

## **THE ANALYSIS OF SOCIAL ASSISTANCE INFLUENCE TO EDUCATION PARTICIPATION IN THE PROGRAM FAMILY HOPE POST-EARTHQUAKE**

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### **Abstract**

Inequality in inhabitants is one of the negative impacts of uneven development that causes poverty. In 2007, the Indonesian government has been striving to accelerate poverty reduction through the Family Hope Program (PKH) with the Conditional Direct Cash Assistance (BLTB) scheme, known internationally as the Cash Conditional Transfer (CCT). All this time, various studies have assessed that the program has succeeded in encouraging the participation of beneficiary families in achieving welfare in Indonesia. However the facts showed that there is an poverty increase in the city of Mataram after earthquake, even though the family hope program runs normally. Therefore, this research was conducted to see the strength of the social assistance influence on one indicator of welfare, education participation after the earthquake. The survey method was used to obtain information on the distribution of 122 KPM PKH respondents in Bertais village, where the location was severely affected. The results showed that the significance of the influence on cash assistance on the level of education participation was 0.775 or 77.5%. Meanwhile, the significance effect of assistance services on the level of education participation was 0.687 or 68.7%. There is a positive influence on the variable of social assistance (dependent) on educational participation and childcare (independent). Thus it can be concluded that the earthquake did not disturb the PKH cycle so much that it did not become one of the factors causing the increase in poverty in the City of Mataram.

**Keywords:** Social Assistance, Educational Participation, Family Hope Program.

### **INTRODUCTION**

The main impact of this inequality is the increase in children birth, especially from low economic households, they did not getting the same start in life as children from well-off families. As a result, they grow with education, health, social-culture and the economy which is not so supportive of their quality of life in the future. Although there are efforts to equalize economic development to overcome inequality in Indonesia, the government besides that must also pay attention to the development of the quality life of the people in facing the challenges this gap. Therefore, the impact caused by this problem namely social problems also continues to increase.

In addition, there is also structural poverty that is defined (Alfian, 1980) as poverty that is

suffered by a group of people because the social structure of the community cannot use income sources and cannot access public facilities (education, health, communication, etc.) that are actually available for them. The factors causing poverty also develop along with the emergence of modernization theory, as explained by McClelland in Martono (2018) that one of the causes in the decline of Third World countries is the lack of achievement motivation.

Modernization theory focuses on individual behavior or attitudes. This is motivated by the mentality of people who are lazy to work and always expect help from others. This statement needs to be underlined so that poverty is not always caused by structural aspects. However, the attitude of resignation or culture of fatalistic values adopted by the community also causes poverty. (Martono, 2018)

As the Development Program Agency under the United Nations (United Nations Development Program / UNDP) in the 2016 Human Development Report reported that Indonesia's Human Development Index (HDI) in 2015 was ranked 113, down from 110 in 2014. The data shows that the quality of Indonesian who the prosperous life is getting lower, so that this case is a common concern to be given the solutions.

The efforts to accelerate poverty reduction due to inequality in Indonesia have been implemented by the Government since 2007 through the Conditional Direct Cash Assistance Program (BLTB) which is now known as the Family of Hope Program (PKH). This program is one of the steps towards the realization of a social protection system that is also known internationally as the Conditional Cash Transfer (CCT). In the short term, conditional cash social assistance is expected to reduce the burden of spending on poor families. Then in the medium term it can change the behavior of beneficiary families in accessing health and education services in a sustainable manner so as to produce a healthy and smart generation. While for the long term, it will break the inter-generational poverty chain (2016 PKH Implementation Guidelines).

The 2019 PKH implementation manual defines that the Family Hope Program (PKH) is one form of household protection that is vulnerable to social risks. Therefore PKH targets three components, namely the education component that requires PKH children to be registered and present at school, the health component with the obligation to access prenatal and postnatal services from health professionals (birth process, immunization, growth monitoring) regularly, and finally, the component of social welfare for persons with disabilities and the elderly.

Besides that the most important thing in the effort to change behavior is by requiring participants to attend a Family Ability Improvement Meeting (P2K2) or Family Development Session (FDS). P2K2 / FDS is designed to help PKH families enter a period of awareness transition to develop through the delivery of life skills messages to PKH participants so that positive behavior changes occur. In this case the social assistance provided education about Education and Childcare (PPA),

Health and Nutrition (KG), Family Financial Management (PKK), Child Protection (PA), and Disability and Elderly Social Welfare Services (LKSDL).

The social-economic impact of social protection published by the International Social Security Association in 2016 believes that the CCT program is quite successful in overcoming chronic poverty in several countries such as Argentina, Bangladesh, Brazil, Camboja, Chile, Colombia, Egypt, Guatemala, Honduras, Jamaica, Mexico, Panama, Peru, Nicaragua, the Philippines, Turkey and the US.

The evaluation results according to PROGRESA in Mexico, PETI in Brazil, and Atencion a Crisis in Nicaragua stated that conditional cash transfers can provide effective incentives for investment in human resources in families on the poverty line. CCT not only affects the overall level of consumption, but also the composition of consumption. There is some evidence that beneficiary households spend more on high-quality food and nutrition. Besides that in the education sector, the level of school registrations among girls and boys is balanced and has been proven to reduce gender disparities in Bangladesh, Pakistan and Turkey (Roth et al., 2016).

The implementation of CCT in Indonesia has increased each year, where starting in 2016 there was a significant target of recipients from as many as 6 million families to 10 million families in 2018. If it compared to CCT implementing countries in the world, Indonesia's coverage is still far from the coverage of Brazil which reached 27 million in 2014. Evidence of the success of the Family Hope Program is to reduce poverty from the number of poor people of Indonesia from 10.12% as of September 2017 to 9.50% as of September 2018 or decrease in the number of poor people by 0.62%. In addition it has the highest level of effectiveness against decreasing coefficient from the number 0.391 in 2017 to 0.380 in 2018. (BPS Bappenas, 2018)

Frederico Gil Sander, Principal Economist for the World Bank in Indonesia, stated that to support inclusive growth, Indonesia needs to spend more effectively on education, spend more on priority areas such as infrastructure, health, social assistance, and collect more income in ways that efficient and support

growth so spending also increases (World Bank Press-Release, 2018).

