National Policy on Food and Nutrition in the Family Food Fulfillment Practices in Aceh: Foucauldian Analysis on the Discourses of the Power of Human Body

Kebijakan Pangan dan Gizi Nasional dalam Praktik Pemenuhan Pangan Keluarga di Aceh: Analisis Foucauldian tentang Diskursus Kuasa Tubuh Manusia

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ABSTRACT

This article aims to analyze national policies on food and nutrition in the family food fulfillment practices in Aceh. Various programs to address food and nutrition problems have been made but nutrition problems have not been successfully resolved. The results of the 2018 Basic Health Research (Riset Kesehatan Dasar, Riskesdas) showed that the prevalence of stunting for baby under two years old in Aceh is the highest in Indonesia. This article was based on Foucauldian theory and a qualitative approach, through interviews with 40 families having children under five years old to recall the type of food consumed by all family members for 3 x 24 hours. The results show that there is a gap between the practice of fulfilling family food in Aceh and national policies on food and nutrition. The practice of fulfilling family food is focused on carbohydrates and animal protein, while the government promotes the fulfillment of a balanced diet between carbohydrates and proteins (animal and vegetable) with vegetables and fruits. The gap occurs because of differences in the discourses of the power of the body and benefits of food. The community understands that food aims to make the body able to function properly (body productivity discourse). Meanwhile, the government aims for the human body to grow and develop ideally to avoid degenerative diseases (healthy body discourse). Family food fulfillment practices depend on the power of women’s knowledge, especially mothers who have the main role in fulfilling family food.

Keywords: Aceh, body power, family food, Foucault, women’s knowledge
INTRODUCTION

Referring to the food and nutrition security system, one of the strategic objectives of food and nutrition policy (Kebijakan Strategis Pangan dan Gizi, KSPG) is to develop food consumption which is diverse, nutritious, balanced and safe (Berağam, Bergizi, Seimbang dan Aman, B2SA). In addition, it aims to develop diversified food consumption based on local food, improve community nutrition, and increase the safety of fresh and processed food. This implies that in order to improve the quality of Indonesian human development (one of which is healthy population), food development must be in line with efforts to fulfill community nutritional consumption based on B2SA rules ([Dewan Ketahanan Pangan], 2015).

Nutritional status can be seen on Health Research Basis (Riset Kesehatan Dasar, Riskesdas) 2018, that the prevalence of Malnutrition (underweight) was 17.7%, prevalence of stunting was 30.8% and wasting was 10.2%. It can be seen that the prevalence of stunting is still high than other cases of malnutrition. Stunting is a condition of failure to grow in children under five due to lack of nutritional intake for a long time. Thus, stunting is very much related to food fulfillment in the long term (Kementerian PPN/Bappenas, 2018). The emergence of various problems of malnutrition and stunting in various regions in Indonesia shows that the problem of malnutrition is still “hidden”, even though various policies and programs have been made and implemented by the government with a budget of hundreds of billions of rupiah, maybe even trillions with various interesting names, such as the Social Safety Net Program. (Jaring Pengamanan Sosial, JPS), Fuel Compensation Fund, Food Assistance for the Poor (Raskin) and Supplementary Food for Undernourished Toddlers (Makanan Pendamping Air Susu Ibu, MPASl). All in the name and for the sake of poor people and children under five (Soekirman, 2017).

National policies on food and nutrition in Indonesia are also developing in accordance with the development of nutrition science and problems. The principle 4 sehat 5 sempurna which began in 1952. The slogan was updated with the program that is called Guidelines for Balanced Nutrition (Guidelines for Balanced Nutrition, PGS). The Guidelines for Balanced Nutrition is daily food consumption must contain nutrients in the right type and amount (portion) the needs of each person or age group. Food consumption must pay attention to the principles of 4 pillars, namely a variety of food, clean living behavior, physical activity and monitoring body weight regularly to maintain a normal weight ([Kemenkes], 2014). This guide is used as a reference for the Government, Provincial Governments, and Regency/City Governments, health workers and other parties involved in the implementation of balanced nutrition.

One of the characteristics of a developed nation is a nation that has a high level of health, intelligence, and high work productivity. These three things are influenced by nutritional status. Diet is the most important behavior than can affect nutritional status. This is because the quantity and quality of food and beverages will affect nutritional intake so that it will affect individual and public health. Optimal nutrition is essential for normal growth, physical and intellectual development of infants, children and all age group. Good nutrition makes a normal and healthy body and increases work productivity, so the people’s diet needs to be increased to get a balanced nutritional consumption. Good nutritional status can improve individual and community health ([Kemenkes], 2014).

Food and nutrition policies have developed in stages, or can be said to have experienced a situational evolution that is adapted to the stages of national development and the development of food and nutrition problems themselves (Izwardy, 2017). Various nutritional problems, both undernutrition including stunting and overnutrition, occurs in almost all economic strata of society, in rural and urban areas. This shows that the cause of nutritional problems is not only poverty, but also the lack of knowledge about the healthy life and nutrition (Gustina, 2019).

One of the problems faced is changes in the household food consumption patterns from time to time which are influenced by socio-cultural conditions in their environment. Food consumption patterns between regions can differ depending on the environment including local resources and culture, tastes, and people’s incomes. Likewise, food consumption patterns will also change from time to time influenced by changes in income, changes in public awareness of nutrition and health and changes in lifestyle. On the other hand, the problem of malnutrition is directly influenced by infectious diseases and lack of nutritional intake in quantity and quality, and indirectly influenced by uneven access and quality of health services due to geographical and demographic factors, inadequate child care, inadequate good environmental sanitation conditions, and low food security at the household level. The low level of education, knowledge and skills, especially for women, as well as the level of community income are the main problems in the community ([Dewan Ketahanan Pangan], 2015). The nutritional
status and health of children are related to the social practice of food choices. There is an interplay between social structures (rules/norms and resources) and food choice practices. It is necessary to transform structural aspects and to develop local food sources (Prasodjo et al., 2017).

