

Program Keluarga Harapan as An Innovative Poverty Reduction Program on The Simardan Island, North Sumatera

Elizon Nainggolan¹, Fathia Ulfa², Rosdiana³, Mahfuzi Irwan³, Ibnu Hajar Damanik⁴
{elizonnaingg06@gmail.com}

Community Education, Universitas Negeri Medan

Abstract. This study aims to determine the effectiveness of the Program Keluarga Harapan (PKH) in alleviating poverty in Simardan Island, North Sumatera. The type of research used in this research is descriptive quantitative. The population in this study amounted to 400 PKH recipients and the sample used was 100 PKH recipients. The data collection technique used is a questionnaire. The results showed that firstly, the effectiveness of PKH in understanding the program was very effective, the effectiveness of PKH in targeting accuracy was classified as effective, the effectiveness of PKH on time was classified as less effective, the effectiveness of PKH in achieving the goal is classified as effective, and the effectiveness of PKH in real effective change is 61.33. So based on the results of this study, the results of the Program Keluarga Harapan (PKH) in poverty alleviation by calculating the average percentage rate of the effectiveness of the Program Keluarga Harapan (PKH) obtained 68.05% results. Thus, it can be concluded that the effectiveness of the Program Keluarga Harapan in alleviating poverty in Siamrdan Island North Sumatera is effective.

Keywords: Keluarga harapan, Innovative program, Poverty

1 Introduction

Indonesia is a country with the largest population, with a population of 268 million people and is divided into 34 provinces. The percentage of the number of poor people in Indonesia comes from data from the Central Statistics Agency (BPS) in March 2019 of 25.41 million people, (9.41%), decreased by 0.80 million people, (0.41%) [1]. Poverty is a problem that can have an impact on health and education. In the health sector, poverty can cause the health of the poor to be vulnerable to disease and the risk of malnutrition in pregnant women which has an impact on fetal development and live birth rates.

In the field of education, poverty has an impact on increasing the number of children dropping out of school from poor families, and can affect the degree of public health, namely susceptibility to disease and the risk of malnutrition in pregnant women, so that it will affect the health of the fetus[2]. To overcome the problem of poverty, the government will try as much as possible. The government issued a policy to empower poor families. One of the government programs that is expected to empower the poor is Program Keluarga Harapan (PKH).

PKH is a program that provides cash assistance to very poor families (RTSM). PKH given to RTSM has met the requirements set by the Ministry of Social Affairs of the Republic of Indonesia in accordance with the decision of the coordinating minister for People's Welfare as the head of the Poverty Reduction Coordination Team No: 31/KEP/MENKO/-KESRA/XI/2007

concerning "Program Keluarga Harapan Control Team ". Program Keluarga Harapan is through the provision of Conditional Cash Assistance (BTB) (known as Program Keluarga Harapan (PKH)) as one of the steps to realize a social protection system. Program Keluarga Harapan (PKH) is different from the previous cash transfer program and is not a continuation of the previous plan that helped maintain the purchasing power of poor households when the government adjusted fuel prices. The purpose of PKH is to establish a social protection system for the poor in order to improve the social welfare of the poor and break the chain of poverty that has emerged so far. PKH is a social assistance and protection program that has been included in the first group of Indonesia's poverty reduction strategies. This program is a conditional cash transfer related to education and health[8],[9].

In implementing Program Keluarga Harapan, each Very Poor Household (RSTM) will receive assistance every three months. This assistance will be used to send their children to school, including immunizations and nutritional checks for toddlers. Gynecological examination for pregnant women. In the short term, the form of assistance provided by PKH will reduce RSTM spending, but in the long term it is hoped that program assistance can break the intergenerational poverty chain. (Source: General Guidebook for Program Keluarga Harapan). Pulau Simardan Village is one of the villages located in the eastern Datuk Bandar sub-district, Tanjungbalai City. Most of the residents of this simardan island village work as fishermen, laborers and motorcycle taxi drivers. With this work, some people are still unable to meet their daily needs. As for some important needs such as education and health, the community reduces these needs for other necessities of life. Pulau Simardan Village has 6,360 families consisting of 12 neighborhoods. From the total population there are 763 families who are classified as poor / unable to meet their needs. Simardan Island Village is one of the villages that received PKH assistance. The recipients of Program Keluarga Harapan (PKH) in this sub-district totaled 400 families.

