

# Repositioning school guidance and counseling in Indonesia's free nutritious meals program: Toward a safe, healthy, and psychosocially supportive school ecosystem

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### Abstract

The Free Nutritious Meal Program (Program Makan Bergizi Gratis or MBG) is a national policy initiative in Indonesia aimed at improving students' nutritional status, learning readiness, and long-term human resource development. However, school meal programs should not be understood merely as food distribution mechanisms, as shared eating activities in schools also involve educational, social, and psychosocial dimensions. This article aims to reposition school guidance and counseling as a psychosocial support system within the implementation of MBG in elementary schools. Using a conceptual and policy review approach, this article synthesizes relevant policy documents, national regulations, and international literature on school meals, nutrition education, social-emotional learning, school counseling, and child well-being. The analysis shows that MBG has the potential to strengthen students' health, learning engagement, character development, and social relationships when implemented within a safe, healthy, and inclusive school ecosystem. Nevertheless, the program may also create psychosocial risks, including stigma, bullying, food-related anxiety, exclusion of students with allergies or special needs, and discomfort during shared meals. Therefore, guidance and counseling services need to be integrated into MBG through promotive, preventive, responsive, and system-support functions. This article recommends that MBG standard operating procedures include psychosocial safety, anti-bullying mechanisms, protection for students with special dietary needs, privacy of health data, and child-friendly reporting systems. Integrating guidance and counseling into MBG can transform the program from a nutritional intervention into a holistic educational strategy that supports students' physical health, psychological well-being, and social development.

## Introduction

The Free Nutritious Meals Program (MBG) is a national policy that positions child nutrition as an integral part of Indonesia's education and human resource development agenda. The National Nutrition Agency explains that MBG aims to improve the nutritional status of students, pregnant women, breastfeeding mothers, and toddlers by providing nutritious meals based on the recommended daily nutrient adequacy standards, accompanied by nutrition socialization and education for the community (Badan Gizi Nasional, 2025a). In the technical guidelines for MBG implementation for fiscal year 2026, the program is also linked to human resource development toward Indonesia's Golden Generation 2045, the improvement of students' behavior toward balanced nutritional eating patterns, and local economic empowerment through the involvement of micro, small, and medium enterprises, farmers, and fishers (Badan Gizi Nasional, 2025b). Thus, MBG should not be understood merely as a food policy, but also as an educational, health, and human development policy that directly affects students' lives at school.

The urgency of MBG becomes stronger when viewed in relation to the continuing problem of child malnutrition in Indonesia. The 2024 Indonesian Nutrition Status Survey reported that the national prevalence of stunting declined to 19.8%; however, this figure still indicates that child nutrition problems require continuous, measurable, and cross-sectoral interventions (Kementerian Kesehatan Republik Indonesia, 2025). Scientifically, nutrition is closely related to learning readiness because nutritional status influences children's energy, concentration, cognitive development, and ability to participate in the learning process. The World Health Organization emphasizes that healthy and adequately nourished children tend to learn better, whereas inadequate nutrition can hinder children's health, productivity, and development (World Health Organization, n.d.).

International studies on school meal programs also show that school-based meal interventions have potential educational benefits. Cohen et al. (2021), through a systematic review of 47 studies, found that universal school meal programs are generally associated with increased school meal participation, diet quality, food security, and some indicators of students' academic achievement. These findings indicate that school meal provision can serve as a strategic instrument for supporting student well-being when accompanied by strong nutritional standards and sound governance. However, Cohen et al. (2021) also showed that effects on attendance and several other outcomes are not always uniform. Therefore, the success of school meal programs should be understood as the result of interactions among food quality, school environment, student participation, and systemic support.

At the elementary school level, MBG has strategic value because students are in a formative phase of habit development, including eating habits, emotional regulation, character, discipline, and social relationships. Schools are not only spaces where children receive academic knowledge; they are also environments for habituating healthy and social behaviors. de Medeiros et al. (2022) showed that school-based nutrition education interventions produce favorable outcomes in changing students' habits and healthy food choices. This finding strengthens the argument that meal provision should be accompanied by education, habituation, and guidance so that students do not merely eat, but also understand the meaning of balanced nutrition, appreciate food, and develop healthy living behaviors.

Accordingly, MBG should not be reduced to a food logistics program focused on procurement, distribution, and consumption. Eating together at school is a pedagogical and social event involving interactions among students, teacher-student relationships, norms of hygiene, queuing discipline, eating etiquette, respect for differences, and children's sense of safety. In this context, MBG implementation may generate psychosocial issues if it is not managed sensitively in accordance with children's developmental needs. Potential issues include stigma toward particular students, bullying related to body shape or food types, food

refusal, anxiety about eating with others, discomfort due to differences in food culture, allergies, dietary restrictions, and special needs.

The international literature shows that psychosocial aspects of school meal programs are not marginal issues. Orta-Aleman et al. (2024) found that students perceived universal school meal programs as capable of improving food access, reducing stigma, and increasing participation, while also raising concerns related to food quality, quantity, and food waste. Meanwhile, Nocerino et al. (2024), through a systematic review, showed that children with food allergies face risks of stigma, social exclusion, anxiety, and bullying, which may affect their mental health, sense of safety, and quality of life. These findings are relevant to MBG implementation in Indonesia because shared meals at school must consider the diversity of children's conditions, including allergies, special needs, food-cultural backgrounds, and students' social experiences.

In this context, School Guidance and Counseling (SGC) needs to be repositioned as a psychosocial support system within MBG implementation. SGC should not be viewed only as a service for handling students with problems; rather, it should be understood as a developmental service that is promotive, preventive, responsive, and collaborative. Empirically, Whiston et al. (2011), through a meta-analysis, demonstrated that school counseling interventions have positive effects on various student developmental outcomes. Durlak et al. (2011) also showed that school-based social and emotional learning programs contribute to improvements in students' social-emotional skills, behavior, attitudes, and academic achievement. Therefore, the psychosocial dimension that falls within the scope of SGC has a strong scientific basis for supporting the success of school programs, including MBG.

Recent policy foundations from the Ministry of Primary and Secondary Education also indicate a strengthened role for SGC in schools. In 2025, the Ministry introduced the “7 Jurus BK Hebat” approach, which consists of Kenali Potensi (recognizing potential), Kelola Emosi (managing emotions), Tumbuhkan Resiliensi (developing resilience), Jaga Konsistensi (maintaining consistency), Jalin Koneksi (building connections), Bangun Kolaborasi (strengthening collaboration), and Menata Situasi (managing situations). This program was designed to strengthen the role of school counselors as companions, facilitators, and motivators for students (Kementerian Pendidikan Dasar dan Menengah, 2025a). In addition, the Directorate of Elementary Schools positions guidance and counseling training and values education for classroom teachers, the improvement of the competencies of school counselors and religion teachers, the appointment of school counselors, the cultivation of the seven habits of Indonesian children, and nutritious lunches as part of the priority program for strengthening character education (Direktorat Sekolah Dasar, n.d.). This policy direction is important because, at the elementary school level, SGC functions are not attached only to school counselors but also need to be strengthened through classroom teachers and the wider school ecosystem.