This research is important to analyze the national policies on food and nutrition and how the practice of fulfilling family food in Aceh is carried out. Aceh is one of the provinces in Indonesia with a stunting prevalence rate above 20%. The results of Riskesdas 2018 showed that the stunting prevalence rate for infants under the age of two (baduta) in Aceh is the highest in Indonesia, reaching 37.9% ([Kemenkes], 2018). By referring to the WHO standard on categorizing community nutrition problems, Aceh is a province with chronic and acute nutritional problems because the prevalence of stunting is above 20% (Azhari, 2018). Maternal knowledge, attitude, and motivation of children aged 6-23 months in Aceh are still poor. Therefore, an effort to improve nutrition education, particularly by health personnel and stakeholder, to be specific and targeted is important (Ahmad et al., 2019).

Fulfilling balanced food and nutrition will determine children growth. In fact, nutritional intake of pregnant women and children is often unbalanced, due to economic conditions and the lack of knowledge about nutritious food and food processing methods (Rubianty, 2015). Based on the data from Nutritional Status Monitoring (Pemantauan Status Gizi, PSG) Aceh 2016, the percentage of children who received exclusive breastfeeding (Air Susu Ibu, ASI eksklusif) until six months in Aceh was only 23.5 %, lower than national average (29.5%). Mother’s milk (ASI) is the main nutritional intake for infants. Aceh is an area where Islamic values are the main way of life and there is a rule about the importance of breastfeeding in Al-Qur’an. In Islam, it’s also important to eat halal and good food. The Aceh Governance is also implementing a national program on food and nutrition by various national and local programs but nutrition problems are still not resolved.

Women play an important role in fulfilling family food. Women have knowledge and power to manage the natural and human resources as a strategy to achieve families’ food security. Heritage knowledge such as the knowledge of managing natural resources, processing and preserving food and other knowledge are the source of women power. These power provide renewed impetus for increasing role, bargaining position, and at times, creating equality in gender relation (Yunindawati et al., 2014a). Women are the main actor for fulfilling food for their family, especially for their children. Mothers are the main caregivers for children under five. More than 90% of children under five are cared for by their mothers. Mother’s knowledge on food and nutrition is an important thing for fulfilling children’s nutritional intake. Nutrition knowledge that is implemented in attitudes and practices will encourage the formation of a good eating pattern in the family ((Khomsan et al., 2013) The women’s knowledge and practice in fulfilling family food in Aceh will be analyzed using the meaning of the human body defined by the holder of power to exercise body discipline (Foucault, 2016b).

According to Foucault, the meaning of the body defined by the holder of power has developed from time to time according to the conditions and needs of each period.1 Furthermore, Foucault introduces the notion of discipline as a political technology of the body to make the individual obedient and useful. Foucault calls discipline the new “political anatomy”. The body is no longer tortured, but is trained, regulated, and accustomed to carrying out useful activities. Discipline is not the implementation of the will imposed by others, but the implementation of one’s own will. Discipline must be distinguished from slave obedience because discipline is not based on a relation of bodily submission or on “servant” obedience because it is not a relation of unlimited “domination”. Discipline is more aimed at developing individual mastery of their own “body”. Individuals are recorded, grouped, and monitored (supervised) continuously, in order to become “obedient” and “useful” individuals. Foucault suggests that it is in this power mechanism that “knowledge” over the individual is born (Foucault, 2016b).

Based on the above description, the focus of this study is to understand to what extent the practice of fulfilling family food in Aceh is in line with the direction of the government’s food and nutrition policy. Accordingly, this study will analyze: (1) National policy on food and nutrition; (2) The practice of fulfilling family food in Aceh.

**METHODS**

This study uses the constructivism paradigm which views that information can be obtained when the researcher is able to understand the informant’s point of view. This does not have to be obtained by having the same experience between the researcher and the case subjects and informants, but rather by

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1 A description of it which is summarized from Foucault’s review can be seen in Appendix 1.
understanding the meaning of the body and the act of “eating” as constructed by the informants. The informants had knowledge of the concept although they did not specifically identify the concept (Agusta, 2014).

The research location was chosen purposively in Pidie Regency which is one of the targets of the national shortening prevention intervention program. The study used a qualitative approach, with the case study method. A case study is an empirical inquiry that investigates a contemporary phenomenon in depth and within its real world context, especially when phenomenon may be context-dependent (Yin, 2003). There is a case of malnutrition in Aceh, especially prevalence of stunting on under two years children; according to Riskesdas (2018) it was the highest in Indonesia. Acehnese people have specific characteristics based on Islamic values in everyday life, including in food fulfillment. Therefore, it is important to assess how the implementation of national policies on food and nutrition in Aceh is carried out.

Data were collected by in-depth interviews, observation, documentation, and focus group discussions (FGD). Case subjects consisting of 40 families with stunting and children under-five years old. The data of case subject was conducted from pos yandu. The data of children from the pos yandu ranged from the baby born to the age of 5 years. In-depth interviews were conducted on women, particularly toddlers’ mothers and family members, related to the fulfillment of family food consumption 3 times a day. Primary data were also obtained by conducting interviews with research informants consisting of cadres of posyandu, village midwives, community leaders, and government officials. The data about knowledge and implementation of fulfilling family food by people in villages was obtained from informants. Secondary data was collected from relevant agencies and from nutrition workers at the puskesmas, village midwives and posyandu cadres in the sub-districts and villages targeted for research. Data collection was carried out from February to December 2020. Data analysis consists of: (1) data reduction; (2) data presentation and simple tabulation; (3) conclusion and verification.

