

INNOVATION IN KATUK LEAF-BASED PRODUCTS ROOTED IN COASTAL LOCAL WISDOM TO SUPPORT BREAST MILK PRODUCTION AND HEALTH SELF-SUFFICIENCY AMONG BREASTFEEDING MOTHERS

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Abstract. Exclusive breastfeeding is recognized as one of the most effective interventions for improving maternal and infant health. However, breastfeeding practices remain influenced by mothers' limited knowledge and the underutilization of local food resources that may support milk production. Katuk leaves (*Sauropus androgynus*) are traditionally known as a natural galactagogue, although their use in coastal communities is still largely confined to vegetable dishes. This community service program aims to strengthen the knowledge and practical skills of breastfeeding mothers through health education and training on the preparation of katuk leaf nuggets as a local functional food. The program was implemented in the working area of Puskesmas Mata, Kendari City, involving 25 breastfeeding mothers. Activities consisted of health education, demonstrations, practical sessions, mentoring, and evaluation using a 10-item knowledge questionnaire and a 12-item observational checklist. Changes in participants' scores before and after the intervention were analyzed using the Wilcoxon Signed-Rank Test. The findings indicated a significant improvement in knowledge, with the median score increasing from 6 to 8 ($p < 0.05$). Practical skills also improved significantly, with the median score increasing from 6 to 11 ($p < 0.05$). Before the training, all participants were categorized as unskilled, whereas 96% achieved the skilled category after the intervention. To encourage sustainability, participants received educational modules, recipe booklets, leaflets, product samples, and packaging labels. The program demonstrated that combining health education with practical training based on locally available resources can strengthen community capacity to support exclusive breastfeeding and may be adopted as part of routine maternal and child health promotion activities.

Keywords: breastfeeding mothers, exclusive breastfeeding, functional food, katuk leaves

Abstrak. Pemberian ASI eksklusif merupakan salah satu upaya penting dalam meningkatkan kesehatan ibu dan bayi. Meskipun demikian, keberhasilan pemberian ASI masih dipengaruhi oleh rendahnya pengetahuan ibu menyusui dan belum optimalnya pemanfaatan sumber daya pangan lokal yang berpotensi mendukung produksi ASI. Daun katuk (*Sauropus androgynus*) dikenal sebagai tanaman yang mengandung senyawa laktagogum alami, tetapi pemanfaatannya oleh masyarakat pesisir masih terbatas pada olahan sederhana. Kegiatan pengabdian kepada masyarakat ini bertujuan meningkatkan pengetahuan dan keterampilan ibu menyusui melalui edukasi kesehatan dan pelatihan pengolahan nugget daun katuk sebagai pangan fungsional berbasis kearifan lokal. Kegiatan dilaksanakan di wilayah kerja Puskesmas Mata, Kota Kendari, dengan melibatkan 25 ibu menyusui. Metode yang digunakan meliputi pendidikan kesehatan, demonstrasi, praktik pembuatan nugget daun katuk, pendampingan, serta evaluasi menggunakan kuesioner pengetahuan sebanyak 10 butir dan lembar observasi keterampilan yang terdiri atas 12 indikator. Perubahan skor sebelum dan sesudah kegiatan dianalisis menggunakan uji Wilcoxon Signed-Rank Test. Hasil kegiatan menunjukkan peningkatan pengetahuan yang bermakna dengan median skor yang meningkat dari 6 menjadi 8 ($p < 0,05$). Keterampilan peserta juga mengalami peningkatan yang signifikan dengan median skor yang meningkat dari 6 menjadi 11 ($p < 0,05$). Sebelum pelatihan, seluruh peserta berada pada kategori tidak terampil, sedangkan setelah pelatihan sebanyak 24 peserta (96,0%) telah mencapai kategori terampil. Untuk mendukung keberlanjutan program, peserta memperoleh modul pelatihan, leaflet, resep olahan, contoh produk, dan label kemasan sebagai media pembelajaran mandiri. Kegiatan ini menunjukkan bahwa pemanfaatan daun katuk melalui pendekatan edukatif dan pelatihan praktis dapat meningkatkan kapasitas ibu menyusui serta berpotensi menjadi salah satu strategi pemberdayaan masyarakat dalam mendukung keberhasilan ASI eksklusif.