CCT PKH succeeded in increasing household consumption of beneficiaries in Indonesia by 4.8%. In the field of education, primary and junior secondary enrollment rates are in line with PKH's goal of encouraging education access for school-age children beneficiaries of 2.3% at the elementary level and 4.4% at the junior high level. While the influence on health also increased to 7.1% by looking at evidence of family visits during pregnancy, post-delivery, immunization, and health checks and child growth in Indonesia. (TNP2K, 2015)

Based on the concepts of social protection and poverty alleviation above, so, the argument developed by the government in providing conditional cash social assistance is that if PKH participants do not fulfill the prescribed obligations, they will receive suspension of aid so that they are compelled to behave to meet the standards of living for a prosperous family. (Technical Guidelines for Distribution of Non-Cash Bansos in 2018). In the sense that the system is run will be maintained and affect their habits. This assumption is reinforced by Talcott Parsons' action system theory (in Martono, 2018: 58) explaining that the social system will be maintained if it fulfills the AGIL (Adaptation, Goal Attention, Integration, Latency) function.

Weber explained that social and motivational relationships are much influenced by formal rationality which includes the actor's thought process in making choices about tools and goals. As for the relationship that is built based on coercive / pressure so that social engineering occurs from the people who have the authority (power) over the powerless. One type of action that can explain PKH participants' reasons for change is instrumentally rational is the actions that are determined by expectations that have goals to achieve in human life that with the means to achieve this have been rationalized and calculated in such a way as to be pursued or achieved by who did it (Ritzer, 2012: 215).

Even so, the government service system which is mention above has a weakness because it is considered to be able to create dependency on the expectation of providing conditional social assistance (reward). In the theory of social exchange which is discussing behavioral

sociology explains that there are rewards and disadvantages in the relationship between actor behavior and the environment. If the reaction give the rewards so the behavior will be repeated or vice versa. Reward is defined as the ability to strengthen behavior, while loss reduces the likelihood of behavior (Ritzer, 2012: 708-709).

Whereas the government does not expect that when its membership period ends, their life will become to the people who weaker to change because they did not get any more help. The validity period of PKH membership can only be enjoyed for 6 years. Then there was a re-certification for PKH participants who did not experience economic changes. Data on the development of PKH participant re-certification in the 2007-2008 cohort shows that the transition of PKH participants was more than 60% and above compared to an average of around 30% (TNP2K, 2014).

The attitude of KPM's independence (participation) in achieving the standard of life quality is a concern. So, the researchers intend to examine the significance of the influence of PKH social assistance on education and health participation. However, the characteristic of the research that distinguishes it from other PKH studies is that the target respondents were victims of the earthquake in Mataram City. Various local health and education facilities or services were damaged so that they could not be accessed properly. This condition certainly resulted in discontinuity in the efforts to establish educational and health participation for PKH beneficiary families.

In the end of this this research, the researchers would try to reveal two possibilities, namely; if there is a significance of the social assistance on the positive participation level so it can be concluded that post-earthquake conditions do not affect the PKH cycle. However, if the results show a negative significance, it can be stated that the post-earthquake condition is one of the factors that inhibits measures of education participation and childcare as an indicator of welfare.

## **THE RESEARCH METHOD**

The researchers choose the quantitative explanatory research to examine the hypothesized relationship between all the

variables. The research problems formulated requires this research identify the factors that influence the outcome and the function of engagement or understanding of outcome predictions. The approach used was a survey which is the researchers would describe the effect of social assistance on the level of education participation and parenting of PKH beneficiary families affected by the earthquake. Technically, the researchers used a cross-sectional strategy by collecting data one at a time (Creswell, 2014). The advantage gained from this cross-section survey is that the presentation of the data is tied to the characteristics of each individual, the speed in presenting data and moreover the economics of research activities.

The total number of PKH beneficiaries in the City of Maratam was 17,520 KPM spread across 6 Districts. Meanwhile, there were 1,053 families of PKH participants who were affected by the earthquake. The population of this study is PKH beneficiaries with earthquake victims. The total population is 603 KPM domiciled in Bertais Village, Sandubaya District.

The sample procedure used is non-probability with a purposive sampling technique (Sugiyono, 2001). Characteristics of the education component respondent group are mothers who have children after early age or school. The number of the sample respondents were those who had 3-4 family members so that 122 respondents were found.

This survey instrument used the questionnaire method that starts with categorical measurements. Data acquisition classified to include variations as much as possible. The purpose of this measurement is to determine the tiered intensity of the categories or symptoms to be investigated (Slamet, 1993). There are four categories that are the object of measurement in this study. First, the use of cash assistance by KPM which was affected by the earthquake. Second, the utilization of assistance services in KPM affected by the earthquake disaster. Third, KPM actions in meeting the educational and childcare needs.

Based on the above categories, the researchers conducted modified instrument by

making a set of question items that can answer the research problem formulation. Questioners or questionnaires are not to judge the right or wrong of the respondent's answers and the data must be kept confidential. In addition to including the instructions for filling out the questionnaire, the researcher also uses language that is simple and easy to understand as much as possible.

Then the study used a Likert scale to measure the effect of PKH social assistance on the participation of education and health of beneficiary families. This scale assesses the changes in attitudes or behavior desired by researchers by submitting several statements to respondents (Sukardi, 2008). Then the respondent is asked to provide a choice of score or response to the measurement scale provided. Encoding is useful to facilitate and speed up data entry. The scale used in this research instrument is the ordinal scale. The arrangement of the scale is 5 = Very Often (SS), 4 = Frequently (S), 3 = Quite Often (CS), 2 = Sometimes (KK), 1 = Never (TP).

As for each item of the questions on the education component questionnaire given a sequence of codes X1.1 to X1.5 which is a question item from the Cash Assistance variable, X2.1 to X2.5 is a question item from the Mentoring Services variable, and Y1 to Y10 are question items from the Educational Participation variable.

