

# Community Empowerment through the Family Development Session of the Family Hope Program (Case Study)

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**Abstract.** *Community empowerment is a strategic approach in overcoming complex poverty. This research aims to analyze the implementation, results, obstacles and solutions for community empowerment through Family Development Sessions (FDS) in the Family Hope Program (PKH) in Kadipiro Village, Sambirejo District, Sragen Regency. This research uses a qualitative approach with a case study method. Data was collected through in-depth interviews, participant observation and documentation studies. Research informants were selected purposely, consisting of social assistants and Beneficiary Families (KPM). The research results show that FDS plays an important role in increasing KPM's awareness, abilities and life skills. However, there are obstacles such as low KPM participation, limited accompanying resources, and a lack of effective training modules. The proposed solutions include developing modules based on local needs, increasing companion training, and optimizing participatory strategies. This research provides important insights for the development of more inclusive and sustainable community empowerment programs.*

**Keywords:** *Community Empowerment, Family Development Sessions, Family Hope Program, Qualitative Research, Kadipiro Village*

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## INTRODUCTION

Poverty in Indonesia is a social problem that is under study and has never been resolved (Dhanani & Ism, 2002). The economic gap between low-income groups and the number of people who are on the poverty line are two big problems that occur in Indonesia. This is a global problem, there are those who understand it comparatively and subjectively, there are also those who see it from a moral and evaluative perspective. The Central Statistics Agency, BPS, (2019) defines poverty using the concept of the ability to meet basic needs (basic needs approach).

With this approach, poverty is seen as an economic inability to meet basic food and non-food needs as measured in terms of expenditure. Thus, the population has an average monthly per capita expenditure below the poverty line. The poverty needs to be resolved most importantly is poverty in the fields of education, health, infrastructure and unemployment levels because these fields are important pillars in alleviating poverty in a country (Lenggogeni & Iyan, 2012). Problems in the field of education are a matter that must be resolved because education is the

main goal of equalizing opportunities and as an effort to reduce social disparities that always occur in society.

Education can be interpreted broadly, and is a learning process that can be carried out anywhere (Ally, 2004). One effort that is considered suitable for alleviating poverty is through community empowerment. Community empowerment activities are activities that have clear goals and must be achieved, therefore, every implementation of empowerment requires a foundation with certain work strategies to achieve success in order to achieve the desired goals. In the everyday sense of strategy, strategy is defined as an action or certain steps taken to achieve goals (Kadir, 2015). In handling poverty, the strategy used by the government in empowering the community is an effort to provide opportunities for community groups (poor) including weak and powerless communities to able and brave to speak out or express opinions, ideas or ideas, as well as the ability and courage to choose something (concept, method, action, etc.) that is best for the person, family and society.

According to Saegert & Winkel (1996), in other words, community empowerment is a process to increase the ability and attitude of independence of the community. The government hopes that with this empowerment, people can immediately be empowered to escape poverty which has been a problem (Setiawan & Choirunnisa, 2023). Strategy is a process as well as an important product related to the implementation and control of activities carried out to win the competition in order to achieve goals. The community empowerment strategy has three directions, such as taking sides and empowering the community, strengthening regional autonomy and delegating authority in development management which develops community participation, modernization through sharpening the direction of changes in socio-economic structures (including health), culture and politics which are based on community participation.

The government itself has consistently implemented various kinds of poverty alleviation and community empowerment programs (Bradshaw, 2007). One of them is the Family Hope Program (PKH) in an effort to eradicate poverty in society. According to (Andayana, 2023) support community empowerment, the Government is currently implementing the Family Hope Program (PKH) which has been implemented since 2007. PKH is a social protection program which is also known internationally as Conditional Cash Transfers (CCT) or conditional cash assistance program to Poor Families (KM) designated as PKH Beneficiary Families (KPM).

The Family Hope Program (PKH) is implemented in Central Java. With its implementation, there are two districts with the largest population, namely: Sragen Regency which has an area of 1,902.37 km<sup>2</sup> with a population density of 1,066 people/km<sup>2</sup>, which is the second largest after Cilacap Regency with an area of 2,142.59 km<sup>2</sup>. Rapid population growth causes population density to become high. Sragen Regency was one of the first regencies to receive PKH in 2011 and it is still ongoing today. Sragen Regency consists of 20 sub-districts, of the 20 existing sub-districts, as many as five sub-districts are inhabited by residents who have poor living conditions.

Kadipiro Village is categorized as far from prosperous, the low level of education and weak resources make it difficult for them to support their daily needs. Kadipiro Village is also included in the intervention villages where health problems such as poor nutrition can cause children to experience stunting, the impact of poor nutrition on children is also one of the causes of children dropping out of school in Kadipiro Village. Apart from that, interest in learning about KPM is also very low, there are still many PKH recipients who do not want to and rarely attend when carrying out FDS activities because they are busy working in the rice fields.

Seeing these conditions and being supported by the existence of PKH in Kadipiro Village which is strengthened with mentoring activities. Where the role of social assistants here is human resources who are recruited and employed in accordance with the agreement and determined by the Ministry of Social Affairs as the implementer of assistance at the sub-district level. The success of PKH is influenced by the implementation of empowerment of poor communities and the role of companions. According to Istiani & Mansyur, 2022, PKH in this case has empowerment

activities which are often called Family Capacity Building Meetings (P2K2) or known as Family Development Sessions (FDS).

The Family Development Session is a structured learning process to improve the life skills of poor people with a main focus in the fields of economics, children's education, health and child protection, each of which is summarized in a module with various sequential sessions. In this FDS activity there is a process of educational learning activities towards the development of the potential of FDS participants to fulfill their personal survival and that of the wider community. (Arfiyani et al., 2020). PKH assistants in implementing FDS for KPMs in their assisted areas are not just commitment verification officers, but also act as facilitators or tutors where FDS participants who are considered learning citizens and social companions as tutors here do not patronize each other and do not differentiate between FDS participants who are one with other participants so that each FDS participant can obtain maximum learning results (Senjawati & Fakhruddin, 2017).

The facilitation carried out by the companion is providing FDS material which has been summarized in a module. The implementation of FDS empowerment activities in this case is a PKH pilot project where the success of the facilitator is not measured by the number of lessons or modules delivered, but by the extent to which there is a dialogic joint learning process that is able to foster awareness (attitudes) of KPM, knowledge and "new" skills. who are able to change their assisted groups towards activities and lives that are more prosperous for the KPMs assisted by them, respectively (Akrab & Somba, 2022).

