

The effect of consuming banana blossom (*musa paradisiaca*) on breast milk production in postpartum mothers

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ARTICLE INFO

Article history:

Received May 14, 2026

Revised May 28, 2026

Accepted June 6, 2026

Keywords:

Banana Blossom

Breast Feeding

Breast Milk Production

ABSTRACT

Background: Breast milk (ASI) contains essential nutrients needed for infant growth, immunity, disease prevention, and cognitive development. Banana flower is known to contain lactagogum compounds that stimulate the hormones oxytocin and prolactin, which can help increase and facilitate breast milk production. **Objective:** This study aimed to determine the effect of banana flower consumption on breast milk production in postpartum mothers at PMB Krasak Bangsri Jepara. **Method:** This study used a quasi-experimental design with a one-group pretest-posttest approach without a control group. The sample consisted of 30 postpartum mothers selected using a total sampling technique. Data were collected through questionnaires and observations. The research instruments included a breast milk production questionnaire and a standard operating procedure (SOP) for administering banana flower. Validity testing showed all questionnaire items were valid with r-count values greater than r-table (0.514), while reliability testing using Cronbach's Alpha obtained a value of 0.906, indicating high reliability. Data were analyzed using the Paired Sample t-Test. **Result:** Statistical analysis showed a p-value of 0.000 ($p < 0.05$), indicating a significant effect of banana flower consumption on breast milk production in postpartum mothers. **Conclusion:** Banana flower consumption has a significant positive effect on breast milk production in postpartum mothers at PMB Krasak Bangsri Jepara.

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INTRODUCTION

Developing quality human resources (HR) to achieve prosperous, just, and prosperous families is one of the goals of national development. Reliable HR can be achieved through various programs, including fulfilling nutritional needs for newborns through breastfeeding until the age of 2 years and exclusively for 6 months. Generally, a mother produces milk, which we call breast milk, as the natural food provided for babies (Afrida & Aryani, 2022)(Purnami et al., 2025).

Breast milk is the best food for babies. It contains beneficial nutrients not found in formula. The composition of breast milk constantly changes according to the needs of both premature and

full-term babies, so breastfed babies have better nutritional status than those fed formula or other supplementary foods. Breast milk provides the optimal nutrition for babies, protects against various infections, and fosters a loving relationship that supports all aspects of a baby's development, including their health and intelligence (Ampu, 2021)(Khotimah et al., 2024).

In Indonesia, the rate of breastfeeding without complementary foods and drinks for 6 months is 29.5%, and this rate increased to 35.7% in 2018. This achievement has not yet reached the national target of 50%. The Ministry of Health reported that the number of children aged 0-5 months who were breastfed without complementary foods and drinks in 2021 reached 71.58%. This result shows an increase compared to the previous year's figure of 69.62%. However, the rate of exclusive breastfeeding in most Indonesian provinces is still lower than the national average (Najahah & Mawaddah, 2022)(Saragih et al., 2024).

The World Health Organization (WHO) reported in 2021 global exclusive breastfeeding data that approximately 44% of infants aged 0-6 months worldwide received exclusive breastfeeding during the 2015-2020 period, falling short of the global target of 50% exclusive breastfeeding coverage (WHO, 2021). Indonesia's exclusive breastfeeding coverage in 2022 was recorded at only 67.96%, down from 69.7% in 2021, indicating the need for more intensive support, such as providing education to mothers about the importance of exclusive breastfeeding to increase coverage (Tunny, 2024)(Olya et al., 2023). The WHO has set a target of increasing the number of mothers exclusively breastfeeding in the first 6 months of life by 2025, to at least 50%. We are still far from the UNICEF-recommended coverage target of 100% (Silayar, n.d.)(Putri & Perbawati, 2023). Based on the Central Java health profile, the percentage of exclusive breastfeeding for infants aged 0-6 months in Central Java in 2023 was 64.3 percent, a decrease compared to the percentage of exclusive breastfeeding in 2022, which was 71.4 percent (Central Java Health Office, 2023).

