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HOPE FAMILY EFFECTIVENESS PROGRAM (PKH) IN THE VILLAGE KEDUNGBANTENG KEDUNGBANTENG SUB-DISTRICT BANYUMAS DISTRICT

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ABSTRACT

This study entitled The Effectiveness of the Family Hope Program (PKH) in Kedungbanteng Village, Kedungbanteng District, Banyumas Regency. This study aims to describe and analyze the Effectiveness of the Family Hope Program (PKH) in Kedungbanteng Village, Kedungbanteng District, Banyumas Regency and find out what factors support and what factors hinder the Family Hope Program (PKH) in Kedungbanteng Village, Kedungbanteng District, Banyumas Regency. The research method used is descriptive qualitative. Determination of informants using purposive sampling method, and analysis of research results using an interactive model. The summary of this research are:. 1. Aspect of success achieved by the program, the implementation of PKH is good and those who are directly involved are PKH facilitators and PKH KPM. PKH facilitators have provided assistance to PKH KPM well. In the implementation of socialization, companions use the film screening method in order to provide an understanding of KPM. During the disbursement process, the assistance funds received by KPM are in accordance with the stipulated provisions, but there is a discount for administrative fees of Rp. 5000 to Rp. 10,000 per KPM and for KPMs it is not allowed to withdraw money at ATMs independently. 2. Aspect is targeting accuracy, each recipient of PKH social assistance has met the specified component criteria. However, there are still many economically disadvantaged communities who do not receive PKH social assistance, especially the elderly. This is due to the absence of re-collection and direct field inspection to ensure that the prospective KPM is not economically capable and only uses data from the central party which in fact must be re-checked for correctness. 3. Aspect is satisfaction with the program, PKH facilitators have worked well and are responsible for KPM. The assistant can direct the KPM in the implementation of PKH and can provide solutions to the KPM if there are obstacles in the implementation of the PKH. 4. Aspect of input and output, in the data validation process to determine candidates for KPM PKH only uses the Integrated Social Welfare Data from 2013 to the present. Therefore, there is a problem that many people do not receive the PKH social assistance. 5. Aspect is the overall achievement of goals, most of the community is ready to be graduated from PKH social assistance if they are considered economically capable. The community feels very helped by the PKH social assistance and the community feels the real benefits obtained from PKH social assistance such as being able to pay school fees for children, the nutritional needs of toddlers. The implications used to increase the effectiveness of the Family Hope Program (PKH) in Kedungbanteng Village, Kedungbanteng District, Banyumas Regency are as follows. 1. For beneficiary families, should be able to use the assistance provided properly in accordance with the provisions. It is hoped that you will always attend the socialization gathering which is held once a month in order to understand the contents of the socialization and so that you can be moved to volunteer to give up PKH social assistance if you are considered economically capable. xvii 2. For PKH administrators and assistants, namely all implementing parties involved in the implementation of PKH, they must carry out socialization as often as possible so that the community knows and knows the purpose of PKH, and it is hoped that people who already feel capable can be willing to release and give up PKH social assistance. Prior to determining a candidate for a KPM PKH, a visit and a review of the prospective KPM PKH home must be carried out which is registered from the DTKS data to ensure that PKH social assistance can be provided to the right KPM. Do not use old data and must use current data in accordance with data generated from field observations. 3. For the Social Service, namely updating of data in determining KPM candidates is carried out annually on a regular basis so that people who have not received assistance funds can be registered as PKH KPM and people who are considered capable can be graduated from the Family Hope Program (PKH) social assistance.

Keywords;

A. INTRODUCTION

Based on the definition of poverty from Kompas.com, poverty is interpreted as one of the problems experienced by state development, including Indonesia. Poverty is a state where the inability to meet basic needs such as food, clothing, shelter, drinking water. These circumstances are closely related to quality of life. Poverty also means scarcity of means of meeting the basic education needs, and the difficulty of access to education and jobs that can overcome the problem of poverty and get the respect it deserves as a citizen. Living in poverty does not mean living in poverty, lack of money and low levels of income, many other things such as health, low education, unfair treatment by law, the threat of crime.S Protection Program.

