

Policy Brief

HEALTHY CANTEENS TO CREATE A HEALTHY FOOD ENVIRONMENT IN JAKARTA'S INSTITUTIONS AND PUBLIC FACILITIES

Background

Situation of Non-Communicable Disease Risk Factors in Jakarta

1. The prevalence of overweight and obesity in DKI Jakarta is higher than the national average in all age groups (SKI, 2023) For example, in the 5–12 age group prevalence of obesity reached 12.7% compared to the national average of only 7.8%. Furthermore, the prevalence of obesity in the age group >18 years reached 31.8%, higher than the national average of 23.4%.
2. The habit of consuming sweet, high-sodium, and high-fat foods and drinks in Jakarta is close to the national average based on data from SKI 2023.
3. Based on the results of screening for non-communicable disease risk factors in DKI Jakarta in 2025, the obesity rate was 26.03%. Of the six regions in Jakarta, the highest obesity rate was in the Seribu Islands Regency at 35.06%.
4. The results of the assessment of visitor consumption patterns at 9 canteen locations surveyed in Jakarta showed 4 main findings that is :
 - Every visitor consumes sweetened drinks in the canteen at least 3–4 times a week.
 - 47.6% of visitor respondents consumed fried food in the canteen.
 - 39.6% of visitor respondents bought packaged snacks that were high in salt due to the addition of high-sodium flavoring powder.
 - Only 2 out of 9 canteen locations surveyed sold fresh cut fruit. The rest did not provide cut fruit or only sold it in the form of juice with added sugar and fruit soup.

5. Testing of sugar, salt, fat and food additive content has been carried out by LABKESDA on food samples sold at 9 canteen locations in Jakarta with the following results:

- Banana chocolate The tested food was identified as high in energy and fat with a fat content of 13.75 grams per serving.
- High sodium content was also found in samples of soto mie, ayam geprek, and chicken with spicy cheese sauce. One serving of ayam geprek contains 970 mg of sodium, which contributes 60% of the daily sodium requirement based on the % RDA.
- The guava juice and sweet tea samples had a high sugar content, averaging 12 grams per serving. This sugar content likely comes from added sugars.
- In the yellow noodle sample from soto mie, it was found to be positive for formalin and borax.

6. The results of observations of Jakarta's healthy canteens found:

- There is a collaborative practice between two school locations that uses packaged and fast food products high in sugar, salt, and fat. This collaboration takes the form of CSR activities, such as providing tablecloths, signage, and product promotion on school bulletin boards;
- There are public facility canteens that are not equipped with adequate sanitation facilities, especially toilets;
- Violations of food safety and hygiene enforcement were found at the canteen locations of health facilities and public facilities.
- Only 3 of the 9 canteen locations provide communication, information, and nutrition education materials that are easy for visitors to understand.
- Visitors and/or food handlers were still found smoking in 4 of the 9 healthy canteen observation locations.
- There are still traders and/or food handlers who do not implement the nutrition and food safety circulars issued by canteen and community health center managers, citing declining sales.
- The absence of a mechanism for enforcing nutritional standards and food safety provisions in the implementation of healthy canteens in the field.

- Compliance with the use of aprons, masks/mouth covers, head coverings (personal protective equipment) is still low due to hot room conditions and poor air circulation.

Policy Landscape for Non-Communicable Disease Management and Healthy Canteens

1. Regulatory support at the central level in efforts to control non-communicable diseases through nutritional interventions

- Law No. 17/2023 mandates the control of NCD risk factors, particularly sugar, salt, and fat (GGL) consumption.
- Government Regulation No. 28/2024 (Article 200 paragraph 2 letter e) mandates Regional Governments to establish low sugar, salt and fat (GGL) food areas.
- Government Regulation No. 28 (Article 202 letter a) mandates regional governments to regulate and provide guidance to food and beverage traders through product standardization and business activities integrated into a health risk-based licensing system.
- Derivative regulations regarding sugar, salt, and fat thresholds are still being worked on by the Coordinating Ministry for Human Development and Culture (Kemenko PMK).