In the implementation of Program Keluarga Harapan (PKH) in Pulau Simardan Village and Tanjungbalai City. There are several problems that arise in Program Keluarga Harapan (PKH) so that it has not yet achieved the objectives of the program. The problems in Program Keluarga Harapan (PKH) include:

First, Understanding Program Keluarga Harapan (PKH) PKH recipients have begun to understand how the PKH program implementation system is and what they should do with the assistance, due to the socialization carried out by facilitators to guide PKH recipients, namely providing good service to PKH participants and provide solutions to complaints submitted by the public.

Second, right on target, there are still some residents who are classified as Very Poor Households (RTSM) who have not received assistance from Program Keluarga Harapan (PKH). The criteria or characteristics of Very Poor Households (RTSM) are as follows:

- a. The floor area of a residential building is less than 8 m² per person.
- b. Home ownership : No house, ride or contract.
- c. The type of floor of a residential building is only ground/plaster.
- d. Types of walls of residential buildings made of bamboo/ low quality wood/ 60% damaged walls.
- e. Do not have defecation facilities/shared with other households (public toilets).
- f. The source of drinking water is from wells/unprotected springs/rainwater rivers.
- g. Home lighting sources do not use electricity/ do not have their own meter/ line.
- h. The type of fuel for daily cooking is firewood/charcoal/kerosene.
- i. Frequency of purchasing meat/chicken/milk once a week per family member.

- j. The frequency of eating once/twice a day and does not meet the nutritional standards for each family member.
- k. Buy only one new set of clothes a year for each family member.
- l. Unable to go to the puskesmas/polyclinic for treatment, (medication costs and transportation costs, as well as waiting compensation).
- m. Sources of income for the head of household are: farmers with land area <0.5 ha, farm laborers, fishermen, laborers, or other occupations with income below Rp. 600,000, - per month.
- n. The highest education of the head of the household: no school/not completed elementary school/only elementary school.
- o. Unable to send children to junior high school level (9 years of basic education). Do not have savings / goods that are easily sold with a minimum value of Rp. 500,000,- such as motorcycles, gold, livestock, or other capital goods.

To be categorized as a Very Poor Household (RTSM), a family only needs to meet 11 points out of the 16 points above. However, in reality there are still some RTSM that meet 11 points or more of these criteria but have not received PKH assistance. This means that the PKH program is not evenly distributed in Pulau Simardan Village because there are still some underprivileged communities in Pulau Simardan Village who should receive PKH assistance. Like Mrs. Ila, who lives in 9 Kelurahan Pulau Simardan which is classified as RTSM, she still has 1 child who is 4 years old and does not receive the assistance, she doesn't even know about PKH before (Source: Interview with PKH recipients).

Third, timely disbursement of PKH aid money. Basically, Program Keluarga Harapan (PKH) funds are disbursed every three months (ie January, April, July and October). But in fact, in the field there are often delays in the distribution of aid funds, and delays in disbursement of these funds can be delayed by about 2-3 weeks from the actual plan. Such as phase I disbursement carried out on January 7, 2020, phase II disbursement on April 10, phase III disbursement on July 15 2020, and phase IV disbursement on October 18 2020. This is what can confuse the (RTSM) who receive this assistance, especially when entering the new school year, because the expected money did not come out (Source: Interview with PKH recipients).