Kata Kunci: ASI eksklusif, daun katuk, ibu menyusui, pangan fungsional

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INTRODUCTION

Exclusive breastfeeding for the first six months of life is an important strategy for improving maternal and infant health. However, at the national level, the coverage of exclusive breastfeeding in Indonesia has not yet reached the established target (Asnidawati & Ramdhan, 2021; Fikawati & Syafiq, 2010). Data from the Basic Health Research and the Indonesian Health Profile indicate that the national prevalence of exclusive breastfeeding is approximately 67%, with considerable variation across regions (Asnidawati & Ramdhan, 2021; Manullang et al., 2025). This condition reflects persistent challenges in breastfeeding practices, including maternal knowledge, family support, and access to sustainable promotive interventions (Monika & Rahayuningsih, 2026; Priscilla & Sari, 2026).

According to data from the Southeast Sulawesi Provincial Health Office in 2024, the coverage of exclusive breastfeeding in Kendari City reached 70.9%, with 3,429 infants receiving exclusive breastfeeding out of a total of 4,835 targeted infants. Although this achievement can be considered relatively good, 29.1% of infants had not yet received exclusive breastfeeding, indicating the need for various efforts to increase exclusive breastfeeding coverage in the community further (Dinas Kesehatan Provinsi Sulawesi Tenggara, 2024). In line with this situation, data from the Ministry of Health of the Republic of Indonesia and Statistics Indonesia indicate that in 2025, the coverage of exclusive breastfeeding in Southeast Sulawesi Province reached 65.71% (Badan Pusat Statistik Provinsi Sulawesi, 2025). This pattern indicates a tendency for exclusive breastfeeding practices to decline as infants grow older, which the introduction of formula milk may influence, the early introduction of complementary foods (complementary feeding/MP-ASI), or mothers' perceptions that breast milk alone is no longer sufficient to meet their infants' nutritional needs (D'Auria et al., 2020).

Exclusive breastfeeding is an important intervention for improving maternal and infant health status (Zulfa et al., 2025). Although the coverage has shown relatively favorable results, it still needs to be continuously improved through various promotive and preventive efforts, including education on the utilization of local food resources that have the potential to support breast milk production, such as katuk leaves (Pujiastuti N, 2025). Therefore, strengthening education on the benefits of exclusive breastfeeding, increasing support from families and healthcare workers, and optimizing the implementation of breastfeeding promotion policies in healthcare facilities are necessary to sustain exclusive breastfeeding practices until infants reach six months of age (Munawarah, 2026; Utama, 2025). This figure remains below the national target, indicating that efforts to improve breastfeeding practices in Southeast Sulawesi require a more contextual approach, particularly in areas characterized by coastal communities and lower- to middle-income socioeconomic conditions.

Kendari City, as the capital of Southeast Sulawesi Province, has its own dynamics regarding breastfeeding practices. Although access to healthcare services is relatively better than in rural areas, challenges in implementing exclusive breastfeeding are still encountered, particularly in coastal communities. The working area of Mata Public Health Center (Puskesmas Mata) in Kendari City is located in a coastal area characterized by diverse socioeconomic conditions. The coverage of exclusive breastfeeding at Mata Public Health Center in 2025 reached 84.8%. This figure indicates that, among all infants aged 0–6 months targeted in the working area of Mata Public Health Center, approximately 85 out of every 100 infants received exclusive breastfeeding in accordance with the recommendations of the Ministry of Health (Mata, 2025). This achievement was 16.43 percentage points higher than the average exclusive breastfeeding coverage in Kendari City, which was reported at 65.71%, making Mata Public Health Center one of the health centers with a high level of exclusive breastfeeding coverage in Kendari City (Badan Pusat Statistik Provinsi Sulawesi, 2025). Low breastfeeding coverage has been associated with mothers' limited knowledge of exclusive breastfeeding and suboptimal healthcare support. In addition, research conducted in the coastal areas of Kendari City indicates that community food consumption patterns remain a challenge, highlighting the need to strengthen nutrition education and provide assistance to breastfeeding mothers to support the success of exclusive breastfeeding (Asmarani et.al, 2019; Dinas Kesehatan Kota Kendari,

2020).