In 2026, this policy direction was reinforced through Regulation of the Minister of Primary and Secondary Education Number 6 of 2026 on Safe and Comfortable School Culture. This regulation defines a safe and comfortable school culture as the entire system of values, attitudes, habits, and behaviors within the school environment that ensures the fulfillment of spiritual needs, physical protection, psychological well-being and sociocultural safety, as well as digital civility and safety (Kementerian Pendidikan Dasar dan Menengah, 2026). This definition shows that students' psychological well-being and sociocultural safety are explicit parts of school policy. Therefore, MBG implementation must be integrated with the framework of safe and comfortable school culture so that shared meals are not only administratively orderly but also psychologically safe, socially inclusive, and respectful of children's dignity.

Atamimi (2015) emphasized the importance of a proactive SGC model for equipping elementary school teachers with psychological skills. Setiana and Asih (2025) found a significant positive relationship, with a moderate correlation, between the quality of SGC services and the psychological well-being of elementary school students. Wicaksono et al. (2025) developed a student learning engagement scale that includes enthusiasm, perseverance, independence, and learning reflection. In addition, Setyaputri et al. (2018) showed that the Roda Pelangi game was effective in improving students' fairness character. These findings indicate that SGC in elementary schools is directly relevant to students' psychological well-being, learning engagement, character formation, and management of social relationships.

Based on these arguments, MBG implementation in schools requires integration with SGC services. Through basic services, SGC can strengthen nutrition education, shared-meal etiquette, acceptance of differences, empathy, and healthy living culture. Through preventive services, SGC can help schools anticipate bullying related to the body, food, allergies, or socioeconomic background. Through responsive services, school counselors or classroom teachers can support students who experience anxiety, food refusal, social conflict, stigma, or discomfort during shared meals. Through system support, SGC can bridge collaboration among school principals, classroom teachers, school health units, parents, school committees, health workers, and MBG managers so that the program is implemented humanely and in accordance with students' needs.

Although studies on school meal programs, nutrition education, school counseling, and students' psychosocial well-being have continued to develop, editorial studies that specifically connect the MBG program with the functions of SGC in elementary schools remain limited. Much of the discourse on MBG still tends to emphasize nutrition, budgeting, distribution, and governance, while students' psychosocial dimensions have not been sufficiently positioned as an important part of program success. This gap provides the foundation for the present article. This article aims to formulate conceptual arguments and policy-practice recommendations for integrating SGC into MBG implementation in elementary schools, so that MBG becomes not only a nutrition fulfillment program but also an instrument for developing a safe, healthy, inclusive, and psychosocially supportive school ecosystem.

## Conceptual and Policy Review Approach

This article uses a conceptual and policy review approach that combines conceptual analysis, policy review, and synthesis of scientific literature. This approach was selected because the focus of the article is not to empirically test relationships among variables, but to build a conceptual argument regarding the relationship among students' nutritional needs, psychosocial development, School Guidance and Counseling (SGC) services, and the elementary school ecosystem in the implementation of the Free Nutritious Meals Program (MBG). Through this approach, the article argues that MBG should not be understood merely as a food distribution program, but rather as an educational intervention that requires psychosocial support and school governance that is safe, healthy, and inclusive.

The main sources in this review consist of three groups. First, policy documents issued by the Ministry of Primary and Secondary Education in 2025-2026 were examined, particularly those related to strengthening the role of SGC, the "7 Jurus BK Hebat" program, the roles of classroom teachers and school counselors in elementary schools, and Regulation of the Minister of Primary and Secondary Education Number 6 of 2026 on Safe and Comfortable School Culture. The "7 Jurus BK Hebat" program contains seven components: recognizing potential, managing emotions, developing resilience, maintaining consistency, building connections, strengthening collaboration, and managing situations. These components indicate the direction of SGC strengthening as a social-emotional and collaborative developmental service in schools. In addition, Regulation Number 6 of 2026

affirms that a safe and comfortable school culture includes physical protection, psychological well-being, sociocultural safety, and digital civility and safety.

Second, this review uses MBG policies issued by government institutions as a basis for understanding the program's objectives, governance, and scope. Presidential Regulation Number 115 of 2025 regulates the governance of MBG implementation, including implementation, monitoring, supervision, control, evaluation, reporting, funding, and procurement of goods and services. Thus, MBG has broad public policy dimensions and requires implementation mechanisms that are not only administrative, but also educational and oriented toward students' experiences at school.

Third, this review draws on reputable international journal articles and relevant national studies to strengthen its empirical basis. The international literature on universal school meals shows that school meal programs are associated with school meal participation, diet quality, food security, and some indicators of students' academic achievement (Cohen et al., 2021). Literature on school-based nutrition education indicates that nutrition interventions in schools can positively influence students' food consumption (de Medeiros et al., 2022). Literature on social and emotional learning shows that school-based social-emotional interventions can improve students' social-emotional skills, behavior, attitudes, and academic achievement (Durlak et al., 2011). Meanwhile, meta-analyses on school counseling show that school counseling interventions contribute to student development (Whiston et al., 2011).

The analysis in this article was conducted through thematic-conceptual synthesis. The first step was to identify the main issues in MBG policy, namely nutrition fulfillment, nutrition education, implementation governance, and program evaluation. The second step was to identify the 2025-2026 policy direction of the Ministry of Primary and Secondary Education regarding the strengthening of SGC, the roles of classroom teachers and school counselors, and safe and comfortable school culture. The third step was to group the findings from scientific literature into themes of school meals, nutrition and learning readiness, social-emotional development, school counseling services, psychological well-being, learning engagement, character, and school-based interventions. The fourth step was to synthesize the relationships among these themes in order to construct a conceptual framework for integrating SGC into MBG in elementary schools.

Within this analytical framework, nutritional needs are understood as biological prerequisites for students' learning readiness. Adequate nutritional intake supports energy, concentration, physical endurance, and children's ability to engage in learning activities. However, nutritional needs do not stand alone. When food is provided at school, eating becomes a social and psychological experience involving a sense of safety, self-acceptance, peer interaction, discipline, and respect for diversity. Therefore, MBG needs to be analyzed not only as a nutrition intervention, but also as a space for shaping learning behaviors, eating habits, and students' social experiences.

Furthermore, psychosocial development is positioned as a bridge between nutritional needs and students' educational experiences. Shared meals can strengthen empathy, responsibility, discipline, and togetherness, but they can also create risks such as stigma, bullying based on body shape or food, anxiety about eating together, menu refusal, discomfort related to allergies or dietary restrictions, and exclusion of students with special needs. Therefore, psychosocial development becomes an important dimension in assessing MBG success. A program that is nutritionally sound may not necessarily be educationally successful if students feel ashamed, afraid, excluded, or unsafe when participating in shared meals.

In this relationship, SGC services function as a developmental support system. SGC services can bridge the nutritional objectives of MBG with students' psychosocial needs through four main functions. First, the promotive function is carried out through nutrition education, shared-meal etiquette, empathy, emotional regulation, and appreciation of diversity. Second, the preventive function is carried out through the prevention of stigma,

bullying, body shaming, discrimination against children with allergies or special needs, and discomfort during shared meals. Third, the responsive function is carried out through individual counseling, group counseling, mediation, and referral for students who experience anxiety, social conflict, food refusal, or body image problems. Fourth, the system-support function is carried out through collaboration among school counselors, classroom teachers, school principals, school health units, parents, health workers, school committees, and MBG managers.

