
| RESEARCH ARTICLE

The Role of Communication in Enhancing PKK Community Kitchen Initiatives for Stunting Reduction in Lebak Regency (A Case Study of Rangkasbitung District)

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| ABSTRACT

Stunting in Lebak Regency has become a serious concern as it reflects the condition of maternal and child well-being, which is influenced by undernutrition, economic constraints, and suboptimal caregiving practices, with approximately 4,391 children affected. In response to this condition, the Family Welfare Movement Team (Tim Penggerak PKK) has implemented various activities, including nutrition education, cooking demonstrations, the utilization of family medicinal plants (TOGA), strengthening of integrated health posts (*posyandu*), promotion of clean and healthy living practices, cross-sector collaboration, and continuous monitoring. These activities have been integrated into the ten core PKK programs, which are holistic in nature and encourage family and community participation. This study aimed to describe the communication processes and elaboration carried out by the Family Welfare Movement Team through the Dapur PKK Program in efforts to enhance maternal and child well-being, particularly in relation to stunting prevention. The study employed a qualitative approach using a case study method and was conducted in Lebak Regency from June to November 2025. Ten informants were selected through purposive sampling based on inclusion criteria and the relevance of information. Data were analyzed thematically through data reduction, data display, and conclusion drawing to understand communication patterns, forms of elaboration, and the role of the Family Welfare Movement Team. The findings showed that communication and elaboration within the Dapur PKK Program occurred in a hierarchical and participatory manner through coordination meetings, digital group communication, official correspondence, as well as cooking practices and technical assistance. These processes shaped nutritional understanding, encouraged changes in family practices, and increased awareness of healthy dietary patterns and child nutrition among mothers and families. The communication strategy integrated personal, participatory, and cross-sector approaches through the involvement of community leaders, health professionals, and the use of digital media. The study concludes that the Dapur PKK Program plays a role in supporting maternal and child well-being and stunting prevention efforts. Hierarchical and participatory communication strategies are recommended to be continuously developed by expanding cross-sector collaboration and the utilization of digital media to reach a wider range of families.

| KEYWORDS

PKK Community Kitchen, Maternal and Child Health, Communication, Community Participation, Stunting Prevention

| ARTICLE INFORMATION

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1. Introduction

Stunting has become a serious concern in various regions, including Lebak Regency, Banten Province, Indonesia. In this context, stunting is not merely a nutritional issue but also reflects the overall condition of family well-being, particularly that of mothers and children. Based on a preliminary study, approximately 4,391 children under five in several districts were found to be affected by stunting (Dinas kesehatan Kabupaten Lebak, 2024). This figure indicates a high level of vulnerability to chronic nutritional problems and requires special attention from multiple stakeholders. The phenomenon of stunting is closely associated with several factors, including inadequate daily nutritional intake, limited household economic access, insufficient maternal knowledge regarding child health, and suboptimal parenting practices (Aminin et al., 2022; Vaivada et al., 2020).

Low family awareness regarding the importance of balanced nutrition and healthy lifestyles further exacerbates the situation. Therefore, stunting interventions cannot be implemented in a partial or sectoral manner alone but require a comprehensive approach that addresses the root causes through holistic family empowerment (Fajaria et al., 2022; Sirajuddin et al., 2021). Within the framework of human resource development, maternal and child well-being plays a central role. This well-being encompasses the fulfillment of basic rights, including physical, psychological, social, and spiritual aspects. The government, through various policies, has emphasized the importance of interventions from pregnancy through early childhood as a strategy for stunting prevention. In this regard, the family serves as both the smallest unit and the central point of intervention, making family empowerment a key determinant of program success (Faridah et al., 2024; Presiden RI, 2024; Sutinbuk et al., 2024).

One of the strategic actors in family empowerment in Indonesia is the Family Welfare Empowerment Movement Team (PKK). As a long-established community-based organization, PKK has strong proximity to communities and a deep understanding of local contexts. In implementing its activities, PKK employs interpersonal, group, and mass communication strategies through direct counseling, group discussions, and the use of print and digital media (Putri et al., 2022). These strategies aim to effectively reach diverse community groups, strengthen understanding, and encourage behavioral changes in family practices related to nutrition and child care anak (Bhanot et al., 2023; Grant et al., 2022).

