

Implementation of the Family Hope Program on Community Welfare in Lubuk District Siak Regency

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ABSTRACT

The Family Hope Program (PKH) aims to reduce the burden on RTSM and hopefully break the chain of poverty between generations. This research was conducted in Lubuk Dalam Village, Lubuk Dalam District, Siak Regency. This research aims to determine the implementation of the Keluarga Harapan Program (PKH) on the welfare of the community in Lubuk Dalam Village, Lubuk Dalam District, Siak Regency and the inhibiting factors. The indicators used in this research are based on Minister of Social Affairs Regulation Number 1 of 2018 which includes: improving the standard of living of beneficiary families, reducing the burden of expenditure, changing behavior and independence of beneficiary families, and reducing poverty. This research uses a descriptive method with a qualitative approach and data collection is carried out through observation, interviews and documentation. From several data sources that have been analyzed, it can be concluded that the implementation of the Family Hope Program (PKH) on the welfare of the community in Lubuk Dalam Village, Lubuk Dalam District, Siak Regency is quite good, this can be seen from the community who feel quite a positive impact with This program exists, but there are several obstacles in its implementation, namely a lack of understanding about the family hope program for beneficiary groups, the occurrence of nepotism where some parties still prioritize their family/relatives over other people and p2k2 activities that do not run properly.

INTRODUCTION

The Indonesian government as the owner of power in Indonesia has rules in organizing its government, the highest regulation in the Indonesian government is the 1945 Constitution of the Republic of Indonesia, paragraph IV, which reads.

"To protect the entire nation and all of Indonesia's territory, and to advance public welfare, to improve the nation's intelligence and to participate in implementing world order based on independence, eternal peace and social justice."

In running the government based on Law Number 23 of 2014, the central government uses the principles of decentralization, deconcentration and the principle of assistance tasks in accordance with laws and regulations. And in running the regional government, the principles of autonomy and assistance tasks are used, including:

1. *Decentralization* , namely the implementation of government authority by the government to autonomous regions to regulate and manage government affairs in the Unitary State system of the Republic of Indonesia .
2. *Deconcentration* , namely the distribution or transmission of central authority to its officers spread across regions to implement central policies. And there is a delegation of authority that is functional from superior officials (from the central government to officials in the regions) .
3. *Assistant Tasks* , namely in the form of assignments from the Central Government to autonomous regions to carry out part of the Government Affairs that are the authority of the Central Government or from the Provincial Government to the Regency/City Regions to carry out part of the Government Affairs that are the authority of the provincial region. (Dr. H. Almasri 2022)

With this regional autonomy, it is expected to be more independent in determining all activities and the central government is expected not to be too active in regulating the region. The regional government is expected to be able to play its role in opening up opportunities to advance the region without intervention from other parties, which is accompanied by public accountability (regional communities) and is accountable to the central government as a consequence of the Unitary State of the Republic of Indonesia.

Law Number 40 of 2004 concerning the Social Security System, as well as Presidential Instruction Number 1 of 2013 concerning the Prevention and Eradication of Corruption, attachment point 46 concerning the implementation of the transparency of direct cash assistance distribution for very poor families (KSM), including participants in the Family Hope Program (PKH).

Poverty is a complex problem faced by all governments in the world. Poverty is a condition of lack of welfare, conventional income associates welfare primarily with the ownership of goods. So the poor are defined as those who do not have sufficient income to make them above the minimum threshold of the prosperous category.

Poverty experienced by an individual or a family can be caused by several interrelated factors, such as having a disability, not having social security, not having the capital or skills to do business, being laid off, and the lack of job opportunities.

Basically, the problem of poverty arises when human income reaches the stage of awareness to compare the level of life of one person with another, both in social status and economic status. Since the existence of this comparative attitude, then makes humans aware of the difference between rich and poor. Therefore, it can be stated that citizens who do not know the principle of strata comparison will not be found to be aware of the problem of poverty.

One of the government's efforts to overcome poverty is through social protection-based programs, namely programs that have been issued by the government related to poverty alleviation such as Direct Cash Assistance (BLT), Non-Cash Food Assistance (BPNT), Poor Family Health Insurance (Askeskin), School Operational Assistance (BOS) and the Family Hope Program (PKH). This program is implemented by the Social Service which is one of the government agencies engaged in the social sector that seeks to develop a protection system for the poor in Indonesia. However, in reality the policies that have been implemented by the government are less effective in overcoming poverty in Indonesia.