The learning process in empowerment is not a "patronizing" process, but rather fosters a spirit of independent and participatory learning together. Mead in (Ahmad et al., 2016), Community empowerment activities can be seen from the extent to which dialogue, discussion and exchange of experiences (sharing) occurs between the facilitator and KPM, where the facilitator does not have to be smarter but can come from ordinary people who have experiences that can be shared. Empowerment always refers to the community's need to optimize community potential and resources to achieve the welfare of an empowered community.

The implementation of FDS for KPM must use an andragogical approach, where the learning approach uses adult principles, the concept of andragogical learning, namely providing experience to KPM to develop knowledge, skills and attitudes in accordance with the objectives of the FDS activity. The andragogy approach is not only to be known, but is applied at every stage of learning so that learning takes place effectively and efficiently. For this reason, the number of participants in each class is no more than 30 people. Education and training can be carried out anywhere in an informal atmosphere, simple, cheap and fun place (Eshach, 2007). The different educational backgrounds of the assistants influence the learning model and delivery style as well.

Based on the results of observations, not all assistants apply the concept of adult learning or what is often referred to as andragogy. There are still many assistants who carry out FDS only to cancel obligations without paying attention to their KPM, so that during FDS, participants or KPM just sit passively without paying attention to discussions during FDS activities, and the number is too many around 40-55 participants so that the aim of FDS activities is to realize The ideals of FDS activities in changing mindsets, KPM independence, will take a very long time to achieve if this is ignored.

On the other hand, companions still face various problems when carrying out FDS activities. These problems are related to the burden on the number of KPMs which ranges from 350-400 KPMs / assistants, KPM data updating activities include education and health verification, not having received FDS training, and added to the complementary activities which hinder FDS activities, namely companions disbursing BPNT (Non-Food Assistance). Cash) PKH participants. This problem requires a solution so that companions can implement FDS optimally. Social welfare programs are implemented in an effort to help overcome social welfare problems faced by disadvantaged communities.

The general characteristics of KPM are those who experience social, economic, intellectual and emotional limitations. These differences in perceptions of KPM make it difficult for them to properly understand the aims and objectives of social welfare programs. In this regard, social assistance is needed in social welfare programs. Social assistants in poverty and vulnerable group management programs have an important role aimed at increasing the capacity of KPM, so that they are empowered to overcome their own problems and carry out their life tasks (Yanti & Adi, 2020). As an effort to overcome poverty, PKH has not fully implemented comprehensive interventions on food and non-food aspects which are used as benchmarks for poverty. The interventions carried out by PKH are limited to non-food aspects (education and health).

There are still aspects of non-food poverty that have not been intervened in, such as housing and clothing. Meanwhile, the food poverty component is not explicitly intervened by PKH. It must be admitted that currently there are many PKH beneficiaries who receive food and non-food assistance at the same time, such as Non-Cash Food Assistance (BPNT), Uninhabitable House Assistance (Rutilahu), Smart Indonesia Card (KIP), Healthy Indonesia Card (KIS), Joint Business Groups (KUBE) and others which are part of synergistic and complementary programs whose control is outside PKH (Nurasyiah et al., 2022).

Based on the background of the problem above, the researcher felt interested in conducting research with the theme "Community Empowerment Through Family Development Session "Family Hope Program (Case Study of Kadipiro Village, Sambirejo District, Sragen Regency)". This research was carried out for the first time in Kadipiro Village, which is an intervention village and it is hoped that it will be able to bring about changes in reducing the number of PKH KPM so that they are independent and with full awareness for independent graduation from PKH membership. The root of the problem that will be studied concerns the process of empowering beneficiary families through FDS activities.

Empowerment carried out as part of poverty alleviation efforts in Kadipiro Village, Sambirejo District, Sragen Regency. Based on the focus of the problem, the aim of this research is to describe, analyze and give meaning to: Describe and analyze strategies for empowering beneficiary families through FDS implemented by social assistants in Kadipiro Village, Describe and analyze the results of community empowerment achievements in implementing FDS activities in Kadipiro Village, Describe and analyze the obstacles faced by the community empowerment that has been carried out by the assistant, Describe and analyze solutions to the obstacles faced in FDS activities carried out by social assistants in Kadipiro Village.

## **METHODS**

Research is an activity in discovering, developing and testing the truth which is carried out methodologically and systematically, which means in accordance with scientific methods. Research methods are basically scientific ways to obtain data with specific purposes and uses. Research methods are very important because the success of the activities carried out in research is determined by the precise method used. Research is a means for science to develop the science concerned. Research is also a means for society to participate in solving the problems they face. Research methods have an important role in determining the quality of research results. The research approach used in this research is a qualitative method. The data obtained from research is not in the form of numbers but data collected in the form of spoken words which include notes, reports and photos. This type of research uses the Case Study Method. Case study means a method or strategy in research, it can also mean the results of research on a particular case. Case studies are an approach to studying, explaining and interpreting a case in its context natural without any intervention from outside parties. In this research method, there are several things that can determine the steps in carrying out research activities. The steps that must be determined are the type of research, research focus, research data sources, data collection methods, data validity, data analysis, and research procedures. Through qualitative methods, researchers attempt to explain, describe and investigate Community Empowerment Strategies through the Family

Development Session of the Family Hope Program (Case Study of Kadapiro Village, Sambirejo District, Sragen Regency).

### **Method of Collecting Data**

Research, besides needing to use appropriate methods, also needs to choose relevant data collection techniques. The use of appropriate data collection techniques allows objective data to be obtained. In this research, researchers used the following data collection techniques.

#### ***Interview Technique***

An interview is a tool for gathering information by asking a number of questions orally to answer them verbally as well. The main characteristic of interviews is direct face-to-face contact between information seekers (interview) and sources of information (interviewee). An interview is a conversation with a specific purpose. The conversation is carried out by two parties, namely the interviewer who asks questions and the interviewee who provides answers to those questions (Azmi & Prayitno, 2024). A method or method for collecting data by having direct dialogue with related parties in order to obtain correct information regarding the matter being researched. The aim of this interview are Community members who received PKH were 3 informants, PKH officers were 1 informant, Village head, Village Midwife and Teacher SDN 1 Kadapiro 1 informan.