Fourth, the achievement of the goals in Program Keluarga Harapan (PKH) in this case the researcher sees that the PKH goals are less than optimal or the PKH goals are not being achieved as well as possible because 70% of PKH recipients misuse PKH assistance. The aid funds should have been used for education and health, but there are still PKH recipients who use the assistance for other purposes such as buying jewelry, electronic equipment and others. (Source: Interview with PKH recipients).

Fifth, real changes in Program Keluarga Harapan (PKH) some PKH recipients have used the assistance as well as possible for education and health purposes. However, from the observations of researchers in the aspect of real change, it has not run optimally (Source: Interview with PKH recipients).

Based on the above background, this study measures the effectiveness of PKH in poverty alleviation in Pulau Simardan Village, Tanjungbalai City more deeply. So that this research will produce an in-depth picture of the effectiveness of PKH in Pulau Simardan Village, Tanjungbalai City.

2 Research Methods

The population in this study were 400 PKH recipients with 12 neighborhoods in Pulau Simardan Village (data obtained from PKH companion mothers) who became PKH recipients in Pulau Simaradan Village, Tanjungbalai City.

The sample is part of the population that has the same characteristics as the population. There are 400 PKH recipients. From this population, 25% of the population is taken so that the number of samples is $25\% \times 400 = 100$ people/mothers who receive PKH. Thus, in line with the opinion of Sugiyono (2013:62) "if the subject is less than 100, it is better to take all so that the research is a population study. But if the number of subjects is large (greater than 100), it can be taken between 10-15% or 20-25% or more.

The sampling technique used in this study was the researcher's sampling using the regional sampling technique (Area Sampling). This technique is used by researchers because the sample to be studied or the data source is in a large area, which includes all the environments in the Simardan Island Village, which amount to 12 neighborhoods. The reason for using this technique is because the population in this study is PKH recipients in the Simardan Island village which is divided into 12 neighborhoods. The data collection technique in this study used a questionnaire. Questionnaire is a data collection technique that is done by giving a set of questions or written statements to respondents to answer [3].

In this study, the instrument used was a questionnaire. All data is collected, then the data will then be analyzed. The data obtained from the questionnaire distributed to the respondents were analyzed using quantitative analysis techniques with the aim of answering the problem formulation. Responses from PKH recipients or respondents will be calculated using the formula $P = \frac{F}{n} \times 100\%$

Description :

P = Percentage of respondents' answers

F = Total respondent's answer score

n=The total number of respondents

This research was conducted in Pulau Simardan Village and Tanjungbalai City. This research was conducted from April to June 2021.

3 Result and Discussion

The results of the research carried out are the Effectiveness of Program Keluarga Harapan (PKH) in Poverty Alleviation in Pulau Simardan Village and Tanjungbalai City, the data obtained are described in accordance with the order of the questionnaire questions. Then it will be analyzed with frequency according to the answers that have been given by the respondents. The questionnaire used consists of 27 statements with 4 answer choices that have a predetermined value as follows: answer choice 1 is worth 4, option 2 is worth 3, choice 3 is worth 2 and option 1 is worth 1. From 100 respondents, it can be seen that the answers to the research questionnaire statements totaling 27 statements which are presented in the following tables :

Table 1.1 Effectiveness of Understanding the PKH Program

No Item	Hasil Jawaban			
	SS	S	KS	TS
1	54	36	10	0
2	20	74	5	1
3	42	58	0	0
4	37	63	0	0
5	25	65	10	0
6	27	55	15	3
Jumlah	215	350	41	4
$P = \frac{f}{n} \times 100\%$	35,8%	58,33%	6,83%	0,667%

From the table above shows all respondents' answers. In the first statement item, the respondents' answers chose strongly agree as many as 54 people (64%), who chose the agreed answer as many as 36 people (36%), who chose the answer to disagree as much as 10 people (10%) and the answer did not agree at all was not chosen. by the respondent. From the explanation above, it can be concluded that the majority of the answers are strongly agree, meaning that the PKH recipient mothers already understand about PKH programs.