At the school, SGC services need to be understood as an ecosystem function rather than solely as the individual responsibility of school counselors. This is relevant because not all elementary schools have an adequate number of school counselors. The policy of the Directorate of Elementary Schools positions guidance and counseling training and values education for classroom teachers, the improvement of school counselor and religion teacher competencies, the appointment of school counselors, the cultivation of the seven habits of Indonesian children, and nutritious lunches as part of the priority program for strengthening character education. Thus, classroom teachers occupy an important position as implementers of daily guidance functions, whereas school counselors, when available, play roles in needs assessment, responsive services, program development, and system support.

Finally, the elementary school ecosystem is understood as an integrative space where nutritional needs, psychosocial development, and SGC services intersect. A safe, healthy, and inclusive school ecosystem is determined not only by food availability, but also by the quality of social relationships, psychological protection, anti-bullying culture, acceptance of diversity, and parental involvement. For this reason, this review positions MBG as part of school culture, not merely as an eating activity. This principle is consistent with the policy on safe and comfortable school culture, which emphasizes psychological well-being and sociocultural safety as components of a conducive learning environment.

Based on this synthesis, the conceptual relationships in this article can be formulated as follows: fulfillment of nutritional needs through MBG supports students' learning readiness; learning readiness is influenced by psychosocial experiences during shared meals; psychosocial experiences require support from SGC services; and SGC services are effective only when integrated into a collaborative, safe, healthy, and inclusive school ecosystem. Thus, this conceptual and policy review argues that the integration of SGC into MBG is a strategic necessity rather than an administrative addition.

Practically, this approach yields three main implications. First, MBG standard operating procedures in elementary schools need to incorporate SGC dimensions, such as nutrition education, shared-meal etiquette, bullying prevention, protection for children with allergies or special needs, and mechanisms for reporting discomfort. Second, classroom teachers and school counselors need training in psychosocial support during shared meals, including empathic communication, early detection of anxiety, handling stigma, and collaboration with school health units and parents. Third, MBG evaluation needs to expand beyond food distribution indicators toward student well-being indicators, such as sense of safety, meal comfort, social relationships, eating behavior, learning engagement, attendance, and acceptance of menus.

Thus, the conceptual and policy review approach in this article affirms that MBG should be positioned as a multidimensional intervention. This program touches the body through nutrition fulfillment, the mind through learning readiness, emotions through psychosocial experiences, relationships through shared meals, and school culture through value habituation. SGC becomes the professional and pedagogical instrument that enables all of these dimensions to connect within a safe, healthy, inclusive, and developmentally supportive elementary school ecosystem.

## Results and Discussion

### 1. MBG AS MORE THAN A NUTRITION PROGRAM: EDUCATIONAL AND PSYCHOSOCIAL IMPLICATIONS

The Free Nutritious Meals Program (MBG) needs to be positioned more broadly than a mere intervention to fulfill students' nutritional needs. In the school context, MBG is a policy located at the intersection of health, education, and human resource development. Nutritious food indeed serves to meet children's energy and nutrient needs; however, within the school environment, eating also becomes part of an educational process that influences learning readiness, the formation of healthy habits, social relationships, and students' psychological experiences. Cohen et al. (2021), through a systematic review of 47 studies, showed that universal school meal programs are associated with increased school meal participation, diet quality, food security, and some indicators of students' academic achievement. These findings affirm that school meals have real educational implications, particularly when implemented with strong nutritional standards and governance that prioritizes children's needs.

From the perspective of learning readiness, nutritional fulfillment contributes to students' capacity to be physically and mentally present in the learning process. Children who are hungry, lack energy, or do not receive adequate intake are more vulnerable to reduced concentration, fatigue, and difficulty sustaining attention during learning. Adolphus et al. (2013) showed that breakfast consumption is associated with better classroom learning behavior, including increased on-task behavior, and has a positive relationship with academic performance, particularly among children experiencing nutritional deficiencies. The systematic review by Adolphus et al. (2016) further confirmed that breakfast consumption, compared with fasting, has short-term positive effects on cognitive function, especially attention, executive function, and memory. Thus, MBG can be viewed as a basic support for learning readiness because it provides the biological prerequisites for children to concentrate, follow instructions, and participate in academic activities.

The relationship between school meals and educational outcomes is also evident in various cross-national studies. Wang et al. (2021), through a systematic review and meta-analysis in low- and middle-income countries, explained that school feeding programs have important implications for the educational and health outcomes of school-age children and adolescents. Ma et al. (2025), in their study of China's Nutrition Improvement Program, also showed that free nutritious meals can improve language and mathematics achievement among rural children and increase long-term participation in secondary education. The study explained that educational impacts occur through improved nutritional intake, cognitive and non-cognitive abilities, learning concentration, self-discipline, and family educational expectations. These findings are relevant to Indonesia because MBG not only targets daily nutritional fulfillment but also has the potential to strengthen children's learning capital and development from the elementary school level.

However, the educational benefits of MBG do not emerge automatically merely because food is available. Nutritious meals need to be accompanied by nutrition education, behavioral habituation, and the strengthening of a supportive school environment. de Medeiros et al. (2022) showed that school-based nutrition education interventions have positive effects on students' food consumption, while Rimbawan et al. (2023) found that lunch programs integrated with nutrition education can improve nutritional knowledge, attitudes, and practices and reduce the prevalence of anemia among students in Indonesia. In other words, food provided by schools should become an educational medium: children learn to identify healthy foods, understand the benefits of balanced nutrition, appreciate food, and repeatedly develop healthy living habits.

In addition to academic and health impacts, MBG also has an important social dimension. Shared meals at school provide an interactional space in which students learn to queue, share, wait their turn, maintain cleanliness, follow rules, respect different preferences, and take responsibility for the food they receive. Benn and Carlsson (2014) positioned school meals as a learning arena because they involve contexts, content, and practices of togetherness or commensality that can shape children's educational experiences. Illøkken et al. (2021) also found that free school meals were perceived to provide social benefits, including functioning as a social event that helps students make new friends, learn social skills, develop healthy eating habits, support school functioning, and promote social equality.

This social dimension shows that MBG can become an instrument of character formation when managed as part of school culture. Shared meals can be used to cultivate discipline, responsibility, empathy, gratitude, and appreciation of food. In the elementary school context, these values are highly important because students are in an early developmental phase that requires concrete and repeated habituation. MBG can become a real learning space for children to understand that food is not merely an object of consumption, but the result of the work of many parties, including families, schools, farmers, fishers, food providers, and the state. Therefore, the school meal experience should be designed as an educational practice that develops nutritional, social, and moral awareness.

Risks emerge when MBG is understood only as a food distribution program. If schools focus only on the number of portions, delivery schedules, and consumption completion without considering children's experiences, the program may lose its educational meaning. Mauer et al. (2022) warned that the provision of free meals does not guarantee that students will eat them; student participation is influenced by food popularity, social aspects, the attractiveness of alternative foods, and menu predictability. Tuorila et al. (2015) also showed that acceptance of school meals is influenced by the type of food, student characteristics, hunger, attitudes toward school meals, and canteen contexts, including queuing experiences. This means that MBG success should not be measured only by food distribution, but also by the extent to which the food is accepted, eaten, enjoyed, and positively interpreted by students.