One of the social policies developed by the Government is the Family Hope Program (PKH). The Family Hope Program (PKH) is a program that provides cash assistance to Very Poor Households (RTSM), with the Basis for Implementing the Family Hope Program (PKH) Decree of the Coordinating Minister for People's Welfare as Chair of the Poverty Alleviation Coordination Team, No.: 31 / KEP / MENKO / -KESRA / IX / 2007 concerning the "Family Hope Program Control Team" dated September 21, 2007 and the Decree of the Minister of Social Affairs of the Republic of Indonesia No. 02A / HUK / 2008 concerning the "Family Hope Program Control Team (PKH) 2008" dated January 8, 2008. With Law Number 11 of 2009 concerning Social Welfare, Presidential Regulation Number 15 of 2010 concerning the Acceleration of Poverty Alleviation, Regulation of the Minister of Social Affairs Number 10 of 2017 concerning the Family Hope Program, and Regulation of the Minister of Social Affairs Number 1 of 2018 concerning the Family Hope Program.

The main objective of PKH is to reduce poverty rates in Indonesia and to break the chain of poverty, improve human resources (HR), and improve the standard of living of the Indonesian people in line with the efforts of the Sustainable Development Goals.

Since 2007, the Indonesian government has implemented the Family Hope Program (PKH). Similar programs have been implemented and have been quite successful in several countries known as conditional cash transfers (CCT). PKH is not a continuation of the Direct Cash Assistance Program (BLT) which was given to help poor households maintain their purchasing power when the government adjusted fuel prices. PKH is more intended as an effort to build a social protection system for the poor.

Based on the experience of other countries, similar programs are very beneficial, especially for families living in poverty. However, the purpose of the PKH mission itself is a long-term hope that can be achieved. It does not mean that the long-term goal is useless, but PKH clearly cannot stand alone in achieving the goal. There needs to be

another waste reduction program that is truly effective so that the condition of community empowerment can be achieved.

From a social policy perspective, PKH is the forerunner to the development of a social protection system, especially for poor families. PKH requires very poor households (RTSM/KSM) to check the health status of pregnant women, provide vaccinations, and monitor children's growth and development, including sending children to school. This will have an impact on changes in the behavior of RTSM/KSM regarding the importance of health and education. It is hoped that these behavioral changes will also have an impact on school-age children of RTSM/KSM who work. On the other hand, this is a major challenge for the central and regional governments, to improve education and health services for poor families wherever they are.

The amount of assistance provided to the poor (KPM) as participants in the Family Hope Program (PKH) is as follows:

Table 1.1 Amount of Cash Assistance for PKH Recipients

Assistance Criteria	Amount of Assistance
Pregnant/breastfeeding assistance	Rp. 2,400,000,-
Assistance for children under 6 years of age	Rp. 2,400,000,-
Assistance for elementary school/equivalent education participants	Rp. 900,000,-
Assistance for junior high school/equivalent education participants	Rp. 1,500,000,-
Assistance for high school/equivalent education participants	Rp. 2,000,000,-
Assistance for people with severe disabilities	Rp. 2,400,000,-
Assistance for elderly aged 70 years and over	Rp. 2,400,000,-

Source: 2019 PKH Implementation General Guidelines Book

The Family Hope Program is a program that provides cash assistance to the community. In return, it is mandatory to meet the requirements related to efforts to improve the quality of human resources (HR), namely education and health. In fact, PKH itself has a general goal of increasing accessibility to education, health, and social welfare services in supporting the achievement of the quality of life of poor families. PKH is expected to be able to reduce the burden of expenditure on poor families in the short term and break the chain of missions in the long term. Because By improving the quality of health, education and maintaining people's livelihoods, it will provide opportunities for people to improve their quality of life.

Indonesia is a country that has 38 provinces spread from Sabang to Merauke, and one of them is Riau Province which consists of 10 regencies and 2 cities. Where Siak Regency is one of the regencies in Riau Province. The Family Hope Program (PKH) was implemented simultaneously in Indonesia in 2017, only this program entered Siak Regency in 2015 and was implemented in 2016. The area of Siak Regency covers land

and water with an area of 8,556.09 km², according to the administration, Siak Regency has 14 sub-districts, 9 villages with a population of 477,064 people (2023).

One of the sub -districts in Siak Regency is Lubuk Dalam Sub-district where there is a village or hamlet that also runs PKH in its village, namely Lubuk Dalam Village. Lubuk Dalam Village is one of the villages receiving PKH assistance, where this village/hamlet is classified as a developing village type that has an area of around 8310 of the total area of Lubuk Dalam Sub-district, which is around ±22,993 ha. The population of Lubuk Dalam village/hamlet with a total of 4,392 people. Based on gender, the number of male residents is 2,067 people and female residents are 2,325 people.