Breast milk is the best food for babies because it contains the energy and nutrients needed for the first 6 months of a baby's life. The growth and development of babies are greatly determined by the amount of breast milk consumed. The first breast milk that comes out of the mother is thick yellow, called colostrum, which contains substances that provide protection against various types of infections. Breastfeeding can reduce the risk of stomach and intestinal infections and constipation. Babies who are not breastfed are susceptible to infectious diseases. Some diseases that are less common in breastfed babies include Sudden infant death syndrome (SIDS) and eczema (SISKA, 2023)(Syahirah, 2024).

Breast milk is the best food that has many benefits. The benefits of breast milk are very large, including improving the quality of life of children. The benefits of breast milk for babies include babies who are less sick, breast milk contains immunity, including: Cellular immunity, namely leukocytes around 4000 / ml of breast milk which mainly consists of macrophages, humoral immunity, for example IgA - enzymes in breast milk that have antibacterial effects such as lysozyme, catalase and peroxidase. Lactoferrin Bifidus factor Other antibodies: Interferon, antistaphylococcal factor, HSV antibody, B12 binding protein and complement C3 and C4. Does not cause allergies (Kulsum et al., 2019). According to research conducted by Fania et al., the ERACS protocol recommends breastfeeding immediately after the baby is born and returns to the ward within 1 hour after surgery with the Skin to skin method. This method can be useful in increasing the speed and duration of breastfeeding, and can reduce maternal anxiety and postpartum depression (Kartini & Kusumadewi, 2023)(Setyorini et al., 2025).

A common problem for breastfeeding mothers is inadequate milk production, leading to a decline in exclusive breastfeeding rates. The impact of inadequate milk supply can lead mothers to believe their babies aren't getting enough nutrition, leading them to stop breastfeeding and switch to formula. Meanwhile, babies who aren't breastfed effectively but are fed formula are at higher risk of food allergies or airborne illnesses, are more prone to diarrhea, asthma, obesity, diabetes,

digestive problems, dental problems, malocclusion, and iron deficiency anemia (Marfuah et al., 2022)(Syahirah, 2024).

Causes of suboptimal breast milk production include nutritional patterns, infant sucking, and sociocultural factors, as well as a lack of stimulation of the hormones prolactin and oxytocin, which play a crucial role in smooth breast milk production. Prolactin and oxytocin are hormones that play a crucial role in the lactation process. Prolactin influences the amount of breast milk produced, while oxytocin influences the milk ejection process or nipple stimulation response. When a baby breastfeeds, it stimulates the brain, which then stimulates the adenohypophysis, which releases the hormone prolactin and stimulates the alveolar cells that produce milk. The milk produced by the alveoli enters the ductal system and then flows through the lactiferous ducts into the baby's mouth (SARI, 2020)(Aini, 2023).

Breast milk production is greatly influenced by the nutritional intake of new mothers. A new mother's nutritional intake is expected to reach approximately 1,800-2,000 calories per day. If nutritional intake is insufficient, breast milk production will be hampered and breast milk production can decrease. Therefore, it is recommended for new mothers to consume vegetables that can increase breast milk production, such as katuk (savory spinach), chayote, nuts, and banana blossoms (Suiraoaka et al., 2024)(Saragih et al., 2024).

There are ways to increase breast milk production, for example by consuming vegetables and fruit. An example of a vegetable that can increase breast milk production is banana blossom. The lactagogum content found in banana blossom functions to stimulate the hormones oxytocin and prolactin, such as alkaloids, polyphenols, steroids, flavonoids, which are effective in increasing breast milk production (Saputri et al., 2025)(Mustikasari et al., 2025). Banana blossom is a part of the banana tree that is shaped like a heart that emerges from the trunk when the banana plant (*Musa paradisiaca*) flowers. This banana blossom has many layers of skin and ovaries (combs) located between the leaves and petals. Banana blossom contains many vitamins: Energy of 30 kkal, protein of 1 g, carbohydrates of 7 g, fat of 50 mg, Vitamin A of 170 IU, Vitamin B1 of 0.05 mg and vitamin C of 10 mg. Of course, all the nutrients contained in it are very beneficial for our bodies (Mastuti et al., 2023)(Ahsan et al., 2020).