2. The role and responsibility of local government in organizing healthy canteens in schools and workplaces.

- PP No. 28/2024 (Article 202 paragraph 2 letter a) regulates and provides guidance to traders around schools and workplaces to control the risk of non-communicable diseases.
- Minister of Education, Culture, Research and Technology Regulation No. 22/2023 (Article 19) requires school canteens to have a special room that is safe from pollution and equipped with healthy canteen facilities and infrastructure.
- The 2025 National Guidelines for Healthy Canteens issued by the Ministry of Primary and Secondary Education mandates the Principal to manage the flow of infrastructure fulfillment, policies, and guidance for vendors around the school through coordination with the UKS/M Supervisory Team.

3. Meanwhile, Jakarta, through Gubernatorial Regulation No. 140/2013 concerning Healthy School Canteens, still only regulates food safety in school canteens.

Key Risks and Mitigation

Key risks and mitigation are considerations for the implementation and refinement of the revised Healthy Canteen Regulation to minimize risks, detailed as follows:

Key Risk	Mitigation Steps
Cross-Sector Coordination 1. Interpretation of roles and responsibilities in the implementation of Healthy Canteen 2. Differences in program and budget priorities, and not yet included in the current year's budget planning	Establish a working group to prepare technical guidelines for nutritional standards, food safety, and guidance, supervision and implementation schemes that are aligned with the roles and functions as well as program priorities of each cross-sectoral stakeholder as a reference for budget and program planning through a Governor's Decree.
Resistance from MSMEs/Food and Beverage Providers 1. Accumulated expenditure from improving food quality 2. Consider it "difficult" to have to meet healthy eating criteria. 3. Potential reduction in sponsorship revenue sources.	Involving MSMEs/Food and Beverage Providers in every process of drafting gubernatorial regulations. Planning the policy transition and adaptation process, as well as guidelines for canteen managers and sellers by facilitating training, socialization, and incentive schemes.

Key Risk	Mitigation Steps
Food Industry Intervention 1. Lobbying for compliance with policies is not effective. 2. The campaign against unhealthy eating and drinking continues to be carried out outside public facilities. 3. Sign in as a sponsor of another health program.	Develop technical guidelines related to partnerships and collaborations, as well as conflict of interest regulations.
Unhealthy Food Environment Minimarkets or street vendors continue to sell outside public facilities, without wanting to be regulated.	Encourage the implementation of low GGL areas and sustainable monitoring and evaluation mechanisms by fostering and involving community elements in these public facilities.

Policy Recommendations

1. The expansion of the Jakarta Healthy Canteen area plan to include educational institutions, offices, health facilities, and other public facilities takes into account the risk of unhealthy food environments contributing to increased obesity rates in all age groups.
2. Establishing 4 pillars of success indicators for Jakarta's healthy canteens, including: (1) nutritional standards, (2) food safety, (3) healthy food environment, and (4) management and governance.
3. Designing a tiered implementation plan by determining the classification of healthy canteens, including: (1) pratama, (2) madya, and (3) superior, while continuing to provide guidance to existing healthy canteens.
4. Specifically, it stipulates restrictions on advertising, promotion, and sponsorship (IPS) of high-GGL food products, as well as regulations on the placement of ready-to-eat and packaged processed food products in canteens at educational institutions.
5. Accommodates the provisions of Government Regulation 28/2024 concerning guidance for food and beverage vendors operating near schools and workplaces, as well as the 2025 National Guidelines for Healthy Canteens, which mandate the implementation of outreach, education, and guidance for food vendors near schools.
6. Encourage a multi-level governance mechanism based on cross-sectors through the formation of a coaching and implementation team from the provincial, district/city, sub-district, to village levels to ensure that the four pillars of healthy canteen success indicators can be implemented practically and sustainably.
7. Providing technical support to canteen managers and food handlers through the preparation of technical instructions, modules, and menu guides, as well as providing tiered outreach and training to ensure a smooth policy transition.
8. Encourage the gradual implementation of healthy canteens, starting with the implementation of pilot healthy canteens followed by monitoring, evaluation, learning, and program adjustments.
9. Encourage the strengthening of cross-sector budget commitments to support the planning, implementation, and monitoring-evaluation of the healthy canteen program into the budget planning and programs of the DKI Jakarta Provincial Government for 2027 and beyond.

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