#### ***Observation Technique***

Observation techniques are used if the research concerns human behavior, work processes, natural phenomena and if the number of respondents being observed is not too large. The use of observation techniques is very important in research, because researchers can see directly the actual conditions, atmosphere and reality that occur in the field. Through observation, it is hoped that false information can be avoided which sometimes appears and is encountered in research. Observation as a data collection tool can be carried out in a structured or unstructured manner. Structured observation is observation that has been systematically designed about what will be observed, when and where. In order to facilitate observation and memory, this research was assisted by notes and evidence in the form of photographs.

In observation, the author is directly involved in the community of people who will be observed. Researchers try to always be present at Community Empowerment Activities for PKH recipients. Data collection begins by focusing on observation activities, namely observing various activities and giving informants the opportunity to freely express their experiences during field observations. In conducting research, researchers try to appear as simple as possible. Data obtained from direct observation in the field is descriptive data. Researchers conducted research from 16 December 2024 for SD N 1 Kadapiro Teacher informants, 17 December 2024 for Village Midwife informants, 19 December 2024 for PKH Recipient Informants.

#### ***Documentation Techniques***

The documentation techniques used in this research are personal documents and official documents. A personal document is a person's written record or composition about his or her actions, experiences, and beliefs. The purpose of collecting personal documents is to obtain real events about social situations and the meaning of various factors surrounding the research subject (Moleong, 2012). In this research, the researcher used a personal camera and a notebook which was used to write down the results of the interview.

### **Data Analysis**

This research stems from four activities, namely data collection, data reduction, data presentation, and data verification.

### **Data Collection**

Data collection is a process of activities carried out by researchers through interviews and documentation to obtain complete data.

### **Data Reduction**

Reducing data means summarizing, selecting the main things, focusing on the important things, looking for themes and patterns and discarding what is not necessary. In this way, the reduced data will provide a clearer picture, and make it easier for researchers to carry out further data collection and search for it if necessary. Data reduction can be assisted with electronic equipment such as mini computers, by providing codes for certain aspects. Data reduction is a form of analysis that makes it easier for researchers to sharpen, classify, direct, remove unnecessary data and organize data. In this way, the final conclusions can be verified. In this data reduction, researchers use field notes to make it easier which data is needed and which data should be discarded to produce final conclusions (Miles, 1994).

### **Data Presentation**

Presenting data is compiling a collection of information that provides the possibility of drawing conclusions and taking action. The presentation is designed to combine information that is arranged in a form that is coherent and easy to achieve, expressed in various types of matrices, graphs, networks and charts. (Miles, 1994) state that the most frequently used way to present data in qualitative research is narrative text. By displaying data, it will be easier to understand what happened, and plan further work based on what has been understood. In carrying out research, better presentations are the main way for valid qualitative analysis.

### **Data Verification (Drawing Conclusions)**

Conclusion is a re-purpose of notes in the field. Conclusions can be viewed from data that must be tested for their truth, robustness and suitability, namely their validity (Miles, 1994). Conclusions in qualitative research may be able to answer the problem formulation formulated from the start, but maybe not. In this case, the researcher reviews the research results with field notes during the research whether they are appropriate or not, then draws conclusions from each item. Based on the description above, data collection, data reduction, data collection and data presentation are interrelated and inseparable. The four stages of data analysis can be described with the following scheme:

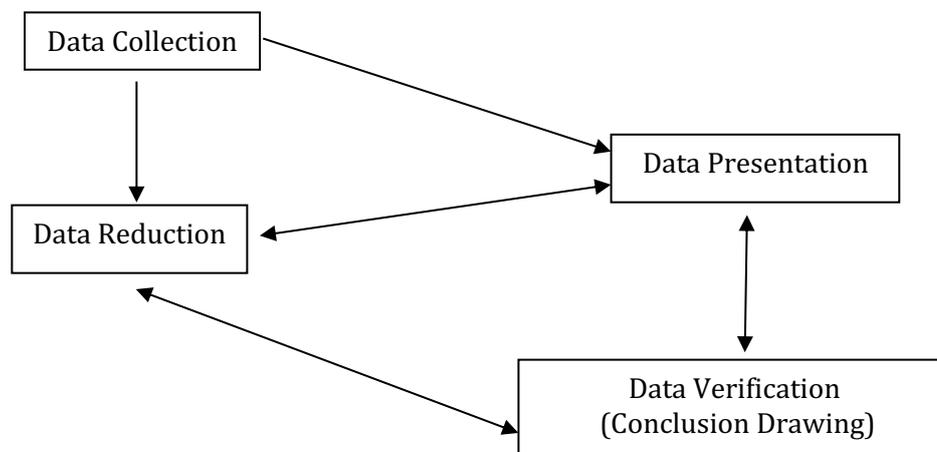


Figure 1. Data Analysis Techniques

## RESULTS AND DISCUSSION

### General Description

#### *Geographical and Demographic Description of Kadapiro Village*

Kadapiro Village is located in Sambirejo District, Sragen Regency, with geographical conditions in the form of hills which affect accessibility, especially in remote areas. Based on BPS Sragen Regency data (2023), Kadapiro Village has an area of around 15 km<sup>2</sup> and consists of 5 hamlets. This area is inhabited by 2,500 residents, with the majority making their living as farmers and daily laborers. Infrastructure in this village is still limited, with several connecting roads between hamlets not yet paved, thus hampering residents' mobility, especially during the rainy season. In terms of demographics, data from the Sragen Social Service shows that 30% of the population of Kadapiro Village is below the poverty line. Most of the community's education level only reaches junior high school level, which is a challenge in improving the quality of human resources in this village. Kadapiro Village was also designated as one of the priority villages in the poverty alleviation program in Sambirejo District by the Sragen Regency Government.

#### *Social, Economic and Educational Conditions of Society*

The people of Kadapiro Village are known to have a culture of mutual cooperation strong, as reflected in activities such as community service and posyandu. However, from an economic perspective, the income of the majority of the population is low. Survey data from the Social Service in 2024 shows that 70% of people depend on the agricultural sector, with unstable harvest results due to weather factors and lack of agricultural technology. In addition, small businesses such as handicrafts and trade are starting to develop, but limited access to capital and training are the main obstacles. In the field of education, there is increasing awareness of the importance of education thanks to the intervention of the Family Hope Program (PKH). Based on the Sambirejo Education UPT report (2024), the number of school-aged children participating in basic education has increased by 20% since the introduction of the PKH program. However, several obstacles remain, such as the lack of adequate educational facilities and long distances to schools for children in hilly areas.