Based on research conducted by Wulan and Girsang (2020), the results showed that the smoothness of breast milk in the intervention group and the control group had a difference of 149.0 with a p-value of 0.01, which means that there is an effect of giving boiled banana blossoms on breast milk production, both seen from the smoothness of mother's breast milk and from baby indicators. It is recommended for breastfeeding mothers to regularly consume banana blossoms because it has been proven to increase breast milk production (Wulan & Girsang, 2020)(Zelharsandy & Soleha, 2024). Research conducted by Manalu in 2020, obtained research results showing that the mean rank value in the control was 5.65 with a sum of ranks of 56.50, increasing in the intervention group with a mean rank of 15.35 and a sum of ranks of 153.50 with a p-value of $(0.000 < \alpha 0.05)$. The conclusion of this study is that there is an effect of banana blossom consumption on increasing breast milk production in breastfeeding mothers in Candirejo Village, Candirejo Regency.

The novelty of this study lies in the differences in research location, research subjects, and intervention methods used compared to previous studies. Research conducted by Wulan and Girsang (2020) showed that there was an effect of giving boiled banana blossom on smooth breast milk production with a p-value of 0.01, while research by Manalu (2020) also showed an effect of consuming banana blossom on increasing breast milk production with a p-value of 0.000. However, the study was conducted on breastfeeding mothers in general and in a different research location. Meanwhile, this study specifically examines the effect of banana blossom consumption on breast milk production in postpartum mothers at PMB Jumiyatun Krasak Bangsri Jepara using a pretest-posttest design to observe the difference in breast milk production before and after the intervention. Thus, this study provides an additional contribution in strengthening scientific

evidence regarding the benefits of consuming banana blossom (*Musa paradisiaca*) as a natural alternative to increase breast milk production in postpartum mothers.

The results of a preliminary survey conducted by researchers in August 2025 on 10 breastfeeding mothers in the PMB J area of Jepara City, there were 6 babies (60%) who were given exclusive breastfeeding while 4 other babies (40%) did not receive exclusive breastfeeding due to substandard breast milk production and lack of knowledge. Therefore, because of the abundance of banana plants in the PMB J area, the banana heart can be used to stimulate breast milk with its lactagogum content.

The aim of this study was to determine the effect of banana heart consumption (*Musa paradisiaca*) on breast milk production in postpartum mothers at PMB Jumiyatun Krasak Bangsri Jepara. Lack of family support, especially from husbands and close relatives, may reduce maternal confidence, increase psychological stress, and negatively affect breastfeeding success. Emotional and practical support from family members plays an important role in stimulating oxytocin release and maintaining mothers' motivation to continue exclusive breastfeeding.

This study contributes to the development of nutritional interventions for postpartum mothers by providing evidence that banana blossom can be used as an affordable, locally available, and natural galactagogue alternative to support breast milk production and improve exclusive breastfeeding practices in the community.

RESEARCH METHOD

The type of research used by the researcher is quantitative research using a quasi-experimental design with a One Group Pretest Posttest design without a control group. There is one group in this study, namely the intervention group.

The population of this study was all mothers on the second day of postpartum who were breastfeeding in the working area of PMB Jumiyatun Krasak Bangsri Jepara as many as 30 respondents. The number of samples in this study was 30 respondents. The sampling technique used in this study was the total sampling method. The sample criteria in this study included the inclusion criteria including: 1) Postpartum mothers from the second day to the eighth day, 2) Willing to participate and willing to fill out the questionnaire, 3) Postpartum mothers who were not taking medication to facilitate breast milk production, 4) Postpartum mothers were not currently receiving other interventions to increase breast milk production, 4) Willing to be research participants and committed to consuming banana blossoms for 7 days and exclusion criteria 1) Not willing to be research respondents, 2) Mothers who experienced postpartum blues, 3) Postpartum mothers who were sick, 4) Postpartum mothers who were experiencing swollen breasts and had infectious diseases.