The working area of Mata Public Health Center in Kendari City is predominantly inhabited by coastal communities whose livelihoods are largely concentrated in the informal sector, which may affect the nutritional consumption patterns of breastfeeding mothers and the sustainability of exclusive breastfeeding practices. Based on routine maternal and child health service reports, some breastfeeding mothers continue to experience difficulties in maintaining exclusive breastfeeding for six months, with the main complaints being perceived insufficient breast milk production and limited dietary diversity during the breastfeeding period. On the other hand, the working area of Mata Public Health Center has local resources in the form of katuk leaves (*Sauropus androgynus*), which have long been recognized by the community as a traditional food believed to promote breast milk production. However, their utilization remains largely limited to traditional practices and has not yet been developed into practical and sustainable functional food products. The gap between the need to improve exclusive breastfeeding coverage and the suboptimal utilization of available local resources highlights the need for innovative interventions based on coastal local wisdom. Therefore, developing innovative katuk leaf-based products is highly relevant as an effort to support breast milk production and promote health self-sufficiency among breastfeeding mothers (Majid et al., 2025; Pujiastuti N, 2025).

METHOD

The community service activity was conducted on July 1, 2026, in Kendari Caddi Urban Village, within the working area of Mata Public Health Center, Kendari City, involving 25 breastfeeding mothers as participants. The activity began with coordination with Mata Public Health Center and community health cadres to identify the partners' problems, namely limited knowledge regarding the benefits of katuk leaves as a support for breast milk production and limited skills in processing katuk leaves into functional food products.

As a solution, the team conducted health education combined with training on the preparation of katuk leaf nuggets based on local coastal wisdom. The methods employed included health education through interactive lectures, discussions, and question-and-answer sessions using leaflets, modules, and presentation materials, followed by demonstrations and hands-on practice in preparing katuk leaf nuggets. The equipment used included a stove, steamer, blender, bowls, knives, cutting boards, and other kitchen utensils. The main ingredients consisted of katuk leaves, chicken meat, eggs, wheat flour, breadcrumbs, and complementary seasonings.

Evaluation was conducted using pre-tests and post-tests with a questionnaire consisting of 10 questions to measure participants' knowledge, while practical skills were assessed using an observation sheet comprising 12 indicators. The normality test indicated that the data were not normally distributed; therefore, differences in scores before and after the intervention were analyzed using the Wilcoxon Signed-Rank Test at a significance level of $\alpha = 0.05$.

RESULT AND DISCUSSION

The community service activity was conducted on July 1, 2026, in Kendari Caddi Urban Village, within the working area of Mata Public Health Center, Kendari City, targeting 25 breastfeeding mothers. The activity was designed as a form of community empowerment through the utilization of katuk leaves (*Sauropus androgynus*) as a functional food based on coastal local wisdom to support breast milk production.

The activity began with health education on the importance of exclusive breastfeeding, the nutritional content and benefits of katuk leaves as a natural galactagogue, as well as the potential for developing katuk leaves into more practical and value-added food products. Subsequently, the participants took part in training on the preparation of katuk leaf nuggets through demonstration and hands-on practice under the guidance of the community service team. This approach was selected to ensure that participants not only gained additional knowledge but also acquired the skills needed to process local food ingredients into products

that could help meet nutritional needs during the breastfeeding period. Throughout the activity, the participants demonstrated a high level of enthusiasm, as reflected in their active involvement in discussion sessions, sharing of breastfeeding experiences, and hands-on practice in preparing katuk leaf nuggets. This condition indicates that a participatory approach can create a more interactive learning process, enabling participants to understand and apply the materials provided more effectively. The details of the activity implementation are presented in Table 1.