#### *Family Hope Program (PKH) in Kadapiro Village*

The Family Hope Program (PKH) in Kadapiro Village is implemented to support beneficiary families (KPM) in meeting their basic needs. Based on the Sragen Social Service report (2024), there are around 200 families in Kadapiro Village who are registered as PKH beneficiaries. This program provides conditional assistance that encourages KPM to ensure children go to school, utilize health services, and increase awareness of family nutrition. The results of a survey conducted by PKH facilitators in 2024 show that 80% of KPM feel that PKH assistance helps them meet their basic needs, especially for education and health. The Family Development Session (FDS), which is part of the PKH program, provides education to KPM in financial management, the importance of education and healthy lifestyles.

A report from the Sambirejo Health UPT stated that there had been a 15% reduction in stunting rates in Kadapiro Village over the last three years, which was attributed to nutrition education through FDS. However, PKH in Kadapiro Village still faces challenges in the form of low initial community participation, limited supporting facilities, and geographical accessibility. Support from the village government, such as providing meeting rooms for FDS, as well as collaboration with village midwives and teachers, is the key to success in overcoming these obstacles.

## Research Result

### *Economy*

Opinion regarding the adequacy of PKH assistance for basic family needs by interviewing several PKH beneficiary residents on December 19 2024, namely ST, PA and BL, by providing the following responses. Mrs. ST thinks:

*"Thank God, this PKH assistance really helps us, especially for basic needs such as buying rice, cooking oil and children's school supplies. However, if we say it is completely sufficient, maybe not, because our daily needs are so many."*

Mr PA also gave his response:

*"If you say it's enough, it's actually not enough, because we have a lot of life's needs. But the assistance from PKH is really very helpful, especially for basic needs such as rice and children's school needs."*

It's different with Mrs. BL:

*"This assistance really helps me, especially for daily needs such as buying food and small capital for selling. Even though it is not enough to cover all my needs, this assistance makes me not too burdened."*

Excerpts from interviews regarding the allocation of cash transfers for education or health:

Mrs. ST responded:

*"Most of this cash assistance I use to buy basic needs such as food, school supplies, and a small amount is allocated for my children's savings. Sometimes, if there is an urgent need such as buying medicine, I also use the money from PKH."*

Mr PA with his response:

*"Most of it I use for daily needs such as food, my children's school needs, and paying for electricity. If a family member is sick, I also use the money from PKH to buy health needs."*

As well as Mrs. BL with her response:

*"I use some of the assistance to buy daily food, such as rice and cooking oil, as well as the children's educational needs such as books and stationery. I also try to set aside a little for additional selling capital."*

The PKH program provides real benefits for beneficiary residents in helping to meet basic needs, supporting children's education, and increasing access to health services. However, the amount of assistance received is still limited, so KPMs have to struggle to find additional income to meet other needs. Overall, this assistance is considered a significant first step, but not enough to bring KPM out of the cycle of poverty completely. Additional support in the form of increased grants, skills training, or access to business capital could help increase the long-term impact of the program. In this way, PKH can be more effective in empowering beneficiary families to become more economically independent.

### *Education*

Interviews with beneficiaries of the Family Hope Program (PKH) revealed the positive influence of assistance on their children's learning motivation:

Mrs. ST responded:

*"My children are now more enthusiastic about school because their needs such as books and uniforms have been met. Their attendance at school is also more regular because I feel better able to meet their needs."*

Mr PA added:

*"My children used to often miss school because they didn't have uniforms or stationery. But now they are more focused on studying because all their school needs have been met."*

This BL said:

*"My children have become more diligent in school. They are no longer embarrassed because they now have proper uniforms and complete stationery. This really helps them to be more confident at school."*

Overall, the PKH program helps reduce economic barriers that affect children's learning motivation, so that they are more enthusiastic about going to school. Then regarding Student Attendance and Achievement, an interview was conducted with Mrs. A, a teacher at SD Negeri 1 Kadipiro, on December 16 2024, providing an additional perspective on the impact of PKH on students from beneficiary families. The attendance of students from PKH recipient families is more regular because their parents become more concerned about the importance of education. Apart from that, fulfilling basic needs such as uniforms and stationery makes students more comfortable going to school. Students' learning motivation increases after their educational needs are met. They become more confident in class, more active in learning activities, and show gradual improvement in academic grades, especially in subjects that require study supplies. Mrs Arum also mentioned that although PKH assistance was very helpful, some students still faced obstacles, such as a lack of support for studying at home. However, additional programs such as free tutoring and extracurricular activities at school are designed to help them overcome these challenges.

### **Health**

Changes in the Health of KPM Families Based on Interviews with AR Village Midwives on December 17 2024 are as follows:

*"PKH really helps beneficiary families (KPM) in improving their health. With the BPJS facilities through this program, they more regularly utilize health services at posyandu and puskesmas. The level of awareness of the importance of nutrition and immunization has also increased thanks to education from the Family Development Session (FDS). We also see a decrease in cases of malnutrition and stunting in this village, because many KPM are more concerned about a nutritious diet for their children."*

*"KIS greatly facilitates access to health for the community. Previously, many were reluctant to come to community health centers or hospitals because they were afraid of the high costs. With KIS, they are more comfortable having regular health checks, especially for children and pregnant women. However, there are still challenges in raising awareness at the start of the program, especially for people living in remote areas."*

Mrs. AR's statement shows that PKH has had a significant impact on public health, especially through access to BPJS and KIS. The education provided in FDS sessions increases understanding of the importance of health, including immunization and healthy eating patterns. This is very relevant in reducing cases of malnutrition and stunting in villages. However, challenges in the form of geographical constraints and low initial awareness still need to be overcome to ensure wider impact. Opinions of KPM Residents regarding the Use of Health Facilities Interview with Mrs. ST:

*"In the past, we often postponed going to the doctor because of the high costs. But now, with BPJS from PKH, we check our children's health more regularly. I also became more aware of the importance of nutrition after attending educational sessions."*

Interview with Mr PA:

*"KIS really helps us to access health centers. Before PKH, I rarely went to the doctor because I was afraid of the costs. Now, we use health services more often, especially for children."*

Interview with Mrs. BL:

*"With KIS, I feel more confident about taking my children to the puskesmas without worrying about costs. The children are also healthier because we are more aware of the importance of nutrition."*

Interviews with residents show that KIS provides a sense of security in accessing health services without worrying about costs. They check their children's health more regularly and better understand the importance of nutrition. This shows that PKH not only functions as financial assistance, but also as a sustainable health empowerment program. However, there needs to be regular evaluation to ensure that all KPMs utilize this facility optimally. Although the impact of PKH on health is very positive, there are several challenges that need to be considered, such as: (1) KPM in remote areas still have difficulty accessing health facilities; (2) Low initial awareness: There are still people who do not understand the importance of routine check-ups or immunizations; (3) Limited medical facilities: Posyandu and village health centers require additional support, such as medical equipment and health workers.