The use of 30 participants allows preliminary evaluation of the intervention effect; however, the relatively small sample size may limit the generalizability of the findings to broader postpartum populations. Therefore, the results should be interpreted cautiously and require confirmation through studies with larger and more diverse samples. Postpartum mothers on days 2 through 8 were selected because this period represents the early lactation phase, during which breast milk production begins to stabilize and hormonal responses related to prolactin and oxytocin activity are highly active. Therefore, the effects of banana blossom consumption on breast milk production could be observed more clearly during this period.

This research will be conducted at PMB Jumiyatun Krasak Bangsri Jepara, from October to November 2025. The data in this study are sourced from primary data. and secondary data. Primary data were obtained from questionnaires. The questionnaire on breast milk production consisted of 10 closed-ended questions about breast milk production with two dichotomous choice answers: "Yes" and "No." Each question had a score of 1 for a "Yes" answer and 0 for a "No" answer.

The data analysis of this study used univariate analysis (frequency distribution) and bivariate analysis with Paired Sample t-Test. This study has received ethical approval from the

Health Research Ethics Commission (KEPK) with number: 572/Z-7/KEPK/UMKU/I/2026 at the Muhammadiyah University of Kudus. During the implementation, the study adhered to the principles of research ethics, including the researcher providing informed consent to respondents as a form of approval to become respondents, explaining the purpose, objectives, and impact of the study. On the measurement sheet, the researcher only wrote the code and did not include the names of the respondents. The researcher also guaranteed the confidentiality of the research results.

RESULTS AND DISCUSSIONS

Research result

a. Respondent Characteristics

Table 1. Frequency distribution of age, occupation and education level of respondents at PMB Jumiyatun

Krasak Bangsi Jeparu (n = 30)			
	Variables	Frequency	(%)
Age	< 20 years	4	13.3
	21-30 years old	21	70.0
	>30 years	5	16.7
	Total	30	100
Work	Work	19	83.3
	Doesn't work	11	36.7
	Total	30	100
Level of education	JUNIOR HIGH SCHOOL	4	13.3
	SENIOR HIGH SCHOOL	17	56.7
	College	9	30.3
	Total	30	100

b. Univariate Analysis Results

Table 2. Distribution of frequency of breast milk production of postpartum mothers before the description of heart consumption at PMB Jumiyatun Krasak Bangsi Jeparu (n = 30)

Breast milk production	Frequency	Percentage (%)
not enough	13	43.3
Enough	17	56.7
More	0	0
Total	30	100

Table 3. Breast milk production in postpartum mothers after consuming banana flower

Breast milk production	Frequency	Percentage (%)
not enough	0	0
Enough	18	60.0
More	12	40.0
Total	30	100

c. Bivariate Analysis Results

Table 4. Statistical analysis of the influence of consumption heart banana (*Musa Paradisiaca*) on breast milk production in postpartum mothers at PMB Jumiyatun Krasak Bangsri Jeparu (n = 30)

Variables	Mean	Standard Deviation	p-value
Breast milk production before consuming banana flower	1.57	0.504	0.00
Breast milk production after consuming banana flower	2.40	0.408	

Discussion

- a. Breast milk production of postpartum mothers before being given banana heart consumption, based on the research results, data obtained showed that breast milk production of postpartum mothers before being given banana heart consumption was Most of the breast milk production was sufficient for 17 respondents (56.7%) and breast milk production was insufficient for 13 respondents (43.3%).

In this study, there are still many postpartum mothers whose breast milk production is reduced, namely as much as 43.3%. This can be influenced by several factors including nutritional factors, breast care, baby sucking factors, social and cultural factors, breastfeeding and psychological factors.