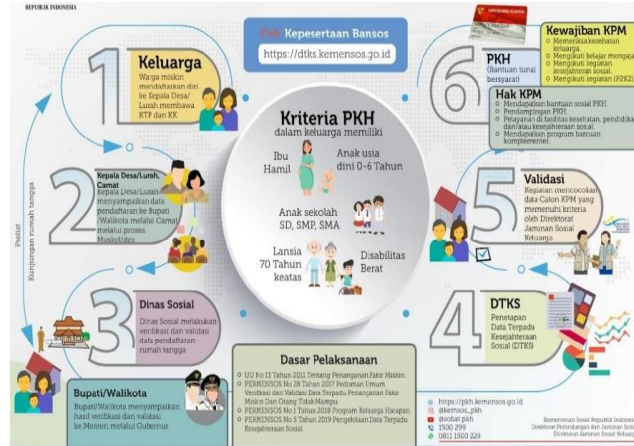
The Very Poor Households (RTSM) that received assistance from the Family Hope Program (PKH) can be seen in table 1.2 below:

Table 1.2 Number of PKH Recipients in Lubuk Dalam District, Siak Regency 2021-2013

No	Village	Number of KPM 2021	Number of KPM 2022	Number of KPM 2023
	New Pond	85	64	54
2	Deep Hole	136	85	74
3	The Kao River	52	47	45
4	West Kao Rawang	38	25	25
5	New Sialang	73	52	47
6	Sialang Palas	55	49	52
7	Sri Gading	116	100	94
Amount		555	424	391

Source: Lubuk Dalam District Office

Table 1.2 above states that in 2021-2023 in Lubuk Dalam District there were 7 villages that received assistance from the Family Hope Program in 2021 as many as 555 Beneficiary Families (KPM), in 2022 as many as 424 Beneficiary Families (KPM) and the number of recipients of the Family Hope Program (PKH) assistance in 2023 was 391 Beneficiary Families (KPM), which can be concluded that the beneficiaries of the program have decreased from year to year. This is because there are no longer components where families have achieved prosperity, families are independent, and are not registered/moved without notification.



Source: website of the Indonesian Ministry of Social Affairs

The image explains the technical information for PKH submission and the criteria/components where at this submission stage not all who apply in the integrated social welfare data (DTKS) pass to receive PKH social assistance, because each social assistance program has its own requirements and mechanisms that have been determined by the program organizer according to the variables needed in DTKS. PKH recipient criteria can be distinguished based on components, namely health , education and social welfare components.

Table 1.3 PKH Recipient Components

No	Component	Criteria
1.	Health	a. Pregnant mother (the condition of a person who is pregnant with a maximum number of pregnancies limited to two pregnancies) b. Early childhood (children aged 0-6 years who have not yet attended school, maximum two children)
2.	Education	a. Elementary School/Islamic Elementary School Children and Equivalent (a child aged 6 to 21 years who has not completed 12 years of compulsory education) b. Junior High School/Islamic Junior High School Students (a child aged 6 to 21 years who has not completed 12 years of compulsory education)

		c. High School Students/Equivalent (a child aged 6 to 21 years who has not completed 12 years of compulsory education)
3.	Social welfare	a. Elderly (a person aged 70 years and over with a maximum of one person and in a family) b. Persons with Severe Disabilities (people with disabilities whose disabilities no longer allow them to carry out daily activities and who depend on other people throughout their lives) physical disabilities and mental retardation

Source: 2019 PKH Implementation Guidelines

PKH assistance is given 4 times a year or 3 months and each family receives different assistance according to the number of family members who are included in the Beneficiary Category (KPM). Recipients of assistance will receive assistance according to the provisions that have been set on the condition that participants fulfill their obligations, namely health checks for pregnant women and toddlers at the integrated health post and for school-age children must meet a minimum attendance of 85%.

In addition to receiving financial assistance, PKH recipients also need companions, companions for PKM PKH are needed to accelerate the achievement of one of PKH's goals, namely creating behavioral changes and independence of Beneficiary Families (KPM) related to the use of health services, education and social welfare. In order to achieve these goals, PKH social companions have the role and function of facilitation, mediation, advocacy, education and motivation for KPM.

As referred to in Article 49 (a) and (b) of the Regulation of the Minister of Social Affairs Number 1 of 2018, Social Companions ensure that PKH social assistance is received by PKH Beneficiary Families in the right amount and on target, and hold PKH Beneficiary Family meetings at least once a month so that RTSM understand their rights and obligations better. Regarding the amount and disbursement of assistance funds, there are still problematic beneficiary families (KPM), including the amount of assistance funds not received according to the components and there are still KPM assistance that has not been disbursed. The implementation of the assistance process does not only focus on assisting individual KPMs who are constrained or in need of access to services, but also through assistance to groups, assistance to groups of Beneficiary Families (KPM) can be carried out by PKH social assistants through Group Meetings (PK) and Family Capacity Building Meetings (P2K2).

