

Effectiveness Analysis of Nutrition Education in the Free Nutritious Meal Program for B3 Targets in Ngabenrejo Village, Grobogan Regency, Central Java

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ABSTRACT

The stunting rate in Central Java in 2024, according to SSGI, is 17.1%, which has not yet reached the target of 14%. The MBG Program for B3 targets (pregnant women, breastfeeding mothers, and non-PAUD toddlers) in Central Java has reached 18.8% of SPPGs served as of August. Grobogan has the second highest stunting rate in Central Java, according to SSGI 2024, at 25.6%, as well as the third highest maternal mortality rate and the highest infant mortality rate in the province. Research Methodology: The method used is descriptive qualitative, focusing on Ngabenrejo Village, Grobogan, which has already implemented the MBG 3B program. The distribution mechanism of the MBG Program for B3 targets in Ngabenrejo is carried out at designated points that have been registered as food collection locations by the facilitators. The food is delivered by the SPPG to these points, targeting pregnant women, breastfeeding mothers, and non-PAUD toddlers, based on Family Data Collection that is updated weekly. The group activities, including target gathering, education, and weighing, are conducted monthly. Individual education is provided daily during MBG distribution, either at the collection points or delivered directly to the beneficiaries if they are unable to attend. The MBG program targeting pregnant women, breastfeeding mothers, and non-PAUD toddlers is effective as a medium for delivering education, both in group and individual settings, to the target beneficiaries who are also families at risk of stunting in Ngabenrejo Village, Grobogan.

Keywords: Makan Bergizi Gratis, B3 Targets, TPK

INTRODUCTION

Free nutritious meals is a program launched by President and Vice President Prabowo-Gibran that aims to overcome the problem of stunting and poverty in Indonesia. This program provides lunch for the goal of fulfilling nutrition including students, toddlers, pregnant women, and breastfeeding mothers. This policy is expected to be able to prevent stunting in children born to pregnant and lactating women, especially in the first 1000 days of life. It is hoped that it will create a healthy, intelligent, and highly competitive generation for Indonesia's economic progress in achieving the Golden Indonesia Vision 2045 (Gunadi et al, 2025).

Presidential Regulation Number 83 of 2024 concerning the National Nutrition Agency states that in the context of developing quality human resources, it is necessary to optimize the implementation of national nutrition fulfillment, which is a manifestation of human rights as guaranteed in the 1945 Constitution of the Republic of Indonesia. In order to fulfill national nutrition, the Government needs to make efforts to regulate the governance of sufficient consumption that is safe, diverse, nutritious and balanced for the community, and to carry out services and fulfillment of national nutrition in a planned and systematic manner with good governance, it is necessary to establish a National Nutrition Agency (BGN).

The goal of fulfilling nutrition which is the task and function of the National Nutrition Fulfillment BGN is the task and function of the BGN in accordance with Presidential Regulation

No. 83 of 2024 Articles 3 and 4, with the goals listed in article 5, consisting of (a) students at the level of early childhood education, primary education, and secondary education in the general education environment, vocational education, religious education, special education, special service education and pesantren education; (b) children under the age of five; (c) pregnant women; and (d) breastfeeding mothers.

As a strategic step in realizing the vision of a Golden Indonesia 2045, the Free Nutritious Meal Program (MBG) is one of the National Strategic Projects (PSN) in the 2025-2029 National Medium-Term Development Plan (RPJMN) which is designed to increase access to healthy food for vulnerable groups. By ensuring that pregnant women, breastfeeding mothers, and non-PAUD children under five get adequate nutritional intake, this program is expected to create a healthy, intelligent, and productive future generation. The implementation of targeted and sustainable programs will contribute to creating a more just and prosperous society.

Indonesia's national maternal mortality rate (AKI) in 2024 will be 183 per 100,000 live births, according to the target of the National Medium-Term Development Plan (RPJMN). However, in the first half of 2024, AKI recorded 4,151 cases, which shows that the target has not been achieved and is still a big homework for the government. Likewise, Indonesia's stunting rate in 2024 according to SSGI is still at 19.8%, which is still far from the national target of 14% in 2024, although we do not deny that this figure has decreased compared to 2023 which is still 21.5%.