The process of breast milk production is also influenced by several factors, including nutrition, breast care, infant sucking, social and cultural factors, breastfeeding, and psychological factors. These nutritional factors need to be considered by a mother during the breastfeeding process because to increase breast milk production, a mother must increase her nutritional needs by increasing the portion of food containing protein, as protein functions to form new tissue for breast milk production (Wiji & Heriyeni, 2024).

According to researchers, postpartum mothers' low breast milk production can be influenced by various factors, both before and after pregnancy. Pre-pregnancy conditions are determined by breast development at birth and during puberty. During the second trimester, if the breasts do not enlarge due to the growth and differentiation of the lobuloalveoli and breast epithelial cells, this can inhibit milk production. In addition to these factors, various other factors related to the respondents' characteristics are also contributing. The study found that the majority of respondents were aged 20-30. Generally, people at this age tend to be less concerned with various factors that can facilitate breast milk production, such as prenatal breast care, consuming certain foods that can facilitate milk production, and various other factors. Therefore, in general, it tends to be less smooth. According to researchers, increased breast milk production is influenced by food intake and the nutritional content of the mother's food, one of which is foods high in lactogagum.

The results of this study are supported by the research of Saragih et al in 2024 stating that of the 20 respondents of postpartum mothers at the Cahaya Lubuk Pakam clinic before being given Kepok banana blossoms, 17 people (85.0%) had insufficient breast milk, 2 respondents had sufficient breast milk (10.0%), and 1 respondent had a lot of breast milk (5.0%). The statistical results of the Wilcoxon test showed that the p-value of 0.04 indicated the effect of giving Kepok banana blossoms on the smoothness of breast milk for postpartum mothers at the Cahaya Lubuk Pakam Clinic (Saragih et al, 2024).

- b. Breast milk production of postpartum mothers after being given banana heart consumption, based on the results of the study, it was found that the breast milk production of postpartum mothers after giving banana heart was mostly sufficient breast milk production for 18 respondents (60.0%) and excess breast milk production for 12 respondents (40.0%).

According to researchers, postpartum mothers after being given banana flower consumption experienced an increase in breast milk production because by consuming banana flower, the mother gets lactogogum, a nutrient that can increase and facilitate breast milk production, especially in mothers who experience problems in breast milk production. In addition, during the research process, it was also seen that several postpartum mothers after consuming banana flower were seen from the seepage of breast milk from the mother's breasts, the breasts did not look tense because the breastfeeding process was smooth, this can be used as an indicator of an increase in breast milk production from breastfeeding mothers after consuming banana flower.

According to the researcher's assumption, there is an increase in breast milk production in postpartum mothers because, in addition to having a composition that can stimulate the hormones oxytocin and prolactin which are useful for increasing breast milk production in mothers who have

just given birth, banana flower is also easy to get and its processing is very simple with costs that are still affordable for all levels of society so that it is very possible to be used as additional food for mothers who have just given birth to facilitate breast milk for mothers who have just given birth.

The results of this study are supported by Wiji's 2024 study, stating that breast milk production before consuming boiled banana blossoms from 16 respondents was (68.0%) sufficient breast milk production, (25.0%) insufficient breast milk production and (6.3%) high breast milk production. Breast milk production after consuming boiled banana blossoms was (93.8%) high breast milk production and (6.3%) low breast milk production. There is an effect of Banana Blossom Consumption (*Musa Balbisiana Colla*) on Breast Milk Production in Postpartum Mothers with a p value = 0.000. It is recommended that by providing banana blossom consumption and explaining the benefits of banana blossoms for breast milk production, postpartum mothers can consume banana blossoms while breastfeeding as an effort to increase breast milk production to support exclusive breastfeeding. (Wiji & Heriyeni, 2024).