Since being established as a national movement through Presidential Decree No. 99 of 1980, PKK has actively carried out various educational, social, and economic activities aimed at improving family welfare. In Lebak Regency, the PKK Movement Team has undertaken concrete efforts to address stunting, one of which is community-based socialization targeting families directly. These socialization activities are not limited to one-way information delivery but emphasize participatory approaches that encourage communities to understand, accept, and internalize healthy living practices, balanced nutrition, and appropriate child-rearing practices that support optimal growth and development (Presiden RI, 2024; Ronald Darly Hukubun et al., 2023; Zuraidah et al., 2022). These efforts are integrated into the ten core PKK programs, which are interconnected and address various aspects of family life.

The ten core PKK programs include the internalization and practice of Pancasila values to build family character; mutual cooperation to strengthen social solidarity; food programs to support food security through home gardening and nutritious food processing; clothing programs to develop skills in garment production and handicrafts; housing and household management to create healthy and orderly living environments; education and skills development to enhance life skills; health programs to improve maternal and child health through integrated health posts (*posyandu*), immunization, and nutrition education; cooperative development to strengthen family economic capacity; environmental sustainability to promote environmental awareness; and healthy planning to support well-planned and prosperous family life (Presiden RI, 2017). Through this holistic and integrative approach, each PKK program contributes to the development of healthy and prosperous families, particularly mothers and children as the next generation. For example, food and health programs directly support nutritional fulfillment and child health, while education programs enhance parental awareness of the importance of education as part of stunting prevention (Amarullah, 2024). To ensure effectiveness, PKK socialization and counseling activities are supported by regular monitoring and evaluation systems, including cadre activity records, indicator achievement evaluations, and community feedback through field visits and discussion forums (Harianti et al., 2023; Sumadewi et al., 2022; Yusransyah et al., 2025).

These efforts are increasingly relevant considering that, at the national level, the prevalence of stunting in Indonesia remains relatively high at 21.6% in (Kementerian Kesehatan RI, 2023), while the government targets a reduction to 18% by 2025 (Coordinating Ministry for Human Development and Cultural Affairs, 2025). Therefore, massive and continuous socialization regarding stunting is required as a national priority program, demanding cross-sector collaboration and active community participation (Absor & Ratriana, 2024; Wasiat & Salomo, 2024). Based on this background, this study focuses on the communication processes and elaboration carried out by the PKK Movement Team in Lebak Regency through the implementation of the Dapur PKK Program. The aim is to understand the processes, meanings, and strategies employed in implementing the ten core PKK programs to enhance maternal and child well-being, particularly in the context of stunting reduction.

2. Literature review

2.1 Socialization

Socialization is a lifelong process through which individuals learn and internalize societal norms, values, and behaviors, enabling them to function effectively within society (Judijanto et al., 2025). It plays a crucial role in shaping individual identity and social roles through continuous interaction (Judijanto et al., 2025). Socialization is essential for developing social responsibility, empathy, and cultural continuity across generations (Judijanto et al., 2025). Its main objectives include understanding social norms, forming personal identity, and developing social and functional skills. Socialization occurs in two primary forms: primary socialization, which takes place within the family during early childhood, and secondary socialization, which occurs in broader social environments such as schools and workplaces. It can also be formal or informal, as well as planned or unplanned. Key agents of socialization include family, peers, educational institutions, media, and religious institutions, all of which contribute to shaping individual behavior and values. The process develops through stages, from imitation in early childhood to full social awareness in adulthood. Socialization is influenced by internal factors such as personality and psychological development, as well as external factors including family environment, culture, and social conditions (Judijanto et al., 2025).

2.2 Community Empowerment and Family Welfare

Community empowerment refers to a process and outcome aimed at enhancing the capacity and independence of individuals or groups to address their own needs and problems (Rachmawati, 2021). It emphasizes participatory, people-centered development, where communities actively engage in decision-making processes (Hadiyanti & Koeswanto, 2023). The primary goals of empowerment include improving institutional capacity, economic conditions, income levels, environmental quality, and overall quality of life, ultimately leading to stronger and more independent communities (Maryani & Nainggolan, 2020). Key principles of community empowerment include equality, participation, self-reliance, and sustainability. Communities are viewed as active subjects with inherent potential rather than passive recipients of assistance (Maryani & Nainggolan, 2020).