Central Java Province itself, although not among the top 12 provinces with the highest stunting rate in Indonesia, still has a stunting rate of 17.1% according to SSGI in 2024. This figure has actually decreased from 2023, which according to SKI was 20.7%. In the Free Nutritious Lunch Program (MBG) with target 3B, namely Mrs. Hami, Breastfeeding Mothers, and Non-PAUD Toddlers, Central Java, it was recorded that until August 2025 there have been 186 SPPGs out of a total of 989 SPPGs (18.8%) in Central Java that provide MBG for target 3B. Meanwhile, the number of targets who have received the distribution of MBG 3B is 10,689 pregnant women, 6785 breastfeeding mothers, and 20,777 non-PAUD toddlers with a total of 38,251 targets.

Grobogan Regency has the second highest stunting rate in Central Java based on SSGI 2024 which is 25.6% and with the 3rd highest Maternal Mortality Rate in Central Java Province in 2024 and the first highest Infant Mortality Rate in Central Java Province in 2024. Looking at the data above, the MBG program target 3B is one of the focuses that needs attention in Grobogan Regency.

The 3B target MBG program, which was launched by the Government since June 2025, is a new program that needs to be seen for its effectiveness in the field, especially because its distribution mechanism is different from the MBG Program for school children. The MBG 3B program involves the cadres of the Family Assistance Team (TPK) formed by BKKBN in distributing and educating the targets. It is hoped that these cadres will not only distribute but also be able to provide education related to health and family development, population, and family planning programs to target groups so that what is the main goal of the program launched can really have a positive impact in reducing stunting and improving the health status of target families.

The problem of stunting is still a long episode of health problems for toddlers in Indonesia. Stunting is a condition of failing to grow in children under five due to chronic malnutrition, especially in the first 1,000 days of life (HPK). Children with stunting are usually characterized by a very short height that exceeds the deficit of 2 SD (-2SD) below the median length or height based on age (1). The impact of stunting is not only on low height but also poor intellectual,

cognitive, motor development and even reduced productivity, causing economic losses in the future. Therefore, prevention, especially at 1000 HPK, is very necessary, starting from babies in the womb to the age of 23 months. (Aurelia, 2024). The period known as 1000 HPK is called the golden period, which has a great influence on the physical and mental of children. Malnutrition, infections, and poor parenting are the main factors in stunting. In addition, the lack of consumption of protein and essential amino acids also contributes to this problem (West, et al., 2003).

The importance of nutrition during pregnancy is often not realized by the public. Nutritional fulfillment at this time is very important for the development of the fetal brain. Lack of protein energy during pregnancy can affect the development of the fetus' head and nerves, which can have a permanent impact on intellectual development (Ekhayanti, 2019). Various specific nutritional interventions have been implemented by the government such as the administration of blood-boosting tablets, dietary supplements, and immunizations as specific nutritional interventions. This effort also involves increasing the capacity of village midwives and posyandu cadres, as well as mentoring pregnant women through balanced nutrition education. This assistance is carried out in three phases: intensive, strengthening, and independent with an evaluation of the child's nutritional knowledge and nutritional status. Improving nutrition requires cross-sectoral collaboration, with the health sector focusing on specific interventions, while the health sector focuses on specific interventions, while the non-health sector ensures integrated food, clean water, and economic support.

Nutrition education is organized in stages by BGN, in collaboration with competent Academics or Institutions in the field of Nutrition Education to key parties including SPPG, accompanying cadres and beneficiaries. During the distribution of MBG to pregnant women, breastfeeding mothers, and children under five, nutrition education for beneficiaries is carried out by accompanying cadres through two approaches and to support the understanding and change of healthy food consumption behavior, namely an individual approach at the time of MBG distribution or a group approach carried out during a meal together at the Posyandu. Nutrition education materials are designed thematically based on the nutritional needs and life phases of the target group. (BGN, 2025).

