

The Impact of PKH Assistance on Poor Communities in Nunggi Village, Wera District, Bima Regency

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Abstract

Poverty is one of the problems faced by every country. This is due to the poor condition of the country or its people who have limited skills to meet their needs. Several poverty alleviation policies have been decided and implemented by the Indonesian government, one of which is the Family Hope Program (PKH) which has existed since 2007. This study aims to analyze the forms of PKH assistance, the role of PKH companions and the impact of PKH on poor families in Nunggi Village, Wera District, Bima Regency. The results of the study show that (1) the forms of PKH assistance are PKH cash assistance and complementary assistance such as health insurance, education insurance, non-cash food assistance, Prosperous rice and other assistance from the regional government and the central government. (2) The role of PKH companions is to accompany PKH participants in verifying education and health, validating prospective PKH participants, updating data and family capacity building meeting activities. (3) the impact of PKH on poor families in Nunggi Village, Wera District, Bima Regency, namely, making people aware of living independently without depending on the government, being aware of education and health and caring about the environment. However, there are still people who claim to be poor to get assistance from the government even though their economic condition is quite capable or stable.

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1. INTRODUCTION

Poverty is a global phenomenon, a problem that must be faced and is a concern for many people around the world. Hearing the word "poverty" immediately implies that someone is considered poor if they are unable to meet their daily needs. In other words, they live in poverty and lack sufficient assets to meet their daily needs. Therefore, those who fall within the poverty line or are underprivileged are those whose income is insufficient to meet basic living needs. If a country has a high poverty rate, it is usually classified as a developing country.

The problem of poverty in Indonesia is a social issue that is constantly being studied. This is also because Indonesia is a developing country with a population that continues to increase annually. Consequently, the level of welfare of its people remains far below that of developed nations.

Poverty is a crucial factor in improving the welfare of the nation's people, ultimately reducing and sustaining poverty. This is also a problem in Indonesia. Poverty limits people's rights to a decent education, adequate employment, and access to guaranteed

healthcare.

Indonesia is a developing country because it has various poverty problems such as low-income levels, people have difficulty meeting basic needs, education, health, and others, so to overcome the problem of poverty, the role of the government is also very necessary.

Efforts to improve the welfare of the poor, in particular, are being implemented so that they can live decently and develop themselves. The Indonesian government has undertaken various efforts to alleviate poverty, including creating various programs and providing assistance to the poor.

To minimize social welfare issues, particularly the increasing poverty rate, the Indonesian government, through the Ministry of Social Affairs, launched the Family Hope Program (PKH). This program is implemented by the Social Services Agency, a government agency specializing in social welfare. This program seeks to develop a social protection system for the poor in Indonesia and provides cash assistance to Very Poor Households (RTSM) provided they meet the required requirements.

The conditional cash assistance program known as the Family Hope Program (PKH) or *Conditional Cash Transfer* (CCT) is Indonesia's first conditional cash assistance program in partnership with the World Bank. Through PKH, the government hopes to help the poor meet their needs by providing funds for their children's schooling and access to adequate healthcare.

The Family Hope Program (PKH) differs from other social protection programs in the form of cash assistance, such as Direct Cash Assistance (BLT), Temporary Community Direct Assistance (BLSM), and the Prosperous Family Card (KKS). The difference lies in the requirements and obligations of beneficiary families (KPM). PKH is an extension of the social protection system in the form of conditional cash assistance for access to health services and basic education, thus breaking the chain of poverty in Indonesia in the long term.

PKH has been running for quite a long time and is currently a program that is quite reliable in the Jokowi administration in overcoming poverty. Poverty. Although not all poor people will receive PKH assistance, the program has criteria and requirements for determining which families are eligible for benefits. This is what made this research interesting, aiming to determine the impact of PKH assistance on the poor in Nunggi Village, Wera District, Bima Regency.

Understanding the Family Hope Program

The Family Hope Program (PKH) is a program that provides cash assistance to Very Poor Households (RTSM) if they meet the requirements related to efforts to improve the quality of Human Resources (HR), namely education, health, and social welfare. The Family Hope Program (PKH) is a poverty alleviation program. The Family Hope Program is part of the poverty alleviation programs. other poverty (Syahriani, 2016).

PKH is a family-based social protection model. Conceptually, PKH falls into the category of social assistance (*social assistance*) is a social security program in the form of cash, goods, or welfare service benefits that are generally provided to vulnerable families who do not have a decent income. Poor families, the unemployed, children, the disabled, the elderly, people with physical and mental disabilities, minorities, orphans, single heads of families, refugees, and victims of social conflict are some examples of target groups for social assistance (Ministry of Social Affairs, 2013).