Empowerment programs target behavioral change, increased participation, strengthened cooperation, improved motivation, and optimal utilization of local resources. Strategies include traditional approaches, direct action, and transformative education (Suhadi, 2023). In Indonesia, the Family Welfare Empowerment Program (PKK) plays a significant role in promoting family well-being through ten core programs, including health, education, food security, environmental sustainability, and economic development (Menteri Dalam Negeri RI, 2020).

2.3 Stunting

Stunting is a condition characterized by impaired growth and development in children, resulting in height-for-age below standard due to chronic malnutrition, particularly during the first 1,000 days of life (UNICEF et al., 2021). Stunting has significant long-term impacts, including reduced cognitive ability, poor academic performance, delayed motor development, and decreased productivity in adulthood (Yuliana & Hakim, 2019) (Setianingsih et al., 2020). The causes of stunting are multifactorial, including inadequate nutrition, poor sanitation, recurrent infections, suboptimal infant feeding practices, and maternal health conditions. At the broader level, socioeconomic factors, food systems, health services, education, and cultural practices also contribute to its prevalence (WHO, 2018). Addressing stunting requires a multisectoral approach. Government policies and national programs play a central role, supported by the health sector through maternal and child health services, the education sector through nutrition awareness, and the private sector through innovation and corporate social responsibility. Community and non-governmental organizations also contribute through education and grassroots interventions (WHO, 2018).

2.4 Health Communication

Health communication is a process of delivering information and messages aimed at influencing individual and community health behaviors. It is widely used by health professionals in health promotion, prevention, and clinical services (Rohani et al., 2022). The communication process involves key elements such as communicator, message, channel, receiver, and feedback. Effective communication requires clear messages, appropriate media, and active feedback to ensure understanding and behavioral change. Health communication can be verbal or nonverbal and may occur in one-way, two-way, or chain communication models. Two-way communication is generally more effective as it allows interaction and feedback (Rohani et al., 2022).

Several factors influence communication effectiveness, including individual characteristics (age, knowledge, perception), cultural background, emotions, environment, and interpersonal relationships. Communication can take various forms, including interpersonal, group, and mass communication. Each form has its own advantages and is used depending on the context and target audience. In public health, effective communication is essential for promoting healthy behaviors and improving health outcomes (Rohani et al., 2022).

2.5 Theoretical Framework

This study applies two main theories, namely the Elaboration Likelihood Model (ELM) and the Two-Step Flow Model of Communication. The Elaboration Likelihood Model explains how individuals process persuasive messages through two routes: the central route, which involves critical evaluation of message content and leads to more stable and long-lasting attitude change, and the peripheral route, which relies on external cues and results in more temporary attitude change (Carroll, 2023; Karoline et al., 2023; Octafiola & Yuliati, 2023; Petty & Briñol, 2012). Meanwhile, the Two-Step Flow Model explains that information from mass media does not directly influence the public but flows through opinion leaders who interpret and transmit messages to the wider community. These opinion leaders play a crucial role in shaping attitudes and behaviors, as interpersonal communication is often more effective than direct media exposure (Katz, 1957; Weimann, 2001).

2.6 Research Gap

Based on the review of previous studies, most research has primarily focused on the role of PKK cadres at the village or sub-district level in stunting prevention through health education, supplementary feeding, and community empowerment activities. These studies generally emphasize individual roles of cadres and tend to use descriptive qualitative or quantitative approaches with limited implementation methods, such as lectures or reliance on secondary data. Furthermore, some studies are limited to literature reviews without incorporating primary field data. There is still a lack of research examining integrated PKK programs and structured

communication strategies in a comprehensive manner. Therefore, this study addresses these gaps by focusing on communication strategies and the integrated implementation of the ten core PKK programs at the district level, analyzing inter-program linkages in stunting reduction, and utilizing primary data through in-depth interviews and document analysis to provide a more comprehensive and empirical understanding.