Based on the above background, a study will be conducted that will look at the analysis of the effectiveness of education provided by the Family Assistance Team inserted through the distribution of Free Nutritious Meals (MBG) to the target of Pregnant Women, Breastfeeding Mothers, and Non-PAUD Toddlers in Grobogan Regency, Central Java Province.

RESEARCH METHOD

This study uses a qualitative descriptive approach. According to Sujsrweni, Wiratna.2025, qualitative research is research that is carried out in depth on an object. Researchers will look at phenomena, collect data, use theories, interpret data and draw conclusions based on the researcher's point of view. The qualitative approach is used to find out the answers to research problems in depth on a research object. The results of the research can be explained in the form of words or numbers based on the research data. The results of qualitative research emphasize more depth of meaning than generalization. Qualitative research will produce answers to questions that are specific to each problem and research object. It is likely that the conclusions of qualitative research will show different results if applied to different objects even if they use the same method. In addition, even if the objects are the same, if they use different methods, the

Effectiveness Analysis of Nutrition Education in the Free Nutritious Meal Program for B3 Targets in Ngabenrejo Village, Grobogan Regency, Central Java

conclusions obtained can also be different.

Based on data in Grobogan Regency with the results, there are 130 kitchens that have been established and 46 SPPGs have been operating, while those that have served MBG, the B3 target is only 4 SPPGs and those that have routinely operated at the SPPG of the Merah Putih Foundation 07 in Ngabenrejo village, Grobogan District. So that the locus taken is in Ngabenrejo Village.

The sources of informants interviewed in this study include the District Level Target 3B MBG Program (DP3AP2KB), the District Level Target 3B MBG PIC (PKB), and the 3B Target MBG Distributor (Cadres).

The analysis of the research results is outlined in the form of narrative analysis. Narrative analysis focuses on the structure and content of the story conveyed by the participants. The researcher analyzed how the story was structured, the meaning behind the story, and the social context.

RESULT AND DISCUSSION

Goal Setting B3

The target of the MBG Target B3 program (Pregnant Women, Breastfeeding Mothers, and Non-PAUD Toddlers) is reported to come from the Updating of the BKKBN Family Data Collection in 2024 in each region with restrictions on pregnant women, especially in the second and third trimester, breastfeeding mothers with children aged 0-1 years, and non-PAUD toddlers. This data is always updated every week because there can be a change in status from pregnant women to breastfeeding mothers if they have given birth or non-PAUD toddlers have switched to PAUD toddlers. In determining this target, SPPG and the sub-district level BGN Coordinator always coordinate with Family Planning Extension Workers and Family Planning Cadres in the area. When the research was carried out, data was obtained on the target portion of school children at the SPPG of the Panji Merah Putih 07 Foundation, which covers the Ngabenrejo village area as many as 815 portions of school children, 138 portions of Non-PAUD Toddlers, and 247 portions of pregnant women and breastfeeding mothers that were prepared.

Distribution Mechanism of MBG Target B3

The distribution mechanism of MBG Target B3 in Ngabenrejo is carried out at a point that has been registered as a location for food collection by the companions. Food is sent by SPPG to the point location with a target to be updated every week. In the third week of October, the target in Ngabenrejo village was 8 pregnant women, 12 breastfeeding mothers, and 47 non-PAUD toddlers. Distribution is carried out to beneficiaries by dropping ready-to-eat food from Monday to Friday while on Saturday the food is dry. In the distribution to the target every day, they are asked to gather at the point and there is an educational message given every month with the posyandu. During the Posyandu, there is a weighing of toddlers and also education related to stunting, the importance of nutrition for pregnant women, balanced nutritional consumption patterns, growth and development of toddlers, including postpartum family planning education. Every day when there is a target who is not present, it will be sent by cadres to their respective home addresses.