PKH has become an important catalyst in improving public health through BPJS and KIS facilities as well as health education in FDS sessions. By paying attention to these challenges, this program has the potential to have a greater long-term impact in improving the quality of life of beneficiary families. From the interviews with the respondents above regarding health, we can reveal that the Family Hope Program (PKH) has had a significant positive impact on the health of beneficiary families (KPM). Based on interviews with village midwives, Bu RI, this program has succeeded in increasing public awareness about the importance of immunization, nutrition and routine health checks. With the BPJS and Healthy Indonesia Card (KIS) facilities, KPMs can more regularly utilize services at posyandu and puskesmas without worrying about costs. This also has an impact on reducing cases of malnutrition and stunting, especially in children.

The opinions of KPM residents such as Ms. ST, Mr. PA, and Ms. BL confirm that KIS provides a sense of security in accessing health facilities. They check their children's health more regularly and become more aware of the importance of a nutritious diet. This program not only provides financial assistance but also empowers KPM to maintain the health of their families in a sustainable manner. However, several challenges still need to be considered, such as limited access for KPM in remote areas, low initial awareness of the importance of routine examinations, and limited medical facilities at posyandu and puskesmas. With additional support, such as improved facilities and more integrated education, PKH can have a greater long-term impact in improving the quality of life of beneficiary families.

### ***Roles and Challenges of PKH Facilitators***

Based on an interview with PKH assistant, Mrs. LN on December 20 2024, there are several important things related to strategies, challenges and evaluations in accompanying beneficiary families (KPM) of the Family Hope Program (PKH):

#### **Strategy in Ensuring MoE Follows FDS**

*"My strategy is to approach them personally and understand their respective conditions. I always try to build good relationships and full of trust, so that they feel comfortable sharing their problems. I also use an educational approach in FDS, such as providing real examples and encouraging discussion so that they are more actively involved."*

This approach helps increase KPM attendance and involvement in Family Development Session (FDS) sessions. For KPMs who are less active, companions make direct visits or reminders by telephone.

## Challenges in Carrying Out Tasks

*"The lack of participant attendance is one of the main challenges. To overcome this, I try to make a flexible schedule and adapt to their free time. Sometimes, I also involve community leaders or hamlet heads to encourage KPM participation."*

Another challenge is the high workload, especially due to differences in the level of understanding and motivation of KPM, as well as geographical conditions that are difficult to access. Companions overcome this by providing additional attention to KPM who need it, including through technology such as WhatsApp groups.

## Evaluation of the Effectiveness of FDS Materials

*"The FDS material is relevant, especially those related to health, education and financial management. However, there is some material that needs to be more practical and applicable so that it is easier to understand."*

Routine evaluations show that the majority of KPM find the FDS material useful, especially in increasing awareness of the importance of education and health. However, input from KPM indicated the need to adapt material to local needs, such as information on agricultural product management. PKH facilitators play a key role in ensuring the success of the program through personalized and flexible strategies. Despite facing challenges such as lack of participant attendance and geographical constraints, the facilitators succeeded in increasing KPM involvement in FDS. Regular evaluations show that FDS materials provide real benefits, although they need to be adapted to be more relevant to local needs. With additional support, such as further training for caregivers and better access to remote areas, the effectiveness of the program can be further improved.

## Collaboration with Stakeholders

Based on an interview with the Head of Kadipiro Village, Pak II on December 18 2024, the village government has a significant role in supporting the implementation of the Family Hope Program (PKH). The village government helps provide facilities for Family Development Session (FDS) activities, such as village halls, and supports PKH facilitators in the process of socializing and verifying beneficiary data. The village head also ensures that the program runs smoothly through coordination with assistants and related agencies to motivate the community to actively participate in the program.

### Village Head Quote:

*"We often coordinate with PKH facilitators to resolve various obstacles, such as motivating people to be more active in participating in FDS sessions or fulfilling program requirements."*

Obstacles faced by village governments include: (1) It is difficult to ensure that all beneficiaries are truly eligible, because there are people who do not meet the criteria but submit applications; (2) Lack of participation by some KPM in fulfilling program obligations, such as attending FDS or taking children to posyandu.

### Village Head Quote:

*"Sometimes, there are people who feel jealous because they are not registered as recipients, even though they actually do not meet the criteria."*

Interviews with the village midwife, Mrs. AR, and the teacher at SD Negeri 1 Kadipiro, Mrs. A, showed that there was close coordination between PKH facilitators and other stakeholders in supporting KPM education and health. Collaborate with PKH facilitators to ensure KPM utilizes health services, such as immunizations, pregnancy checks and child nutrition. Midwives also contribute to FDS sessions to provide health-related education. As stated by Mrs. AR below:

*"We often discuss designing FDS sessions that are relevant to community health needs. PKH facilitators also help remind KPM to come to the posyandu or puskesmas."*

Communicate with PKH assistants to monitor the attendance and learning progress of students from KPM families. This collaboration helps overcome the educational obstacles faced by KPM children. As the following quote from Mrs. A:

*"If there are students who face difficulties in learning, I immediately inform the assistants about this so that they can pay more attention to the student's family."*

Collaboration between the village government, PKH assistants, midwives and teachers is the key to the successful implementation of the PKH program in Kadipiro village. Even though there are obstacles such as low community participation or difficulty in verifying data, solid cooperation helps ensure that the benefits of the program can be felt optimally by KPM. With increased coordination and support from all parties, the impact of PKH on the education and health of KPM can be more significant in the future.