3. Methodology

This study employed a qualitative approach using an instrumental case study design to explore communication strategies and the elaboration of the Dapur PKK program implemented by the Family Welfare Empowerment Team (TP PKK) in Lebak Regency, Indonesia. A case study approach allows an in-depth understanding of complex social phenomena within a real-life context, particularly the interaction between community actors, cultural dynamics, and health communication practices.

The research was conducted in Lebak Regency, Banten Province, from June to November 2025. The study sites included the TP PKK office at the regency level as well as selected sub-districts and villages where program implementation and community interactions took place. Participants were selected using purposive sampling based on their relevance to the research objectives. A total of 10 informants were involved, consisting of key informants (PKK regency-level leaders), main informants (sub-district and village PKK leaders), and supporting informants (PKK cadres, health workers, and beneficiary families). Inclusion criteria required participants to have direct involvement or experience with the PKK program for at least six months and willingness to provide informed consent.

Data were collected through semi-structured in-depth interviews, document analysis, and field observations. Interviews were audio-recorded with participants' consent and complemented by field notes. Document review included program reports, policy documents, and related materials to support data triangulation. Data analysis followed a thematic analysis approach, involving data transcription, coding, categorization, and interpretation. The analytical process was conducted iteratively through data reduction, data display, and conclusion drawing to identify patterns and key themes related to communication strategies, community engagement, and program implementation.

To ensure trustworthiness, this study applied credibility, transferability, dependability, and confirmability criteria. Credibility was achieved through source triangulation and member checking; transferability through detailed contextual descriptions; dependability through systematic documentation of the research process; and confirmability through audit trails and the use of multiple data sources. Ethical approval was obtained from the Research Ethics Committee of Universitas Sultan Ageng Tirtayasa. All participants provided informed consent prior to data collection, and the study adhered to ethical principles including respect for persons, beneficence, and justice.

4. Results/Findings

4.1 Communication and Elaboration Stages

Communication in the Dapur PKK Program in Lebak Regency was implemented hierarchically from the district to the village level through both formal and informal channels. Formal communication was conducted through coordination meetings and official letters, while informal communication utilized digital media such as WhatsApp to facilitate rapid information exchange. Informants reported that communication was carried out "through routine coordination meetings, WhatsApp groups, and official letters" (YS), and that information was "disseminated through monthly cadre meetings" (IZ). In addition to indirect communication, direct approaches such as training, field assistance, and hands-on practice were used to strengthen the understanding of cadres and beneficiaries, as reflected in statements referring to "direct training and field assistance" (RR) and "guidance and hands-on practice with cadres" (AW). Beneficiaries also reported receiving information during community health service activities, particularly "from cadres during posyandu sessions" (N).

Program activities focused on nutrition education, cooking demonstrations, provision of locally based supplementary feeding, and assistance for families at risk of stunting. These activities were supported by cross-sector collaboration involving the Health Office, primary healthcare centers, and village cadres. Informants highlighted collaboration with "the Health Office, puskesmas, and village PKK cadres" (YS). Capacity building efforts were conducted through routine training programs; however, not all cadres had participated in formal training, as some reported that they had "not participated in formal training" (N).

4.2 Meaning of Stunting Education Communication

Educational communication on stunting within the Dapur PKK Program was understood by beneficiaries as a learning process that enhances knowledge and supports the application of nutritional practices in daily life. Informants indicated that family understanding improved after repeated exposure to program activities, as reflected in statements such as "family understanding increased after cooking demonstrations" (IZ) and that families "began to realize the importance of child nutrition" (RR). The findings also showed that practical and experience-based communication was more effective than one-way information delivery, with informants stating that "understanding improved when direct practice was provided" (FA).

The communication process was participatory, involving active engagement between cadres and families. This was reflected in beneficiaries' enthusiasm, such as "families were enthusiastic about trying healthy recipes" (AW) and becoming "more aware of the importance of nutritious food" (N). Behavioral changes were observed in the form of improved household practices, including

preparing healthier meals and increasing awareness of nutritional needs. Informants reported that “mothers started cooking healthy meals at home” (RR) and that “cadres became more active in reminding the community about nutrition” (IZ). In some areas, this process also contributed to measurable outcomes, such as a “reduction in children at risk of stunting” (DA).