- c. Bivariate analysis of the effect of banana flower (*Musa paradisiaca*) consumption on breast milk production in postpartum mothers. The results of the study show that the data obtained shows that the average breast milk production of postpartum mothers before being given banana flower consumption was 1.57 while after being given banana flower consumption was 2.40. A significant difference was seen between breast milk production before and after giving banana flower consumption, indicated by a p -value of $0.000 < 0.05$, which means that there is an effect of banana flower consumption (*Musa paradisiaca*) on breast milk production in postpartum mothers at PMB Jumiyatun Krasak Bangsri Jepara. In addition, there was a change in the SD value from 0.504 to 0.408.

In this study, processed banana blossoms were served in the form of clear vegetables, steamed as *lalaban* or stir-fried with a total of 200 grams given for one week and consumed twice a day. Breast milk production in postpartum mothers who were breastfeeding before consuming banana blossoms was 13 respondents not smooth and 17 quite smooth, after consuming banana blossoms, breast milk production was still quite smooth for 18 respondents and 12 respondents were smooth. During the study, many respondents said that their babies looked satisfied after breastfeeding and fell asleep.

Based on researchers, there is an effect of consuming banana blossom on breast milk production because banana blossom contains lactagogum which has the potential to stimulate the hormones oxytocin and prolactin such as alkaloids, polyphenols, steroids, flavonoids which are very effective in helping to smooth and increase breast milk production. The role of oxytocin in the mammary glands is to encourage contraction of the myoepithelial cells that surround the alveoli of the mammary glands, so that by contracting the myoepithelial cells the contents of the alveoli will be pushed out into the milk ducts, so that the alveoli become empty and stimulate the synthesis of the next milk.

The results of this study are in line with research conducted by Hutabarat et al., in 2020, which stated that there was an effect of increasing breast milk production in postpartum mothers after consuming banana blossoms with a P -Value of $0.000 < 0.05$. Based on the results of the study, the increase in breast milk production in mothers occurred due to the content contained in banana blossoms, namely lactagogum which has the performance of stimulating the hormones oxytocin and prolactin, alkaloids, polyphenols, steroids, and flavonoids in increasing breast milk production (Hutabarat et al., 2021).

According to the researchers, the results of this study showed that breast milk production was in the fairly smooth category, possibly due to other factors that inhibited breast milk production, such as sadness and tension, lack of support from husbands and close friends. Furthermore, in this study, postpartum mothers also consumed foods such as rice, tempeh, tofu, vegetables, and meat, with the addition of processed banana blossoms, which can increase breast milk production. However, apart from the consumption of banana blossoms, respondents in this

study who succeeded in increasing breast milk production were also influenced by other factors, including nutritional factors, baby sucking factors, social and cultural factors, breastfeeding, and psychological factors.

According to researchers, some respondents only recently learned that banana blossoms are a nutritious food and that consuming them can quickly increase breast milk production. Furthermore, the use of banana blossoms is more effective because people already know the benefits of banana blossoms for breast milk production from those around them, especially parents, siblings, and friends, leading to a preconceived notion that banana blossoms can increase breast milk production. This psychological suggestion helps increase breast milk production.

This research is also supported by research conducted by Manalu et al in 2020 stating that the results of the study showed that the mean ranks value in the control was 5.65 with a sum of ranks of 56.50 increasing in the intervention group with a mean ranks of 15.35 and a sum of ranks of 153.50 with a p-value of ($0.000 < \alpha < 0.05$). The conclusion of this study is that there is an effect of banana flower consumption on increasing breast milk production in breastfeeding mothers in Candirejo Village, Deli Serdang Regency (Manalu, Andayani, 2020).

This research is supported by research conducted by Susanha and Pattamapornpong in 2022 entitled "Galactagogue Effect of Banana (*Musa x paradisiaca*) Blossom Beverage on Breast Milk Production Among Mothers Undergoing Cesarean Section" states that a randomized controlled trial was conducted with an experimental group ($n=30$) who consumed banana blossom (*Musa X paradisiaca*) beverage and a control group ($nc=30$) who consumed water. The results showed that mothers who underwent cesarean section in the experimental group had significantly higher milk flow levels on Day 2 ($p=0.017$), Day 3 ($p=0.005$) and milk volume on Day 2 ($p=0.005$), and Day 3 ($p<0.001$) compared to the control group. This study has proven the galactagogue effect of banana blossom beverage to increase breast milk production, without side effects. (Yimyam & Pattamapornpong, 2022).