The Family Hope Program offers a wide range of guidance for participants, aimed at providing assistance to individuals and groups in overcoming difficulties or solving

problems to achieve well-being. The current problem experienced by Family Hope Program participants is a lack of confidence in facing life independently. Family Hope Program participants are poor people living below average. The Family Hope Program aims to provide guidance to poor residents whose education is weak and whose health standards are neglected.

The Family Hope Program is a policy program formulated by the government to address poverty in Indonesia. In general, the concept of policy is almost always associated with fixed, consistent decisions and the repetition of behavior by those who make them and those who comply with them.

In other words, the Family Hope Program (PKH) is a cash transfer program for Very Poor Families (KSM) based on predetermined terms and conditions, and they fulfill their obligations. This type of program is internationally known as a conditional cash transfer (CCT) program. These requirements can include attendance at educational facilities (for example, for school-age children) or attendance at health facilities (for example, for toddlers or pregnant women). These requirements are monitored by PKH implementers, known as facilitators. The facilitator's role is to provide information and explanations to PKH participants about the procedures they must follow. The facilitator is tasked with monitoring the monthly attendance of pregnant women and toddlers at community health centers (health facilities), and also the attendance of school children at educational facilities (elementary, middle, and high school students) as well as monthly group meetings. Therefore, with the facilitator's role, PKH can be a form of assistance provided to the right targets.

The Goal of the Family Hope Program

The Work Guidelines for Facilitators explain that the primary objective of the Family Hope Program (PKH) is to help reduce poverty by improving the quality of human resources in very poor communities. The short-term goal of this assistance is to help reduce the burden of expenses on Very Poor Households. The long-term goal is to require recipient families to send their children to school, immunize toddlers, provide antenatal care for pregnant women, and improve nutrition, with the hope of breaking the intergenerational cycle of poverty. Specifically, the PKH aims to:

1. Improving access to quality education and health services for PKH participants,
2. Improving the education level of PKH participants,
3. Improve the health and nutritional status of participants.

Components of the Family Hope Program

The Family Hope Program clearly states that the primary focus is on health, education, and social welfare. The primary objective of the Family Hope Program in the health sector is to improve the health status of Indonesian mothers and children, particularly among the very poor, through the provision of intensive preventive health visits (prevention rather than treatment). Currently, the Family Hope Program is focused solely on the two sectors mentioned above, as these two sectors are central to improving the quality of life of the community. (Ministry of Social Affairs, 2013)

The education component of the Family Hope Program was developed to increase enrollment in nine years of compulsory basic education and reduce child labor among very poor families. Children receiving the Family Hope Program, aged 7-18, who have not yet completed nine years of basic education, must enroll in formal or non-formal school and attend at least 85% of the face-to-face sessions.

Every child participating in the Family Hope Program is entitled to receive assistance

in addition to the Family Hope Program, whether national or local. Family Hope Program assistance is not a substitute for other programs and therefore insufficient to cover other expenses such as uniforms, books, and so on. The Family Hope Program provides assistance so parents can send their children to school.

The low level of education of the head of the family results in a low income, making it impossible to meet the health and educational needs of their children. Furthermore, if the health of pregnant women in poor families is inadequate, the health of their babies will also be inadequate. Consequently, children in poor families will have inadequate growth and a reduced learning capacity.

Poverty causes children to drop out of school or not attend school at all, and some even have to help earn a living. As a result, the quality of the next generation in poor families remains low, trapping them in a cycle of poverty. Therefore, efforts to improve the health and education of very poor households must be ongoing. This is expected to improve the quality of human resources in the long term.

The social welfare component covers persons with disabilities and the elderly aged 70 years and over. Beneficiary families with a social welfare component are required to provide nutritious food using local food sources and health care at least once a year to elderly family members aged 70 (seventy) years and over. They are also required to request existing health workers to check their health, maintain hygiene, and provide local food for persons with severe disabilities.

Criteria for Recipients of Family Hope Assistance

The Family Hope Program is provided to Extremely Poor Families (KSM). Family data eligible for the Family Hope Program is obtained from the Integrated Database and must meet at least one of the following program participation criteria:

1. Pregnant/postpartum women/toddlers,
2. Preschool children/not yet in primary education (ages 5-7 years),
3. Elementary school children/MI/Package A/SDLB (7 years old),
4. Junior high school/Islamic junior high school/Package B/Small junior high school students (aged 12-15 years),
5. Children aged 15-18 years who have not complete basic education,
6. Persons with Disabilities,
7. Seniors aged 70 years and above.

Only one or more of the PKH recipient criteria must be met. However, this does not mean that every family considered extremely poor and meeting one or more of these criteria is eligible for PKH assistance. If they were not previously listed as a PKH recipient, they will not be validated.

