulting in nearly universal participation at the primary level and high satisfaction among students and parents. Prior studies also indicate a link between food waste and user satisfaction. Research shows that higher satisfaction with meal services—especially regarding staple foods, plant-based side dishes, and vegetables—is associated with a reduction in food waste. Finland's sustained implementation of the program over 77 years has played a significant role in shaping the country's human capital. On the governance side, the Ministry of Administrative and Bureaucratic Reform (KemenPAN-RB) has established a public grievance mechanism for the MBG Program through the SP4N-LAPOR! application. Between October 2024 and January 2025, the platform recorded 27 complaints, with a follow-up rate of 31.8%, indicating room for improvement in public responsiveness.

Table 4. Strategic SWOT Analysis of the Free Nutritious Meal (MBG) Program

Strength Weakness • A national priority program with strong political Low implementation performance, with only 5.6 million support under the Vision of Indonesia Emas 2045; beneficiaries and 1,873 SPPGs (6.24% of the 2025 target) reached by the first half of 2025; · Positive economic impact through cross-sector and central-local government collaboration; Uneven distribution of MBG program implementation · Community and MSME involvement contributes to across regions; more equitable income distribution; Reported food poisoning cases indicate weak food safety Potential to accelerate the achievement of SPPG and monitoring; beneficiary targets through community-based No integration with nutrition education or behavioral partnerships under BGN; interventions · Supports improved quality of life by reducing Centralized procurement and weak regional targeting, stunting and enhancing community nutrition. limiting flexibility in terms of need-based distribution and weak student or beneficiary voice mechanisms; Absence of legal framework for managing MBG food waste, which may pose environmental risks;

		 Lack of a strong and legitimate legal and operational regulatory framework; No assessment has been conducted to measure the direct impact of the MBG program on human capital quality improvement.
	Opportunity	Threats
Eksternal	The government has allocated IDR 121 trillion for the MBG program in 2025, creating room for accelerated service delivery; National media and oversight institutions actively monitor MBG implementation, potentially driving improvements in governance; International organizations such as WHO advocate for the strengthening of free meal policies as part of the global commitment to child nutrition.	 Risk of rising food and beverage inflation due to simultaneous demand surge from the MBG program in the second half of 2025; Regional disparities in capacity and infrastructure readiness for MBG kitchen services (SPPG); Potential public resistance if meal quality does not improve.

Source: Authors' Analysis, 2025

The SWOT analysis in Table 4 reveals that while the MBG program exhibits notable strength, such as strong political backing under Indonesia Emas 2045, active community and MSME involvement, and positive cross-sector coordination, these advantages are not yet fully leveraged to achieve transformational outcomes. External opportunities such as increased government funding, global advocacy for school meals, and heightened public awareness present momentum for scale-up and policy reform. However, these strengths and opportunities are counterbalanced by persistent operational challenges, including uneven regional implementation, infrastructure gaps, and low uptake relative to targets, which together risk compromising the program's equity and effectiveness.

More critically, the MBG program faces deep-seated structural weaknesses that could significantly limit its long-term effectiveness. Foremost is the absence of a national legal mandate guaranteeing children's right to free nutritious meals, which makes the program vulnerable to shifts in political priorities and budget cycles. In Brazil, this right is enshrined in national law, anchoring program stability across administrations (de Amorim et al., 2022). Additionally, MBG lacks enforceable minimum nutritional standards such as calories and protein per meal, standards that are clearly articulated in India's PM POSHAN policy to ensure adequacy and uniformity across regions (Natekar et al., 2022). Weak food safety monitoring further undermines public trust and program integrity, particularly in light of reported poisoning cases. Unlike Finland, which implements decentralized food safety protocols managed by local authorities (Tikkanen & Urho, 2009), MBG currently relies on minimal or reactive oversight.

The program also suffers from inefficient centralized procurement and weak regional targeting, limiting its responsiveness to local needs. India's decentralized system enables state-level customization, including menu adaptation based on local dietary habits and malnutrition levels—an approach Indonesia could emulate. The lack of integration between MBG and school-based nutrition education or behaviour change strategies represents another missed opportunity. Finland's success is partially rooted in embedding meals within a broader pedagogical framework, involving students in menu design and promoting lifelong healthy eating habits. Additionally, MBG lacks a clear regulatory framework to manage food waste—posing financial and environmental risks—and does not have a beneficiary feedback mechanism to improve service quality. Most critically, there is no systematic monitoring or third-party evaluation to track impact on stunting, anemia, or school attendance, as is practiced in India and Brazil. Without these institutional elements, MBG risks remaining a well-intentioned but underperforming social program, rather than a strategic investment in human capital.