RESULTS AND DISCUSSION

The National Food and Nutrition Policy

Based on the Law Number 18 of 2012 concerning Food, Government and Regional Governments are obliged to realize diversification of food consumption to meet the nutritional needs of the community and support healthy, active, and productive lives. The term 4 sehat 5 sempurna (4 healthy, 5 perfect) is definitely not uncommon to all Indonesians. The menu, included in 1952 was a food menu consisting of carbohydrate food, animal protein food, plant protein food, vegetable, fruit, and milk. In the latest development, the government replaced the 4 Sehat 5 Sempurna principle with Balanced Nutrition Guidelines. The difference in food fulfillment according to 4 sehat 5 sempurna and PGS is in milk consumption. Nutrients contained in milk can be fulfilled in other food consumption.

The importance of balanced nutrition is because there is no single type of food that contains all the types of nutrients the body needs to ensure growth and maintain health. In addition, the amount of food and a regular eating schedule must also be considered. Especially for newborns up to 6 months, it is recommended to drink only breast milk (ASI). Balanced Nutrition Guidelines known as “Fill My Plate” (includes 50% carbohydrates and protein and 50% more vegetables and fruit). Regulation of the Minister of Health of the Republic of Indonesia Number 41 of the Year on Guidelines for Balanced Nutrition outlines balanced nutrition for various groups ([Kemenkes], 2014). Figure 1 shows the contents of my plate (isi piringku) which is an application of the Balanced Nutrition Guidelines with the hope that it will be easily understood by the public.

Implementation of 4 healthy 5 perfect and PGS, which is a national program, is carried out by socialization and counseling by various parties, especially health workers and nutrition officers in the District Health Office, Puskesmas, and posyandu cadres in the village. Every month at the time of the posyandu activities managed by cadres of posyandu, there are nutrition officers from puskesmas and village midwives who monitor the health condition of pregnant women and toddlers and provide explanations about food and nutrition fulfillment in accordance with PGS. Since the provision of additional food (Pemberian Makanan Tambah, PMT) in posyandu is carried out with the village fund budge (dana desa), the budget must be sought so that the PMT given to pregnant women and toddlers can meet PGS.

Every month, there is a meeting between nutrition officers from all health centers with stakeholders in the Pidie District Health Office to socialize programs from the central government and the province
which will be delivered to the community to discuss food and nutrition problems that occur in the working area of the Pidie District Health Office.

![Balanced nutritional composition in the contents of my plate](Kemenkes Website, 2020)

For babies aged 0-6 months, there is Government Regulation of the Republic of Indonesia Number 33 of 2012 concerning Exclusive Breastfeeding, which states that every mother who gives birth must give exclusive breastfeeding to her baby. Exclusive breastfeeding is breast milk that is given to babies from birth for 6 (six) months without adding and/or replacing with other food or drinks (Sekretariat Negara RI, 2012). These regulations are followed by regulations at the provincial and district levels and socialized to the public, especially by health workers. Village midwives, health center nutrition officers and cadres of posyandu in the village conducted socialization about the importance of exclusive breastfeeding to mothers from pregnancy to after delivery. However, this was not easy to implement in the field since babies would cry if only given breast milk, so they were then given bananas. Home visits were carried out by village midwives and posyandu cadres to monitor the practice of exclusive breastfeeding, but were not fully successful in encouraging mothers to give exclusive breastfeeding. One village midwife stated that:

*When told about the importance of exclusive breastfeeding for 6 months to babies, they listened and seemed to understand, but in fact they gave bananas as an additional food before the baby was 6 months old even though they did not dare to admit it. If you visit their house, the bananas given to the baby are hidden.*

The government’s policy regarding the fulfillment of family food shows that the body concept has implemented the standardization of an ideal/healthy body, using the keywords: universality of will and biopower. The standard of the ideal body is by applying discipline through development programs on health and nutrition, standards of hopeful food patterns, and modern knowledge about the ideal body and healthy living.

**Practice of women’s knowledge in fulfilling family food**

Fulfillment of family food and making decisions regarding menu selection for family members are mainly carried out by mothers based on their knowledge. The power of knowledge about food sources is also an important factor influencing the formation of eating habits in the family. Along with the development of information and technology, the sources of knowledge and decisions to obtain food become very diverse. Sources of information and power of knowledge about food sources are not only obtained from inheritance and experience, but also from the information media, government and private parties. The development of industrial technology and communication media provides information about the variety and development of very many types of food and the attractiveness that influences decision making in fulfilling family food. The development of the milk processing industry and complementary feeding has also become an alternative source of food supply for infants and children which can be an alternative source of food for children that can complement or replace breastfeeding and complementary foods for breastfeeding. The results of the study are seen in Table 1.
### Table 1. The Community and Government Knowledge and Family Food Fulfillment Practice

| Group                  | Community Knowledge                                                                 | Government Knowledge                                                                 | Family Food Fulfillment Practice                                                                 |
|------------------------|--------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| Pregnant mother        | Abstinence: pineapple, durian. The tradition of bringing various foods, complete with rujak fruits for pregnant women | There are no taboos. A variety of foods that meet balanced nutrition                    | There are still those who believe pineapple and durian can cause miscarriage. Husband’s family brings a variety of foods for 7 months pregnant women, especially the first child |
| Breastfeeding mothers  | The first week is free to eat anything. *Jamu* (turmeric). After 1 week - 40 days: rice, clear vegetables and fried/grilled fish, don’t eat spicy food. Abstain from duck eggs 1 year | There are no restrictions except for those who have a history of allergies. A variety of foods that meet balanced nutrition | Mother gave birth normally: according to community knowledge (discipline and certain food abstinence). Childbirth surgery: no taboo except 1-year old duck eggs. There are those who can’t drink herbal medicine (turmeric) because they have a headache after drinking. |
| 0-6 months baby       | Breast milk. Banana. Banana mixed rice.                                              | Exclusive breastfeeding for the first 6 months. No other food/drink intake.             | Exclusive breastfeeding is difficult. The baby is given a banana to calm down and the mother can rest and do other activities. |
| Infants and children aged 6-24 months (Complementary Foods/MP ASI) | Breast milk. Tim/soft rice, carrots, potatoes until the age of 1 year, without fish until the age of one year, because they can get intestinal worms. After 1 year, same menu as other family members. | Gradually according to the child’s age development with a menu that meets balanced nutrition (carbohydrates, animal/vegetable protein, vegetables and fruits). | Breastfeeding until the child is 2 years old, is taught by Teungku (teacher of the Koran) and is in the book (Al-Qur’an). Tim rice/soft rice, potatoes and carrots. Instant porridge. Do not give fish until the age of one year. After the child is 1 year old, the food is the same as the rest of the family. |
| Children aged > 2 years and adults | Rice as a source of energy and animal protein.                                       | Balanced menu according to “fill my plate” (50% carbohydrates and protein; 50% fruit and vegetables). | Dominant carbohydrates as a source of energy and animal protein for a healthy and active body. Cigarettes for men are a source of energy so that the body does not limp and can earn a living. |