### **Obstacles in Implementing FDS**

Many KPMs stated that daily busyness was the main obstacle in participating in FDS sessions. Some of the reasons found include:

#### **Busy Taking Care of The Household or Work**

This is ST:

*"The problem is more about time, because I have to take care of the house and the children. Sometimes, the session schedule conflicts with household work, so I really have to manage my time well."*

Mr DD:

*"Sometimes it's difficult for me to attend FDS sessions because my schedule conflicts with work on the farm. But I still try to attend because I know the knowledge I gain is very important for our family."*

#### **Having to Leave Your Job**

Mr PA:

*"As a daily worker, I have to work from morning to evening. Sometimes it is difficult to find time to attend FDS sessions. But I always try to attend, even though sometimes I have to ask permission from the workplace."*

KPMs who have precarious jobs often find it difficult to leave income-generating activities to attend FDS sessions, even though they understand the importance of the material presented. PKH Facilitator, Mrs. LN, mentioned several operational obstacles faced in managing FDS:

#### **Too Many Participants**

In one FDS session, the number of participants is often too large so that the assistants find it difficult to provide personal attention to each KPM.

This LN:

*"Too many participants make the discussion less effective, and some participants tend to be passive during the session."*

#### **Differences in the Level of Understanding of KPM**

Some KPMs demonstrate good understanding of the material, while others require additional explanation. This makes it difficult for companions to adjust the tempo and delivery method.

This LN:

*"There are those who are very enthusiastic and quickly understand the material, but there are also those who tend to be passive or lack the confidence to speak."*

### Geographical Constraints

Access to FDS session locations is difficult, especially in villages with inadequate road infrastructure.

This LN:

*"Difficult geographic conditions, especially during the rainy season, make access to some areas a challenge."*

Facilitators often have to reschedule or make home visits to ensure that FDS materials are delivered to KPMs who are unable to attend. Village governments face challenges in providing adequate logistical support and facilities for FDS implementation. The Head of Kadipiro Village, Mr. Ibnu Indratmoko, revealed the following obstacles:

### Limited Facilities

Pak II:

*"We often face obstacles in providing adequate facilities, especially in remote villages. Village halls are sometimes not large enough to accommodate all FDS participants."*

### Lack of Initial Coordination

Village governments sometimes have difficulty arranging schedules and outreach regarding FDS, so that some KPMs feel they do not receive timely information.

Pak II:

*"We are trying to work together with PKH facilitators to improve coordination, but communication barriers with some KPM remain a challenge."*

Obstacles in implementing the Family Development Session (FDS) come from three main aspects, namely KPM, social assistants, and village government. KPM's business in daily work is one of the significant obstacles that causes low participant attendance. Many KPM, such as daily laborers and farmers, find it difficult to leave their jobs to attend FDS sessions. Apart from that, geographical obstacles in several areas that are difficult to access also worsen the situation, especially for KPM who live in remote areas. From the social assistant's point of view, the large number of participants in one session often makes it difficult to convey the material effectively. Facilitators also face challenges in dealing with differences in participants' levels of understanding, where some participants quickly understand the material while others require additional explanations. This condition reduces the effectiveness of discussions and interactions during the session. On the other hand, village governments face limited facilities, such as village halls that are not large enough to accommodate all participants, as well as logistical challenges in ensuring adequate access for FDS implementation.

To overcome these various obstacles, strategic steps are needed. Scheduling FDS sessions more flexibly according to KPM's free time can help increase participant attendance. Dividing participants into small groups is also important to increase the effectiveness of interactions and discussions. In addition, village governments can play a more active role by improving village hall facilities or providing more adequate alternative locations for implementing FDS. Finally, closer coordination between PKH facilitators, village government and KPM must be strengthened so that information and logistical support can be managed optimally. With these steps, it is hoped that the implementation of FDS can run more effectively and provide maximum benefits for KPM. This program not only aims to provide education to participants, but also becomes a means of empowerment that helps them improve their quality of life in a sustainable manner. Handling

obstacles with this collaborative approach will ensure that the main objectives of FDS can be achieved well.

### ***Solutions to Obstacles***

The Family Hope Program (PKH) companion, Mrs. LN, provided several strategies to increase participation and effectiveness in implementing the Family Development Session (FDS). The FDS implementation schedule is proposed to be more flexible, adapting to the availability of Beneficiary Families (KPM). This is especially important for KPMs who work or have other responsibilities, such as taking care of their family. With a more flexible schedule, it is hoped that the level of participant attendance can increase.

*"Lack of participant attendance can be overcome with flexible schedules and personal reminders via direct visits or telephone,"* said Mrs. LN.

A small group approach is considered more effective for increasing interactivity and discussion during FDS sessions. With a smaller number of participants, companions can focus more on accompanying each individual or family, so that the messages and material delivered are easier to understand. A personal motivational approach is also considered important. Showing the direct benefits of the material presented can encourage participants to be more enthusiastic about participating in the program. For example, exemplifying the positive impact of good financial management or correct parenting patterns on the welfare of their family.

Mr. AH, Head of Kadipiro Village, also provided input to support the implementation of FDS so that it is more optimal. The village will strive to provide more adequate facilities to support the smooth implementation of FDS. For example, providing a comfortable meeting room with audiovisual aids.

*"We will try to improve the facilities at the village hall so that FDS sessions can run more smoothly and comfortably,"* said Mr. Ibnu Indratmoko.

To increase public awareness about the importance of FDS, the village government will hold outreach through village meetings, involving community leaders, and using local communication media. This step is expected to strengthen public understanding of the benefits of the FDS program. Inviting KPM to participate in program planning can increase their sense of ownership of the program. In this way, KPM is not only a passive participant, but is also active in providing input and ideas to improve the implementation of FDS. Mrs. AR, village midwife, provided specific suggestions that focused on improving the health aspects of the PKH program, especially to support stunting prevention and improve the quality of family life. One suggestion is to add a special session in FDS on how to use local, nutritious food ingredients. This session not only provides theory, but also practical training to KPM, such as cooking healthy food with easily available ingredients.

*"We can provide training to KPM on how to use local, nutritious food ingredients,"* Ms Arinta said.