In the second statement item, the respondents who chose the answer strongly agree were 20 people (20%), who chose the answer agreed as many as 74 people (74%), who chose the answer less agree as much as 5 people (5%) and chose the answer disagree as much as 1 person (1%). From the explanation above, it can be concluded that the majority of the answers are agree, meaning that the requirements to join PKH are quite easy. In the third statement item, it shows that the respondents' answers regarding the existence of outreach activities/socialization of the goals of PKH, who chose the answer strongly agreed were 42 people (42%), who chose the answer agreed as many as 58 people (58%). Meanwhile, the respondents did not agree and disagree at all. From the explanation above, it can be concluded that the majority of the answers are in agreement, meaning that there are outreach activities/socialization of the goals of PKH.

The 4th statement item shows that the respondent's answers know the purpose of PKH, 37 people (37%), who chose the answer strongly agree, 63 people (63%). Meanwhile, the respondents did not agree and disagree at all, which were not chosen by the respondents. So from the explanation above, it can be concluded that most of the answers are agree, which means that respondents know the purpose of PKH. In the 5th statement item, it shows that the answers of respondents attending regular meetings of PKH activities, who chose the answer strongly agree as many as 25 people (25%), who chose the answer agree as many as 65 people (65%), who chose the answer disagree as much as 10 people (10%) and 0 people chose the answer that did not agree (0%).

From the explanation above, it can be concluded that the majority of the answers are in agreement, namely the PKH recipients attend regular meetings in PKH activities. In the 6th statement item shows that the respondents' answers regarding knowing the role of PKH facilitators, who chose the answer strongly agree as many as 27 people (27%), who chose the agree answer as many as 55 people (55%), who chose the answer disagree as much as 15 people (15%) and 3 people (3%). From the explanation above, it can be concluded that the majority of the answers were agreeing to know the role of the PKH facilitator.

Based on the table above shows that the effectiveness of Program Keluarga Harapan, namely the effectiveness of understanding the program in accordance with the questionnaire given to PKH recipients, produces a response that is in accordance with the alternative answers after calculating the data for 100 respondents, namely 34.16% of PKH participants' answers in understanding the program runs very effectively, then 58.33% of PKH participants' answers indicate that the program understanding is quite effective, 6.83% of PKH participants' answers indicate that it is less effective and the remaining 0.67% indicates that the understanding of the PKH program is not effective.

In determining the effectiveness of Program Keluarga Harapan on the effectiveness of understanding the program as shown in the table, researchers not only focused on very effective answers (SE), but also took into account the percentage of effective answers (E)[6],[7]. So the researchers added up the percentage of SE answers (34.16%) and E answers (58.33%) with the results of 92.49%. Thus, in accordance with the interpretation of the research that has been determined by the researcher himself, the result is that the effectiveness is categorized as 76%-100%. So it can be said that the Effectiveness of Understanding the Hope Family Program in Pulau Simardan Village, Tanjungbalai City is very effective.

Table 1.2 Effectiveness of PKH Targeting

No Item	Result Score			
	SS	S	KS	TS
7	31	55	12	2
8	17	56	23	4
9	13	40	37	10
10	23	58	0	19
11	13	20	0	67
12	63	37	0	0
13	51	42	7	0
14	17	59	21	3
15	10	41	34	15
Total	238	408	134	121
$P = \frac{f}{n} \times 100\%$	26,44%	45,33%	14,88%	13,44%

From the table above shows all respondents' answers. In the 7th statement item, the respondent's answers chose strongly to agree as many as 31 people (31%), who chose the agreed answer as many as 55 people (55%), who chose the answer disagree as much as 12 people (12%) and chose the answer disagree as much as 2 people (2%). From the explanation above, it can be concluded that most of the answers are agree, meaning that PKH recipients have difficulty in meeting their daily needs.