The assistance provided is in the form of cash. PKH assistance is given to mothers or adult women (grandmothers, aunts, or older sisters) not the head of the family but to the family caretaker. Money given to family caretakers is more effective in improving the quality of education, health, and social welfare. This is because if the Family Hope Program assistance funds are received by the head of the family, there is a concern that the assistance will not be used for the needs of the children, but rather the assistance will be misused for other purposes such as buying cigarettes and others. If there is no adult woman in the family, the head of the family will replace her family. As proof of PKH participation, RTSM are given a PKH Participant Card. The Family Administrator can collect the aid money at the nearest Post Office by bringing the PKH Participant Card and cannot be represented. (Rizal, 2017)

Definition of Poverty

According to Kartasasmita in Alpan Disman (2013), poverty is called "accidental poverty," namely poverty due to the impact of a particular policy that causes a decline in the level of community welfare. The general meaning of human poverty is "the lack of essential human capabilities, especially in terms of 'literacy' (the ability to read; literacy) as well as health and nutrition levels." In addition, it is also defined as a lack of income that is unable to meet minimum consumption needs.

According to Suparlan (1993), poverty can be defined as a low standard of living, namely the existence of a level of material deprivation among a number or group of people compared to the general standard of living prevailing in the society in question. Social scientists agree that the primary cause of poverty is the prevailing economic system in the society in question. However, many experts also believe that poverty is not a phenomenon manifested solely by the economic system. Poverty is a manifestation of the results of interactions involving almost all aspects of human life.

Poverty can be defined as a state of inability to meet basic needs such as food, clothing, shelter, and drinking water. It is closely related to quality of life. Economically, poverty can be defined as the lack of resources available to meet these needs and improve the well-being of a group of people.

Living in poverty is not only living with a lack of money and low-income levels, but also many other things, such as: low levels of health, low education, unfair treatment under the law, vulnerability to the threat of criminal acts, powerlessness in the face of power, and powerlessness in determining one's own path in life.

Of the various causal factors outlined, poverty is a social problem. Poverty alone can give rise to other social problems. Poverty has a wide range of social impacts, ranging from crime and unemployment to impaired health, and much more. Based on research conducted by many parties, the rampant criminal acts are mostly motivated by economic motives, namely a person's inability to adequately meet their living needs.

From a sociological perspective, poverty is not only an economic issue but is multidimensional, as it also encompasses non-economic issues (social, cultural, and political). Because of this multidimensionality, poverty is not solely a matter of social well-being.

Structural Functional Theory

The basic assumption of functional structural theory, according to Talcott Parsons, is that society is integrated based on the agreement of its members regarding certain values. In this case, these values have the ability to overcome various differences, so that society is seen as a system that is functionally integrated in a state of balance (Arisadi 2015).

Parsons viewed society as a collection of interconnected and interdependent social systems, each with its own function. Structural functionalism theory originated from the assumption of similarities between biological organisms and social structures, and the view that there is order and balance within society (Arisadi 2015).

Impact of PKH Assistance on Poor Communities

In this case, the Family Hope Program (PKH) is a social protection program that can alleviate and assist poor families in terms of access and quality education and health services for PKH participant families, with the hope that this program will reduce poverty. As is known, the Family Hope Program (PKH) is a social protection program that provides cash assistance to Very Poor Households (RTSM). All members of Very Poor Households are required to comply with the established terms and conditions.

Not a single person felt disadvantaged by this government assistance, all members of the community, whether they were included in the aid recipients or not, were very proud of this program, which according to people's understanding, this assistance really helped with education and health costs.

The impacts that arise are divided into two, namely positive impacts and negative impacts:

Positive impact

According to the Great Dictionary of the Indonesian Language, impact is a result, effect, outcome, influence, etc. Positive impact, on the other hand, refers to a positive influence. Therefore, a positive impact is a strong influence that brings about progress.

The social conditions of beneficiaries in Bumi Nyiur sub-district before the Family Hope program was implemented showed a situation that was still far from a decent standard of living, particularly in terms of education and health. Generally, heads of families worked as laborers, construction workers, and cake sellers, resulting in an uncertain monthly income. This, of course, was a barrier. growth in education and health.

The positive impacts of the Family Hope Program for Very Poor Households (RTSM) are, firstly, it reduces the burden of RTSM expenses and can help families who are PKH participants to finance their children's schooling at elementary, middle, and high school levels.

Interviews with several informants revealed that the primary positive impact of the Family Hope Program assistance was the reduction in expenditure for very poor households. They cited the primary impact as reducing their burden in accessing education for their children at elementary, middle, and high school levels.

The second positive impact is increasing participation in health checks for toddlers and social welfare to ensure the provision of nutritional intake for the elderly and disabled.