The Family Hope Program (PKH) in Lubuk Dalam Village, Lubuk Dalam District, Siak Regency, has been running as it should, but there are still some problems that occur

in its implementation, namely the lack of understanding of PKH for PKH participants in Lubuk Dalam Village. This is due to the lack of coordination between PKH and village officials and there are still individuals who prioritize their relatives over other beneficiary participants. And based on interviews with Beneficiary Families (KPM) in Lubuk Dalam Village, in the implementation of socialization, family capacity building meetings carried out by PKH Companions are only carried out when there are additional beneficiaries from the PKH program and when the fund disbursement schedule is sometimes only for documentation.

It is hoped that through various programs that have been implemented, privileges can be eliminated, but the problem of poverty cannot be completely overcome. Programs offered to the community should improve the quality of human resources, such as improving education and health services. If the community is healthy and intelligent, then the community will get out of the cycle of mistakes in its own way.

METHODOLOGY

The research time used was 2 (two) months after the proposal seminar. This research was conducted in Lubuk Dalam District, Siak Regency. The reason the researcher took this research location was based on the phenomenon that occurred that the role of the village government in implementing the Family Hope Program (PKH) had not been implemented properly. This type of research was used through qualitative research, the reason the researcher used this type of research was because qualitative research has many advantages such as having the advantage of providing more precise conclusions and based on facts that occur and this research uses a very efficient sample.

The type of research used in this study is descriptive research which uses descriptive data in the form of written or spoken words from people and actors that can be observed so that it is useful for providing a systematic description or explanation. Data source Primary data In this study, the data used came from distributing questionnaires to PKH members in Lubuk Dalam District. The secondary data needed in this study are regarding village history, demographics, social and economic conditions. Data Collection Methods Interview Observation Documentation Research Informants Data Analysis Data Reduction Data Presentation Drawing Conclusions

RESULTS AND DISCUSSION

Improving the Standard of Living of Beneficiary Families

Improving Family Living Standards or better known as Family Development Session (FDS) is a learning process for PKH participants which takes place in the form of mediation and information discussion in the fields of education, health, and social welfare which are taught every month in group meetings. The Family Capacity Building Program is a development program from PKH with the hope that PKH can help improve personal capacity and change family life, so that poor people become established families.

This family capacity building program is a community strengthening program through a learning process. The learning process often occurs slowly, but changes will occur to be long-lasting. So from the definition above, researchers can conclude that the Family Capacity Building Program is a program that includes an intermediary learning process for companions and beneficiary families to improve knowledge and skills in community life.

Implementation of the Family Hope Program (PKH) in the Health Sector

In the health sector, it is useful for improving the nutritional health status of pregnant and breastfeeding mothers and toddlers, especially for poor community groups, by providing incentives to carry out preventive health visits (prevention and treatment).

Researchers analyzed that with the implementation of integrated health services, children's growth and development can also be determined by carrying out immunizations and weighing, which is one way to determine nutritional improvements.

Implementation of the Family Hope Program (PKH) in the Education Sector

In the field of education, it is useful for increasing the participation rate of school children, the educational status of KPM children to reduce the risk of dropping out of school, and reducing underage child labor. In the implementation of PKH in the field of education, it is mandatory to participate in learning activities with an attendance rate of at least 85%. With the assistance from the government, poor people can think more about the future, especially in terms of children's education.

Researchers analyzed that this indicator is very important because every change that occurs in the data, especially family cards, can be reported to the office so that it can be processed properly. So that KPM can ensure themselves that they continue or stop their rights.

Implementation of the Family Hope Program (PKH) in the Social Welfare Sector

In the field of social welfare consists of the elderly starting from 60 years and above and people with disabilities. In this field, they are allowed to access health services such as health services from health centers and hospitals. Similarly, for people with disabilities, their children are also encouraged to attend special schools so that they can get basic services that can help them get access to education. For the elderly, there are also potential elderly who are still able to work independently or their lives do not depend on others.

Researchers analyzed that there are still people who really need it but have not received assistance, especially in the sub-indicator which requires assistance and support for those with severe disabilities. For that, the importance of the role of companions and government officials is firm and pays more attention to their community for the common welfare.

Reducing Expense Burden

The benefits of the Family Hope Program (PKH) can reduce the burden on families, such as KPM income can be helped and can reduce the burden of daily expenses. Where

during the p2k2 activities, the assistant provides education related to family financial management.