To reach remote areas, village midwives proposed establishing a mobile health service. This service can provide routine health checks to KPM who find it difficult to reach health facilities. In an effort to prevent stunting, a program of providing regular supplementary food to children at risk of malnutrition is proposed. This program can be supported by collaboration with the government or donor agencies. The health material in the FDS also needs to be expanded, including a clean and healthy lifestyle (PHBS), as well as reproductive health. By understanding the importance of PHBS, KPM can maintain a clean environment and family health. Meanwhile, reproductive health education helps families plan healthy pregnancies and prevent related health problems. With synergy between social assistants, village heads and village midwives, various obstacles in implementing FDS can be overcome. It is hoped that this collaboration will not only increase KPM participation, but also have a real impact on improving their quality of life.

## ***Economic Impact***

The interview results show that the Family Hope Program (PKH) has had a significant impact in helping to meet the basic needs of Beneficiary Families (KPM). This assistance is mainly used for food, education and small business capital needs. For example, Mrs. ST and Mrs. BL used some of the aid funds to start small businesses such as selling food or daily necessities. However, the majority of recipients admit that this assistance is not enough to lift them completely out of the poverty line. Previous research also supports these findings (Putri, 2016) stated that empowerment through Family Development Sessions (FDS) can increase the economic capacity of beneficiaries, but the results are still far from optimal. This is caused by limited resources and access to supporting facilities. Similar obstacles were found in Kadipiro Village, where several KPM remained dependent on informal work with low and unstable incomes.

To answer this challenge, several studies propose solutions that are more oriented towards developing local potential. (Malik & Mulyono, 2017) for example, emphasize the importance of skills training based on local potential to increase economic independence. By utilizing local resources, KPM can develop micro businesses that are relevant to the needs of the surrounding community. Training such as micro-enterprise management, craft production, or processing of local agricultural products can have a more sustainable impact than just providing cash assistance. In addition, the scope of PKH interventions needs to be expanded. Currently, aid is still focused on meeting basic needs, so aspects of economic empowerment have not been fully integrated. To increase KPM's economic independence, the government can allocate additional funds to provide greater access to business capital and entrepreneurship training based on local needs. For example, financial management training, digital marketing strategies, and product development can help KPMs manage their businesses more professionally.

Not only that, collaboration with the private sector and non-governmental organizations can also be the key to success. This partnership can open access to business assistance programs, equipment assistance, or a wider market. With a holistic and sustainable approach, PKH has great potential to not only help KPM meet their basic needs, but also push them out of the cycle of poverty through real economic empowerment. As an implementation step, regular evaluations need to be carried out to identify specific obstacles faced by KPM in running their small businesses. This is important to ensure that any interventions provided are appropriate to local needs and conditions. In this way, PKH can develop into a program that is not only social assistance, but also a catalyst for KPM's economic transformation.

## ***Impact on Children's Education***

The Family Hope Program (PKH) has a positive impact on the education of children from beneficiary families. Fulfilling basic needs such as uniforms, books and stationery has increased children's participation and motivation to learn. This can also be seen from the statement of the teacher at SD Negeri 1 Kadipiro, who noted that children from PKH families are more diligent in attending school. Research by (Sihotang & Sihotang, 2022) supports these findings, showing that financial support from PKH is able to reduce economic barriers to children's education, allowing them to be more active in the learning process. However, this program still faces challenges in supporting the quality of learning at home. One of the main obstacles is parents' limited education, which reduces their ability to help children learn. For example, some parents find it difficult to provide guidance in completing homework or understanding more complex subject matter. The need for educational literacy training for parents to increase their role in supporting children's learning.

To overcome this obstacle, the government needs to integrate tutoring programs and literacy training for KPM parents. Tutoring programs can help children overcome difficulties in core subjects, while literacy training for parents can improve their skills in supporting learning at home. In addition, the development of learning communities and the use of digital technology, such as free learning applications, can be innovative solutions to support children's education in

a sustainable manner. Through this holistic approach, PKH not only contributes to increasing access to education, but also the quality of learning for children from beneficiary families. By involving parents, schools and communities, this program can be more effective in creating a generation that is more educated and ready to face future challenges.

### ***Health Impact***

The results of interviews with village midwives show that the Family Hope Program (PKH), through the support of BPJS and KIS facilities, has had a positive impact on increasing access to health services, especially for children and pregnant women. Many beneficiary families can now take advantage of basic health services such as immunizations, pregnancy checks and child health care that were previously difficult to reach. Nutrition and health education provided through the Family Development Session (FDS) also contributes to reducing stunting rates and cases of malnutrition among children. This shows the role of PKH in increasing awareness of beneficiary families regarding the importance of health and nutrition. These findings are in line with (Fernandez & Olfindo, 2011) research in the Philippines, which shows that conditional assistance programs with a health component have a significant impact in improving the quality of life of beneficiaries. Programs such as PKH not only help recipients access health services, but also play a role in breaking the cycle of intergenerational poverty by improving maternal and child health. Healthy children tend to have a greater chance of growing into productive individuals in the future.

However, significant challenges are still faced, especially in remote areas. Limited physical access to health services is a major obstacle for families who live far from medical facilities such as posyandu or puskesmas. In some cases, poor geography and infrastructure make travel to health facilities difficult and expensive. Apart from that, limited medical facilities, such as a lack of health workers, equipment and medicines at posyandu or puskesmas, further worsen this condition. To overcome this obstacle, the government needs to strengthen health services in remote areas through various initiatives. One strategic step is to provide mobile health facilities, such as mobile clinics or mobile medical teams, which can reach beneficiary families in locations that are difficult to access. Apart from that, improving the quality of posyandu is also very important.

The government can provide trained medical personnel, such as midwives or nurses, and equip posyandu with basic medical equipment and medical supplies. Furthermore, collaboration with the private sector and non-governmental organizations can help expand the scope of these health services. For example, partnership programs with pharmaceutical companies or donor agencies can provide vaccines, nutritional supplements, or training for health workers in underdeveloped areas. With this integrated approach, PKH can be more effective in ensuring that all beneficiary families, including those living in remote areas, receive adequate and quality health services.