The Social Protection Program is also known internationally, with the term Conditional Cash Transfers (CCT) proving to be quite successful in tackling the mission faced in these countries, especially chronic poverty problems. Seeing this, Indonesia is deeply motivated to tackle poverty in Indonesia. One attempt at poverty alleviation, the Indonesian government launched the Family Hope Program (PKH) in 2007. PKH is a form of assistance given to poor families to have access and utilizes social services: health, education, food. With PKH, poor families will get help in a certain period. With the hope that PKH can contribute significantly to reducing the population. PKH was also created as an effort to accelerate poverty alleviation.

PKH targets are poor families with component criteria; the health of family members consisting of children aged zero to six years, pregnant women and the elderly. The educational component with the criteria of elementary school children2(SD)/Madrasah Ibtidaiyah (MI) or equivalent, Middle School childrenFirst (SMP)/Madrasah Tsanawiyah (MTs) or equivalent, school children Senior High School (SMA)/Madrasah Aliyah (MA) or equivalent, children aged sixup to twenty-one years who have not completed 12 years of compulsory education. Social welfare component with elderly criteria starting at sixtyyears and over in one family and persons with severe disabilities in onefamily. The Ministry of Social Affairs limits PKH assistance to one family. There are pregnant women, students, the elderly, or the disabled. Calculation of social assistance PKH is limited to a maximum of four people in one family. Restrictions this calculation is stated in the Decree of the Director of Social Security Family Number 02/3/BS.02.01/01/2020 concerning the Social Assistance Index.

PKH Beneficiary Families (KPM) must be registered and present at nearby health and educational facilities. PKH KPM obligations in the field of health include examination of the womb for pregnant women, provision of intake nutrition for early childhood, the elderly, and persons with disabilities, and immunizations as well as the body weight of toddlers and preschoolers. Obligations of KPM PKH in education is to register and ensure the attendance of members of PKH families in education units according to elementary school and school levels. The obligations of KPM PKH in the social field are for persons with disabilities and the elderly starting at sixty years old are required to take part in activities in the field of social welfare. The average population is classified as poor and only work as farm laborers whose income ranges from IDR 75, 000 up to IDR 150,000 per day, which is just enough to make ends meet daily needs.

The results of other studies show that the Family Hope Program impacts on changes in household consumption, as several countries are implementing Conditional Cash Transfer (CCT), for example, the United States, Turkey, Cambodia. The Family Hope Program which was implemented in Indonesia from 2007-2020 has the scope as in the picture below. The following is an overview and explanation of the Family Hope Program (PKH) 2007-2020.

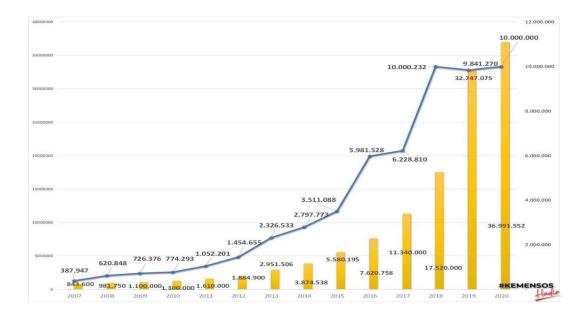


Figure 1. PKH Coverage 2007-2020

(Source: Family Hope Program, Ministry of Social Affairs Republic of Indonesia)

Based on the picture above, it can be seen that at the beginning, the implementation of the Family Hope Program in Indonesia in 2007, as many as387,947 families with a budget of IDR 843,600,000. In the year of 2008, PKH recipients were 620,848 families with a budget of Rp981,750,000. Then in 2009 there were 726,376 PKH, families with a budget of IDR 1.1 trillion. Furthermore, for PKH recipients in 2010 there were 774,293 families with a budget of IDR 1.3 trillion.PKH beneficiaries in 2011 were 1,052,201 families with a budget of IDR 1.6 trillion. In 2012 there were 1,454,655 PKH beneficiaries with a budget of IDR 1.8 trillion. The number of PKH beneficiaries in 2013 there were 2,326,533 families with a budget of IDR 2.9Trillion. The number of families receiving PKH assistance in 2014 was 2,797,773 families with a budget of IDR 3.8 trillion. In 2015, PKH recipients are 3,511,088 families with a budget of IDR 5.5Trillion. Furthermore, families who received PKH assistance in 2016, as many as 5,981,528 families with a budget of IDR 7.6 trillion. Among PKH beneficiaries in 2017 there were 6,228,810 families with a budget of IDR 11.3Trillion. In 2018 there were 10,000,232 families with a PKH recipients budget of IDR 17.5 trillion. In the following year, PKH beneficiaries in 2019, there were 9,841,270 families with a budget of IDR 32.7Trillion. PKH recipients in 2020 are 10,000,000 families with a budget of IDR 36.9 trillion.