The results of a study conducted by Desi Veronik et al in 2022 on "The Effect of Giving Banana Heart Nuggets on Breast Milk Production in Breastfeeding Mothers in Kelumpang Village in 2022" stated that the results of data analysis using paired t-tests and independent tests. There was no significant difference in the average breast milk production of respondents between the intervention group and the control group at a pre-test p-value of 0.033 ($p < 0.05$) and there was a significant difference in the average breast milk production of respondents between the intervention group and the control group at a post-test p-value of 0.000 ($p < 0.05$). Discussion: Banana heart contains calories, protein, fat, carbohydrates, vitamin A, vitamin B1, vitamin C and minerals such as phosphorus, calcium and Fe and stimulates the hormones oxytocin and prolactin which will greatly help the process of breast milk production (Desi Veronika, Endah Wahyutri, 2022).

The results of this study are supported by research conducted by Susanha Yimyam et al. entitled "Effectiveness of banana flower beverage on breast milk production among mothers of preterm neonates" in 2023 stating that a randomized controlled trial was conducted on mothers with premature babies who were recruited and randomized into a treatment group ($nt = 20$) who consumed banana flower flower drink and a control group ($nc = 21$) who only received water. The amount of breast milk expressed for three days after delivery was recorded and compared between the two groups. The results showed that mothers in the treatment group had higher breast milk production than mothers in the control group on Day 2 (48 ± 2 hours) and Day 3 (72 ± 2 hours) after delivery. Banana flower is a promising galactagogue in increasing breast milk production in mothers with premature babies without side effects (Yimyam et al., 2023).

CONCLUSION

The results of the study showed that breast milk production in postpartum mothers before being given banana blossom consumption was mostly in the sufficient category as many as 17

respondents (56.7%), while breast milk production was insufficient as many as 13 respondents (43.3%). After being given banana blossom consumption, there was an increase in breast milk production where most respondents were in the sufficient breast milk production category as many as 18 respondents (60.0%) and more breast milk production as many as 12 respondents (40.0%). Based on the results of statistical analysis, the average breast milk production of postpartum mothers before being given banana blossom consumption was 1.57, while after being given banana blossom consumption increased to 2.40. The results of statistical tests showed a significant difference between breast milk production before and after being given banana blossom consumption with a p-value of 0.000 (<0.05), so it can be concluded that banana blossom (*Musa paradisiaca*) consumption has an effect on increasing breast milk production in postpartum mothers at PMB Jumiyatun Krasak Bangsri, Jepara. In addition, there was a change in the standard deviation value from 0.504 before the intervention to 0.408 after the intervention, which indicates smaller data variation after the intervention.

The findings of this study imply that community midwives can promote banana blossom consumption as a complementary nutritional intervention for postpartum mothers to support breast milk production and increase exclusive breastfeeding coverage at the community level.

Future research should employ randomized controlled trials with larger and more diverse samples, longer observation periods, and objective measurements of breast milk production to provide stronger evidence regarding the effectiveness of banana blossom as a natural galactagogue. These findings also suggest that banana blossom can be incorporated into community-based maternal and child health programs as an affordable and locally available nutritional intervention to support breastfeeding practices, increase exclusive breastfeeding coverage, and improve maternal and infant health outcomes.

ACKNOWLEDGEMENTS

The researcher would like to thank the Jumiyatun Krasak PMB, Bangsri, Jepara, for granting permission and support in conducting this research. Appreciation is also expressed to Muhammadiyah University of Kudus for academic guidance. Special thanks are extended to family and friends for their prayers and moral support, which enabled this research to be successfully completed.

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