The researcher analyzed that it is important for data to be verified to the latest data, therefore it is hoped that KPMs will pay more attention to what must be done so that KPMs can continue to receive their rights without blaming other parties. Apart from that, the role of companions is also important in providing reviews/guidance to PKH participants regarding the graduation system.

Behavioral Change and Independence of KPM

P2K2 is a systematic learning process to accelerate behavioral changes in KPM PKH. Where the material provided during the P2K2 activity must be delivered by the PKH assistant to all members of the KPM PKH group. In general, P2K2 has the aim of increasing insight, understanding in recognizing the importance children's education, health, financial management so that it can encourage the creation of accelerated behavioral changes.

The researcher analyzed that there is no special training for PKH participants because every meeting that is held routinely will discuss how to get out of the zone, where in that case KPM PKH can carefully filter the information provided especially for those who want to try but do not have capital. However, apart from that, KPM PKH will receive assistance from the region in the form of joint business groups.

Figure 5.1
P2K2 Activities by PKH Companions



Based on the interview, the researcher analyzed that the p2k2 activities that should be carried out by PKH assistants once a month did not run properly, even though in this activity PKH assistants must deliver modules in the form of materials because as a means of communication delivery to KPM through PKH assistants which must run effectively so that the information message is delivered and there is no *miscommunication*.

Based on the interview, the researcher analyzed the importance of personal awareness by remembering the components and criteria that have been set by the PKH program, not to force the will to receive assistance by ignoring the policies that have been

made, and not to act nepotistically by prioritizing or prioritizing relatives/siblings without seeing that there are other people who need the assistance more.

Reducing Poverty

Benefits in the economic sector for the beneficiary group of the family hope program (KPM PKH) in Lubuk Dalam village KPM is able to manage family finances/economy. Economic management is a way to manage family finances economically, regularly, plan the use of finances and secure storage.

Based on the interview, the researcher analyzed that the implementation of the Family Hope Program (PKH) was quite on target because the participants had gone through the selection stage so that they could be said to have passed and were entitled to receive assistance because they had met the criteria.

Based on an interview with Mr. Rika, the researcher analyzed that this family hope program cannot be said to be right on target because there are still many pros and cons regarding the participants selected to receive this assistance, because the benchmark for some people is different, some have large houses but receive assistance even though the members of the household are also experiencing economic difficulties.

Based on an interview with Mrs. Azni, the researcher analyzed that this indicator is very influential in seeing the success of RTSM in improving their economy in the future and also as a consideration for social services for the graduation process for KPM whose economy has improved and is more prosperous, only there are several factors that make it less accurate which may come from a lack of care during the data collection or there are still KPM who are reluctant to change their status from being unable to being able.

Based on the interviews that have been conducted, researchers analyzed that in this case many KPMs whose economy is increasingly helped, not to mention they also feel more prosperous because they can set aside the aid funds received for other needs. Therefore, this PKH in improving community welfare has been quite helpful in reducing poverty rates, especially in Kampung Lubuk Dalam.

Based on the interview, the researcher analyzed that there were several factors causing the above case, including changes in statistics on family cards and ID cards to unclear reasons for RTSM not receiving PKH assistance. Thus, the indicators for reducing poverty among the underprivileged community have not been said to be successful or right on target, where there is still a lack of understanding about this program and prioritizing relatives over others.

CONCLUSION

Based on the results of research and discussion regarding the Implementation of the Family Hope Program (PKH) on Community Welfare in Lubuk Dalam District, Siak Regency, the following conclusions can be drawn:

The implementation of the Family Hope Program (PKH) towards Community Welfare in Lubuk Dalam District, Siak Regency has not been optimally implemented. On the indicator of improving the standard of living of beneficiary families (KPM) with health

and education services, the author can conclude that the implementation of the Family Hope Program (PKH) to improve education is running according to plan and is quite optimal.

However, there are indicators in reducing the burden on families, there are several cases of family program assistance not being disbursed or the funds received are no longer in accordance with the provisions. The third indicator for the Family Capacity Building Meeting (P2K2) in Kampung Lubuk Dalam is still not optimal, it has not been carried out once a month as stipulated in the Regulation of the Minister of Social Affairs Number 1 of 2018 and there is still a lack of P2K2 material provided by beneficiary families so that KPM still does not fully understand their rights and responsibilities as PKH participants, even though the activity is one of the means of communication to KPM through PKH assistants which must run effectively so that the information message is delivered.

In the fourth component, the decline in the number of poor people can be marked by the number of recipients of the Family Hope Program (PKH), where the number of PKH recipients is decreasing from year to year.

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