If pedagogical and psychosocial aspects are neglected, MBG may also create problems such as food refusal, waste, discomfort during shared meals, or even stigma toward particular students. Petchoo et al. (2022) showed that school lunch programs may face plate-waste problems, making menu quality and student acceptance important factors in ensuring that food is actually consumed. Cohen et al. (2021) also emphasized the importance of strong nutrition guidelines in universal school meal programs so that benefits for diet quality and educational outcomes can be achieved. Thus, MBG needs to be designed not only as a food logistics system, but also as an educational ecosystem involving teachers, school counselors, classroom teachers, school health units, parents, meal managers, and students.

Based on the above discussion, MBG should be understood as a nutrition intervention as well as an educational and psychosocial intervention. As a nutrition intervention, MBG supports children's physical needs, energy, and health. As an educational intervention, MBG strengthens learning readiness, nutrition literacy, healthy habits, and responsibility for food. As a psychosocial intervention, MBG creates a space for social interaction that can strengthen empathy, discipline, equality, and a sense of safety at school. Therefore, MBG implementation requires a cross-functional approach, including the involvement of school guidance and counseling, so that the program does not stop at food distribution but develops into part of an elementary school ecosystem that is safe, healthy, inclusive, and supportive of students' holistic development.

## 2. SCHOOL GUIDANCE AND COUNSELING AS A PSYCHOSOCIAL SUPPORT SYSTEM

School Guidance and Counseling (SGC) needs to be positioned as a developmental support system, not merely as a corrective service for students who experience problems. In the comprehensive SGC paradigm, school counseling services are designed to support students' academic, personal, social, emotional, and career development through systematic, preventive, developmental, and needs-based approaches. This view is consistent with the position of school counseling programs as comprehensive, preventive, developmental services that constitute an integral part of the school mission (American School Counselor Association [ASCA], n.d.). Accordingly, in the context of the Free Nutritious Meals Program (MBG), SGC should not appear only when problems such as conflict, food refusal, or bullying arise; rather, it should be involved from the beginning in planning, habituation, prevention of psychosocial risks, and strengthening of a healthy school culture.

Conceptually, SGC has strategic functions in prevention, development, adjustment, advocacy, and responsive services. The preventive function is evident when SGC helps schools anticipate the potential emergence of stigma, bullying related to body shape or food, anxiety about eating with others, and discomfort among students with allergies, dietary restrictions, or special needs. The developmental function is realized through services that help students develop healthy living habits, emotional regulation, empathy, discipline, responsibility, and appreciation of food. The adjustment function is seen when students are assisted in adapting to shared-meal routines, new menus, queuing rules, hygiene procedures, and social dynamics during MBG implementation. The advocacy function is needed to ensure that vulnerable students do not experience discrimination, labeling, or neglect of their special needs. The responsive function is carried out when school counselors, classroom teachers, or school teams provide support for students who experience psychological distress, social conflict, food refusal, or uncomfortable experiences during the program.

The empirical basis for the importance of SGC as a psychosocial support system has been demonstrated by various international studies. Whiston et al. (2011), through a meta-analysis of school counseling interventions, found that school counseling services have positive effects on student development, with a weighted average effect size of 0.30. This finding indicates that counseling interventions in schools make a real contribution, although their effects vary according to service type and implementation context. In addition, a recent meta-analysis of social and emotional learning interventions delivered by school counselors showed significant small to moderate effects, thereby strengthening the argument that school counselors play an important role in enhancing students' social-emotional competencies (Lemberger-Truelove et al., 2025). In the context of MBG, these social-emotional competencies are important because shared meals require the ability to manage emotions, wait one's turn, respect differences, communicate politely, and build positive peer relationships.

The relevance of SGC as a psychosocial support system is also consistent with the 2025-2026 policy direction of the Ministry of Primary and Secondary Education. Regulation of the Minister of Primary and Secondary Education Number 11 of 2025 on the Fulfillment of Teachers' Workload affirms that teachers' workload includes planning and implementing learning or guidance, assessing learning or guidance outcomes, guiding and training students, and carrying out additional duties attached to teachers' main tasks. This regulation is important because it strengthens the position of guidance as part of teachers' professional work, rather than as an incidental additional activity. In the context of MBG, guidance implementation can be understood as a policy basis for the involvement of school

counselors and classroom teachers in developing healthy eating behavior, social order, and psychosocial support for students.

The strengthening of SGC is also reflected in the “7 Jurus BK Hebat” program introduced by the Ministry in 2025. This program consists of seven main components: recognizing potential, managing emotions, developing resilience, maintaining consistency, building connections, strengthening collaboration, and managing situations. These components show that SGC is directed toward helping students understand themselves, manage emotions, build resilience, maintain positive behavior, strengthen relationships, and manage learning and social situations more adaptively. This approach is highly relevant to MBG implementation because eating together at school is not only a biological activity but also a social situation that requires emotional management, social connection, resilience, consistency of habits, and collaboration among school members.

In 2026, the relevance of SGC was further strengthened through Regulation of the Minister of Primary and Secondary Education Number 6 of 2026 on Safe and Comfortable School Culture. This regulation positions safe and comfortable school culture as the entirety of values, attitudes, habits, and behaviors within the school environment that ensures the fulfillment of spiritual needs, physical protection, psychological well-being and sociocultural safety, as well as digital civility and safety. The regulation's scope indicates that psychological well-being and sociocultural safety are explicit responsibilities of schools. Therefore, MBG implementation must be managed within the framework of a safe and comfortable school culture, ensuring that shared meals do not create shame, fear, pressure, exclusion, or differential treatment.

In the elementary school context, SGC functions cannot be assigned solely to school counselors as specialized personnel, especially because not all elementary schools have an adequate number of school counselors. Therefore, SGC functions at the elementary level need to be carried out collaboratively by classroom teachers, school counselors when available, principals, school health units, parents, school committees, and MBG managers. The policy direction of the Directorate of Elementary Schools also shows that strengthening character education includes guidance and counseling training and values education for classroom teachers, improving the competencies of school counselors and religion teachers, appointing school counselors, cultivating the seven habits of Indonesian children, and providing nutritious lunches. This affirms that, at the elementary school level, SGC should be understood as a school ecosystem function rather than merely an individual service delivered by counselors.

This collaboration is important because elementary school students are in a developmental phase that requires concrete habituation, close supervision, and emotional support from adults who are present in their daily lives. Classroom teachers can integrate the values of discipline, hygiene, gratitude, and empathy into shared-meal routines. School counselors can design classroom guidance, group counseling, individual counseling, needs assessments, and referrals when students with anxiety, social conflict, or special needs are identified. School principals play a role in formulating child-sensitive MBG policies and standard operating procedures. School health units support health, allergy, and hygiene aspects. Parents help maintain continuity of healthy eating habits at home. Through this pattern, SGC functions as a coordinating system that connects nutritional needs, psychological well-being, character formation, and school culture.