In the 8th statement item, it shows that the respondents' answers regarding difficulties in meeting the educational needs of children, who chose the answer strongly agree as many as 17 people (17%), who chose the answer agree as many as 56 people (56%), who chose the answer disagree as much as 23 people (23%) and 4 people (4%). From the explanation above, it can be concluded that the majority of the answers are agree, meaning that PKH recipients have difficulty in meeting the educational needs of their children.

In the 9th statement item, it shows that the respondents' answers regarding the difficulties in meeting the health needs of children, who chose the answer strongly agree as many as 13 people

(13%), who chose the agree answer as many as 40 people (40%), who chose the answer less agree as much as 37 people (37%) and 10 people chose the answer to disagree (10%). From the explanation above, it can be concluded that the majority of the answers are agree, meaning that PKH recipients have difficulty in meeting the health needs of their children.

The 10th statement item shows that the respondent's answer regarding PKH recipients who have children aged 5-7 years who have not tasted elementary school education, who chose the answer strongly agree as many as 23 people (23%), who chose the answer agree as many as 58 people (58%), who chose the answer that did not agree as much as 0 people (0%) and 19 people chose the answer that did not agree (19%). From the explanation above, it can be concluded that the majority of the answers are in agreement, meaning that PKH recipients who have children aged 5-7 years have had elementary school education.

The 11th statement item shows that the respondents' answers regarding PKH recipients who have junior high school age children and children aged 15-18 years who have not completed high school education, who chose the answer strongly agree as many as 13 people (13%), who chose the answer agree as much as 20 people (20%), who chose the answer to disagree as much as 0 people (0%) and chose the answer to disagree as many as 67 people (67%). From the explanation above, it can be concluded that most of the answers are disagree, meaning that there are PKH recipients who do not have junior and senior high school age children.

The 12th statement item shows that the respondent's answer regarding the respondent is one of the right people to be registered as PKH participants, who chose the answer strongly agree as many as 63 people (63%), who chose the answer agree as many as 37 people (37%), which 0 people chose the answer that did not agree (0%) and chose the answer that did not agree as much as 0 people (0%). From the explanation above, it can be concluded that the majority of answers are strongly agree, meaning that PKH participants have been right on target in choosing to become PKH recipients.

In the 13th statement item, it shows that the respondents' answers regarding the presence of PKH in meeting the educational needs of children, who chose the answer strongly agreed were 51 people (51%), who chose the agreed answer as many as 42 people (42%), who chose the answer disagreed as much as 7 people (7%) and 0 people chose the answer to disagree (0%). From the explanation above, it can be concluded that the majority of answers are strongly agree, meaning the presence of PKH in meeting the educational needs of children.

The 14th statement item shows that the respondents' answers regarding the presence of PKH in meeting the health needs of children, who chose the answer strongly agree as many as 17 people (17%), who chose the answer agree as many as 59 people (59%), who chose the answer disagree as much as 21 people (21%) and 3 people (3%). From the explanation above, it can be concluded that the majority of answers are strongly agree, meaning that the presence of PKH in meeting children's health needs.

In the 15th statement item, it shows that the respondents' answers regarding PKH assistance were right on target, 10 people chose the strongly agree answer (10%), 41 people chose the agree answer (41%), 34 people chose the least agree answer people (34%) and 15 people (15%). From the explanation above, it can be concluded that the majority of the answers are in agreement, namely that this PKH assistance has been carried out on target.

Based on the table above, it shows that the effectiveness of Program Keluarga Harapan, namely in the Setting of Targets section in accordance with the questionnaire given to PKH recipients, produces a response that is in accordance with the alternative answers after calculating data on 100 respondents, namely 26.44% of PKH participants' answers in targeting running very effectively, then 45.33% of PKH participants' answers indicated that the targeting was quite effective, 14.88% of PKH participants' answers indicated that it was less effective /

less targeted and the remaining 13.44% indicated that PKH targeting was not effective / not yet on target[7].