After all the questionnaires are answered full and correct as well as have gone through the coding, so the next step is to process the data by entering data from the questionnaire into the computer program package, namely SPSS for Window. The standing for SPSS namely Statistical Program For Social Science, is a package of statistical programs that are useful for processing and analyzing data easily and quickly. The capabilities that can be obtained from SPSS include the process of all forms of data types, data modification, making tabulations in the form of frequency distributions, descriptive statistical analysis, advanced analysis that is simple or complex, making graphics, etc.

**FINDING AND DISCUSSION****The Cash Assistance Recipients by KPM PKH who have an Education Component****Table 1. Number of Assistance received by KPM PKH based on Category**

| Category        | Amount of Cash Assistance |                           |                              |                 | Total  |         |
|-----------------|---------------------------|---------------------------|------------------------------|-----------------|--------|---------|
|                 | Rp. 225.000 - Rp. 375.000 | Rp. 450.000 - Rp. 750.000 | Rp. 1.000.000 -Rp. 1.200.000 | > Rp. 1.250.000 |        |         |
| Early childhood | Amount                    | 0                         | 0                            | 6               | 4      | 10      |
|                 | %                         | 0,00%                     | 0,00%                        | 60,00%          | 40,00% | 100,00% |
| School children | Amount                    | 4                         | 43                           | 61              | 4      | 112     |
|                 | %                         | 3,60%                     | 38,40%                       | 54,50%          | 3,60%  | 100,00% |
| Total           | Amount                    | 4                         | 43                           | 67              | 8      | 122     |
|                 | %                         | 3,30%                     | 35,20%                       | 54,90%          | 6,60%  | 100,00% |

**Source:** The attachment data is processed with SPSS

The table above provides the information that the PKH KPM category that received the most cash assistance was Rp. 1,000,000 - Rp. 1,200,000 are those who have school-age children. While only a few namely 10 KPM which has a category of early childhood. As many as 60% get

1,000,000 - Rp. 1,200,000 and 40% get more than Rp. 1,250,000. As for quite a lot of those who received assistance in the amount of Rp. 450,000 - Rp. 375,000 which is 38.40% categorized as having school children.

**Table 2. Disbursement of Cash Assistance Performed by KPM PKH Based on the Entry Year**

| KPM Force Year of Entry |        | BUT Disbursement Frequency    |   |   |   | Total  |
|-------------------------|--------|-------------------------------|---|---|---|--------|
|                         |        | 1 disbursement stage per year | 2 times the disbursement stage per year | 3 times the disbursement stage per year | 4 times the disbursement stage per year |        |
| 2012                    | Amount | 0                             | 5                                       | 8                                       | 14                                      | 27     |
|                         | %      | 0,0%                          | 18,5%                                   | 29,6%                                   | 51,9%                                   | 100,0% |
| 2015                    | Amount | 0                             | 2                                       | 14                                      | 17                                      | 33     |
|                         | %      | 0,0%                          | 6,1%                                    | 42,4%                                   | 51,5%                                   | 100,0% |
| 2016                    | Amount | 2                             | 1                                       | 16                                      | 28                                      | 47     |
|                         | %      | 4,3%                          | 2,1%                                    | 34,0%                                   | 59,6%                                   | 100,0% |
| 2017                    | Amount | 1                             | 2                                       | 5                                       | 7                                       | 15     |
|                         | %      | 6,7%                          | 13,3%                                   | 33,3%                                   | 46,7%                                   | 100,0% |
| Total                   | Amount | 3                             | 10                                      | 43                                      | 66                                      | 122    |
|                         | %      | 2,5%                          | 8,2%                                    | 35,2%                                   | 54,1%                                   | 100,0% |

**Source:** The attachment data is processed with SPSS

The table above explains that the 2015 and 2016 batches received cash assistance more often than the 2012 and 2015 batches. The 2016 batch consisted of 47 people and the 2015 batch was less than 33 KPM. While the 2012 class of 27 people and the 2017 class of 15 people. It is seen that quite a lot or 54.1% PKH KPM received cash

disbursement as much as 4 times the disbursement stage per year. The KPM PKH that received assistance three times the disbursement stage per year was 43 KPM or 35.2%. In addition, PKH KPM received 1-2 cash aid disbursements in stages at only 10.7% or as many as 13 people.

**Table 3. Timeliness of Disbursement of Cash Assistance by Category**

| Category        |        | Timeliness of BUT Disbursement |      |               |         | Total  |
|-----------------|--------|--------------------------------|------|---------------|---------|--------|
|                 |        | Very Late                      | Late | Quite on time | On time |        |
| Early childhood | Amount | 0                              | 0    | 2             | 8       | 10     |
|                 | %      | 0,0%                           | 0,0% | 20,0%         | 80,0%   | 100,0% |
| School children | Amount | 2                              | 4    | 55            | 51      | 112    |
|                 | %      | 1,8%                           | 3,6% | 49,1%         | 45,5%   | 100,0% |
| Total           | Amount | 2                              | 4    | 57            | 59      | 122    |
|                 | %      | 1,6%                           | 3,3% | 46,7%         | 48,4%   | 100,0% |

**Source:** The attachment data is processed with SPSS

The table above informs that most PKH KPM received their assistance quite on time and on time. Comparison of the number that has categories shows the composition of school children more than in early childhood. Those who have the category of school-age children receive cash assistance in a timely manner as much as 49.1%. While there were 45.5% who said they received their help on time. Not many of

them, or only 3.6%, were late in utilizing the assistance provided. The KPM which was very late in receiving only 2 people or 1.8%. In the early childhood category, the majority had a tendency to receive assistance in a timely manner. There are 80% KPM who answered the disbursement on time. Meanwhile, 20% of KPM categories of school children who responded to the disbursement quite on time.