4.3 Two-Step Flow Communication Strategy

The communication strategy implemented in the Dapur PKK Program reflects the Two-Step Flow model, in which PKK cadres and community leaders act as intermediaries in delivering messages from the local government to beneficiaries. This approach emphasizes interpersonal and community-based communication. Informants described the use of “personal approaches and role modeling by cadres” (IZ), as well as “home visits to build closer relationships with residents” (TI). Community participation was actively encouraged through involvement in program activities, with informants noting that “families were invited to participate in routine activities” (DA). In addition, community leaders were engaged to strengthen message acceptance, as reflected in statements that “community leaders were involved to make messages easier to accept” (IZ).

Communication methods were primarily interactive and practical, including cooking demonstrations and informal discussions, which were perceived as more engaging by beneficiaries. This is reflected in statements such as “communication was conducted through cooking demonstrations and light discussions” (RR) and that participants were “more interested when practical activities were included” (A). Various communication media were utilized, including digital platforms such as WhatsApp and printed materials like leaflets and banners. However, direct communication remained the dominant approach, with beneficiaries reporting that information was mainly received “during posyandu activities” (N).

Despite its effectiveness, implementation faced several challenges, including limited time among cadres, fluctuating community participation, and financial constraints. These challenges were addressed through adaptive strategies such as “flexible scheduling” (IZ), “involving community leaders” (RR), and “utilizing local food resources” (FA).

5. Discussion

5.1 Communication and Elaboration Stages

The communication process in the Dapur PKK Program was implemented in a hierarchical and systematic manner, starting from the district government and extending to beneficiary families at the village level. The district-level PKK acted as the primary message initiator, delivering program policies and educational content through both formal and informal channels. This aligns with the findings that communication occurred through coordination meetings, official letters, and WhatsApp groups, ensuring consistency and adaptability of messages across levels. The initial stage emphasized aligning cadres’ understanding of program goals through discussions and technical guidance, enabling message elaboration before dissemination to the community. This process reflects the Two-Step Flow of Communication, where cadres and community leaders function as opinion leaders who interpret and transmit messages in a more contextual and accessible manner (Katz, 1957; Weimann, 2001).

At the community level, communication became more dialogic and participatory through activities such as posyandu sessions, home visits, cooking demonstrations, and group discussions. This two-way communication strengthened community participation and fostered a sense of ownership, consistent with Community-Based Health Communication approaches that position community members as agents of change (Insana & Swastikawara, 2021; Villar et al., 2024). The use of digital media, particularly WhatsApp, further enhanced coordination and message reinforcement, supporting previous findings that digital platforms improve communication efficiency and program effectiveness (Buskens, 2020; Sari et al., 2025; Setianingsih et al., 2025). In addition, integration with other programs and hands-on activities, such as cooking demonstrations, reflects principles of Social Cognitive Theory, where learning through observation and practice enhances self-efficacy and behavioral change (Faria et al., 2023). Capacity-building efforts through cadre training also played a crucial role in maintaining message consistency and program sustainability (Munir, 2024; Nur et al., 2025; Wayan et al., 2022). Overall, the findings indicate that a tiered, participatory, and community-based communication approach is essential for effective program implementation and aligns with the Community Empowerment Approach (Dushkova & Ivlieva, 2024).

5.2 Meaning of Stunting Education Communication

The findings indicate that stunting education communication in the Dapur PKK Program was perceived not merely as information delivery but as a continuous learning process that supports families in understanding nutritional issues and applying preventive behaviors in daily life. This is consistent with the results showing increased family awareness and behavioral changes following repeated exposure to program activities. The communication process was interpersonal and participatory, positioning cadres as facilitators who assist families in practicing healthy dietary behaviors, which reflects the principles of Social and Behavior Change Communication (SBCC) (Pawar et al., 2025).