Source: Primary Data, 2020

**The meaning of the human body in fulfilling family food**

Management of family resources for food fulfillment based on knowledge of food diversity and food sources will affect the power of knowledge about the body. An understanding of the body includes knowledge of the meaning and function of the body of each family member, the meaning of health, the meaning of eating and forms of discipline (governmentality) to achieve the expected body condition. According to Foucault, governmentality includes dimensions from self to interpersonal relations involving control and arrangement, relations in various social institutions to the practice of sovereignty and power. The function of discipline is to train by shaping and selecting the body to produce a certain type of individual. Discipline is a specific power technique that treats the individual as an object as well as an instrument (Robet & Tobi, 2017).

The meaning of the body greatly affects the food chosen and consumed by all family members. The results showed that the types of food chosen for daily consumption were limited in type. For the Acehnese, the main types of food are cooked rice and fish (fried, stir-fried, gravy/tamarind or baked). Vegetables are complementary foods as gravy or consumed if the available funds are not sufficient to buy fish. Some even believe that eating vegetables can cause diarrhea.

The meaning of the body is believed to be how to have and produce a body that can move well and productively, that is, children are not weak, and adults are able to earn a living. Rice is believed to be an important source of energy for the body to be strong and able to work. Likewise, the habit of men in consuming cigarettes. Cigarettes are believed to give strength to work. If you don’t smoke, your body...
will be weak and unable to get up to work. One research respondent who has a habit of smoking to relieve fatigue after work stated that: “Menyo hana pip rukok, hana puleh hek (If I don’t smoke cigarettes, I get tired)”

The type of food consumed by postnatal mothers and children under one year of age is also strongly influenced by the meaning of the body. Breast milk is believed to be able to make a child’s body good, besides that there are also other benefits that are expected, namely the child is more affectionate to the mother and the mother also loves the child, as expressed by a mother about the benefits of breastfeeding: “Bah aneuk sehat, rayeuk” (so that the child is healthy, big).

Consuming healthy foods, such as good fish (fresh, not mushy when pressed, red gills) is beneficial for the body so that it does not get sick easily, so that it is full, the body grows healthy and can work: “Makanan sehat bek keunong penyakit, bah tro, tumuh sehat dan tega sehingga bisa bekerja membuat kerupuk untuk menambah pendapatan keluarga” (Healthy food so that you don’t get sick, so that you are full and strong so you can work making crackers to increase family income).

There are many traditions and taboos for post-partum mothers, such as sale (fumigation for the first 7 days after giving birth), thot batee/burning stones (burning stones and sticking them to the stomach and body parts that feel sore/pain), abstaining from eating duck eggs for one year, abstain from eating sticky rice, spicy food and noodles for 100 days after giving birth. This is done so that the body returns to normal after giving birth, the body becomes fresh again and can carry out activities properly: “Ureung madeung bek keunong boh itik, sie kameng, engkut muluh, engkut suree dan udeung. Jep ie on gaca jampu kunyet saban bengoh” (People who have just given birth/postpartum are prohibited from eating duck eggs, mutton, milkfish, tuna, and shrimp. Drink henna leaf water mixed with turmeric every morning):

“If you obey the taboos and add the tradition of sale and thot batee, your body will be healthy, fresh; your bones/knees will be strong; and it won’t be easy to get back-pain so you can move on to old age. Ancient women were able to work in the fields until they were old. Today’s women have left many traditions and violated taboos, so they get sick easily and are not strong enough to work even though they are still young. However, nowadays, there are traditions that are difficult to carry out, such as sale (fumigation) because there is no specific place to carry out the ritual due to the increasingly narrow land and houses. In addition, there are no longer parents or staff who have the time to take care of it. The increasing need causes mothers to be busy working to earn money” (Mrs.Z, DK Village, 9/11/2020).

The practice of fulfilling family food in Pidie Regency is influenced by knowledge about the benefits and experience from generation to generation. Dietary taboos and eating habits for postpartum mothers are carried out because based on their knowledge and experience, it provides benefits for mothers in the context of post-natal recovery. Giving bananas to babies before the age of 6 months is caused by the fact that babies “often cry because they are hungry” and if they are given bananas, they can sleep well, especially at night. Although they have knowledge about the prohibition of giving food other than breast milk before the baby is 6 months old obtained from health workers and cadres of the yandu post, they claim that they have no other way to deal with babies who cry loudly and are difficult to stop. Based on experience, babies who are given bananas tend to sleep more soundly in a relatively long time so that mothers can rest or do other activities. A mother who recently gave birth to her second child stated that:

If given a banana, the baby will sleep soundly at night so that I can also rest and the next day I can work and not sleepy because of lack of sleep at night. I did that experience with my first child who is now more than 2 years old, because he was fussy, his grandmother told me to give him a banana so he wouldn’t cry anymore and that’s true (IF, DK Village, 9/11/2020).