**Table 4. Technical Obstacles to Disbursement of Cash Assistance Experienced by KPM PKH by Age**

| Age       |        | BUT Disbursement Technical Obstacles |       |              |        | Total  |
|-----------|--------|--------------------------------------|-------|--------------|--------|--------|
|           |        | Very Often                           | Often | Occasionally | Never  |        |
| 20-29 Age | Amount | 0                                    | 0     | 0            | 1      | 1      |
|           | %      | 0,0%                                 | 0,0%  | 0,0%         | 100,0% | 100,0% |
| 30-39 Age | Amount | 1                                    | 4     | 16           | 24     | 45     |
|           | %      | 2,2%                                 | 8,9%  | 35,6%        | 53,3%  | 100,0% |
| 40-49 Age | Amount | 2                                    | 5     | 29           | 39     | 75     |
|           | %      | 2,7%                                 | 6,7%  | 38,7%        | 52,0%  | 100,0% |
| 49-59 Age | Amount | 0                                    | 0     | 0            | 1      | 1      |
|           | %      | 0,0%                                 | 0,0%  | 0,0%         | 100,0% | 100,0% |
| Total     | Amount | 3                                    | 9     | 45           | 65     | 122    |
|           | %      | 2,5%                                 | 7,4%  | 36,9%        | 53,3%  | 100,0% |

**Source:** The attachment data is processed with SPSS

The table above shows that more than a half of KPM PKH aged 30-49 years have never experienced technical problems with disbursement. There are around 53.3% KPM aged 30-39 years and 52% aged 40-49 years have never experienced banking technical problems. The rest, around 6-8%, sometimes experience technical problems. However, quite a number of them also sometimes experience technical

disbursement problems in accessing cash disbursement assistance at ATMs or Regional Offices / Branches of channeling banks, which is around 35% of KPM aged 30-49 years. While for the ages of 20-29 years and ages 49-59 years they were few and all of them answered that they never face a technical obstacle disbursement of funds

**Acceptance of Assistance Services by PKM KPM who has an Education Component****Table 5. Personal Visits of Social Companions by Type of Work**

| KPM PKH Occupation |        | Social Escort Visit |                   |                         |                          | Total  |
|--------------------|--------|---------------------|-------------------|-------------------------|--------------------------|--------|
|                    |        | Once Every Month    | Twice Every Month | Three Times Every Month | > Four Times Every Month |        |
| House Wife         | Amount | 0                   | 1                 | 8                       | 15                       | 24     |
|                    | %      | 0,0%                | 4,2%              | 33,3%                   | 62,5%                    | 100,0% |
| Laborer            | Amount | 0                   | 0                 | 13                      | 17                       | 30     |
|                    | %      | 0,0%                | 0,0%              | 43,3%                   | 56,7%                    | 100,0% |
| Farmer             | Amount | 0                   | 2                 | 9                       | 15                       | 26     |
|                    | %      | 0,0%                | 7,7%              | 34,6%                   | 57,7%                    | 100,0% |
| Trader             | Amount | 1                   | 2                 | 20                      | 19                       | 42     |
|                    | %      | 2,4%                | 4,8%              | 47,6%                   | 45,2%                    | 100,0% |
| Total              |        | 1                   | 5                 | 50                      | 66                       | 122    |
|                    |        | 0,8%                | 4,1%              | 41,0%                   | 54,1%                    | 100,0% |

**Source:** The attachment data is processed with SPSS

The table above claims that most PKH KPM get 3-4 visits every month. There are 54.1% KPM PKH who get visits by social assistants with a frequency of more than 4 times every month. Meanwhile, those who are visited 3 times each month are 50 or 41.0% KPM. A small portion or 5.5% of

other PKH KPM are visited twice a month to get personal support. Among the types of work, KPM PKH who worked as traders amounted to 39 people received personal visits 3 times or more than 4 times by social assistants to be given attention.

**Tabel 6. Discussion Group Meetings Based on the Year Entered**

| KPM Force Year of Entry |        | BUT Disbursement Frequency    |   |   |   | Total  |
|-------------------------|--------|-------------------------------|---|---|---|--------|
|                         |        | 1 disbursement stage per year | 2 times the disbursement stage per year | 3 times the disbursement stage per year | 4 times the disbursement stage per year |        |
| 2012                    | Amount | 0                             | 0                                       | 9                                       | 18                                      | 27     |
|                         | %      | 0,0%                          | 0,0%                                    | 33,3%                                   | 66,7%                                   | 100,0% |
| 2015                    | Amount | 0                             | 4                                       | 15                                      | 14                                      | 33     |
|                         | %      | 0,0%                          | 12,1%                                   | 45,5%                                   | 42,4%                                   | 100,0% |
| 2016                    | Amount | 1                             | 0                                       | 24                                      | 22                                      | 47     |
|                         | %      | 2,1%                          | 0,0%                                    | 51,1%                                   | 46,8%                                   | 100,0% |
| 2017                    | Amount | 1                             | 0                                       | 5                                       | 9                                       | 15     |
|                         | %      | 6,7%                          | 0,0%                                    | 33,3%                                   | 60,0%                                   | 100,0% |
| Total                   |        | 2                             | 4                                       | 53                                      | 63                                      | 122    |
|                         |        | 1,6%                          | 3,3%                                    | 43,4%                                   | 51,6%                                   | 100,0% |

**Source:** The attachment data is processed with SPSS

The above table indicates that the 2015 and 2016 batches dominated the composition of the KPM PKH and often participated in discussion groups. There are 51.6% KPM PKH attend discussion group meetings 4 times a month as scheduled by the social assistance. Besides that, there were 43% of PKH KPM who quite often or

3 times a month participated in the meeting. Meanwhile, only 4.9% of PKH KPM who sometimes or only 1-2x a month gather in groups to discuss with the facilitator or social assistance after the earthquake disaster. Although the 2012 and 2017 batches are relatively few, they also tend to

participate as many as 3-4 times in discussion group meetings.