Thus, school guidance and counseling in MBG needs to be positioned as a psychosocial support system that ensures nutritious meal programs are implemented safely, inclusively, and educationally. If MBG provides nutritional support for students, SGC provides developmental support that enables students to receive, understand, habituate, and interpret shared meals positively. This repositioning is important so that MBG produces not only students who receive nutritious meals, but also students who feel safe and valued, are

able to manage emotions, have healthy social relationships, and develop within an elementary school ecosystem that is psychosocially supportive.

### **3. PSYCHOSOCIAL RISKS IN THE IMPLEMENTATION OF FREE NUTRITIOUS MEALS**

The implementation of the Free Nutritious Meals Program (MBG) in elementary schools needs to consider the psychosocial risks that may arise during shared meals. These risks are not reasons to reject MBG, but rather a basis for ensuring that the program is implemented safely, inclusively, and sensitively to students' developmental needs. In the school context, food is not only an object of consumption; it can also function as a marker of social, cultural, economic, bodily identity, and health conditions. Therefore, MBG needs to be managed as an educational policy that considers students' psychological and social experiences, not merely as food distribution.

One of the main risks in school meal programs is social stigma. Meal programs provided only to certain groups may mark students according to economic status, causing children to feel ashamed, different, or labeled as "aid recipients." The study by Orta-Aleman et al. (2024) showed that students perceived universal school meals as improving food access, reducing low food security, decreasing stigma, simplifying payment systems, and increasing school meal participation. However, the same study also identified concerns about food quality, food quantity, and food waste, indicating that universal meal programs must still be managed by taking students' voices into account. In the context of MBG, the principle of universality needs to be translated into school practices that do not differentiate, label, or highlight students' economic backgrounds.

The next risk is bullying based on body shape, food, allergies, eating habits, or economic background. Shared meals create an intensive social interaction space. On the one hand, this interaction can strengthen togetherness; on the other hand, it can become an arena for teasing, negative comments, or exclusion. Students may be mocked because of body shape, food portions, foods they like or dislike, eating manners, food allergies, or family economic conditions. Literature on weight-related bullying shows that body weight is one of the major targets of bullying in schools and that weight bias can emerge in educational environments. This issue is important in MBG because school meal programs can make students' eating behaviors visible to their peers.

Children with food allergies also have particular vulnerabilities. Nocerino et al. (2024) showed that food allergy-related bullying among children may take the form of verbal teasing, social exclusion, physical threats using allergens, and may lead to anxiety, depression, social withdrawal, and reduced quality of life. Simeone et al. (2025) also emphasized that schools are risk environments for children with food allergies because of the possibility of accidental exposure, the need for emergency preparedness, and the need for psychosocial support to reduce stigma, bullying, and anxiety. In MBG, allergy issues should not be viewed only as medical records, but also as matters of safety, social acceptance, and psychological protection for students.

In addition to bullying, MBG may also generate anxiety about eating together. Some students may feel uncomfortable eating in front of their peers, fear being judged for their food portions, feel embarrassed because they dislike a certain menu, or feel anxious because they have allergies or dietary restrictions. For children with food neophobia or a tendency to reject new foods, unfamiliar menus may trigger fear, disgust, or refusal. Studies on food neophobia show that refusal of new foods can influence food acceptance, menu perceptions, emotional states, and food-waste behavior in school canteens. Therefore, refusal of MBG menus should not always be interpreted as indiscipline or disobedience; it may be related to developmental factors, emotions, family habits, and previous eating experiences.

Another risk that requires attention is menu refusal and food waste. School meal programs do not automatically succeed simply because food is available. Mauer et al. (2022) emphasized that providing free meals does not guarantee that students will eat them; participation is influenced by food preferences, social aspects, alternative foods, and menu predictability. Petchoo et al. (2022) also showed that plate waste in school lunch programs is related to portion size, food composition, and students' acceptance of menus. In the context of MBG, menu refusal and leftovers need to be read as signals for program evaluation rather than merely negative student behavior. Schools need to examine whether menus are appropriate to children's age, local food culture, eating habits, food safety, texture, taste, portion size, and students' special conditions.

MBG also needs to be sensitive to differences in food culture and special needs. Indonesia has diverse cultures, religions, family habits, dietary restrictions, local preferences, and children's health conditions. A menu considered ordinary by one group may feel unfamiliar or unsuitable to another. For students with special needs, sensory difficulties, eating disorders, allergies, or certain medical conditions, shared meals may require additional adjustments. Simeone et al. (2025) emphasized the importance of individual health plans, emergency preparedness, staff training, school-family communication, and psychosocial support in managing food allergies in schools. This principle can be extended to MBG through mechanisms for needs assessment, menu adjustment, communication with parents, and referral procedures when special needs require more intensive support.

An equally important aspect is the protection of students' health and nutrition data. MBG implementation may involve sensitive data, such as allergies, nutritional status, special needs, dietary restrictions, medical history, or socioeconomic background. Such data must be managed in a limited and proportionate manner and used only for the purpose of serving students. Baker et al. (2020) emphasized that the management of health information in schools needs to observe privacy and confidentiality rules when sharing student information. In the context of MBG, health and nutrition data must not be used to label students, openly differentiate treatment, or embarrass them. Sensitive information should be accessible only to parties with direct interests, such as school principals, classroom teachers, school counselors, school health units, parents, and relevant health workers.

Thus, psychosocial risks in MBG include stigma, bullying, anxiety about eating together, menu refusal, food waste, food-cultural mismatch, special needs, and protection of students' health and nutrition data. These risks show that MBG success cannot be measured only by the number of portions distributed or the nutritional content designed. MBG success also needs to be assessed by whether students feel safe, valued, not humiliated, not excluded, able to accept food gradually, and supported when they have special needs. At this point, school guidance and counseling becomes essential as a psychosocial support system that helps schools anticipate, prevent, and respond to these risks humanely.

#### **4. INTEGRATING GUIDANCE AND COUNSELING SERVICES INTO MBG**

The integration of School Guidance and Counseling (SGC) services into the Free Nutritious Meals Program (MBG) needs to be designed as a systematic educational strategy, not as an incidental response when problems arise. Within the comprehensive SGC framework, school counseling services are holistic, preventive, developmental, and integral to the school mission. This principle is relevant to MBG because shared meals at school concern not only nutritional fulfillment, but also behavioral habituation, social relationships, psychological safety, and the protection of students from stigma or discriminatory treatment. Thus, SGC can become a bridge between MBG's nutritional

objectives and broader educational goals, namely developing students who are healthy, independent, character-driven, and psychosocially well.

First, SGC integration into MBG can be carried out through basic services. Basic services are delivered to all students in classroom or group formats to develop the knowledge, attitudes, and skills needed in daily life. In the context of MBG, basic services can be directed toward nutrition education, shared-meal etiquette, personal hygiene, queuing discipline, responsibility for food, empathy, and appreciation of diversity. School counselors or classroom teachers can facilitate simple activities such as class discussions about healthy food, reflections on gratitude, role-play on respecting peers with dietary restrictions, or habituation to not tease peers based on body shape, portion size, or food preferences. This approach is consistent with evidence that school-based social and emotional learning programs can improve students' social-emotional skills, attitudes, behavior, and academic achievement.

