

Inhibiting Factors (Internal & External) Implementation of the Family Hope Program (PKH) in Bone Regency

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Abstract

The Family Hope Program (PKH) is a program launched by the Government of Indonesia in 2007 to break the chain of family poverty. PKH in Bone Regency has been running for approximately ten years, starting in 2010 until now. If the effectiveness of PKH is measured by reducing the poverty rate, PKH in Bone District shows fluctuating results in reducing the poverty rate. This research used a qualitative approach, carried out in Bone District, South Sulawesi Province, from January to June 2019. In this study, the key informants were the District Coordinator (Korkab) PKH Bone Regency, PKH Social Worker Supervisor, three PKH social assistants, and three people. PKH recipient communities. Data collection was carried out through interviews, observation, and documentation. The data were then analyzed through descriptive qualitative, including data collection, data reduction, data presentation, and concluding. The results showed that the factors that hindered PKH facilitators in implementing PKH in Bone Regency were: 1) Internal factors, which included target recipients of assistance, either Inclusion or Exclusion Error, PKH HR itself and PKH infrastructure, 2) External factors that become The obstacles are the lack of support from the village government and the community in the PKH implementation process and there is still access to areas that are difficult to reach by PKH Facilitators.

Keywords: Family Hope Program, Inhibiting Factors, Indonesia

1. Introduction

The Family Hope Program (PKH) is a program launched by the Government of Indonesia in 2007 to break the chain of family poverty (Misnawati et al.). The implementation of PKH has touched all of Indonesia to remote areas, which is called PKH Akses. Still, this assistance is a breakthrough for the government with a different system from other service types, such as the conditional assistance model.

As a conditional social assistance program, PKH assists in the form of non-cash money and social assistance. Non-cash money can be used by Beneficiary Families (KPM) to reduce family burdens, such as household burdens, and the responsibility of access to other social services, such as education, health, and social welfare. Access to services

in question is family access, especially pregnant women and toddlers, to take advantage of various health service facilities and educational service facilities for school-age children available around them and access to services for elderly parents (seniors). And persons with severe disabilities to maintain their level of social welfare by the mandate of the constitution and the President of the Republic of Indonesia (PKH Kemensos).

The implementation of PKH in the regions is carried out by PKH Human Resources (SDM) consisting of Regional Coordinators, Regency Coordinators, Database Administrators (APD), and most importantly by PKH Social Assistants. They are the first to have direct contact with KPM, in this case, PKH assistance recipients. PKH Facilitators assist KPM in using social assistance, empowerment, and updating data to receive on target and effective. At the same time, PKH Facilitators carry out charge to deliver KPM to get out of the poverty chain that has been trapped so far.

PKH has been implemented in Indonesia for approximately 13 years, if on a national scale, from 2007 to 2020. Various studies have been conducted by researchers in measuring the effectiveness of this program. For example, research conducted in Kasegeran Village, Cilongok District, Banyumas Regency, that the PKH implemented in the village has been useful in evaluating program goals and objectives (Prichatin). Meanwhile, another research was conducted in Nagari Lagan Hilir, Pesisir Selatan Regency also produces data that the PKH program has been useful when viewed from the program objectives. However, it is not practical in terms of targeting beneficiaries or has not been on target. There are still many KPMs who are not eligible to receive but are recipients of assistance (Ekardo et al.). In Kota Utara Subdistrict, Gorontalo City, a similar study was also carried out with the results that the level of effectiveness of PKH there is in the medium category. It tends to be low in terms of the program's meaning and the program objectives in poverty reduction (Usman).

The three studies that have been carried out above with a sample of three different locations also show three different results. In the first location, PKH showed beneficial effects, while in the second location, it showed effective products on the one hand but ineffective on the other. Furthermore, it offers low results in the third location, or in other words, it is less effective (Yusriadi et al.; Y. Yusriadi et al.; Hasbi et al.; Ansar et al.). This data indicates that all regions do not evenly distribute the benefits of PKH implementation. Some areas show that the program's benefits and objectives have been achieved, but several others show the opposite results, or the program objectives have not been completed (Nuraini et al.; Umanailo and Ali). Of course, the effectiveness of this program is based on several factors that become supporting and hindering the implementation of PKH in the field. These factors may come from PKH's internal conditions and external PKH itself, as happened in Bone Regency, South Sulawesi.