**Table 7. Results of Submission of P2K2 Material Based on the Highest Education**

| Highest Education               |        | Results of Submission of P2K2 Material |                         |            |                   | Total  |
|---------------------------------|--------|--|-------------------------|------------|-------------------|--------|
|                                 |        | Do Not Understood                      | Sufficiently Understood | Understood | Really Understood |        |
| Not completed in primary school | Amount | 0                                      | 0                       | 0          | 1                 | 1      |
|                                 | %      | 0,0%                                   | 0,0%                    | 0,0%       | 100,0%            | 100,0% |
| ES                              | Amount | 1                                      | 8                       | 59         | 48                | 116    |
|                                 | %      | 0,9%                                   | 6,9%                    | 50,9%      | 41,4%             | 100,0% |
| JHS                             | Amount | 0                                      | 1                       | 3          | 1                 | 5      |
|                                 | %      | 0,0%                                   | 20,0%                   | 60,0%      | 20,0%             | 100,0% |
| Total                           | Amount | 1                                      | 9                       | 62         | 50                | 122    |
|                                 | %      | 0,8%                                   | 7,4%                    | 50,8%      | 41,0%             | 100,0% |

**Source:** The attachment data is processed with SPSS

The above table gives the explanation that the Submission of Family Ability Improvement Meeting (P2K2) material on education modules and childcare after the earthquake can be understood by half or 50.8% KPM and very understandable by 41.0% KPM PKH. The other KPM who quite understand the provision of material occupy a relatively small number of 7.4%. According to the highest education, it can be

seen that KPM PKH who graduated from elementary school was able to understand 59 KPM and even very capable of understanding 48 KPM with the material. However this cannot be compared which is more understanding between elementary and junior high school graduates because the number of KPM PKH who have graduated from junior high school is only 5 people.

**Table 8. KPM PKH responses to Social Assistance Counseling Services based on Occupation**

| KPM PKH Occupation |        | Counseling Service |              |        | Total |             |
|--------------------|--------|--------------------|--------------|--------|-------|-------------|
|                    |        | Useless            | Quite Useful | Useful |       | Very Useful |
| House Wife         | Amount | 2                  | 1            | 15     | 6     | 24          |
|                    | %      | 8,3%               | 4,2%         | 62,5%  | 25,0% | 100,0%      |
| Laborer            | Amount | 2                  | 0            | 15     | 13    | 30          |
|                    | %      | 6,7%               | 0,0%         | 50,0%  | 43,3% | 100,0%      |
| Farmer             | Amount | 1                  | 2            | 17     | 6     | 26          |
|                    | %      | 3,8%               | 7,7%         | 65,4%  | 23,1% | 100,0%      |
| Trader             | Amount | 5                  | 2            | 18     | 17    | 42          |
|                    | %      | 11,9%              | 4,8%         | 42,9%  | 40,5% | 100,0%      |
| Total              | Amount | 10                 | 5            | 65     | 42    | 122         |
|                    | %      | 8,2%               | 4,1%         | 53,3%  | 34,4% | 100,0%      |

**Source:** The attachment data is processed with SPSS

The table above shows that almost all KPM PKH from various types of work feel the benefits of counseling services provided by social assistants. There were 53.3% KPM

felt the benefits and 34.4% felt very beneficial. Meanwhile, only a small portion or 4.1% of KPM PKH felt quite useful with the arrival of social assistance in providing

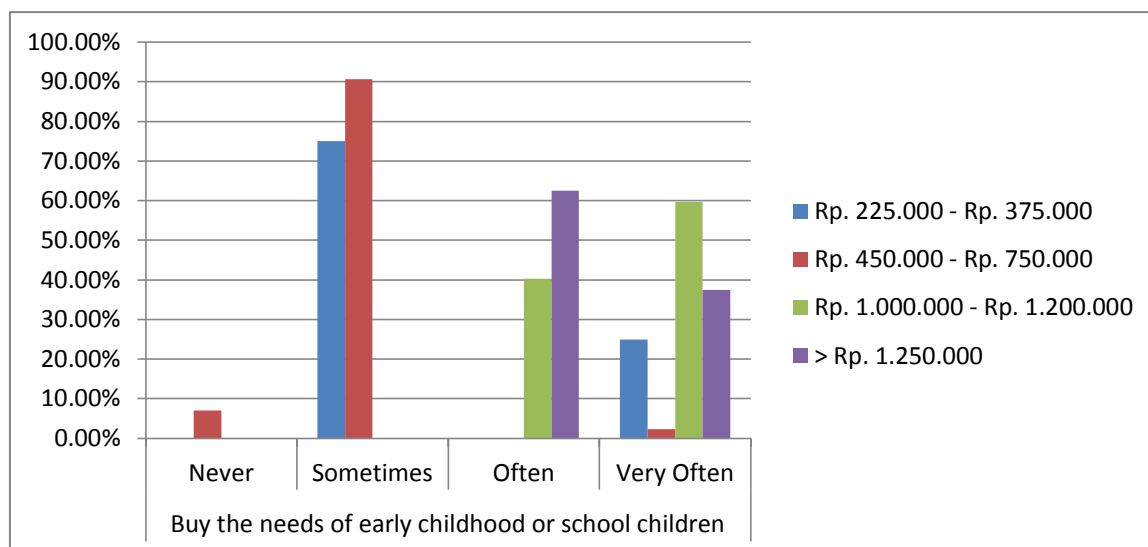


post-earthquake counseling support. The interesting thing to attention is that some PKH KPM who work as traders feel that they are not useful with counseling services.

Even though it is only 11.9%, the number amount is bigger compared to KPM PKH which feels quite useful.

### **KPM PKH Participation in Meeting the Educational Needs and Care of Children with Cash Assistance**

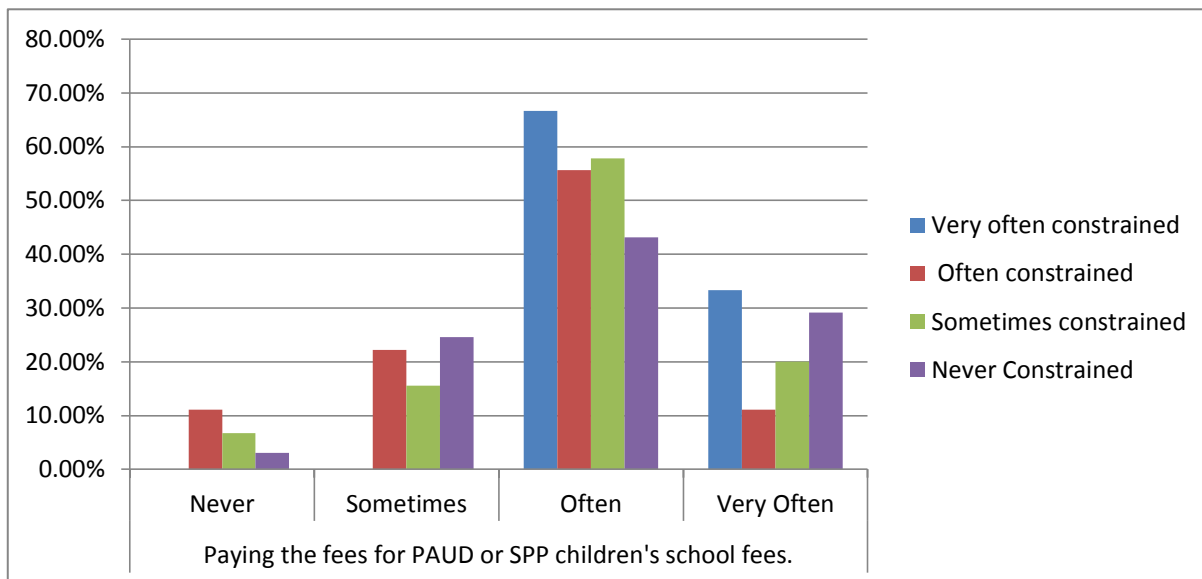
**Diagram 1. Frequency of KPM PKH participation by using BUT to buy children's needs based on the amount received**