Table 1. *Schedule of the health education activity*

No	Time	Activity
1	08.00–08.15 WITA	Participant registration and distribution of pre-test questionnaires
2	08.15–08.25 WITA	Opening, prayer, and welcoming remarks from Mata Public Health Cente
3	08.25–08.35 WITA	Presentation of the objectives and activity procedures
4	08.35–09.20 WITA	Health education on the importance of exclusive breastfeeding, the benefits of katuk leaves as a natural galactagogue, the nutritional content of katuk leaves, and the utilization of local food based on coastal wisdom
5	09.20–09.50 WITA	Demonstration of the preparation of innovative Chicken and Katuk Leaf Nuggets
6	09.50–10.10 WITA	Discussion and question-and-answer session
7	10.10–10.20 WITA	Completion of the post-test questionnaire
8	10.20–10.30 WITA	Closing and activity documentation

The activity began by assessing the breastfeeding mothers' level of knowledge using a pre-test questionnaire. Subsequently, the participants received health education on the benefits of katuk leaves as a functional food to support breast milk production, the nutritional content of katuk leaves, the importance of exclusive breastfeeding, and a demonstration of the preparation of Katuk Leaf Nuggets as an innovative local food product based on coastal wisdom. The activity concluded with a reassessment of the participants' knowledge using a post-test questionnaire. Documentation of the activity implementation is presented in Figure 1.



Figure 1. *Implementation of health education*

The evaluation results showed that the health education provided was effective in increasing breastfeeding mothers' knowledge regarding the benefits of katuk leaves as a functional food to support breast milk production. Based on the Wilcoxon Signed-Rank Test, a p-value of 0.000 ($p < 0.05$) was obtained, indicating a statistically significant difference in knowledge levels before and after the intervention.

The median knowledge score increased from 6 at the pre-test to 8 at the post-test, indicating that most participants experienced an improvement in their understanding after participating in the health education activity. This increase in knowledge demonstrates that the health education method, which combined interactive lectures, discussions, question-and-

answer sessions, and educational media, was effective in improving participants' understanding of the material presented.

The participatory learning approach provided participants with opportunities to actively engage, ask questions, and clarify information they did not fully understand. This process not only improved the participants' acceptance of information but also strengthened their understanding of the importance of exclusive breastfeeding, the nutritional content of katuk leaves, and the potential utilization of local food resources based on coastal local wisdom as an effort to support successful breastfeeding practices (Rehan et al., 2026). The results are presented in Figure 2.

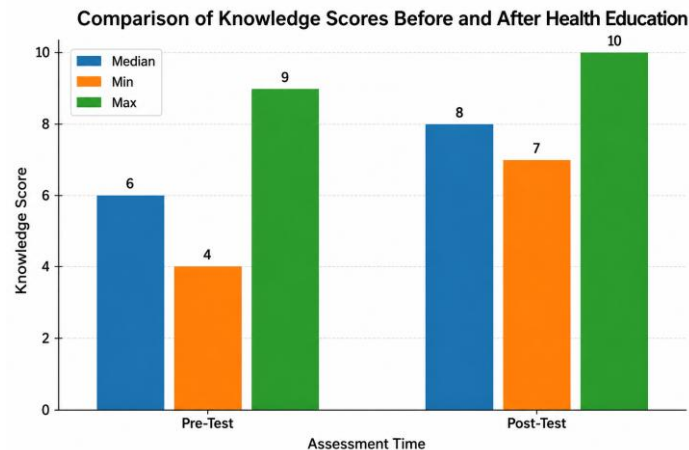


Figure 2. Participants' knowledge scores

Figure 2 shows that the community service activity successfully addressed the problem identified during the needs assessment stage, namely the limited knowledge of breastfeeding mothers regarding the benefits of katuk leaves and their processing into appealing, nutritious, and easy-to-consume food products. Before the activity was conducted, most participants were only familiar with katuk leaves as an ordinary vegetable and were not aware of their active compounds or their potential as a natural galactagogue. After receiving health education, participants demonstrated a better understanding of the benefits of katuk leaves and the importance of optimizing local food resources as part of efforts to improve maternal and infant health. The discussions conducted during the activity also contributed to the improvement in participants' knowledge. Through the question-and-answer sessions, participants were able to share their experiences, dietary habits during breastfeeding, and various challenges they encountered in meeting their nutritional needs. This two-way interaction made the educational materials easier to understand because they were related to the participants' real-life conditions and daily experiences. In addition, the use of examples of katuk leaf-based food products provided participants with a practical illustration of how local food ingredients can be transformed into food products that are more convenient, appealing, and nutritionally valuable (Majid et al., 2025).