In basic services, MBG can be used as a concrete medium for character education. Students are not only told about the importance of nutritious food; they directly experience shared meals as a social practice. They learn to wait their turn, keep eating areas clean, avoid excessive food waste, respect peers with different preferences, and understand that food is the result of the work of many parties. At the elementary school level, this kind of habituation is important because children are in a developmental phase that requires real experience, repetition, modeling, and reinforcement from teachers. Therefore, basic SGC services in MBG do not always need to take the form of formal lectures; they can be embedded in daily school routines through teachers' greetings, positive reinforcement, brief post-meal reflections, educational posters, group games, or classroom projects on healthy food.

Second, SGC integration needs to be realized through responsive services. Responsive services are provided to students who experience obstacles, distress, or specific problems that require immediate attention. In MBG, responsive services are needed for students who experience anxiety about eating together, repeated food refusal, social stigma, bullying based on body shape or food, conflict with peers, shame related to economic conditions, or body image problems. School counselors can provide individual counseling, small-group counseling, peer mediation, or coordination with classroom teachers and parents. This service is important so that problems emerging during shared meals are not viewed merely as ordinary misbehavior, but are understood as signals of psychological, social, or developmental needs that require support.

Responsive services also need to be directed toward preventing problem escalation. For example, negative comments about a peer's body, portion size, or eating habits must be addressed immediately because they may develop into bullying, shame, low self-esteem, and social avoidance. In other situations, students who repeatedly refuse menus should not be immediately labeled as undisciplined, because refusal may be related to previous eating experiences, sensory conditions, anxiety, family food culture, or specific health needs. School counselors and classroom teachers need to help schools understand such behavior more comprehensively. Thus, responsive services in MBG function as an early detection and support mechanism so that every student continues to feel safe, valued, and not humiliated.

Third, MBG needs to be connected to individual planning for students with special needs. Not all children have the same eating conditions. Some students may have food allergies, restrictions based on family beliefs, specific dietary needs, medical conditions, sensory difficulties, disabilities, or psychosocial experiences that make shared meals less straightforward. Clinical studies on the management of food allergies in schools emphasize the importance of a team approach involving children, parents or guardians, school staff,

school health personnel, and healthcare providers, including individualized written plans for allergy management and anaphylaxis emergencies.

In the context of MBG, individual planning can be carried out through mapping students' needs before program implementation, confidentially recording allergies or dietary restrictions, coordinating with parents, adjusting menus when possible, and preparing emergency response procedures. School counselors can help ensure that data on special needs are not used to label children, but to protect and support them. Classroom teachers can assist with daily monitoring, school health units can ensure health aspects, and parents can provide necessary information about children's eating history, allergies, or special conditions. Thus, individual planning is not only administrative; it is also part of students' psychosocial protection.

Fourth, integrating SGC into MBG requires system support. System support means that SGC services do not work alone but become part of school governance involving multiple parties. At the elementary school level, SGC functions can be carried out collaboratively by school counselors when available, classroom teachers, principals, school health units, parents, school committees, health workers, and MBG managers. This is consistent with the policy direction of the Directorate of Elementary Schools under the Ministry of Primary and Secondary Education, which positions guidance and counseling training and values education for classroom teachers, the improvement of school counselor competencies, the appointment of school counselors, the cultivation of the seven habits of Indonesian children, and nutritious lunches as part of the priority program for strengthening character education.

System support is also consistent with the strengthening of SGC competencies through the "7 Jurus BK Hebat" introduced by the Ministry in 2025. The program includes seven components: recognizing potential, managing emotions, developing resilience, maintaining consistency, building connections, strengthening collaboration, and managing situations. These components can be translated directly into MBG implementation: identifying students' needs and potential, helping children manage emotions during shared meals, developing resilience toward new experiences, maintaining consistency in healthy habits, building teacher-student connections, strengthening school-parent collaboration, and arranging meal situations so they are safe and comfortable.

At the school policy level, system support can be realized through the development of child-sensitive MBG standard operating procedures. These procedures should not only regulate meal times, distribution flows, hygiene, and management of leftovers, but should also cover interaction etiquette, bullying prevention, mechanisms for reporting discomfort, protection of health data, procedures for children with allergies or special needs, and the roles of each party. School principals are responsible for ensuring that policies are implemented; classroom teachers supervise daily habituation; school counselors design psychosocial services; school health units support health aspects; parents provide information and reinforcement at home; MBG managers attend to menu quality, safety, and acceptability; and school committees can support supervision and communication with the community.

This integration becomes increasingly important within the framework of Safe and Comfortable School Culture. Regulation of the Minister of Primary and Secondary Education Number 6 of 2026 affirms that a safe and comfortable school culture includes the fulfillment of spiritual needs, physical protection, psychological well-being and sociocultural safety, and digital civility and safety. On this basis, MBG needs to be evaluated not only by the number of portions distributed, but also by students' experiences: whether they feel safe while eating, whether any child is teased, whether children with allergies are protected, whether students accept the menu well, and whether shared meals strengthen positive social relationships.

Thus, SGC integration into MBG can be formulated in four service layers. Basic services develop nutrition literacy, eating etiquette, empathy, and appreciation of diversity. Responsive services address anxiety, stigma, bullying, social conflict, and body image problems. Individual planning ensures that students with allergies, dietary restrictions, special needs, or particular psychosocial conditions receive safe and dignified support. System support connects school counselors, classroom teachers, principals, school health units, parents, health workers, MBG managers, and school committees within collaborative governance. Through this integration, MBG does not stop as a meal program but develops into an educational practice that strengthens health, character, safety, and psychosocial well-being among elementary school students.

## **5. TOWARD A SAFE, HEALTHY, AND INCLUSIVE ELEMENTARY SCHOOL ECOSYSTEM**

The Free Nutritious Meals Program (MBG) needs to be directed toward strengthening an elementary school ecosystem that is safe, comfortable, healthy, and inclusive. From an educational perspective, the success of MBG lies not only in the availability of nutritious meals but also in the creation of meaningful, enjoyable, non-discriminatory meal experiences that support students' development. Elementary schools are spaces for early habit formation; therefore, shared meals can become a medium for character education, nutrition literacy, healthy living habituation, strengthening of social relationships, and protection of children's psychological well-being. Thus, MBG needs to be situated within a whole-school approach that involves all school members and their support networks in building a learning environment that is healthy and safe both physically and psychosocially.

This direction is consistent with Regulation of the Minister of Primary and Secondary Education Number 6 of 2026 on Safe and Comfortable School Culture. The regulation affirms that safe and comfortable school culture includes values, attitudes, habits, and behaviors that ensure the fulfillment of spiritual needs, physical protection, psychological well-being and sociocultural safety, as well as digital civility and safety. On this basis, MBG should not be positioned merely as a meal activity, but should be developed as a school-cultural practice that protects students' dignity, sense of safety, and diversity. Shared meals must be free from bullying, labeling, negative comments about the body, teasing about food preferences, and differential treatment of children with allergies, dietary restrictions, or special needs.