The diagram above shows that it not always the amount of cash assistance obtained makes KPM PKH inclined to buy the needs of early childhood or school. Most or 90% of KPM PKH received cash assistance Rp. 450,000 - Rp. 750,000 choose sometimes to buy various needs for early childhood or school equipment. The same trend was seen in KPM which

received assistance of Rp. 225,000 - Rp. 375,000, most or 75% also sometimes incur costs for these needs. While for PKH KPM who received assistance in the amount of Rp. 1,000,000 - Rp. 1,200,000 of which 40% choose to frequent and 60% very often to go to shop for the needs of early childhood or school children.

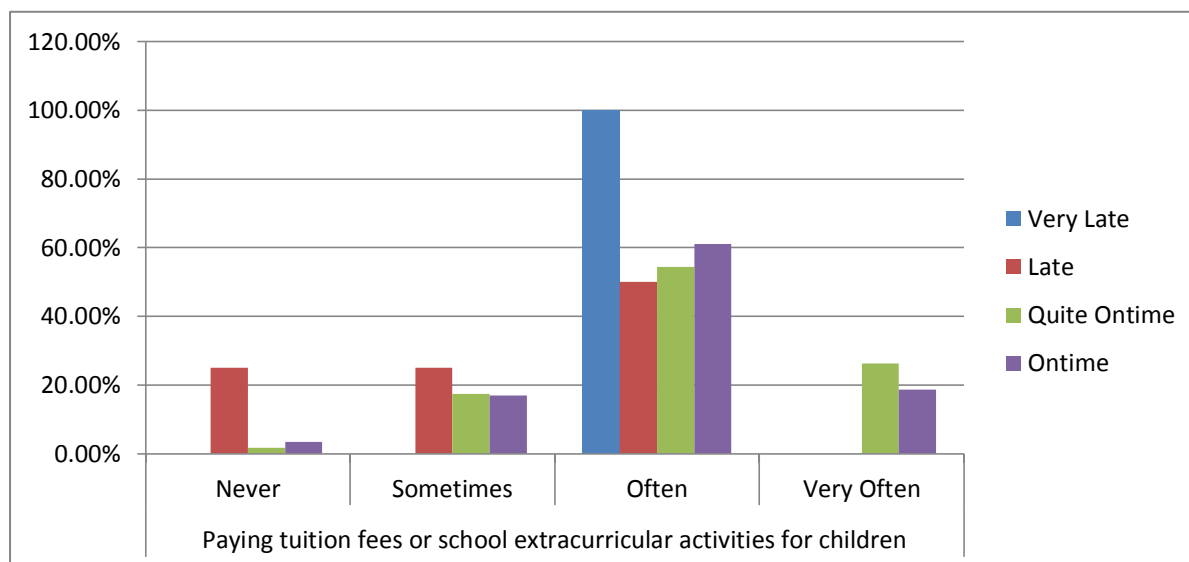
**Diagram 2. Participation Frequency of KPM PKH by using BUT to pay the costs of early childhood institutions (PAUD) or tuition fees (SPP) for school children based on technical obstacles to disbursement**



The diagram above illustrates that the technical obstacles to disbursing cash assistance did not prevent KPM PKH from paying the fees of PAUD or SPP Children's school institutions. Although PKH KPM is often constrained in the search, 66% of them still often pay for the cost of children's education. Likewise for those

who sometimes experience disbursement barriers, there are 57% who often make payments at their children's educational institutions. However, what is not ruled out is that 11% often experience technical problems so that they do not pay their children's school fees.

**Diagram 3. Participation Frequency of KPM PKH uses BUT to pay tuition fees or extracurricular school children based on timely disbursement**



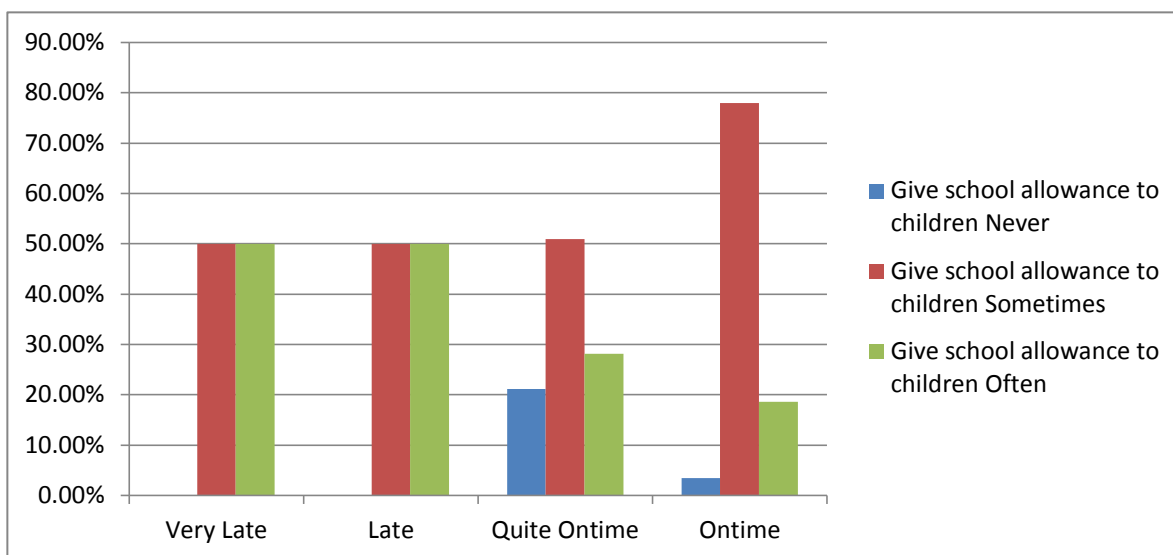
The diagram above provides information that the timeliness of disbursement of cash assistance greatly influences the tendency of KPM PKH to