### ***Effectiveness of Family Development Sessions (FDS)***

Family Development Session (FDS) plays an important role in delivering education related to health, education and financial management to Beneficiary Families (KPM) of the Family Hope Program (PKH). Through this session, beneficiaries gain insights to improve their quality of life, such as understanding the importance of balanced nutrition, the importance of children's education, and simple strategies for managing household finances. PKH facilitators, such as Mrs. LN, often use a personal and flexible approach to attract participants' interest and encourage their attendance. However, the effectiveness of FDS is often hampered by a number of challenges. One of them is the large number of participants in each session, which ranges from 40 to 55 people. This condition limits interaction between companions and participants and reduces opportunities for participants to express opinions or ask questions. In addition, differences in levels of education and understanding between participants make the delivery of material

uneven. As a result, some participants found it difficult to apply the material presented in everyday life.

shows that the andragogical approach is very relevant in increasing the effectiveness of FDS. This approach, which focuses on adult learning, emphasizes the importance of participants' active involvement, the relevance of the material to their needs, and recognition of participants' lived experiences as a learning resource. Through this approach, participants not only understand the material more easily, but are also more motivated to apply it. To increase the effectiveness of FDS, several improvement steps need to be taken. Firstly, FDS sessions need to be organized in small groups, with the ideal number of participants being between 10 and 15 people. This allows the creation of a more interactive discussion atmosphere, where participants feel more comfortable sharing experiences and asking questions. Second, the material presented needs to be adapted to local needs. For example, in rural areas where the majority of people work in the agricultural sector, material could include agricultural product management, marketing strategies, or community-based skills training such as handicrafts.

Apart from that, FDS can also utilize digital technology to support learning. Companions can use educational videos or learning applications to enrich the method of delivering material. That way, participants do not only depend on face-to-face sessions, but can also learn independently. Regular evaluation of FDS implementation is also important to ensure that the materials and methods used remain relevant and effective. With a more personal approach, small groups, and material that is relevant to local needs, FDS can be a more strategic means of empowerment for KPM. This not only increases participants' understanding, but also empowers them to take concrete steps to improve their family's quality of life.

### ***Interagency Collaboration***

Inter-institutional collaboration is a key factor in the successful implementation of the Family Hope Program (PKH) in Kadipiro Village. The synergy between PKH facilitators, village midwives, village heads and related agencies creates comprehensive support in program implementation. The village head, for example, plays an important role in providing facilities for the implementation of the Family Development Session (FDS), so that activities can run smoothly. Meanwhile, village midwives provide health education that is relevant to community needs, such as the importance of pregnancy checks, preventing stunting, and fulfilling child nutrition. However, interviews with relevant parties also revealed several challenges that need to be overcome to increase program effectiveness. One of the main obstacles is problems in verifying beneficiary data, which is often inaccurate. Invalid data can lead to inaccurate program targets, so that aid does not reach those who really need it. Apart from that, the low level of community participation in FDS activities is also an obstacle. Many Beneficiary Families (KPM) did not attend due to lack of awareness or motivation, so the program impact was not optimal.

That solid inter-institutional collaboration can increase the effectiveness of community empowerment programs. In the context of Kadipiro Village, strengthening coordination between the village government, PKH facilitators and related agencies needs to be a priority. The first step that can be taken is to improve the beneficiary data verification system. This can be done by involving community leaders, such as hamlet or RT/RW heads, in the data collection process. This approach not only increases data accuracy, but also strengthens a sense of collective responsibility for the success of the program. In addition, to increase community participation, a more effective socialization strategy involving community leaders is needed. Religious leaders, traditional leaders, or respected figures in the local community can be a bridge in conveying the importance of participating in FDS activities. This community-based approach can increase people's trust and motivation to actively participate.

Village governments can also utilize digital technology to support coordination and communication between institutions. For example, using data-based applications to monitor program progress, document activities, and track KPM participation and needs. With this

technology, all parties involved can more easily access information and collaborate effectively. By strengthening collaboration, improving data verification, and increasing community participation, PKH can have a more significant impact in Kadipiro Village. Good collaboration not only ensures the program runs according to target, but also creates a community empowerment model that is sustainable and can be adopted in other regions.

## CONCLUSION

This research found that the strategy for empowering beneficiary families (KPM) through Family Development Session (FDS) activities in Kadipiro Village was implemented with a personal and flexible approach by social assistants. The assistant not only serves as a facilitator who delivers material, but also as a motivator who builds good relationships with KPM to ensure they actively participate. This strategy emphasizes participatory learning in accordance with the principles of andragogy, where participants are actively involved in discussions and sharing experiences. The material presented in the FDS covers three main areas, namely health, education and financial management, which aims to increase KPM's awareness, knowledge and ability to manage aid and overcome challenges in everyday life. The results of empowerment through FDS show a positive impact on various aspects of KPM's life. In the economic sector, assistance from PKH helps meet basic family needs, such as food, educational equipment and small capital for micro businesses. However, these results have not fully lifted KPM from poverty, because the amount of assistance is still limited compared to daily needs. In the field education, FDS has succeeded in increasing the learning motivation of KPM children by fulfilling basic educational needs such as uniforms, books and stationery. Children from beneficiary families show gradual increases in school attendance, self-confidence and academic achievement. In the health sector, FDS encourages KPM to use BPJS and KIS facilities more regularly for health services at posyandu and puskesmas. The nutrition education provided in FDS sessions helps reduce stunting rates and cases of malnutrition in villages, especially among children.

## SUGGESTION

However, obstacles to implementing FDS remain a significant challenge. One of the main obstacles is that the number of participants in each session is too large, often reaching 40-55 people, thereby reducing the effectiveness of the discussion and personal attention from the companion. In addition, KPM's daily activities, such as working in the fields or taking care of the household, are often the reason for the low level of attendance at FDS sessions. Differences in levels of understanding and motivation among KPM also add to the challenges for assistants in delivering material evenly. Geographical conditions that are difficult to access, especially in remote areas, worsen this situation, especially during the rainy season which hampers the mobility of KPM and companions. Limited facilities, such as adequate meeting rooms and learning aids, are also obstacles that influence the implementation of FDS. To overcome these obstacles, the proposed solution includes organizing FDS sessions in small groups with an ideal number of participants between 10-15 people. This small group will allow for more intensive interaction between mentors and participants, so that the material can be delivered more effectively. Apart from that, FDS material needs to be adapted to local needs, such as training in agricultural product management or community-based skills, so that it is more relevant to KPM conditions in Kadipiro Village. The use of technology, such as educational videos and learning applications, can be an effective tool to expand access to learning for KPM who cannot attend in person. The government also needs to improve logistical support by providing mobile health facilities for remote areas and improving village infrastructure so that access to program services is easier. Closer collaboration between social assistants, village government, village midwives and related agencies is a key factor for success. With good cooperation, this program can be implemented in a more targeted manner and have a more significant impact on beneficiary families.

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