Within a safe and inclusive elementary school ecosystem, school counselors and classroom teachers need to be explicitly involved in the development and implementation of MBG standard operating procedures. These procedures should not only regulate technical aspects such as food reception, portion distribution, meal schedules, hygiene, and leftover management. They should also include psychosocial dimensions, such as shared-meal etiquette, bullying prevention, protection of students with allergies or special needs, mechanisms for reporting discomfort, procedures for supporting children who refuse food, and protection of students' health and nutrition data. The involvement of school counselors and classroom teachers is important because they are in direct contact with students and can recognize signs of discomfort, anxiety, social conflict, or behavioral changes during program implementation.

The involvement of school counselors and classroom teachers in MBG procedures is also relevant to the policy for strengthening SGC competencies through the “7 Jurus BK Hebat” introduced by the Ministry in 2025. Its seven components--recognizing potential, managing emotions, developing resilience, maintaining consistency, building connections, strengthening collaboration, and managing situations--can serve as operational principles in MBG implementation. Teachers can identify students' individual needs, help children manage emotions when encountering new menus, develop resilience toward unfamiliar

experiences, maintain consistency in healthy eating habits, build social connections during shared meals, strengthen school-parent collaboration, and manage meal situations so they are safe and comfortable.

MBG evaluation also needs to be expanded. The program should not be evaluated only by the number of portions distributed, the punctuality of food delivery, or the suitability of nutritional content. These indicators are important, but they do not fully describe students' experiences. Evaluation needs to include students' comfort during meals, menu acceptance, social relationships during shared meals, eating behavior, the amount of food waste, attendance, learning engagement, and sense of safety. Cohen et al. (2021) showed that universal school meal programs are associated with increased meal participation, diet quality, food security, and some academic outcomes, but findings on attendance and several other outcomes remain mixed. This indicates that school meal program evaluation needs to be multidimensional and not merely administrative.

Evaluation based on students' experiences is also important to ensure that the food provided is actually consumed and accepted. Cohen et al. (2021), in a systematic review of strategies to increase school meal consumption, identified several evidence-supported strategies, including providing menu choices, adjusting recipes to make them more appealing and culturally appropriate, providing sufficient meal time, and arranging the school environment to support healthy food consumption. These findings are relevant to MBG because children's acceptance of food is influenced by taste, appearance, food culture, meal time, social situations, and eating atmosphere. Therefore, feedback from students, teachers, parents, and food managers needs to become part of a continuous evaluation cycle.

In addition to nutrition and consumption indicators, MBG evaluation needs to include psychosocial indicators. Schools need to determine whether any students feel embarrassed, teased, uncomfortable, afraid to try food, or isolated during shared meals. Evaluation should also examine whether shared meals strengthen empathy, discipline, responsibility, hygiene, and appreciation of diversity. Durlak et al. (2011) showed that school-based social and emotional learning programs involving 213 programs and 270,034 students contributed to improvements in social-emotional skills, attitudes, behavior, and academic achievement. This finding strengthens the argument that social-emotional aspects should be part of the evaluation of school programs, including MBG, because educational success is measured not only through academic outcomes but also through students' behavioral development and well-being.

The policy implication for schools is the need to formulate MBG governance that is integrated with school culture programs, SGC services, school health units, character education, and parent communication. School principals need to establish a clear coordination mechanism among classroom teachers, school counselors, school health units, MBG managers, school committees, and parents. Each school needs to have a map of students' needs, including data on allergies, dietary restrictions, special needs, and particular psychosocial conditions, while maintaining confidentiality. Schools also need to provide child-friendly reporting mechanisms so that students can express discomfort without fear of being embarrassed or punished.

Another implication is the need for teacher training. Classroom teachers and school counselors need training in basic nutrition literacy, ethical support during shared meals, early detection of anxiety or bullying, empathic communication, handling children who refuse food, protection of children with allergies or special needs, and the use of shared meals as a medium for character formation. This training is important because, at the elementary school level, teachers are the main figures shaping students' daily experiences. If teachers understand MBG only as a food distribution activity, the educational and psychosocial dimensions of the program may be neglected. Conversely, if teachers

understand MBG as part of the school ecosystem, shared meals can become a learning space that strengthens children's health, character, and well-being.

Thus, in moving toward a safe, healthy, and inclusive elementary school ecosystem, MBG needs to be managed through a cross-functional approach. The program must connect nutritional fulfillment with safe and comfortable school culture, SGC services, school health units, character education, and parental participation. School counselors and classroom teachers need to be involved in the development of procedures, implementation, monitoring, and evaluation of MBG. Program evaluation needs to expand from portions and logistics toward students' experiences, social relationships, eating behavior, learning engagement, and sense of safety. In this way, MBG becomes not only a food provision program but also an educational instrument that develops elementary schools as healthy, dignified, and psychosocially supportive living spaces for students.

## Conclusion

The Free Nutritious Meals Program is a strategic national policy with the potential to strengthen children's nutrition, learning readiness, and human resource development in Indonesia. However, the success of this program should not be measured merely by the number of meals distributed, the punctuality of food delivery, or the fulfillment of nutritional standards. In the school context, meals are not only biological necessities but also educational and psychosocial experiences. Therefore, MBG needs to be positioned as part of a broader school ecosystem that supports students' health, dignity, social interaction, and psychological well-being.

This article emphasizes that School Guidance and Counseling is essential to ensure that MBG is implemented in a humane, safe, inclusive, and developmentally supportive manner. Guidance and Counseling can help schools prevent stigma, bullying, food-related anxiety, exclusion, and discomfort during shared meals. It can also support students in developing healthy habits, empathy, self-regulation, discipline, responsibility, and respect for diversity. Thus, the role of Guidance and Counseling in MBG is not peripheral but strategic.

At the elementary school level, the implementation of Guidance and Counseling within MBG should be carried out collaboratively. Classroom teachers and school counselors need to work together through promotive, preventive, responsive, and system-support services. Promotive and preventive services can strengthen nutrition education, eating etiquette, empathy, and inclusive behavior. Responsive services can support students who experience anxiety, stigma, bullying, body image concerns, or difficulties accepting the menu. System-support services can connect school principals, classroom teachers, school counselors, school health units, parents, meal providers, health workers, and school committees.

The main recommendation of this article is to integrate Guidance and Counseling into MBG standard operating procedures in schools. Schools need procedures that not only regulate food distribution, hygiene, and meal schedules, but also address psychosocial safety, anti-bullying procedures, protection for students with allergies or special needs, privacy of health and nutrition data, and mechanisms for reporting discomfort. In addition, teacher training is needed so that classroom teachers and school counselors are able to support MBG as an educational and psychosocial program, not merely as a logistical activity.

Finally, MBG evaluation should move beyond administrative and nutritional indicators. Evaluation should also include students' comfort, sense of safety, peer relations, eating behavior, menu acceptance, school attendance, learning engagement, and psychosocial well-being. By integrating Guidance and Counseling into MBG, elementary schools can transform the program from a food distribution policy into an educational intervention that builds a safe, healthy, inclusive, and psychosocially supportive school ecosystem.

