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The Indonesian Government's Conflict Management in Handling Free Nutritional Meal (MBG) Program Poisoning Crisis

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ABSTRACT

The Free Nutritional Meal Program (*Makan Bergizi Gratis*–MBG), launched by the Indonesian government in 2025, represents a strategic policy to reduce stunting, improve child nutrition, and strengthen human resource development. Despite its developmental objectives, the program encountered a significant crisis following a series of food poisoning incidents across multiple provinces, raising concerns regarding food safety governance, institutional coordination, and policy legitimacy. This study aims to analyze the Indonesian government's conflict management, crisis response, and image restoration strategies in handling the MBG poisoning crisis. The research employs a qualitative approach using literature review and document analysis of government reports, official statements, academic literature, and credible media sources. The analysis is guided by Conflict Management Theory, Crisis Management Theory, and Benoit's Image Restoration Theory. The findings indicate that the MBG poisoning incidents constituted not only a food safety failure but also a broader governance crisis characterized by weak early detection mechanisms, fragmented implementation, limited oversight, and contested institutional accountability. In response, the government adopted a combination of conflict resolution, crisis management, and reputation repair strategies through cross-sectoral coordination, corrective policy interventions, public apologies, and strengthened food safety standards. These measures contributed to mitigating conflict escalation, restoring public trust, and maintaining policy legitimacy. The study concludes that the long-term sustainability of the MBG Program depends on strengthening food safety governance, enhancing integrated multi-stakeholder coordination, improving participatory risk communication, and establishing adaptive accountability mechanisms to ensure effective and legitimate policy implementation.

INTRODUCTION

Indonesia faces significant challenges in ensuring the 121 fulfillment of basic community needs, particularly in the areas of food and nutrition (Prayitno et al., 2022). One of the issues that remains a major challenge in Indonesia is stunting, caused by inadequate nutritional intake during the first 1,000 days of life (HPK), from pregnancy to the age of two. This lack of nutritional intake not only hinders physical growth but also disrupts a child's brain development, affecting intelligence and productivity in adulthood (Rumlah, 2022). To address this problem, one of President Prabowo Subianto's flagship policies is the Free Nutritious Meal Program (MBG), which aims to improve the nutrition and health of Indonesian children. This program is in line with the Sustainable Development Goals (SDGs), particularly Goal 2, which aims to end hunger and ensure access to safe and nutritious food for all.

Based on the 2022 Indonesian Nutritional Status Survey (SSGI), the national stunting prevalence remains at 21.6 percent, making the MBG Program an important long-term investment in human resource development while contributing to reducing the national stunting rate (Kementerian Sekretariat Negara Republik Indonesia, 2024). The MBG Program was officially launched by the Indonesian government on January 6, 2025 as the initial stage of national implementation. This program aims to provide nutritious food for schoolchildren to reduce stunting and improve national food security. According to the Head of the National Nutrition Agency (BGN), Dadan Hindayana, in the initial phase the program targeted 3 million beneficiaries across Indonesia, with plans to increase to 15 million people by August 2025. Based on the BGN report, by August 2025 the MBG Program had successfully reached more than 20 million beneficiaries in various regions of Indonesia (Badan Gizi Nasional, 2025).

The rapid expansion of the MBG Program, however, was followed by a series of food poisoning incidents in multiple provinces, raising concerns over food safety governance and implementation readiness. Data compiled from the National Nutrition Agency show that poisoning cases occurred across all major regions of Indonesia. Region II (Java) accounted for the highest number of MBG food poisoning victims, representing 55.3% of all recorded cases nationwide. Region I (Sumatra) contributed 27.2%, while Region III (Kalimantan, Bali, Sulawesi, East Nusa Tenggara, Maluku, and Papua) accounted for 17.5%. The concentration of cases in Java suggests that implementation risks were not limited to geographically remote areas but also emerged in regions with relatively stronger administrative and infrastructure capacities. This pattern indicates that the poisoning incidents were associated more with systemic governance and food safety management issues than with regional disparities alone.