So, based on the research findings from the first and second impacts, it can be concluded that the Family Hope Program assistance provided to very poor households significantly helps with education and healthcare costs. One of the main reasons why very poor households don't send their children to school is economic factors. The research

findings indicate that the Family Hope Program assistance can reduce the burden on very poor households in continuing their children's education. It can also provide health checks for toddlers and ensure adequate nutrition for the elderly and those with disabilities.

From the explanation above, it can be seen that after receiving assistance from the Family Hope Program, the education and health aspects of Extremely Poor Households have undergone changes. This is evident in the social conditions of PKH participants, who are now experiencing improvements in education and health, as well as improved standards of living. Education and health are crucial aspects of life that must be optimally met.

Education is a nation's weapon for competitiveness in the era of globalization, which demands the integration of all aspects of global welfare, especially in Indonesia. This is why the Ministry of Social Affairs is highlighting Indonesian education as the core of the Family Hope Program (PKH).

Just as important as education, health is also a crucial aspect in improving the welfare of the Indonesian people. Health is a crucial element in upholding humanitarian values. Inability to afford medical expenses is thought to be the reason why intelligent citizens fail to survive, thus depriving the nation of individuals with the potential to lead Indonesia to participate in the global world.

Negative impact

Dependence on aid. Dependence refers to parents who rely solely on the available aid. As reported by an informant from a recipient, the government sometimes fails to provide aid on time, sometimes even a week or even a month late. Furthermore, PKH facilitators in the field report that recipients misuse the aid for non-essential purposes.

4. CONCLUSION

Based on the results of research and discussion regarding "The Impact of PKH Assistance on Poor Communities in Nunggi Village, Wera District, Bima Regency", the following conclusions were drawn:

The impact of PKH assistance on the poor is both positive and negative. The positive impact is reducing the burden on Very Poor Households (RTSM), helping participating families cover education costs, and increasing participation in health and social welfare checkups to ensure the nutritional intake of the elderly and disabled. The negative impact is that some informants remain dependent on or rely on this assistance.

5. BIBLIOGRAPHY

_____, 2010. *Metodologi Penelitian Kualitatif*. Bandung: PT. Remaja Rosdakarya.

Alpan Disman. 2013. *Masyarakat Miskin Di Kelurahan Maharatu Rw 09 Kecamatan Marpoyan Damai Kota Pekanbaru*. Universitas Riau.

Arisadi, Herman. 2015. *Buku Pintar Pemikiran tokoh-Tokoh Sosiologi dari Klasik Sampai Modern*. Yogyakarta. IRCiSoD.

Azwar, Saifudin. 1998. *Metode Penelitian*. Yogyakarta: Pustaka Pelajar.

Balitbang Kemenkes RI 2013. *Riset Kesehatan Dasar*; RISKESDAS. Jakarta: Balitbang Kemenkes RI.

Balitbang Kemenkes RI 2013. *Riset Kesehatan Dasar*; RISKESDAS. Jakarta: Balitbang Kemenkes RI.

Buku kerja PKH tahun 2019.

Dr.Chairika Nasution,SAP.,MAP.2025. *Koordinasi Dalam Implementasi Kebijakan Program Keluarga Harapan (PKH)*.
Ginanjar, Kartasasmita. 1997. *Kemiskinan*. Jakarta. Balai Pustaka.

Miles, B. Mathew dan Michael Huberman. 1992. *Analisis Data Kualitatif Buku Sumber Tentang Metode-Metode Baru*. Jakarta: UIP.

Moleong, Lexy. 1996. *Metodologi Penelitian Kualitatif*, Bandung: PT. Remaja Rosdakarya.

Mubyarto. 2010. *Membangun Sistem Ekonomi*. Yogyakarta: BPPE.

Puspa Swara, Jakarta.

Rizal. 2017. *Pengaruh Program Keluarga Harapan Terhadap Masyarakat Kabupaten Sidoarjo Tahun 2017*. Skripsi. Program Studi Filsafat Politik Islam Fakultas Ushululuddin dan Filsafat UIN Sunan Ampel. Surabaya.

Sarman, Mukhtar & Sajogyo, 2000. “*Masalah Penanggulangan Kemiskinan*”.

Sugiyono. 2014. *Metode Penelitian Kuantitatif Kualitatif dan R&D*. Bandung: Alfabeta.

Sugiyono. 2017. *Metode Penelitian Kualitatif* (untuk penelitian bersifat eksploratif, interpretif, interaktif dan konstruktif). Bandung: Alfabeta.

Suparlan, Parsudi. 1993. *Kemiskinan Di Perkotaan*, Yayasan Obor, Jakarta.

Yusriadi, M.Si., Misnawati,M.Si.,Saidna Zulfiqar Bin Tahir,Lc.,M.Pd.,dan M.Awaluddin A.,S.Sos.,M.Si.2020. *Pengentasan Kemiskinan: Program Keluarga Harapan dan Sociopreneur*.