## REFERENCES

- Adolphus, K., Lawton, C. L., & Dye, L. (2013). The effects of breakfast on behavior and academic performance in children and adolescents. *Frontiers in Human Neuroscience*, 7, Article 425. <https://doi.org/10.3389/fnhum.2013.00425>
- Adolphus, K., Lawton, C. L., Champ, C. L., & Dye, L. (2016). The effects of breakfast and breakfast composition on cognition in children and adolescents: A systematic review. *Advances in Nutrition*, 7(3), 590S-612S. <https://doi.org/10.3945/an.115.010256>
- American School Counselor Association. (n.d.). *The school counselor and school counseling programs*. ASCA.
- Baker, C., Galemore, C. A., & Lowrey, K. M. (2020). Information sharing in the school setting during a public health emergency. *NASN School Nurse*, 35(4), 198-202. <https://doi.org/10.1177/1942602X20925031>
- Benn, J., & Carlsson, M. (2014). Learning through school meals? *Appetite*, 78, 23-31. <https://doi.org/10.1016/j.appet.2014.03.008>
- Cai, C., Mei, Z., Wang, Z., & Luo, S. (2025). School-based interventions for resilience in children and adolescents: A systematic review and meta-analysis of randomized controlled trials. *Frontiers in Psychiatry*, 16, Article 1594658. <https://doi.org/10.3389/fpsy.2025.1594658>
- Cohen, J. F. W., Hecht, A. A., McLoughlin, G. M., Turner, L., & Schwartz, M. B. (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(3), 911. <https://doi.org/10.3390/nu13030911>
- de Medeiros, G. C. B. S., de Azevedo, K. P. M., Garcia, D., Segundo, V. H. O., Mata, Á. N. S., Fernandes, A. K. P., Santos, R. P., Trindade, D. D. B. B., Moreno, I. M., Martínez, D. G., & Piuvezam, G. (2022). Effect of school-based food and nutrition education interventions on the food consumption of adolescents: A systematic review and meta-analysis. *International Journal of Environmental Research and Public Health*, 19(17), 10522. <https://doi.org/10.3390/ijerph191710522>
- Direktorat Sekolah Dasar. (n.d.). *Program prioritas*. Kementerian Pendidikan Dasar dan Menengah.
- Durlak, J. A., Weissberg, R. P., Dymnicki, A. B., Taylor, R. D., & Schellinger, K. B. (2011). The impact of enhancing students' social and emotional learning: A meta-analysis of school-based universal interventions. *Child Development*, 82(1), 405-432. <https://doi.org/10.1111/j.1467-8624.2010.01564.x>
- Illøkken, K. E., Johannessen, B., Barker, M. E., Hardy-Johnson, P., Øverby, N. C., & Vik, F. N. (2021). Free school meals as an opportunity to target social equality, healthy eating, and school functioning: Experiences from students and teachers in Norway. *Food & Nutrition Research*, 65, Article 7702. <https://doi.org/10.29219/fnr.v65.7702>
- Kementerian Pendidikan Dasar dan Menengah. (2025). *7 Jurus BK Hebat*. Direktorat Guru Pendidikan Menengah dan Pendidikan Khusus.
- Kementerian Pendidikan Dasar dan Menengah. (2025). Peraturan Menteri Pendidikan Dasar dan Menengah Nomor 11 Tahun 2025 tentang Pemenuhan Beban Kerja Guru.
- Kementerian Pendidikan Dasar dan Menengah. (2025, November 20). *Bangun karakter murid, Kemendikdasmen latih puluhan ribu guru*. Kementerian Pendidikan Dasar dan Menengah.
- Kementerian Pendidikan Dasar dan Menengah. (2026). Peraturan Menteri Pendidikan Dasar dan Menengah Nomor 6 Tahun 2026 tentang Budaya Sekolah Aman dan Nyaman.
- Lemberger-Truelove, M. E., Li, D., Kim, H., & Wills, L. (2025). Meta-analysis of social and emotional learning interventions delivered by school counselors. *Journal of Counseling & Development*.

- Ma, Z., Ma, Y., Zou, W., & Fan, Z. (2025). Free school meals and educational outcomes: Evidence from China's Nutrition Improvement Program. *Frontiers in Public Health*, 13, Article 1542861. <https://doi.org/10.3389/fpubh.2025.1542861>
- Mauer, S., Torheim, L. E., & Terragni, L. (2022). Children's participation in free school meals: A qualitative study among pupils, parents, and teachers. *Nutrients*, 14(6), 1282. <https://doi.org/10.3390/nu14061282>
- Nocerino, R., Mercuri, C., Bosco, V., Aquilone, G., Guillari, A., Simeone, S., & Rea, T. (2024). Food allergy-related bullying in pediatric patients: A systematic review. *Children*, 11(12), 1485. <https://doi.org/10.3390/children11121485>
- Orta-Aleman, D., Zuercher, M. D., Bacon, K. A., Chelius, C., Hecht, C. E., Hecht, K., Ritchie, L. D., Cohen, J. F. W., & Gosliner, W. (2024). Students' perspectives on the benefits and challenges of universal school meals related to food accessibility, stigma, participation, and waste. *Journal of Nutrition Education and Behavior*, 56(9), 599-610. <https://doi.org/10.1016/j.jneb.2024.04.011>
- Petchoo, J., Kaewchutima, N., & Tangsuphoom, N. (2022). Nutritional quality of lunch meals and plate waste in school lunch programme in Southern Thailand. *Journal of Nutritional Science*, 11, e35. <https://doi.org/10.1017/jns.2022.31>
- Piochi, M., Rinaldi, M., & Torri, L. (2025). The impact of children's food neophobia on meal perception and food waste behaviours in school canteens. *Foods*.
- Presiden Republik Indonesia. (2025). Peraturan Presiden Nomor 115 Tahun 2025 tentang Tata Kelola Penyelenggaraan Program Makan Bergizi Gratis.
- Rimbawan, Nurdiani, R., Rachman, P. H., Kawamata, Y., & Nozawa, Y. (2023). School lunch programs and nutritional education improve knowledge, attitudes, and practices and reduce the prevalence of anemia: A pre-post intervention study in an Indonesian Islamic boarding school. *Nutrients*, 15(4), 1055. <https://doi.org/10.3390/nu15041055>
- Sicherer, S. H., & Wang, J. (2025). Management of food allergy in schools: Clinical report. *Pediatrics*, 156(6), e2025073168.
- Simeone, S., Aquilone, G., Mercuri, C., Lotito, F., Bosco, V., Rea, T., Berni Canani, R., & Nocerino, R. (2025). Impact of school nurses on children with food allergies: A comprehensive review. *Children*, 12(2), 201. <https://doi.org/10.3390/children12020201>
- Tuorila, H., Palmujoki, I., Kytö, E., & Törnwall, O. (2015). School meal acceptance depends on the dish, student, and context. *Food Quality and Preference*, 46, 126-136. <https://doi.org/10.1016/j.foodqual.2015.07.013>
- Wang, D., Shinde, S., Young, T., & Fawzi, W. W. (2021). Impacts of school feeding on educational and health outcomes of school-age children and adolescents in low- and middle-income countries: A systematic review and meta-analysis. *Journal of Global Health*, 11, 04051. <https://doi.org/10.7189/jogh.11.04051>
- Whiston, S. C., Tai, W. L., Rahardja, D., & Eder, K. (2011). School counseling outcome: A meta-analytic examination of interventions. *Journal of Counseling & Development*, 89(1), 37-55. <https://doi.org/10.1002/j.1556-6678.2011.tb00059.x>

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