The Implementation of the MBG Prog"am h's therefore not been entirely without obstacles. According to data from the

Food and Drug Monitoring Agency (BPOM), at least 17 extraordinary incidents (*kejadian luar biasa* / KLB) of food poisoning were recorded throughout 2025 and were directly related to MBG implementation in ten provinces (CNN Indonesia, 2025b). These cases indicate that although the program has strong developmental goals, aspects of food safety, distribution supervision, and kitchen sanitation at the Nutrition Fulfillment Service Units (SPPG) remain weak points that must be addressed immediately to prevent negative impacts on recipients.

Previous studies have generally emphasized the developmental potential of the MBG Program. Agustini (2025) found that MBG contributed positively to improving community nutritional status and educational quality, particularly in student attendance and concentration. Furthermore, the program also encouraged local economic empowerment through the procurement of food from local producers. Evidence from primary school settings also indicates that MBG may contribute to improved student attendance, attention, and cognitive readiness when nutritional standards are adequately maintained (Yamin et al., 2025). Similarly, Ramlan et al. (2025) argue that school feeding programs in various countries have contributed to improving attendance, learning participation, and food security. However, these studies also highlight several implementation challenges, including inconsistencies in nutritional standards, unequal distribution, and weak coordination among stakeholders, which may hinder program effectiveness (Agustini, 2025). Meanwhile, Amril and Sazali (2025) found that the successful implementation of MBG remains constrained by weak communication strategies, limited technical regulations, and low levels of public participation and communication literacy. Communication challenges are also highlighted by Sianturi (2025), who found that public discussions surrounding MBG during its early implementation were characterized by information ambiguity and predominantly negative public sentiment, indicating the importance of clear government communication in maintaining policy legitimacy.

Recent studies further emphasize that the long-term sustainability of the MBG Program depends on governance coherence, decentralized implementation capacity, community participation, and effective food safety regulation. Weak institutional integration and coordination gaps may undermine the resilience and legitimacy of large-scale school feeding programs (Lubis et al., 2026). Moreover, fragmented implementation across agricultural, educational, and logistical sectors has been identified as a major challenge in achieving policy effectiveness, particularly in geographically diverse settings such as Indonesia. Governance fragmentation, supply-chain inefficiencies, and coordination failures may reduce the effectiveness of school feeding policies and create implementation vulnerabilities (Lee et al., 2026). In addition, environmental and sustainability perspectives suggest that the long-term effectiveness of MBG depends on the integration of food policies with environmental sustainability principles, local food systems, and community-based economic empowerment (Julian & Pranata, 2025). More broadly, fragmented food governance and weak integration between central and local government institutions have long been recognized as major challenges in Indonesia's food management system, potentially affecting the effectiveness of national food-related programs (Gunawan et al., 2024).

Previous research also demonstrates that the emergence of MBG as a national policy agenda was strongly influenced by political considerations, public expectations regarding nutrition improvement, and government efforts to place food security within the broader development agenda (Bisyri et al., 2025). Similar findings are reported by Herwawan et al. (2026), who identify coordination gaps, funding delays, logistical barriers, and implementation challenges as major constraints affecting the effectiveness and sustainability of the MBG Program, particularly in geographically dispersed regions. Beyond nutritional outcomes, several scholars have also highlighted the importance of stakeholder participation and social justice in the implementation of school feeding policies. Juliani and Wibawa (2024) argue that participatory governance is essential to ensure that public welfare programs remain equitable, accountable, and responsive to the needs of affected communities. However, these studies primarily focus on participation and distributive justice, while providing limited attention to how governments manage conflict, crisis escalation, and reputational challenges when policy implementation generates public harm.

Although previous studies have provided important insights into the nutritional, educational, economic, and implementation dimensions of MBG, limited attention has been given to how the government manages conflict and crisis when policy implementation generates public harm and reputational pressure. Existing research predominantly examines MBG as a developmental and service-delivery program, while the governance dynamics that emerge during policy failure remain underexplored. In particular, little is known about how government institutions respond to food poisoning incidents, manage inter-organizational tensions, address public criticism, and restore institutional credibility during crisis situations. This gap is important because the MBG poisoning cases not only reflect technical failures in food safety management but also generate conflict among policy actors, public distrust, and challenges to government reputation. Therefore, this study positions itself within the intersection of public policy, crisis management, and government communication by examining how the Indonesian government manages conflict, responds to crisis escalation, and undertakes image restoration following the MBG food poisoning incidents.