The improvement in participants' skills was also reflected in the changes in skill categories before and after the training. Before the activity, all participants (100%) were categorized as unskilled, indicating that most breastfeeding mothers had no prior experience or ability to process katuk leaves into more innovative food products. After participating in the training, a substantial change was observed, with 24 participants (96.0%) achieving the skilled category, while only 1 participant (4.0%) remained in the unskilled category. This substantial improvement indicates that the training provided participants with practical experience and increased their confidence in processing katuk leaves into nutritious food products. The results also suggest that hands-on training can effectively strengthen participants' ability to apply the skills acquired in their daily household practices. This change demonstrates that the training not only improved participants' understanding of food-processing concepts but also successfully developed practical skills that could be independently applied in their households (Mayangsari et al., 2026). The results are presented in Figure 3.

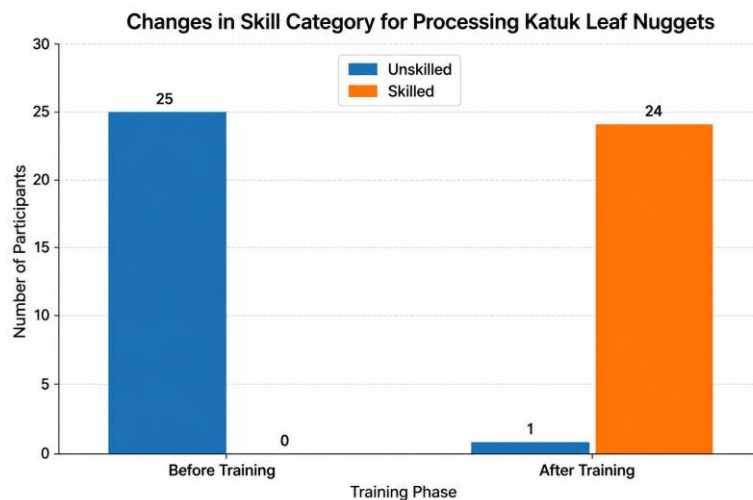


Figure 3. Participants' Skill Levels

The success of this training cannot be separated from the learning methods employed, namely demonstrations combined with hands-on practice and intensive assistance from the community service team. Through this approach, participants had the opportunity to observe each stage of katuk leaf nugget preparation, beginning with the selection and preparation of ingredients, mixing the batter, steaming, coating with breadcrumbs, and finally the frying and serving techniques. Active participant involvement throughout the training enabled them to gain direct learning experiences through a *learning-by-doing* approach, making the skills acquired easier to understand, remember, and apply after the activity. Thus, the training not only improved participants' technical skills in processing katuk leaves but also encouraged the utilization of local food ingredients in products that are more appealing, nutritious, and potentially supportive of successful exclusive breastfeeding while enhancing family self-sufficiency in processing food based on locally available resources (Aswita et al., 2025).

The improvement in participants' skills, as shown in Figure 3, was also closely associated with the training method emphasizing hands-on practice accompanied by intensive assistance from the community service team. Throughout the activity, participants were allowed to follow all stages of katuk leaf nugget preparation systematically, starting from selecting fresh katuk leaves, washing and preparing the ingredients, mixing the katuk leaves with chicken meat, eggs, flour, and seasonings, to steaming, breadcrumb coating, frying, and serving the final product. Each stage was first demonstrated by the community service team and then practiced by the participants in groups under continuous guidance. This approach enabled participants to understand proper food-processing techniques while gaining direct experience in producing food products that are safe, nutritious, palatable and acceptable to family members.