Based on the target of the Family Hope Program, namely the poor community in Indonesia, the table below shows poor people in Banyumas Regency. Here is a table of the number of poor people in Banyumas Regency in 2018-2020.

Table 1. Number of Poor Population in Banyumas Regency in 2018-2020.

| Year | Number of Poor Population(Thou sands of People) | Poverty Rate(Percent) | Poverty Line (RP/Capital/Mon th) |
|------|---|--------------------------|--|
| 2018 | 226,20 | 13,50 | 366,422 |
| 2019 | 211,60 | 12,53 | 385,140 |
| 2020 | 225,84 | 13,26 | 406,250 |

(Source: Central Bureau of Statistics for Banyumas Regency 2021)

Based on the table above, it can be seen that the number of poor people in Banyumas Regency in 2018 there were 211.60 people with, people poverty of 12.53% and a poverty line of 385.140 (RP/Capital/Month). Whereas in 2020 there will be an increase, namely the number of poor peopleas many as 225.84 with a poverty rate of 13.26% and the linepoverty of 406.250 (RP/Capital/Month).

Referring to the implementation of the Family Hope Program namely carried out in every village in Indonesia, the following is a table of the number of KPM PKH in each village in Kedungbanteng District, RegencyBanyumas 2018-2020.

Table 2. Number of KPM PKH in each village in the Kedungbanteng subdistrict Banyumas Regency 2018-2020.

| No | Village | Number of Population (Person) | KPM PKH 2018 year | KPM PKH 2019 year | KPM PKH 2020 year | Order of Poverty the |
|----|---------------|-------------------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| 1 | Baseh | 4293 | 240 | 331 | 338 | 4 |
| 2 | Beji | 9230 | 442 | 467 | 467 | 1 |
| 3 | Dawuhan Kulon | 3535 | 193 | 193 | 199 | 12 |
| 4 | Dawuhan Wetan | 5067 | 258 | 271 | 271 | 7 |

| 5 | Kalikesur | 2754 | 217 | 229 | 240 | 10 |
|----|----------------------|------|-----|-----|-----|----|
| 6 | Kalisalak | 3098 | 184 | 253 | 272 | 6 |
| 7 | Karangnangka | 4558 | 160 | 196 | 194 | 13 |
| 8 | Karangsalam Kidul | 5056 | 100 | 102 | 103 | 14 |
| 9 | Kebocoran | 5347 | 393 | 409 | 407 | 3 |
| 10 | Kedungbanteng | 4580 | 310 | 310 | 310 | 5 |
| 11 | Keniten | 5118 | 234 | 287 | 270 | 8 |
| 12 | Kutaliman | 5264 | 412 | 412 | 420 | 2 |
| 13 | Melung | 2358 | 231 | 231 | 231 | 11 |
| 14 | Windujaya | 2726 | 237 | 251 | 257 | 9 |

(Source: PKH Secretariat Office of Social Affairs and Village Community Empowerment Banyumas Regency in 2021)

Based on the table data above, it can be seen that as an ingredient comparison between Kedungbanteng Village and other villages located in Kedungbanteng District, Kedungbanteng Village is at level 5, the highest number of PKH KPM and the numbers are constant from 2018-2020.

In determining the amount of KPM data, population data is needed from every village. The following is a recapitulation of residents in Kedungbanteng Village, Kedungbanteng District, Banyumas Regency.