To understand this problem, this study employs conflict management, crisis management, and image restoration as its analytical lenses. Conflict management explains how the government manages tensions, competing interests, and institutional blame among policy actors during crisis escalation (Rahim, 2011; Robbins, 2017; Ansell & Gash, 2008). Crisis management helps explain how the government detects, responds to, and recovers from policy disruption that threatens public trust and institutional legitimacy (Fearn-Banks, 2016; Coombs & Holladay, 2015; Ulmer et al., 2017). Meanwhile, Benoit's Image Restoration Theory is used to analyze how the government restores legitimacy and public trust through apology, corrective action, and strategic communication after reputational damage occurs (Benoit, 2015). Therefore, this study aims to analyze the forms and causes of crisis in the MBG Program, the Indonesian government's conflict and crisis response strategies, and the image restoration efforts undertaken to maintain policy legitimacy and public trust.

METHODS

This study employs a qualitative approach using literature review and document analysis to examine the Indonesian government's conflict management in handling the MBG Program poisoning crisis. A qualitative approach was selected

because the study focuses on understanding policy responses, institutional coordination, crisis communication, and reputation management within a complex public policy setting rather than testing causal relationships statistically (Fatimah et al., 2025). Document analysis is particularly suitable for examining policy processes because it enables researchers to systematically identify, evaluate, and synthesize information from multiple documentary sources relevant to a specific phenomenon (Morgan, 2022).

The study relies exclusively on secondary data obtained from four categories of sources: (1) academic literature, including books, peer-reviewed journal articles, and conference proceedings related to conflict management, crisis management, image restoration, public policy, food safety governance, and the Free Nutritious Meal Program (MBG); (2) official government documents, including presidential regulations, policy statements, and official publications issued by the National Nutrition Agency (BGN), the Ministry of Health, and the Ministry of State Secretariat; (3) reports and public statements issued by state institutions, particularly the Ombudsman of the Republic of Indonesia and other relevant oversight agencies; and (4) credible national media reports documenting the chronology of poisoning incidents and government responses, including reports from CNN Indonesia, Tempo, Liputan6, Detikcom, and iNews.

The documents analyzed were published between October 2024 and October 2025, covering the period from the pilot implementation of the MBG Program to the escalation of food poisoning incidents and the government's subsequent response. A total of 45 documents were included in the final analysis, consisting of 25 academic publications, 9 scholarly books, 3 official government documents, and 8 media reports. The document selection process followed purposive sampling to ensure relevance to the research objectives.

The inclusion criteria consisted of documents that: (1) discussed the implementation and governance of the MBG Program; (2) reported food poisoning incidents associated with MBG implementation; (3) described government responses, institutional coordination, crisis management, conflict management, or image restoration efforts; and (4) originated from credible academic, governmental, institutional, or media sources. Documents were excluded if they contained duplicated information, lacked verifiable sources, or did not provide substantive information relevant to the poisoning crisis.

Following identification, screening, and classification, the selected documents were analyzed using qualitative thematic analysis. The analysis followed three stages: first, open coding of documents to identify key issues related to food safety failures, institutional coordination, conflict dynamics, crisis response, and reputation management; second, categorization of codes into broader themes and patterns; and third, interpretation of the identified themes using the theoretical frameworks adopted in this study. Thematic analysis was selected because it facilitates the systematic identification of recurring patterns and meanings across qualitative data while providing a flexible framework for policy-oriented research.

This study applies three analytical lenses to interpret the findings. Conflict Management Theory is used to examine patterns of inter-organizational tension, blame attribution, and conflict resolution among policy actors (Rahim, 2011; Robbins, 2017; Thomas & Kilmann, 1974). Crisis Management Theory is employed to analyze the phases of crisis development and response, including early detection, acute response, and recovery (Fink, 2013; Fearn-Banks, 2016; Coombs & Holladay, 2015). Meanwhile, Benoit's Image Restoration Theory is used to assess how the government attempted to restore legitimacy and public trust through apology, corrective action, and reputation repair strategies (Benoit, 2015). Through this analytical framework, the study seeks to provide a comprehensive understanding of how the Indonesian government managed conflict, crisis, and reputational risk in the implementation of the MBG Program.