Figure 4. Training on the preparation of katuk leaf nuggets

Figure 4 shows that during the practical session, participants demonstrated high levels of enthusiasm and participation. This was evident from their active involvement in every stage of the food-processing process, from preparing the raw ingredients to producing ready-to-consume katuk leaf nuggets. Participants also actively asked questions regarding ingredient composition, appropriate processing techniques, methods for maintaining product quality, and storage procedures to ensure that the nuggets remained safe and suitable for consumption. The interactions that took place during the training created a communicative learning environment in which participants not only received information from the resource person but also obtained immediate feedback when encountering difficulties during the product preparation process.

Intensive assistance enabled each participant to correct inappropriate processing techniques, thereby optimizing the skills acquired and enabling them to be independently applied after the activity was completed.



Figure 5. *Preparation of katuk leaf nuggets with the community service team*

After receiving the health education session, as shown in Figure 5, participants took part in training on the preparation of katuk leaf nuggets through a demonstration method followed by hands-on practice. During this session, participants practiced all stages of the processing procedure, including ingredient preparation, batter mixing, nugget shaping, steaming, breadcrumb coating, and frying. The community service team provided direct assistance at each stage, allowing participants to correct any inappropriate processing techniques.

This practice-based learning approach provided participants with a more applicable learning experience, enabling them to understand the entire processing procedure and gain confidence in reproducing it independently at home. The success of this practical session demonstrates that a demonstration method combined with hands-on practice is an effective approach for improving community skills in community service activities (Sari et al., 2026). Through this applied learning experience, participants not only understood the concept of utilizing katuk leaves as a functional food but were also able to process them into an innovative product with nutritional and economic added value (Maryanti et al., 2025).

The katuk leaf nugget innovation is expected to provide a more appealing and practical alternative food product for breastfeeding mothers, so that katuk leaf consumption is no longer limited to its traditional use as a vegetable. The development of this product also provides participants with an opportunity to diversify their daily food choices while increasing the utilization of locally available nutritional resources. Furthermore, the innovation may encourage families to become more actively involved in preparing nutritious food products that support maternal health during the breastfeeding period. In addition to supporting improved nutritional intake during the breastfeeding period, the skills acquired by participants have the potential to be further developed into home-based businesses utilizing local food resources. Thus, this innovation can provide broader benefits for improving family health while simultaneously supporting the economic empowerment of coastal communities.



Figure 6. *Distribution of educational packages*

As a form of program sustainability, at the end of the activity, as shown in Figure 6, the community service team distributed educational packages to all participants. The packages consisted of leaflets, training modules, a recipe for preparing katuk leaf nuggets, sample products, and packaging labels. These educational packages were designed as learning resources that participants could reuse when practising katuk leaf processing at home or as educational materials for other breastfeeding mothers through Posyandu activities and breastfeeding mothers' classes. The distribution of these educational materials is expected to strengthen the sustainability of the program by encouraging participants to continuously apply the skills they have acquired while disseminating information on the utilization of katuk leaves as a local food resource to support successful exclusive breastfeeding (Ramdan et al., 2025).

CONCLUSION

The community service activity through health education and training on the preparation of katuk leaf nuggets based on coastal local wisdom successfully achieved its objectives, namely improving breastfeeding mothers' knowledge and skills in utilizing katuk leaves as a functional food to support breast milk production. Through a combination of educational methods, demonstrations, and hands-on practice, participants not only gained an understanding of the benefits of katuk leaves but were also able to process them into a nutritious, practical, and easy-to-prepare food product for daily consumption.

In addition, the provision of educational materials in the form of leaflets, training modules, processing recipes, and packaging labels is expected to support the sustainable application of the training outcomes at the household level and serve as educational media in Posyandu activities and breastfeeding mothers' classes. Therefore, continued support from the Public Health Center (Puskesmas), health cadres, and local government is needed to conduct similar activities periodically. Such support should be accompanied by assistance in developing product variations, improving packaging quality, and expanding the target groups so that the utilization of katuk leaves as a local food resource can continue to develop and provide broader benefits for improving maternal and child health and empowering coastal communities.

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