Beneficiaries actively processed information through discussion, reflection, and practical application, indicating a high level of message elaboration. This aligns with the Elaboration Likelihood Model, where deeper cognitive processing leads to more sustained behavioral change (Carroll, 2023; Karoline et al., 2023; Octafiola & Yuliati, 2023; Petty & Briñol, 2012). Dialogic

communication between cadres and families also allowed for contextual problem-solving, reinforcing previous findings that participatory communication enhances meaningful behavioral outcomes (Narayanan et al., 2022; Starkweather et al., 2020; Thuita et al., 2021). The role of cadres as opinion leaders further strengthened message acceptance by translating technical information into practical guidance relevant to daily life (Katz, 1957; Weimann, 2001).

Experiential learning through cooking demonstrations and practical activities reinforced message internalization, consistent with Experiential Learning Theory, which emphasizes learning through direct experience (Crowe et al., 2025; Varman et al., 2021). This process also contributed to increased self-efficacy among families, as explained by Social Cognitive Theory (Johnson et al., 2021). The findings are consistent with previous studies showing that community-based nutrition education enhances both knowledge and independent practice of healthy behaviors (Barid et al., 2025; Maria et al., 2025; Mau et al., 2025). Therefore, communication in this program is not only informative but also transformative, shaping sustainable behavioral change supported by environmental reinforcement through integrated health programs (Leese et al., 2025; Nieves et al., 2022; Saci et al., 2024).

5.3 Two-Step Flow Communication Strategy

The communication strategy implemented by the PKK in the Dapur PKK Program reflects a contextual and community-based development communication model. Consistent with the results, communication did not occur directly from government to beneficiaries but was mediated by cadres and community leaders acting as opinion leaders. This confirms the application of the Two-Step Flow of Communication, where trusted intermediaries enhance message credibility and acceptance (Katz, 1957; Weimann, 2001). Their social proximity, cultural understanding, and legitimacy enabled more persuasive and effective communication of nutrition messages.

This strategy is also supported by Diffusion of Innovation Theory, which emphasizes the importance of interpersonal communication channels in promoting the adoption of new behaviors (Nordberg, 2020; Rivera et al., 2023; Tadesse et al., 2025). The use of home visits, cooking demonstrations, and informal discussions facilitated two-way communication, allowing beneficiaries to relate messages to their socio-economic context. Furthermore, the participatory approach encouraged active community involvement, strengthening ownership and promoting sustainable behavior change (Ingabire, 2025; Yanti & Prastiwi, 2024). The effectiveness of the strategy was reinforced by the role of cadres as role models, demonstrating healthy practices directly to the community. Interpersonal communication based on trust and social closeness has been shown to be more effective than one-way communication in influencing health behavior (Rosyidah et al. 2021). In addition, the involvement of community leaders increased message legitimacy and acceptance at the local level. The strategy was further strengthened through cross-sector collaboration and the use of both digital and traditional media, although direct communication remained the most dominant channel, as reflected in the findings.

Despite its effectiveness, several challenges were identified, including limited time, fluctuating participation, and financial constraints. Adaptive strategies such as flexible scheduling, community leader involvement, and the use of local resources were implemented to address these barriers. This highlights the importance of flexibility in communication strategies to respond to dynamic community conditions (Donovan et al., 2022; Moya et al., 2020; Szemz et al., 2022). Overall, the communication strategy demonstrates that participatory, adaptive, and community-based approaches are critical for improving nutritional practices and supporting stunting reduction efforts.

6. Conclusion

This study concludes that the communication and elaboration process in the Dapur PKK Program was implemented in a structured and hierarchical manner, integrating formal and informal channels from the district level to beneficiary families. Communication was not limited to information delivery but involved participatory and experiential learning processes, enabling families to understand and apply nutritional knowledge in daily life. The role of PKK cadres and community leaders as opinion leaders reflects the effective application of the Two-Step Flow communication model, where interpersonal, contextual, and practice-based approaches strengthened message acceptance and behavioral change. Overall, the communication strategy contributed to improving awareness, knowledge, and practices related to balanced nutrition, supporting stunting prevention efforts at the community level. Families are encouraged to actively participate in program activities and consistently apply balanced nutrition practices at the household level. The PKK organization should strengthen cadre capacity through regular training, improve coordination, and optimize digital media for communication. Future research should focus on evaluating the long-term impact of the program and the effectiveness of participatory communication strategies.

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