RESULTS AND DISCUSSION

The MBG Program was designed as a strategic welfare policy to improve child nutrition, reduce stunting, and strengthen human resource development through state-funded school feeding. As a large-scale public intervention implemented across diverse administrative regions, the program required strong coordination, food safety control, and institutional readiness. However, its rapid expansion exposed significant implementation vulnerabilities, particularly in food safety governance and inter-agency coordination, which became more visible through the emergence of food poisoning incidents in multiple provinces.

Chronology and Escalation of the MBG Crisis

The Free Nutritious Meal Program began with a trial phase in Nganjuk Regency, East Java, in early October 2024. Seven elementary school students reportedly experienced nausea, stomach pain, and vomiting after consuming the MBG menu, requiring treatment at a community health center (Inews, 2024). Although considered a minor incident, this incident served as an early indicator of weaknesses in the program's food quality control system, as symptoms of poisoning continued to occur in various areas (Table 2).

The spread of poisoning cases across regions shows that the MBG crisis developed beyond isolated local incidents and began to reflect a broader implementation problem. Several reported cases from different provinces are summarized in Table 1.

Table 1. Number of Students from Various Provinces Experiencing Poisoning Symptoms

No.	Location	Province	Number of Affected Students
1	Sukoharjo Regency	Central Java	40
2	Nunukan Regency	North Kalimantan	30
3	Cianjur Regency	West Java	165
4	Bandung City	West Java	585
5	Bogor City	West Java	223
6	Pali Regency	South Sumatra	173
Total			**1,216**

Source: Tempo (2025)

Table1 indicates that poisoning incidents were not confined to a single locality but occurred across multiple provinces with varying scales of impact. This distribution suggests that food safety risks in the MBG Program were systemic rather than incidental, reflecting broader weaknesses in quality control, sanitation, and implementation oversight. The MBG program was officially launched on January 6, 2025, but within weeks of its national implementation, food poisoning cases began to occur in various regions. Within the first few months of

implementation, thousands of students from various provinces reported experiencing food poisoning symptoms after consuming food from the MBG program. The provisional total by early 2025 had reached 1,376 student victims across Indonesia.

Entering mid-2025, cases of poisoning due to the MBG Program increased sharply and spread to various provinces. The period from July to September 2025 was known as the second wave of the crisis, marked by a significant spike in the number of victims and the frequency of incidents occurring weekly. On July 22–23, 2025, a major case occurred in Kupang and Southwest Sumba, East Nusa Tenggara, affecting more than 140 students with symptoms of headaches, nausea, vomiting, and weakness. The menu suspected to be the cause consisted of rice, potatoes, carrots, cabbage, and fried tuna. Furthermore, major poisoning incidents were also reported in West Bandung Regency, where the number of victims exceeded 1,000 students (Tempo, 2025).

New cases were also reported on September 25, 2025, in the Riau Islands, specifically at SMP Negeri 2 Karimun and SDN 016 Sagulung, Batam, which caused dozens of students to experience symptoms of nausea and dizziness (CNN Indonesia, 2025a). Shortly thereafter, on October 16, 2025, 426 students at SMAN 1 Yogyakarta reported experiencing diarrhea and stomach aches after consuming MBG food in the morning (Liputan6, 2025).

This crisis shows weak quality control, lack of coordination between institutions, and the need for reformulation of the food monitoring system in the implementation of national-scale social programs. The recurrence of food poisoning incidents also reflects broader food safety challenges in Indonesia, where food safety protection remains insufficient and foodborne outbreaks continue to pose risks to public health and the fulfillment of the right to health (Damayanti & Wahyati, 2019).

The repeated occurrence of similar incidents across provinces indicates that the MBG crisis was not an isolated technical failure, but a systemic governance problem involving weak oversight, fragmented implementation, and delayed institutional response, which is characteristic of public-sector crises where governance failure, coordination breakdown, and legitimacy pressures interact simultaneously (Boin et al., 2017). Similar concerns are raised by Puteri and Kaharuddin (2026), who argue that recurring mass poisoning incidents in the MBG Program reveal accountability weaknesses and highlight the need for stronger legal mechanisms to protect beneficiaries and ensure compliance with food safety standards. Recent legal scholarship similarly argues that recurring poisoning incidents reveal weaknesses in the regulatory foundation of the MBG Program, creating accountability gaps and undermining the protection of citizens' right to health (Firdaus & Astuti, 2026).