PKH in Bone Regency has been running for approximately ten years, starting in 2010 until now. If the effectiveness of PKH is measured by reducing the poverty rate, PKH in Bone District shows fluctuating results in reducing the poverty rate. This last year, there has been a very significant emphasis on numbers, namely as many as 33.20 thousand people, wherein 2018 it showed that the number of poor people in Bone Regency was 79.57 thousand, decreasing in 2019 to 76.25 thousand people.

Table 1: Number of Poor Population in Bone District 2015 - 2019

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
101,10	92,08	88,84	87,70	80,46	75,00	75,09	77,10	79,57	76,25

Source: (BPS Sulawesi Selatan)

The table above shows that the implementation of PKH in Bone Regency has been effective in several years of PKH implementation, although the results have fluctuated. The existing conditions and resistance triggered researchers to conduct research related to the obstacles to the implementation of PKH in Bone Regency. The author is interested in researching and describing what factors hinder the main tasks and functions of PKH Facilitators in implementing PKH in Bone Regency.

2. Method

This study uses a qualitative approach, a research procedure that uses descriptive data in the form of written words from people or actors who can be observed. The research was conducted in Bone District, South Sulawesi Province, starting from January to June 2019. The selection of Bone Regency as a research location was based on the

following aspects: 1) Bone Regency as a large district to support the implementation of government programs, especially in poverty alleviation, 2) Bone Regency is an area that receives and implements PKH. 3) Bone District has PKH beneficiaries of approximately 20,000 people until 2019.

Data in this study are directed to informants involved in poverty alleviation, either directly or indirectly. In this study, the key informants were the PKH Coordinator of Bone Regency, PKH Supervisor Social Workers, three PKH social assistants, and three PKH recipient communities. Data collection was carried out through interviews, observation, and documentation. The data were then analyzed through descriptive qualitative, including data collection, data reduction, data presentation, and concluding.

3. Result and Discussion

3.1 Internal factors

The organizational environment will influence PKH. The territory can be divided into two major parts: the external environment and the internal environment. Internal factors include strengths and weaknesses within PKH facilitators itself. The preparation of an appropriate PKH facilitators strategy must pay close attention to its strengths and weaknesses and pay attention to external factors. PKH facilitators' internal environmental analysis is an analysis that is useful in identifying the strengths and weaknesses of a program that is running based on its resources and capabilities.

The purpose of internal analysis is to understand and understand the PKH facilitators environment so that it can react appropriately to any changes and the ability to respond to various critical issues regarding the environment that have a strong enough influence on the implementation of the program. The benchmarks used in this study to see the internal factors that influence the performance of PKH in Bone Regency consisted of 1) Target beneficiaries, 2) PKH human resources, and 3) PKH facilitators facilities and infrastructure.

3.1.1 Target beneficiaries

Recipients of PKH social protection assistance must be right on target, namely residents who need them. According to the regulations, PKH recipient candidates must meet several criteria. One of them, the most impoverished families, with the meaning of the bottom five percent of the low-income family community. For its components, the family has pregnant women, toddlers, pre-school children, elementary, junior, and senior high school children, and the elderly and severely disabled.

The target recipients of PKH assistance in Bone Regency based on the study results showed that they were right on target according to the program participants who had been previously determined. This program's targeting accuracy is that target determinants are determined individually or by government organizations closest to the community, such as RT, RW, and Village. So that knowing the real condition of the community can avoid inaccuracy.

In implementing a program, accuracy of targeting is needed. The accuracy of program targets is seen from how program participants are right on the predetermined targets (Budiani, 2007). In general, objectives have meaning. Namely, everything achieved and produced by certain agencies or parties within a predetermined period. The target of the Family Hope Program is PKH participants who have been declared accepted as PKH aid recipients.

However, inaccurate data also often appeared at the beginning of data validation for KPM candidates. So that PKH Facilitators are responsible for updating the information whether they are recipients or not. The problem of target beneficiaries is challenging to resolve because the data provided to PKH Facilitators come from the central government. It is difficult to remove or add to KPM even if it is substituted or replaced by eligible people to become PKH participants. Based on this study's results, it can conclude that the target recipients of assistance in PKH in Bone Regency still have data problems, so that the indicators of target recipients are not yet useful.