fund tutoring or extracurricular activities of children. Even though some people experience delays in receiving assistance, they still pay attention to additional

learning outside of school. There are 61% of KPM who receive assistance on time and they often use the assistance for these costs. Then followed by those who

received help quite on time and around 45% were late often using the assistance for educational purposes outside of school teaching and learning hours.

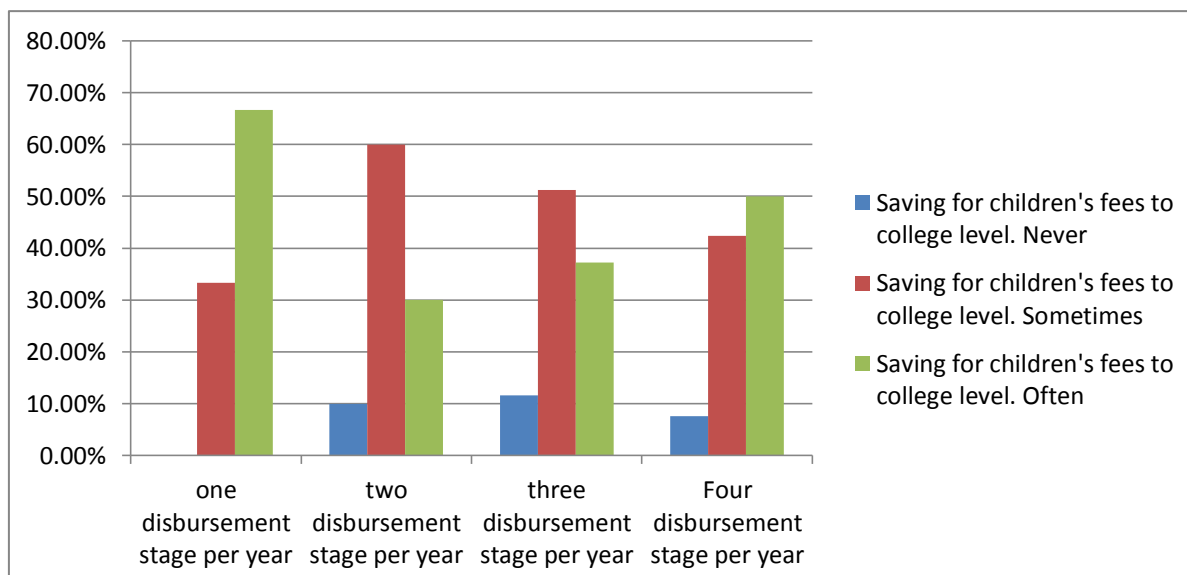
**Diagram 4. Participation Frequency of KPM PKH uses BUT to provide children's pocket money based on the timely disbursement**



The diagram above explains that the timely disbursement does not really affect the habit of KPM PKH giving pocket money to children. It is clear that those who receive help on time 78% prefer to sometimes give an allowance to their children. Then the same trend was seen at the 50% rate for those who were late and

very late to receive assistance, it turns out they sometimes and often also give money for children's snacks at school. There is a small portion who are quite on time to receive assistance, but 21% never set aside the cash assistance obtained to please children by giving school allowances.

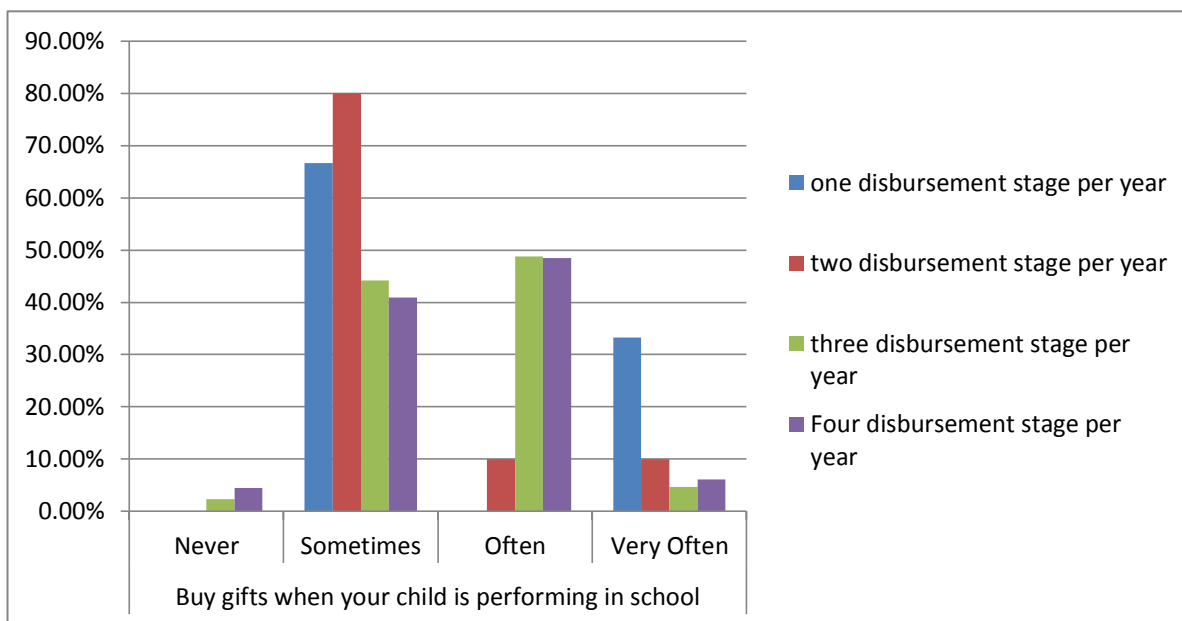
**Diagram 5. Frequency of Participation KPM PKH uses BUT to save continuation of children's school to PT based on the frequency of disbursement**



The diagram above reveals that the frequency of disbursement has no effect on the frequency of KPM PKH to save cash assistance for the sake of continuing children's education in tertiary institutions. This can be seen from the KPM which disbursed their assistance 1 time in one

year, 66% of them saved very often. Likewise with those who search twice a year, there are 60% who do the same thing. On the other hand there are some namely around 8-10%, they only sometimes save even though they receive aid as much as 3-4 times the disbursement per year.