Government Conflict and Crisis Management

The crisis that occurred in the implementation of the MBG Program can be categorized into three, that is: *First*, Product Crisis. According to Coombs and Holladay (2015), a product crisis occurs when a distributed product is deemed defective or dangerous. In the context of MBG, the poisoning cases experienced by students indicate a non-compliance with food safety standards, thus reducing public confidence in the program's quality (Azizi, 2025). This was reflected in repeated reports of contaminated food, poor menu handling, and inadequate sanitation in MBG kitchens across multiple regions.

Second, Public Service Crisis. A public service crisis occurs when institutions fail to provide services that meet public expectations, either due to negligence, weak oversight, or suboptimal inter-agency coordination (Coombs & Holladay, 2015). Incidents of mass poisoning reflect the failure of implementing agencies to ensure safe and accountable public services. This indicates weak supervision of the Nutrition Fulfillment Service Unit (SPPG) kitchen, food quality control, and suboptimal inter-agency coordination (Rayhan, 2025). The scale and repetition of incidents indicated that the problem extended beyond food quality and reflected weaknesses in service supervision, inter-agency coordination, and implementation control. Habibah et al. (2025) similarly identify weak food safety standard implementation, limited human resource capacity, and inadequate kitchen infrastructure as major constraints affecting the effectiveness of the MBG Program.

Third, Reputational Crisis. According to Benoit (2015), a reputational crisis arises from negative public perception of an organization. Widespread coverage of the MBG poisoning case raised doubts about the government's credibility and tarnished the image of national social programs (Syamsu, 2025). The widespread media coverage and public criticism shifted the issue from operational failure to a broader crisis of policy legitimacy and government credibility.

Based on the crisis stages proposed by Coombs and Holladay (2015), the crisis in the MBG Program can be analyzed through three main phases: *First*, Early Detection Phase (Prodromal Stage). At this stage, indications of a potential crisis began to emerge through reports of poisoning cases in several areas, such as the case of 140 students at SMP Negeri 8 Kupang in July 2025, as well as similar cases in Sleman and Lebong (Detikcom, 2025). However, the government's response at this stage was deemed suboptimal due to a lack of supervision and initial audits of the Nutrition Fulfillment Service Unit (SPPG) kitchens.

Second, Rapid Response Phase (Acute Stage). When cases spread and gained public attention, the government immediately held a cross-ministerial coordination meeting at the Ministry of Health on September 28, 2025. Several measures were implemented, such as the temporary closure of problematic SPPGs, sterilization of eating utensils, sanitation improvements, and the implementation of the Hygiene Sanitation Certificate (SLHS) (Kementerian Sekretariat Negara Republik Indonesia, 2025). Furthermore, the government ensured that victims received prompt medical treatment and conducted evaluations to prevent recurrence.

Third, Recovery Phase (Chronic–Resolution Stage). Once the crisis is under control, the government focuses on restoring the system and public trust through training kitchen volunteers by the National Agency of National Development Planning (BGN), the Food and Drug Monitoring Agency (BPOM), and the Health Office, as well as strengthening cross-agency oversight. The government also apologizes and affirms its commitment to continuous improvement (Kementerian Sekretariat Negara Republik Indonesia, 2025). This phase is a crucial part of the crisis management cycle to restore reputation and rebuild public trust through concrete corrective actions.

The food poisoning crisis during the Free Nutritional Meals (MBG) program gave rise to complex conflict dynamics at the policy and implementation levels. The conflict was not only related to technical aspects such as food safety and kitchen sanitation at the Nutrition Fulfillment Service Unit (SPPG), but also involved institutional and communication

dimensions due to unclear boundaries of responsibility between actors. These conflicts involved not only the central government and implementing agencies, but also local governments, schools, parents, and media actors who contested responsibility, accountability, and policy legitimacy during crisis escalation. The conflict was distributive in nature, involving contestations over authority, attribution of blame, and differing interests between the central government, local governments, schools, and the community. These differing interests and risk perceptions triggered the conflict's escalation, particularly when food poisoning cases began to spread to various provinces in mid-2025 and media coverage increased.