3.1.2 PKH Human Resources

Human resources (HR) is a significant factor that cannot be separated from an organization, institutions, and companies. HR is also the key that determines the company's development. In essence, human resources are in the form of humans employed in an organization as movers, thinkers, and planners to achieve the organization's goals (Wikipedia, 2019).

The role and importance of human resources as PKH implementers is that all potential resources that are owned can be used to achieve success in poverty alleviation through PKH. These resources, namely the time, workforce, and human resources of PKH (both in terms of thinking and physical power), can be utilized in an integrated and optimal manner for poverty alleviation. Human Resources as the first and foremost factor in the development process and achieving PKH goals. If PKH already has large capital, sophisticated technology, but there are no human resources, in this case, PKH HR who can manage and utilize it, it will not be possible to achieve success in poverty alleviation. Therefore, the importance of PKH human resources is very much needed as the main element and the controlling element for poverty alleviation.

Human resources are the main driving factor (Riadi, 2003). Likewise, with the Family Hope Program process, HR is the main factor driving program implementation. Thus, as a driving force, it is essential and even becomes the key to the success or failure of the program implementation process.

Through information from informants, it can interpret that PKH HR in Bone District, in this case, PKH Facilitators, found several characters and categories. It illustrates the variety of PKH Facilitators in the Bone District. Some work well according to their duties and functions. Still, others work to abort their obligations as a companion, so they do not innovate to help KPM change their mindset to move out of poverty.

Human resources are the main driving factor (Tamsah et al.; Sahid et al.; Usman et al.), as well as the PKH process. Facilitators are the main factors driving program implementation. Thus, it is essential as a driving force and even becomes the key to the program implementation process's success or failure.

3.1.3 Facilities and infrastructure

One aspect that gets the immediate attention of PKH Facilitators is the PKH implementation facility. The facilities generally cover all the facilities directly used and support the PKH process, such as availability of places, tools, media for assistance, etc. Meanwhile, what is meant by infrastructure is that which indirectly supports the assistance process. In general, facilities and infrastructure are tools to help the success of a method of efforts made in program implementation. If these two things are not available, then all activities carried out will not achieve the expected results according to plan.

PKH is a social program whose existence is part of the nation's social system, aiming to alleviate poverty and produce educated human beings. For this goal to be achieved, strong knowledge is needed, both in infrastructure and superstructure. This knowledge will later be used to carry out all learning activities, especially the interaction between PKH Facilitators and the recipient community. PKH Facilitators, as PKH implementers, are required to carry out learning with skills so that the recipient community has the skills to work.

Given the importance of infrastructure in learning activities, the recipient community and youth will be directly related. The support of learning infrastructure will more assist KPM. Not all KPMs have a good level of intelligence, so learning infrastructure will help KPMs, especially those who have weaknesses in participating in learning activities. The support of infrastructure facilities will assist PKH Facilitators. Learning activities will also be more varied, exciting, and meaningful.

Based on the research results on the indicators of infrastructure for implementing PKH in Bone Regency, it shows that related to the means of equipment by PKH Facilitators in assisting by the Facilitators themselves. It becomes an obstacle in the implementation of KPM assistance. At the same time, facilitators need assistance facilities in supporting PKH activities and their ability to organize mentoring activities. The completer and more adequate the facilitation facilities they have, the easier it will be for assistants to implement PKH as social assistants.

3.2 External factors

External or environmental factors that are outside the organization exchange resources and depend on one another. PKH Facilitators get input (raw materials, money, labor) from the external environment, then are transformed into services as output for the external environment. PKH Facilitators should focus their attention on the internal environment of their organization and realize the importance of the influence of the external environment on their organization. They must consider the elements and forces of the external environment in every activity. PKH

Facilitators must identify, analyze, evaluate, diagnose and react to environmental pressures, whether in opportunities, risks, or threats that influence the organization's operations, Implementing the Family Hope Program.

PKH Facilitators are always required to be responsive and adaptive, always follow and adapt to environmental conditions. They need to determine the means or approaches that will enable them to maintain and develop the organization in an ever-changing environment. With systems and contingency approach, the external environment consists of elements outside the organization, most of which are uncontrollable and influence PKH decision making. The organization gets the input (input) it needs, such as labor and energy from the external environment, transforms it into services, and produces outputs to the external environment. In this study, indicators to measure the influence of external PKH Facilitators in poverty alleviation are seen by three hands, namely: a) government support; b) community support; c) area access.