Based on the results of an interview with the SPPG of the Merah Putih 07 Foundation, that there has not been good coordination between SPPGs in Grobogan District so that there has not been a good and clear division of targets. The Grobogan Sub-district Head conveyed the need to

increase cross-sector coordination involving Sub-district Heads, Forkompinca, Village Heads, and Forkompindes in the SPPG target area and the location of adding new SPPG. In the near future, the Sub-district Head informed that the Deputy Regent of Grobogan will gather all SPPGs in the Grobogan area for technical discussions and coordination of the implementation of MBG, both targeted for school children and MBG targeted B3 in Grobogan Regency. The B3 target itself is an allocation of 10% of the total targets in each SPPG. Another obstacle is related to the distribution of cadres to the target, which according to the juknis is worth 500-1000 per target once delivered. But in Grobogan Regency it still varies and there is no agreement yet. So this is also still a record in the distribution of MBG in the Grobogan area.

The Impact of Free Nutritious Eating for B3 Targets

The benefits that are directly felt by the beneficiaries and cadres are that the community gets nutritious food, especially for families at risk of stunting so that it is expected to prevent stunting in pregnant women. Based on the reports of cadres who distributed MBG, there was an increase in the baby's weight while in the posyandu compared to before the routine MBG administration. It's just that it cannot be fully evaluated because the program has only been running for 1.5 months so it cannot be determined due to MBG factors alone or due to other factors. Another benefit obtained is an increase in information from educational materials that are widely provided, including an understanding of family balanced nutrition patterns, including contraceptive options, especially postpartum for pregnant and lactating mothers. This condition certainly provides great benefits for the target group.

The free nutritious meal program has been proven to provide benefits in improving the nutritional status of children, especially from families at risk of stunting. Increase the quantity and quality of nutritional intake of pregnant women, lactating mothers, and toddlers including fruits, vegetables, and proteins. Giving different portions for pregnant and lactating women with the amount of carbohydrates added and protein added can be an option for giving double protein for this group. SPPG already has a nutritionist who is in charge of monitoring nutrition and preparing menus every 7 days + 1 day and will be different in the following week to prevent boredom for the target recipients.

The Effectiveness of Education in the Provision of MBG Target B3

Based on the MBG guidelines issued by BGN in 2025, the implementation of socialization and nutrition education in the MBG program for pregnant women, lactating mothers, and non-PAUD toddlers is carried out systematically and in stages and integrated with the distribution and assistance mechanisms that have been set out in the guidelines. The goal is to ensure understanding, awareness, and behavioral changes in nutrition consumption at the family and community level. The Family Assistance Team (TPK) cadres themselves have received debriefing, both socialization and educational materials needed because previously they played a lot of roles in stunting reduction education, especially for families at risk of stunting. So with this program, it is a follow-up to the previous program, there is a goal of free nutritious food and also education that can be right for the target.

Eating together at distribution points or Posyandu is carried out as part of efforts to increase the involvement of beneficiaries. This activity was accompanied by the implementation of direct monitoring of MBG package consumption. This activity was accompanied by the implementation of monitoring the involvement of beneficiaries. This activity is accompanied by the

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implementation of direct monitoring of MBG package consumption, providing nutrition education to beneficiaries and as a form of monthly monitoring and evaluation of each SPPG in the MBG program for toddlers, pregnant women, and lactating mothers.

The MBG program targeted B3 is a new program that has just started so that there are still many obstacles and problems related to its implementation so that it still requires the most targeted forms of education, the assessment of its effectiveness also still requires further research in a longer period of time and a wider reach.

CONCLUSION

The conclusion obtained from the research conducted is that the MBG program targeting pregnant women, breastfeeding mothers, and non-PAUD-toddlers is effective as a medium in providing education both groups and individuals to targets who are also families at risk of stunting in Ngabenrejo Village, Grobogan Regency. This activity has only been running for 1.5 months so there is still a lot to be adjusted, especially coordination with local sectors such as the involvement of partners and coordination between SPPGs around so that the targets can be evenly distributed or there is no term for the goal and further discussion is needed regarding the distribution of funds to the target by cadres.

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