From a conflict management perspective, the Indonesian government implemented several conflict-handling modes as proposed by Thomas and Kilmann (1974). During the early phase of the crisis, the government's response tended to reflect an avoidance mode. Initial poisoning incidents were treated as isolated operational problems rather than indicators of a broader governance crisis, resulting in limited corrective action and delayed institutional intervention. However, as poisoning cases expanded across provinces, victim numbers increased, and media attention intensified, the political and reputational costs of inaction became substantially higher. This escalation altered the conflict environment and reduced the government's ability to rely on avoidance strategies.

Consequently, the government shifted toward a competing mode by implementing more assertive measures, including the temporary closure of problematic SPPGs, mandatory Hygiene Sanitation Certification (SLHS), food safety audits, and stricter supervision mechanisms. This shift occurred because the government needed to demonstrate control, restore administrative authority, and prevent further escalation of public criticism. Nevertheless, unilateral intervention alone was insufficient because the crisis involved multiple actors with overlapping responsibilities, including BGN, BPOM, local governments, schools, and health authorities. As a result, the government increasingly adopted collaborating and compromising modes through cross-ministerial coordination meetings, shared monitoring mechanisms, and the division of responsibilities among implementing agencies. The transition from avoidance to competing and subsequently to collaborative approaches illustrates how conflict management strategies evolved in response to changing crisis conditions. Rather than representing separate actions, these strategies formed a sequential process in which increasing crisis severity required greater institutional coordination to maintain policy continuity and legitimacy (Thomas & Kilmann, 1974).

The government's conflict management directly impacted the dynamics of the crisis and the legitimacy of the MBG policy. In the initial phase, weak conflict management exacerbated the crisis because delayed responses and information gaps fueled public distrust. However, in the subsequent phase, cross-agency consolidation, corrective actions, and public apologies contributed to mitigating symbolic conflict between the government and the public while restoring trust in the program. Thus, conflict management plays an integral role in crisis management, with the government's success in resolving internal and external conflicts determining the effectiveness of crisis management and the sustainability of national-scale social programs like the MBG.

Handling the food poisoning crisis during the MBG Program requires an integrated response across health, food safety, regulations, and public communication. According to Rejeki & Djunaedi (2023), successful crisis mitigation depends on a swift medical response and cross-agency coordination in reporting, investigation, and monitoring food distribution. Similarly, Aidonojie & Francis (2021) emphasize that weak regulations and law enforcement can exacerbate the situation, making synergy between regulatory agencies, local governments, and the private sector crucial in crisis management.

In response to the crisis, the government held a cross-ministerial coordination meeting at the Ministry of Health on September 28, 2025. This meeting involved the Ministry of Health, the National Nutrition Agency (BGN), and the Food and Drug Monitoring Agency (BPOM) to formulate strategic steps to strengthen MBG governance. According to a statement by Coordinating Minister for Food, Zulkifli Hasan, the government has established six main steps. In response to the crisis, the government formulated six strategic measures to strengthen MBG governance, including the temporary closure of problematic SPPGs, routine sterilization of eating utensils, sanitation improvement, mandatory hygiene certification (SLHS), optimization of health center and school health unit monitoring, and stronger coordination between ministries, local governments, and related stakeholders (Kementerian Sekretariat Negara Republik Indonesia, 2025).

Various government agencies also implemented follow-up measures. State Secretary Prasetyo Hadi apologized for the repeated poisoning cases and ensured medical treatment for victims and a thorough evaluation of regional implementation. He emphasized that the government would take firm action against violations without halting the distribution of MBG to beneficiary students. President Prabowo Subianto emphasized that the MBG Program would continue while strengthening food safety standards and implementation oversight (Kementerian Sekretariat Negara Republik Indonesia, 2025).