After bananas, complementary foods for breast milk (MPASI) given to babies are instant porridge or rice porridge mixed with potatoes and carrots. There is a belief that infants and children under one year of age should not be given fish because it can cause intestinal worms in children. The explanation from the village midwife stated that: “Worms are not caused by eating fish, but it could be because the child is playing or eating something dirty” (Bidan M, PK Village, 1/12/2020).

However, mothers who have babies are reluctant to take the risk if their children suffer from intestinal worms because they are given fish. One mother stated:
"If my child is sick (worms) I’m also in trouble. So I don’t want to give my son fish before he is one year old. After a year, he was able to eat the same food as his mother, father, and brothers (Y, DK Village, 7/12/2020).

After the child’s teeth grow, or he is one year old, the child will eat the same food as the food consumed by his parents and other family members because they are considered capable of consuming adult food, so there is no need for special food.

Interviews were conducted to 40 households, to find out the family food fulfillment practices, to recall the type of food consumed by all family members for 3 x 24 hours. The results about the types and frequency of food consumed by the family for 3 days can be seen in Figure 2 below.

Figure 2 shows that the proportion of carbohydrate and protein consumption reaches 62%, while the consumption of vegetables and fruits is only 13%. The rest consume various types of food with various components. Local food is a type of food made and/or sold by the local community, such as bakwan, jelly, wet/dry pastries, fried/grilled meatballs and various local specialties. Packaged food/beverages are factory products that are sold by traders at kiosks in the village. Other beverages include tea, coffee and herbal medicine. Baby food consists of instant porridge or team porridge cooked by the toddler’s mother. Complementary dishes consist of salt, oil and soy sauce which are generally added as a flavor enhancer for rice or side dishes. Cigarettes consumed by husbands are believed to be a source of energy because without smoking, the body is weak and unable to work for a living. Although 4 sehat 5 sempurna is well known by the people, but it can be seen that milk consumption is only 2%.

People’s knowledge of the body focuses on its function as a productive workforce until old age. The choice of food consumed tends to focus on rice as a source of energy and animal protein (especially fish) as a complement for a healthy body. The people also consume vegetable and fruit but not balanced with the consumption of carbohydrate and animal protein.

The gap between national food and nutrition policy and Family Food Fulfillment Practices

Actually, the unbalanced consumption of food nutrition is not a new problem. Riskesdas (2013) showed that 93.5% of the population over the age of 10 years that consume vegetables and fruits are still under the recommendation; the quality of protein consumed on average per person per day is still low because most of it comes from vegetable proteins such as cereals and nuts, consumption of foods and drinks with high sugar, high salt and high fat quite high ([Kemenkes], 2014). There are problems in the implementation of national food and nutrition programs in accordance with PGS in Indonesia and also in Aceh.

According to Yunindyawati, Sumarti, Adiwibowo, et al., (2014), women will have power over their knowledge when they are able to practice their knowledge. Hence the relationship between power and knowledge. Here it is determined by a strategic situation in maintaining the relationship between what can be said and what can be seen. It also happens in the fulfillment of family food in Aceh. Women who play a major role in meeting the food needs of the family have knowledge about food and nutrition. A woman's power will be seen if she is able to practice her knowledge. Women's power in the fulfillment
of family food is in the process of relations between the government and the community. The most dominant is knowledge of community practiced by the women and their family. It’s in accordance with the explanation that in everyday life, including in doing consumption, a person is influenced by the group that is a reference in acting, behaving and feeling. Such a social group is referred to as a reference group (Damsar, 2014).

There are various sources of knowledge that can be obtained by humans about a healthy body and the efforts to achieve it. In rural communities in Indonesia, the immediate environment is still the source and determinant in obtaining knowledge which is generally acquired from generation to generation. New knowledge obtained from various sources will be responded to differently by each person, depending on how well the knowledge can be understood, how easy it is to practice, and how useful and not risky it is. In line with that, there is a relationship between mother’s knowledge about feeding patterns and the nutritional status of toddlers. The mother’s role as the primary caregiver for children is important to ensure nutrition and prevent disease (Paudel et al., 2012; Sari & Ratnawati, 2018). In particular, 6-23 months for infants is the longest period in the “first 1,000 days” of life. This period is very important for child development, so complementary feeding practices must be optimized to maximize the child’s growth and development potential (Ahmad et al., 2019). On the other hand, people are not aware of stunting as a problem compared to other nutritional problems. Therefore, the policies implemented to reduce the incidence of stunting are focused on the first 1000 days group or what is called Scaling Up Nutrition (Mitra, 2015).

The practice of family food fulfillment is formed based on body discipline processes that occur through mechanisms of power over individuals using networks of power scattered in society. Discipline is a form of normalization of power that takes place against the individual body. The operation of power legitimized by certain knowledge regimes is not only carried out by the government but also in a wider space, namely against the social body (population) (Foucault, 2016a; Kamahi, 2017). This analysis of the power (discipline) and meaning of the human body from Foucault is used as a tool to understand the reality of fulfilling family food in Pidie District - Aceh. Fulfillment of family food, especially in certain groups such as post-natal mothers and babies, is greatly influenced by the discipline/habituation given. Mothers, in-laws and the closest environment are very intensive in making mothers obey the traditions and customs that exist in their families and communities compared to those carried out by health workers. On the other hand, the knowledge gained from the government through health workers and cadres of the posyandu is not directly applied but undergoes many processes. If it is useful and easy to implement then it will be implemented. However, if it is difficult to implement and contains risks, it will persist with the old behavior.