Table 3. Recapitulation of Villagers of Kedungbanteng District Kedungbanteng, Banyumas Regency.

| No | Group | Number of Citizens |
|----|-------|--------------------|
| 1 | RW 1 | 1.705 |
| 2 | RW 2 | 1.028 |
| 3 | RW 3 | 1.300 |

| 4 | RW 4 | 1.273 |
|---|--------------|-------|
| | TOTAL NUMBER | 5.305 |

(Source: Kedungbanteng Village Secretariat, Kedungbanteng District Banyumas Regency)

Based on the table above it can be seen that the population in Kedungbanteng Village, Kedungbanteng District, Banyumas Regency RW 1 group of 1,705 residents. RW 2 group of 1,028 residents.RW 3 group of 1,300 residents. RW 4 group of 1,273 residents. The total number is 5,306 residents.

The number of poor people in Kedungbanteng Village, Distric tKedungbanteng Banyumas Regency 2021 as many as 1,607 residents.

From the data on the number of residents in Kedungbanteng Village, District Kedungbanteng, Banyumas Regency, the number of KPM PKH can be known. The following is a table of the number of Program Beneficiary Families (KPM). Hope Family (PKH) in Kedungbanteng Village, Kedungbanteng District Banyumas Regency in 2018-2020.

Table 4. Number of PKH KPM in Kedungbanteng Village, Kedungbanteng District Banyumas Regency in 2018-2020.

| No | Group | KPM PKH 2018 year | KPM PKH 2019 year | KPM PKH 2020 year |
|----|-------|----------------------|----------------------|----------------------|
| 1 | RW 1 | 120 | 120 | 120 |
| 2 | RW 2 | 48 | 48 | 48 |
| 3 | RW 3 | 66 | 66 | 66 |
| 4 | RW 4 | 76 | 76 | 76 |
| | TOTAL | 310 | 310 | 310 |

(Source: Data from the Head of the PKH Group in Kedungbanteng Village, District Kedungbanteng Banyumas Regency in 2021)

Based on the table data above, it can be seen that the number of KPM inRW 1 as many as 120 KPM. Then in RW 2 there are 48 KPM. At RW 3there are 66 KPM.

While in RW 4 there are 76 KPM. As for the number of KPM from 2018 to 2020 there was no increase and nodecrease.

Based on the Guidelines for the Implementation of the Family Hope Program(PKH) regarding the criteria for PKH beneficiaries, the following is a table of criteria and number of Beneficiaries (PM) of the Family Hope Program (PKH) in the VillageKedungbanteng Kedungbanteng District, Banyumas Regency in 2018-2020.

Table 5. Number of PKH Beneficiaries in Kedungbanteng Village, District Kedungbanteng, Banyumas Regency, 2018-2020

| No. | Beneficiary Criteria | PM PKH 2018 | PM PKH 2019 | PM PKH 2020 |
|-----|-----------------------------------|----------------|----------------|----------------|
| 1. | Pregnant mother | 8 | 8 | 8 |
| 2. | Children Aged 0-6 Years | 87 | 87 | 87 |
| 3. | SD / MI / equivalent children | 153 | 153 | 153 |
| 4. | SMP/MTs/equivalent students | 94 | 94 | 94 |
| 5. | Children of SMK / MA / equivalent | 55 | 55 | 55 |
| 6. | Disabilities | 1 | 1 | 1 |
| 7. | Elderly | 102 | 102 | 102 |

(Source: PKH Facilitator in Kedungbanteng Village, Kedungbanteng District Banyumas Regency 2018-2020)

Based on the data above, it can be seen that the number of PM PKH in the village of Kedungbanteng, Kedungbanteng District, Banyumas Regency in 2018-2020 is still the same and has not experienced an increase or decrease in numbers KPM PKH. For re-data collection such as population movements, deductions fromchildren who have graduated from SMP/MTs/equivalent and SMK/MA/equivalent, as wellPM PKH beneficiary members die every year on a regular basis.

After conducting pre-research by researchers in Kedungbanteng Village, District Kedungbanteng, Banyumas Regency, they found a problem, namely data inaccuracy. This is related to the inaccuracy of the data in the determination of

Beneficiary Families (KPM), such as the status of the middle-aged program, while residents who are married and still at a productive age (15-64 years) are instead registered as beneficiaries of the Family Hope Program. This is related to the Family Hope Program (PKH) which aims to improve people's standard of living, especially in Kedungbanteng Village, Kedungbanteng District, RegencyBanyumas is hampered by being able to improve the standard of living of the community, Village.