In determining the effectiveness of Program Keluarga Harapan in the setting of targets as shown in the table above, the researchers not only focused on very effective answers (SE), but also took into account the percentage of effective answers (E). So the researchers added up the percentage of SE answers (26.44%) and E answers (45.33%) with a result of 71.77%. Thus, in accordance with the interpretation of the research that has been determined by the researcher himself, the result is that the effectiveness is categorized as 51% - 75%.

So it can be said that the target setting for Program Keluarga Harapan in Pulau Simardan Village and Tanjungbalai City is quite effective. In determining the effectiveness of Program Keluarga Harapan in the Real Changes section as shown in the table, the researchers not only focused on very effective answers (SE), but also took into account the percentage of effective answers (E). So the researchers added up the percentage of SE answers (13.33%) and E answers (48%) with the results of 61.33%. Thus, in accordance with the interpretation of the research that has been determined by the researcher himself, the result is that the effectiveness is categorized as 51% - 75%. So it can be said that the real change in Program Keluarga Harapan in Pulau Simardan Village, Tanjungbalai City is effective.

4 Conclusion

Program Keluarga Harapan (PKH) in Poverty Alleviation in Pulau Simardan Village, Tanjungbalai City with the aim of alleviating poverty can be said to be effective. Program Keluarga Harapan (PKH) can be said to be ineffective and effective through the variables measuring the effectiveness and indicators of the effectiveness of Program Keluarga Harapan (PKH). The existence of conformity of expectations with the implementation of Program Keluarga Harapan (PKH). If so, then the expected goal of Program Keluarga Harapan (PKH) in alleviating poverty has been achieved.

Acknowledgement

The author expresses his gratitude to all parties who have been involved in this research, especially to all PKH users and those in charge of PKH, housewives, school children to officials who cannot be said one by one.

References

- [1] Ema Evi. (2020). Kekuatan Karakter dan Komitmen Okupasi (Suatu Study Pendahuluan Pada Profesi Dosen).Jurnal Ilmiah Psikologi Index.22 (1).
- [2] Indrayani,F.K. 2014. Efektivitas Program Keluarga Harapan di Desa Sugihwaras Kecamatan Saradan Kabupaten Madiun. Jurnal Publika 2(3), 1-11
- [3] Sugiyono. 2017. Metode Penelitian Kuantitatif, Kualitatif, dan R&D. Bandung: Alfabeta.
- [4] Yunita, Rahma, Tarifu, La & Aminuddin.2020.Efektivitas Program Keluarga Harapan (PKH) Dalam Mendukung Pengentasan Kemiskinan Di Desa Mataindaha
- [5] Robbins Stephen P. 2008. Perilaku Organisasi, Jilid 1 & 2, Alih Bahasa: Hadyana Pujaatmaka. Jakarta: Indeks Kelompok Gramedia
- [6] Nurhawa. 2010. Pedoman Kelembagaan Program Keluarga Harapan Daerah. Jakarta : Kementerian Sosial Republik Indonesia
- [7] Kiswati,Ayu. 2020. Peran Pendamping Program Keluarga Harapan (PKH) Dalam Membantu Meningkatkan Kesejahteraan Masyarakat Miskin Melalui Kegiatan Rutin Pertemuan Peningkatan Kemampuan Keluarga (P2K2) Kelurahan Blotongan, Sidorejo, Salatiga Tahun 2020

- [8] Binarika, D, Christani. 2020. Partisipasi Rumah Tangga Sangat Miskin (Rtsm) Dalam Program Keluarga Harapan (PKH) Pendidikan Di Kelurahan Latsari Kecamatan Tuban Kabupaten Tuban
- [9] Fitri, Erma & Zubaidah Evi.2020.Efektivitas Program Keluarga Harapan Dalam Penanggulangan Kemiskinan.Jurnal Ilmu Administrasi & Sosial, 9(2),88-99
- [10] Streers, Richard. 2008. Efektivitas Organisasi, diterjemahkan Magdalena Jamin. Jakarta: Erlangga