Women will have power over their knowledge when they are able to put their knowledge into practice. Therefore the relationship between power and knowledge here is determined by a strategic situation in maintaining the relationship between what can be said and what can be seen (Yunindyawati, et al., 2014b). The power of knowledge about the body will determine the pattern of feeding and parenting of children’s food which in turn will have implications for the act of eating. The act of family eating will have an impact on the health condition of the family. Family feeding patterns can be distinguished based on the conditions and categories of family members, because food for newborns is different from food given to other family members. Feeding patterns are also influenced by preferences (likes) for food and taboos related to community culture. There are values in society that affect the fulfillment of the food rights of pregnant women and children, such as the enactment of certain myths that must be followed or avoided and the availability of food that can be reached by them. In addition, the family’s purchasing power also determines the type of food that can be served.

There are still problems in transferring knowledge to the community and its implementation in the family. Many government programs in an effort to improve community nutrition have been carried out by the central government to cadres in the village. However, in reality, this knowledge cannot be fully implemented by the community members for several reasons, but the main thing is the ability to put it into practice. This is in line with the research of Lestari et al. (2018) that the cause of malnutrition for toddlers and shorty toddlers is more in the different communication and meaning of the health service providers (village midwives, puskesmas personnel and the health office) and the community. The social construction that is built is also different, so there is no common ground for the success of the toddler nutrition program. If health service providers always view behavior only in terms of “positive for health must be continued and negative must be stopped”, regardless of the characteristics of people who adhere to certain cultural values interact with their surroundings and the reality of their daily lives, then the
problem of malnutrition, under-five stunting and health problems in general, will never be resolved even though many programs and budgets have been disbursed to address these health problems.

The knowledge of the community that is still practiced by women in fulfilling family food shows that the concept of the body is the productivity of the body, using the keywords: political power: rules, wealth and welfare, as well as political and economic demands. Whereas the type of body needed by the market (industry) is: healthy, productive (body politics), health and physical well-being of the population (resident). Michel Foucault coined the term “biopower” that refer to the ways in which power manifest itself in the form of daily practices and routines through which individuals engage in self-surveillance and self-discipline, and thereby subjugate themselves (Jen Pylypa, 1998). According to Foucault, the disciplinary power mechanisms of the body and the regulatory mechanisms of the population, constitute the modern incarnation of power relation, labeled as biopower (Cisney & Morar, 2015).

There is a gap between government policies and the practice of fulfilling family food that takes place in the community. Many government programs in an effort to improve community nutrition have been carried out by the central government to the villages. Guidelines for balanced nutrition according to the government are prepared with standard criteria that are universally applicable, which are now being socialized with the concept of the contents of my plate (isi piringku). Guidelines for balanced nutrition are prepared by the Standard of Hope Food Pattern which refers to modern knowledge about the ideal body. Fulfillment of food according to balanced nutrition guidelines, especially in the first 1000 days of life will produce children who are physically healthy and intelligent and avoid degenerative diseases in adulthood and old age. On the other hand, the fulfillment of family food that takes place in the community is still focused on the needs of a productive body to be healthy and able to carry out normal activities (not sick, children are agile and adults can work) which is still oriented towards a healthy body in the short term.

The practice of food fulfillment of society is the result of normalization of power that occurs in the individual body. The evolving discourse is about the normative body in society. The ideal body is a healthy body. Symbols appear in the construction of this discourse, such as proportional bodies and diseases related to the body (Agustin, 2009). Ideal body standards that differ between government and society are also the cause of gaps in the meaning and power of the individual body. The government sets ideal standards of height according to age and weight that are proportional to age and height. People believe that height is God’s destiny.

Socio-cultural studies of food and eating have been influenced by general theoretical developments and shifts between approaches which each has their own conceptual foundations and empirical foci. For a sociological theory, it is necessary to explain the relationships between foods consumed, and social arrangements When people eat, they do not follow deliberate rules but respond to given situations based on their previous experience by implementing procedures anticipated as being suitable (Warde, 2016).

Based on the concept of body power according to Foucault summarized in annex 1, the knowledge and power of the body changes over time. Indonesia’s national food and nutrition policy aims to make the human body grow ideally by creating balanced nutrition guidelines that regulate food consumption that supports a healthy body in the long term and avoids degenerative diseases (health body discourse). On the other hand, the concept of a healthy body according to the community is one that supports productive activities so that it can support the activities of making a living. In that case, food fulfillment practices are focused on the type of food consumption that is believed to be a source of energy and nutritious according to their knowledge (body productivity discourse).

People’s food fulfillment habits and practices are socially and culturally restricted. Discipline, supervision and social control also play a role in forming a body that is obedient in choosing the type of food consumed daily. This is intensively done by the community so that family food fulfillment practices in Aceh reflect the discourse of body meaning and food benefits that develop in the community. Thus, most actions are “automatic”, i.e. uncontrolled, fast, effortless, associative, unconscious, skilled and not reflective, self-aware and rule following (Warde, 2016). For the people of Aceh, the main food consumption is rice and fish; there are feelings of guilt and shame if parents cannot provide enough rice and fish for daily food fulfillment.

The food’s pattern of human beings was also built and constructed from their culture with many social culture changes, for example, life style, bio-technology, symbolic expression, and ideologies (Meliono & Budianto, 2004). Person and environment are more intimately related than often anticipated. Habits are not only personal but depend on external environments, which instigate and accommodate
performances of practices. Repetition is central in practice theory, as practices depend on individuals repeating themselves over time and on such conduct being repeated across populations (Warde, 2016). Discourse about the meaning of the body and the practice of food fulfillment in the community develops based on the power relationship with many parties. Food fulfillment practices for pregnant women, nursing mothers and toddlers adjust to existing situations based on their experiences. For example, mothers who give birth by surgery will adjust to the doctor’s advice not to abstain from food and eat nutritious food so that the surgical wound heals quickly.

According to Foucault, the concept and knowledge of the body develop linearly over time and are determined by the ruling regime. In fact, the power of knowledge about food fulfillment is not only owned by the government but spread in the community. Therefore, the power of the body and the practice of family food fulfillment are more influenced by the process of body power discipline and community food fulfillment discourse. The theoretical implication of this study is that the power of the human body and the practice of food fulfillment are formed through disciplinary processes in power relations that are spread across society, not dominated by discourses on the concept of the government body and do not always run linearly over time.