B. METHODS

This study uses a descriptive qualitative research method. The target of this research is the Program Beneficiary Families Family of Hope (PKH), Facilitator of the Family Hope Program (PKH), and Kedungbanteng Village Officials, Kedungbanteng District, RegencyBanyumas. The informant determination technique uses a purposive sampling method. Data collection techniques are carried out by observation, interviews, and documentation.

C. RESULTS AND DISCUSSION

Efektivitas Program Keluarga Harapan (PKH) Di Desa Kedungbanteng Kecamatan Kedungbanteng Kabupaten Banyumas

- Aspects of Program Success
 - a. Implementation of the Program in accordance with the Terms and Procedures Implementation

The effectiveness of a program can be seen from its functioning or no provisions and procedures that have been made in order to maintain the ongoing process of activities. Aspects of the success achieved by the program includes the implementation of the program according to the provisions and implementation procedures and socialization, time, and amount of funds received.

Based on the Regulation of the Minister of Social Affairs Number 1 of 2018Regarding the Family Hope Program (PKH) article 32, the following isprovisions and implementation mechanism of PKH.

- 1) Planning
- 2) Determination of PKH participant candidates
- 3) Data validation of prospective PKH beneficiaries

- 4) Determination of PKH Beneficiary Families
- 5) Distribution of PKH social assistance
- PKH Assistance
- 7) Increasing family capacity
- 8) Verify the commitment of PKH Beneficiary Families
- 9) Updating data on PKH Beneficiary Families
- 10) PKH membership transportation

Based on research results obtained through the process interview regarding the provisions and procedures for implementing the ProgramHope Family (PKH) in Kedungbanteng Village, DistrictKedungbanteng, Banyumas Regency, is already good because of its implementationPKH is in accordance with the provisions and procedures for implementing PKHRegulation of the Minister of Social Affairs Number 1 of 2018 Concerning ProgramsFamily Hope (PKH) Article 32.

b. Socialization, Time, and Amount of Funds Received

Based on the Family Program Implementation Manual, it is hoped that in 2021 the purpose of carrying out the socialization isto increase understanding and equalization of perceptions for central and regional stakeholders between Central PKH Implementing HRand Regions, as well as the community, need to be socialized as between one key to the successful implementation of PKH.

In implementing PKH in Kedungbanteng Village, District Kedungbanteng, Banyumas Regency for the time, the socialization was carried out once a month and disbursement is done once every three months. Then, regarding the amount of funds received by KPM PKH determined according to the KPM PKH component.

Socialization is done by the method of screening of films, brochures, and explanations. Once the implementation time of socialization, every month only one time, and for that fundreceived by each KPM is appropriate the amount is just that there are pieces of each KPM for administrative costs.

2. Aspects of Target Accuracy

a. In accordance with the Stipulated Criteria

In implementing PKH in Kedungbanteng Village, DistrictKedungbanteng Banyumas Regency is still not effective, especially in terms of determining KPM candidates, because there are still many residents with criteria for the elderly who have not yet received PKH social assistance and the number of citizens who are already able but still remainget PKH assistance. This triggers social jealousy in society. There are also people with disabilities but do not receive PKH assistance.

Every KPM that receivesPKH assistance is appropriate with component criteria specified in the rules and implementation provisions of PKH, it's just that there is one underprivileged elderly person economically and really needs help and data collection, so things like it still village of Kedungbanteng.

3. PKH Program Satisfaction Aspects

Data reduction and excellent service is one of the important keys in every program run by an agency, organization, and group. In this case, the service in question is the service of the implementation of assistance programs provided by the government former privileged citizens. One of the goals of giving excellent service is to provide satisfaction to customers. That is in this case, the customer is the beneficiary Family Hope Family Program.

a. Services provided

Services and assistance in the implementation of PKH in the village of Kedungbanteng, Kedungbanteng District, Banyumas Regency good. The companion is already responsible for the assigned task given.