Conclusions

The Free Nutritious Meal (MBG) program stands as one of Indonesia's flagship strategies to strengthen human capital through improved child nutrition and reduced stunting. This study finds that while MBG enjoys strong political legitimacy and substantial budgetary commitment, its implementation by mid-2025 has not yet yielded optimal outcomes. The number of beneficiaries and operational Nutrition Service Units (SPPG) remains far below target, and service quality continues to fall short of public expectations. Key challenges include uneven regional distribution, absence of standardized operating procedures, weak field-level supervision, and the lack of a legal framework to safeguard universal access

and food safety. These gaps have resulted in incidents such as food poisoning and widespread dissatisfaction, indicating that program governance and quality assurance systems are underdeveloped.

To evolve into a transformative national investment, MBG must go beyond coverage expansion and address foundational weaknesses through lessons from comparable international models. Brazil's PNAE program demonstrates the value of legal protection and local sourcing policies; India's PM POSHAN ensures nutritional minimums and employs independent outcome monitoring; while Finland integrates nutrition education and participatory planning into its school meal system. Compared to these benchmarks, MBG lacks institutional instruments that link interventions to measurable improvements in children's health, learning, or social inclusion. Its economic empowerment potential through MSMEs and cooperatives is emerging, yet remains unevenly distributed. Moving forward, the program must prioritize the development of a robust monitoring and evaluation framework, embed nutritional education within schools, ensure strong accountability mechanisms, and adopt a clear legal mandate to guarantee quality and equity in implementation. With these reforms, MBG can realize its full potential as a foundation for Indonesia's long-term human development agenda.

Recommendation

Based on several identified weaknesses in the implementation of the MBG program, a few policy recommendations can be considered to improve its effectiveness. To accelerate target achievement and expand service coverage, the government needs to strengthen infrastructure by empowering local actors. BGN, in collaboration with the Ministry of Public Works and local governments, can expedite the renovation of food establishments, restaurants, or community kitchens so they can function as operational SPPG. Integration of MBG with other social protection programs, such as the PKH and the Non-Cash Food Assistance Program (*Bantuan Pangan Non Tunai*/BPNT), should also be promoted to broaden the beneficiary database, speed up distribution, and enhance delivery efficiency. Furthermore, short-term partnerships with state logistics agency Bulog—through asset grants or operational lease schemes—may strengthen the food supply chain infrastructure.

In terms of governance, the program must be implemented in a professional and accountable manner. Regulatory reinforcement is needed through clear mandates in a Presidential Regulation that governs procurement mechanisms within the context of MBG. The selection of SPPG operators should be conducted transparently and based on performance evaluations to prevent monopolistic practices and inefficiencies. In addition, the government should establish food quality standards, distribution procedures, and an integrated monitoring system covering the entire supply chain as part of comprehensive governance reform.

From an environmental perspective, food waste management under the MBG program remains a significant challenge. To address this, BGN should prepare technical guidelines for food waste management and partner with local communities to develop community-based waste processing facilities (*Tempat Olah Sampah Setempat /TOSS*) and promote the use of Waste Banks across regions. This strategy supports sustainability principles while opening opportunities for community-based green economic empowerment.

On the beneficiary side, the nutritional effectiveness of the meals is still hampered by low nutrition literacy and students' picky eating behavior. Therefore, BGN should collaborate with the Ministry of Education, community health centers (Puskesmas), schools, and parents to provide regular nutrition education and outreach. Additional strategies—such as buffet-style meal presentations—could be explored to give students more autonomy in food choices without compromising nutritional quality.

Furthermore, BGN needs to collaborate with Statistics Indonesia (BPS), the Ministry of Health, and independent research institutions to conduct baseline surveys on the impact of MBG on dietary behavior, student participation, and household socio-economic conditions. In parallel, a digital application-based system should be developed to enable real-time program monitoring—covering ingredient tracking, meal distribution, and recipient feedback. Such a system will enhance accountability, transparency, and the government's responsiveness in addressing implementation challenges.

Limitations

This study is limited in scope to the internal aspects of the Free Nutritious Meal (MBG) program at first semester of 2025, particularly in identifying the program's strengths and weaknesses as the basis for policy recommendations. Although the SWOT analysis includes elements of opportunities and threats, these external factors were not explored in depth within the discussion nor analyzed as part of policy response strategies. Consequently, the findings and recommendations presented in this study do not fully reflect overall program implementation in 2025 and the external dynamics that may systematically influence the program's success, leaving space for further research in this area.

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