3.2.1 Government Support

The government needs to realize that regional economic development is a long-term process and not a short-term process (The NGO Committee for Social Development). Therefore, when local governments make regional development plans that need to be considered is the dimension of sustainability.

Corruption in the regions will hamper the poverty alleviation process. In some instances, the ruler himself can be the cause of poverty. Local authorities often exploit their people in the form of petty corruption. The local rulers seemed to have the privilege of receiving tribute from the community. People are frequently asked for money for services they should receive free of charge. For the affluent society, paying illegal fees may not be too burdensome, but this is not the case for the poor. Expenditures for extortion are too demanding for the household economy (Aliwear, 2012).

To eradicate poverty, governments often face several problems in developing countries, namely, concept, content, coordination, corruption, and continuity. These problems are experienced by many developing countries such as South Asia and Africa, but that does not mean it does not occur in Indonesia. Most of the poor live in rural areas, and various programs are carried out in the regions to improve the community's socio-economic conditions. For this reason, the role of government as a motor of development is increasingly important, including social development.

Regarding government support indicators, based on the results of interviews with informants, it is known that from the local government, in this case, the village government, in facilitating the implementation of KPM assistance in their villages is better than before. Likewise, PKH Facilitators can resolve complaint cases if there are problems in KPM assistance in the town. According to the assistant, one of the keys is coordination and communication. Finally, it can conclude that the local government has facilitated the village's implementation well.

3.2.2 Community Support

There will be interactions between communities known as social interactions or known as social exchanges in social life. Therefore, in the interactions that occur, it is necessary to have relationship maintenance behavior. Relationship maintenance is a behavior shown to ensure the continuity of a valuable relationship through strengthening, repairing, and restoring a relationship (Sonhadji, 2016).

In connection with implementing the PKH program based on community groups, community groups are both the movers and the program's primary implementers. These aspects of community perception and participation are essential. Besides, communication between the community and PKH facilitators also dramatically influences the program's running because the running of PKH will undoubtedly lead to various kinds of perceptions arising from the surrounding community.

Based on the interview results, the coordination with the local community (non-PKH) was not optimal. It was because the facilitators had difficulty coordinating and collaborating in implementing the PKH program. Facilitators find it difficult to invite the community's active role to support mentoring activities carried out by the mentor. In this activity, the facilitator must convey information on program progress or achievements, update data, receive complaints and explore problems faced by PKH participants, providing motivation for participants who have not fulfilled their commitments. The facilitator has not been optimal in utilizing the monthly meetings with the group leader and all PKH participants to approach the local community; this is due to the local community's lack of participation in seeing the PKH program goals.

3.2.3 Territory Access

Regional access is one indicator that affects the implementation of poverty alleviation through the Family Hope Program. Bone Regency is the largest district in South Sulawesi, with 27 sections. Bone District has mountainous areas and sea areas, not all of which support road access. There are still several villages that are very remote, so that road access to these villages is difficult to pass. Besides that, the selection of a companion, in this case, PKH Facilitator, not all of them come from the area where assistance, which also affects the implementation of poverty alleviation programs in Bone District.

It can be seen from the results of research carried out through observations and interviews with several informants that the obstacles experienced by PKH Facilitators in assisting in the village, especially if the assisted community is in a remote town, make road access very difficult. It is because all activities are highly dependent on road access in an area. It is also a factor influencing PKH Facilitators in mentoring KPM in the village.

4. Conclusion

Factors that hinder the role of PKH facilitators in implementing PKH in Bone Regency include:

1. Internal factors include target recipients of assistance, both Inclusion or Exclusion Error, PKH Facilitator itself, and PKH infrastructure. There are still data problems in determining target recipients. There are PKH Facilitators who are on duty in the field abort their tasks and do not innovate as executors PKH and inadequate infrastructure owned by the companion.
2. The external factors that become obstacles are the lack of support from the village government and the community in the PKH implementation process in the field, and there is still access to areas that are difficult to reach by PKH Facilitators, making it ineffective in implementing field assistance.

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