The performance of the PKH assistant is good. The companion already responsible for KPMB is his responsibility. All problems can be solved with good and uncomplicated.

b. Whether the PKH Program is Effective or Not

Whether the PKH Program is Effective or Not in implementing PKH in Kedungbanteng Village, DistrictKedungbanteng, Banyumas Regency as a whole is implemented and the procedure is good, but there are still some things causing the ineffective implementation of

assistance PKH such asthere are many elderly people who have not received assistanceresidents with disabilities do not get assistance, nofield visits in determining KPM PKH.

The Family Hope Program in the Village of Kedungbanteng is already running well. However, there are problems occurring, including the absence of data collection again to determine the KPM, the latest, so there are still many seniors. Seniors are not registered to forget PKH assistance, there is delay in dispensing funds, they forget there is a disability that does not get PKH assistance.

4. Input and Output Aspects

Input and output in a system is the most important thing in a programme. In this case, the intended input and output are the input is data on prospective PKH beneficiaries and the output is data results of determining the KPM candidate to become the result of a PKH KPM.

a. Data validation

In implementing PKH in Kedungbanteng Village, DistrictKedungbanteng Banyumas Regency for the data validation process. KPM candidates only use data from the central government and DTKS(Integrated Social Welfare Data) from 2013 now and no redata collection from the parties companion, so that the incoming data as input remains the same. The data validation process for determining KPM PKH only uses data from DTKS from 2013 up to now and no review was carried out directly.

c. The data that is generated is proper Criteria

In the data collection process carried out by the company, we only use data from the center and no data is generated from data collection. In terms of criteria, yes meet the specified components, but those that get PKH assistance on average can already be considered capable economically.

The resulting data is appropriate according to the criteria set out in the implementation of the Family Program, Hope and there is KPM supervision by PKH assistants and there is supervision from the parties.

5. Aspects of Goal Achievement

Achievement of overall goals in the Family Program Hope is the expected result of the goals that have been determined. These objectives include the achievement of graduation targets KPM PKH and the welfare level of KPM, which continues to increase continuously.

a. Achieved Graduation

PKH Graduation in Kedungbanteng Village, District Kedungbanteng, Banyumas Regency has not yet reached its target. But there are already some who are ready if the KPM are graduated from PKH, but there are also who are not ready to be graduated for some reason. KPM PKH have directly benefited from assistance of PKH social assistance and they are assisted by PKH social assistance.

Most of the people who get PKH social assistance graduate from PKH and are assigned as a capable society, the economy is ready to give up aid, but there are some societies that they experience.

b. Reduction of Poor Families

Reducing poor families and increasing the welfare community is one of the objectives of the Family Program Hope (PKH). Implementation of PKH in Kedungbanteng Village, Kedungbanteng District, Banyumas Regency can help lighten the burden of life experienced by KPM and KPM helped by PKH social assistance.

Communities designated as KPM PKH feel the benefits they get from PKH social assistance, because it can directly lighten the load to meet that need society needs. Society feels very helpful with the help of PKH social services.

D. CONCLUSION

Based on the analysis of research results and discussion, a conclusion can be made of the Effectiveness of the Family Hope Program (PKH) in the Village Kedungbanteng, Kedungbanteng District, Banyumas Regency as of. 1. Aspects of Program Success: In this aspect the implementation has been good and those directly involved are PKH assistants and PKH KPM. However, in the disbursement process, KPM is not allowed to take aid funds independently and is directed to collect aid funds simultaneously by an agent determined by the PKH Facilitator. 2. Aspects

of Accuracy in Targeting: In determining the target of aid, there are still a lot of economically disadvantaged people who do not get assistance with PKH social services, especially the elderly. This is due to the absence of re-data collection and field observations directly to ensure that the prospective KPM is economically incapable as well of only using data from the central party that actually has to be checked to repeat the truth. 3. Aspects of Program Satisfaction: PKH Facilitators have worked well and are responsible for KPM and can provide solutions to KPM if there are obstacles in implementing PKH. 4. Input and Output Aspects: In the data validation process to determine PKH beneficiary, candidates only use DTKS data from 2013 to now. Because of that, there are many people problems who do not receive PKH social assistance. 5. Aspects of Achievement of Goals: Most of the community is ready to volunteer to be released from PKH social assistance if it is considered economically capable. The community feels very helped by PKH social assistance and the community feels the real benefits obtained from PKH social assistance.

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