The discourse is built by standardization, normalization, and discipline (Agusta et al., 2012). The various discourses in every society give birth to knowledge, power, and truth in a circular relationship, a center regime of truth/power that developed in a period and change or change in total in the stages of other periods (Adlin, 2016). Exposure to and familiarity with nutritional knowledge does not have to be negative; it can be empowering and productive. New knowledge about nutrition does excite people, and the “nutritionized self” could be a site of desire and satisfaction (Kimura, 2013). Society is not merely a symptom of a disease whose cause must be treated and then completed, but society is the product of knowledge that process, interact with others and negotiate to determine objectivity in subjective meanings so as to give rise to common consciousness (Lestari et al., 2018).

Knowledge about family food fulfillment is sourced from the government and the community. Food fulfillment practices are dominated by community discourses built on standardization, normalization and discipline. Various discourses on food fulfillment in the community give birth to knowledge, power and truth that develop in a period and can change totally or gradually. Family food fulfillment practices in Aceh are predominantly influenced by community knowledge influenced by Islamic values and local culture, including habits, tastes, ideas, ordinances, norms, and behaviors so as to facilitate, facilitate, or inhibit a person in behavior related to consumption.

Solutions addressing the gap between government knowledge of balanced nutrition fulfillment and family fulfillment practices in Aceh must be implemented through a food discipline process that is in accordance with Islamic values and local culture through individuals and groups in the community that are referenced in acting and behaving so as to become a discourse that becomes common knowledge and truth. The practical implication of this study is the importance of the food fulfillment disciplinary process in accordance with balanced nutrition guidelines carried out by many parties in the community by optimizing existing groups, such as yandu posts, PAUD, study groups, PKK in an effort to achieve a healthy and productive ideal body in the long term.

CONCLUSIONS

The results of this study show that there are various programs on national policy on food and nutrition. National policies on food and nutrition in Indonesia are also developing in accordance with the development of nutrition science and problems. Principle 4 sehat 5 sempurna which began in 1952 is a food menu consisting of carbohydrate food, animal protein food, plant protein food, vegetable, fruit, and milk. The slogan was updated with the program that is called Guidelines for Balanced Nutrition (Guidelines for Balanced Nutrition, PGS). The implementation of Balanced Nutrition can take the form of activities, including: socialization, education and training, counseling, and demonstrations. The practice of food fulfillment practices depends on power of knowledge of women, especially mother who have the main role in fulfilling family food. In this study, the power of knowledge in fulfilling family food depend on the process of body discipline that occurs in the power relationship between individuals and government and community. The body’s disciplinary process is influenced by discourse about the body and the food the body needs.

There is a gap between the practice of fulfilling community food and the balanced nutrition guidelines prepared by the government. The gap occurs because of differences in the power of the body and the
benefits of food. The practice of fulfilling community food is focused on carbohydrates as a source of energy and animal protein which is believed to be the food needed for a healthy body and able to carry out activities properly. Guidelines for balanced nutrition according to the government are the fulfillment of a balanced diet between carbohydrates and protein (animal and vegetable) with vegetables and fruits that are socialized with “fill my plate”. The government’s policy on fulfilling food and nutrition with balanced nutrition guidelines aims to make the human body grow ideally and productively in the long term, thus making children grow up physically and intelligently so that they are productive and can avoid degenerative diseases.

The gap in knowledge about the meaning of the body and the practice of fulfilling family food with government knowledge in fulfilling balanced nutrition can be carried out by the application of body discipline and practices in food consumption that are carried out to children from an early age by adjusting to local food that is available and affordable by the local community. The practice of fulfilling family food occurs as a result of repeated food selection processes and becomes a family eating habit through a long-term process. Therefore, the process of selecting and consuming food can be done by getting used to eating balanced nutrition for children in local PAUD with the hope that eating habits will be formed in accordance with the needs of the child’s body and development in the long term. However, the socialization process to mothers and community members is also continuously carried out, among others, by implementing additional food provision at the Yandu Post that meets the criteria for balanced nutrition. Ideally, the practice of consuming food provided by Pos Yandu cadres can be carried out at the place where the Pos Yandu is implemented so that the development of children’s appetite can be monitored from an early age to toddler age. If a problem occurs in unbalanced eating choices, it can be approached to the child and also the mother and monitored intensively so that it is not sustainable, and in the long term it will affect eating habits.

REFERENCES

[Dewan Ketahanan Pangan]. (2015). *Kebijakan Strategis Pangan dan Gizi Tahun 2015-2019*.

[Kemenkes] Kementerian Kesehatan Republik Indonesia. (2014). *PMK No. 41 ttg Pedoman Gizi Seimbang*. Kementerian Kesehatan Republik Indonesia.

Adlin, A. (2016). Michel Foucault: Kuasa/Pengetahuan,(Rezim) Kebenaran, Parrhesia. *Jaqfi: Jurnal Aqidah Dan Filsafat Islam*, 1(1), 13–26.

Agusta, I. (2014). *Paradigma Metodologi Ilmu Sosial: Simpang Jalan Konstruksi Teori*. IPB Press.

Agusta, Soetarto, Lubis, & Abdullah. (2012). Production Orientation within Poverty Reduction in Indonesian. *Jurnal Ekonomi Pembangunan*, 06(02).

Agustin, S. M. (2009). Foucault dan Kmunikasi ( Telaah Konstruksi Wacana dan Kuasa Foucault dalam Lingkup Ilmu Komunikasi). *Jurnal Ilmu Komunikasi*, 7, 199–211.