In addition, the Ombudsman of the Republic of Indonesia for the Special Region of Yogyakarta conducted field monitoring following the incident in Sleman Regency and plans to review the MBG distribution system and impose sanctions on SPPGs found to have violated procedures (Ombudsman Republik Indonesia, 2025). At the regional level, the National Nutrition Agency of the Serang Region, in collaboration with the BPOM, the Health Office, and nutritionists, held training for MBG kitchen volunteers in Banten on hygiene standards, safe distribution, and food waste management (Detikcom, 2025).

These interventions indicate that the government's response gradually shifted from reactive crisis control to institutional crisis governance, where coordination, standardization, and accountability became central to restoring policy legitimacy. This finding is consistent with Astuti et al. (2026), who argue that adaptive coordination, facilitative leadership, and collaborative governance mechanisms are critical in addressing food security challenges and maintaining policy effectiveness across multiple levels of government. These findings are consistent with studies that identify weak quality control, limited inter-agency coordination, and insufficient food safety supervision as central governance failures behind the MBG poisoning incidents, indicating that the crisis extends beyond technical implementation problems and reflects broader issues of state accountability (Candra et al., 2025).

Government Image Restoration and Policy Legitimacy

Based on Benoit's Image Restoration Theory, the government's efforts to address the MBG Program poisoning crisis reflect the implementation of several organizational image

restoration strategies. Taken together, these findings suggest that the government adopted a predominantly accommodative image restoration strategy characterized by acknowledgement of the crisis, corrective action, and limited responsibility transfer. From the perspective of Benoit (2015), the combination of mortification and corrective action is generally considered more credible than denial because it signals institutional accountability and willingness to address the source of the problem. In the MBG case, evidence of corrective measures such as kitchen audits, hygiene certification requirements, sanitation improvements, and cross-agency monitoring indicates that image restoration efforts were accompanied by concrete policy interventions rather than symbolic communication alone.

However, the effectiveness of these strategies should be interpreted cautiously. Evidence from social media analysis conducted by Irfansyah et al. (2026) also suggests that public responses toward the MBG Program remain mixed across digital platforms, indicating that reputational recovery is an ongoing process rather than an immediate outcome. While the government's response may have reduced immediate reputational pressure and demonstrated responsiveness to public concerns, this study does not employ survey data or public opinion measurements capable of directly assessing changes in public trust. Therefore, it cannot conclusively determine whether trust was fully restored. Instead, the findings indicate that image restoration efforts contributed to maintaining policy continuity and mitigating further legitimacy challenges during the crisis. The long-term effectiveness of these strategies ultimately depends on whether corrective actions successfully prevent similar incidents and sustain public confidence in the implementation of the MBG Program.

CONCLUSION

The findings of this study demonstrate that the poisoning crisis in the Free Nutritional Meal Program (MBG) should not be understood merely as a technical failure in food provision, but as a broader governance crisis involving weak food safety oversight, fragmented implementation, institutional coordination gaps, and contested accountability among policy actors. The recurrence of poisoning cases across regions indicates that the crisis was systemic rather than incidental, reflecting structural weaknesses in the governance of national-scale welfare policy implementation. From a conflict management perspective, the study finds that the Indonesian government's response evolved from an initial avoidance mode toward more assertive and collaborative approaches as the crisis escalated. This shift shows that conflict management was not separate from crisis response, but an integral component of crisis governance, particularly in managing institutional tensions, blame attribution, and public distrust. The government's ability to move from delayed reaction to cross-sectoral coordination and corrective intervention played an important role in containing conflict escalation and stabilizing policy implementation.

From a crisis management perspective, the MBG case illustrates that delayed early detection increased the severity of the crisis, while rapid cross-ministerial intervention, corrective action, and institutional standardization were critical in mitigating operational disruption and restoring administrative control. The government's response demonstrates that the effectiveness of crisis governance in public policy depends not only on technical intervention, but also on the speed of institutional coordination and the clarity of response mechanisms. Furthermore, the study finds that the government's image restoration strategy particularly through mortification, corrective action, and limited evasion of responsibility played a significant role in reducing reputational damage and rebuilding public trust. This suggests that legitimacy recovery in public-sector crises depends not only on resolving operational failures, but also on strategic communication, public accountability, and visible institutional responsiveness.

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