Ahmad, A., Madanijah, S., Dwiriani, C. M., & Kolopaking, R. (2019). Pengetahuan, sikap, motivasi ibu, dan praktik pemberian MP-ASI pada anak usia 6-23 bulan: studi formatif di Aceh. *Jurnal Gizi Klinik Indonesia*, 16(1), 1. https://doi.org/10.22146/ijcn.34560

Azhari. (2018, October). Stop “Stunting” (Bek Paneuk). *Aceh Tribunnews.Com*.

Cisney, V. W., & Morar, N. (2015). *Biopower: Foucault and Beyond*. University of Chicago Press.

Damsar. (2014). *Sosiologi Konsumsi*. Penerbit Universitas Terbuka..

Foucault, M. (2002). *Power/Knowledge* (T. Setiawan & Sufianto (Eds.); Pertama). Bentang Budaya.

Foucault, M. (2016a). *Arkeologi Pengetahan* (E. A. Iyubenu (Ed.); Pertama). Pelangi.

Foucault, M. (2016b). *Disiplin Tubuh: Bengkel Individu Modern* (P. S. Hardiyanto (Ed.); II). LKiS.

Gustina, E. (2019). *Gizi Seimbang, Prestasi Gemilang*. [Kemenkes] Direktorat Jenderal Kesehatan Masyarakat Kementerian Kesehatan RI.

Izwardy, D. (2017). *Kebijakan dan Program Gizi Masyarakat Indonesia* (Hardinsyah & I. D. N. Supariasa (Eds.)). Penerbit Buku Kedokteran EGC.

Jen Pylpya. (1998). *Power and Bodily Practice: Applying the Work of Foucault to an Anthropology of*
the Body (pp. 21–36). Association of Student Anthropologist, Department of Anthropology, University of Arizona, Tucson, AZ.

Kamahi, U. (2017). Teori Kekuasaan Michel Foucault: Tantangan Bagi Sosiologi Politik. Jurnal Al-Khitabah, III(No. 1), 117–133.

Kesehatan, [Kemenkes] Badan Penelitian dan Pengembangan. (2018). Hasil Utama Riskesdas 2018. https://kesmas.kemkes.go.id/assets/upload/dir_519d41d8cd98f00/files/Hasil-riskesdas-2018_1274.pdf

Khomsan, A., Anwar, F., Hernawati, N., Suhanda, & Oktarina. (2013). Tumbuh Kembang dan Pola Asuh Anak. IPB Press.

Kimura, A. H. (2013). Smast Baby Food: Participating in the Market. In Hidden Hunger (pp. 111–138). Cornell University Press.

Lestari, W., Kristiana, I., & Paramita, A. (2018). Stunting: studi konstruksi sosial masyarakat pedesaan dan perkotaan terkait gizi dan pola pengasuhan balita di kabupaten jember. Aspirasi, 9(1).

Ribianty, D. (2015). "Stunting mengancam Aceh” (p. 18). https://aceh.tribunnews.com/2015/03/02/stunting-mengancam-aceh

Sari, M. R. N., & Ratnawati, L. Y. (2018). Hubungan Pengetahuan Ibu tentang Pola Pemberian Makan dengan Status Gizi Balita di Wilayah Kerja Puskesmas Gapura Kabupaten Sumenep. Amerta Nutrition, 2(2), 182–188. https://doi.org/10.20473/amnt.v2.i2.2018.182-188

Soekirman. (2017). Dari “4 Sehat 5 Sempurna” ke Pedoman Gizi Seimbang (I. Jus’at, A. Winoto, N. Pribadi, D. Martiano, Atmarita, A. Riyanti, N. Afriansyah, & W. Agustina (Eds.)). Penerbit IPB Press.

Yunindyawati, Sumarti, T., Adiwibowo, S., Hubbeis, A. V. S., & Hardinsyah. (2014). Kontestasi Diskursus Ketahanan Pangan dan Pembentukan Kuasa Pengetahuan pada Keluarga Petani Sawah di Sumatera Selatan. Jurnal Komunitas, 6(1), 170–179.

Yunindyawati, Sumarti, T., Hubbeis, A. V., & Hardinsyah. (2014). The power of women’s knowledge in food security at at the rural families in Indonesia (the case in south sumatera international journal of humanities and social science). Int J Humanit Soc Sci, 4(7). https://scholar.google.co.id/citations?view_op=view_citation&hl=id&user=iG2X06UAAAAJ&citation_for_view=iG2X06UAAAAJ:Y0pCki6q/DkC
### Appendix 1. Concepts of Body and Power from Time to Time

| Century | Body Concept | Keywords | Text/Context Knowledge and Power |
|---------|--------------|----------|----------------------------------|
| 17      | The King’s body and the King’s bodyguard | Ritual/Spirituality, Monarchy Political System, Social Body | The ideology of the body relates to God |
| 18      | Body Productivity | Investing Power in the Body, Political Power: Order, Wealth and Welfare, Political and Economic Demand, Pseudo Politics: Child Privileges and Family Medicalization, New Detailed Rules on Adult-Child Relationships | Embodiment of Power in the individual body (Healthy Body), Body Type that the market (industry) needs: healthy, productive (Body Politics), Health and physical well-being of the population, Number of births and deaths, ability to survive to adulthood, Family is the physical environment that plays a role in building children’s bodies |
| 19      | Community Body | Medication Prescription, Social Body: Power over the Body of Society, Discipline and Normalization | Sterilization methods, criminology, genetics, quarantine of the elderly, Embodiment of Power operating on individual bodies: Physiological and Organic Knowledge, Formation of normal and abnormal separation systems, The Mechanism of Power with Body Investment “private” and “social” medicine stemming from a global strategy |
| 20      | Standardization of Ideal/Healthy Body | Universality of Will, Biopower | Ideal Body Standards (W/U, TB/U, BW/TB), Governmentality (Discipline): Development Program on Health and Nutrition, Hope Food Pattern Standard, Modern Knowledge about Ideal Body and Healthy Living |

Sources: (Foucault, 2002, 2016b)