**Diagram 6. Frequency of Participation KPM PKH uses BUT to buy gifts when children excel based on the frequency of disbursement**

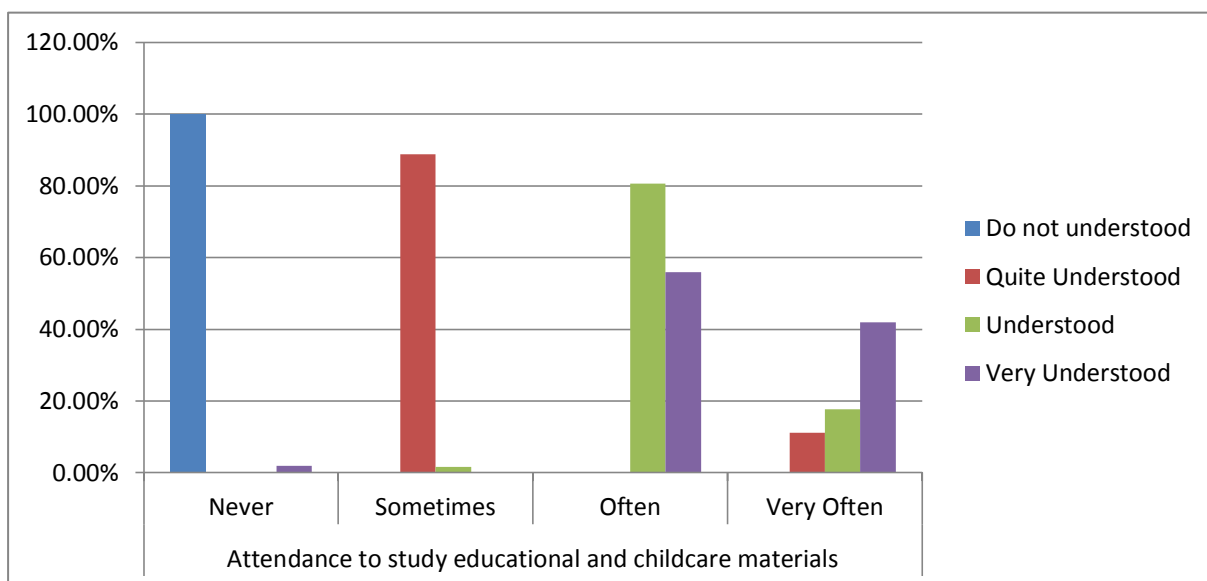


The diagram above gives the understanding that most of the PKH KPM choose to sometimes buy gifts of children who excel at school. For those who receive aid twice the disbursement stage per year, 80% sometimes shop for gifts as a token of appreciation for the success of their children at school. Then followed by those

who received as much as 1 time the stage that is equal to 65% sometimes also do that. But not a few also or 49% who often buy gifts for children with the acquisition of aid 3-4 times the disbursement stage per year. Even some or 32% very often shop for gifts, even though they only receive help once in the thawing stage

### **KPM PKH Participation in Supporting Education and Childcare with Assistance Services**

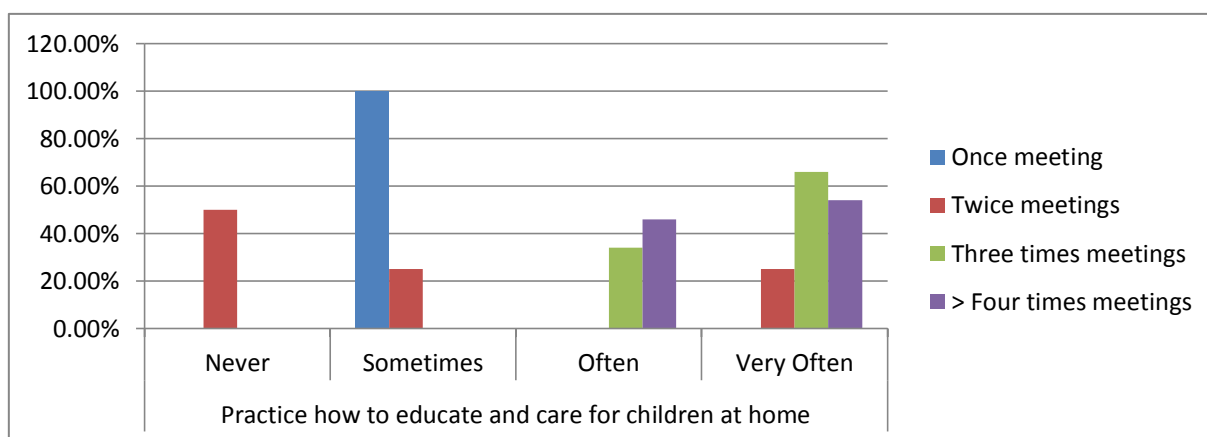
**Diagram 7. Frequency of KPM PKH Participation by attending family capacity building meetings (P2K2) based on material understanding**



The diagram above shows a picture that the absence of KPM PKH in learning educational material and childcare makes them not understand it. This is evident in 89% who often follow the delivery of material, they understand how to educate and care for children. Similar to those who are sometimes present at learning activities,

there are 85% who are quite understand the contents of the material presented. In contrast to those who are very understanding, it is clearly seen that they very often attend family capacity building meetings in educating and caring for children at home.

**Diagram 8. Frequency of KPM PKH Participation by practicing understanding related to PPA based on the results of group discussions**



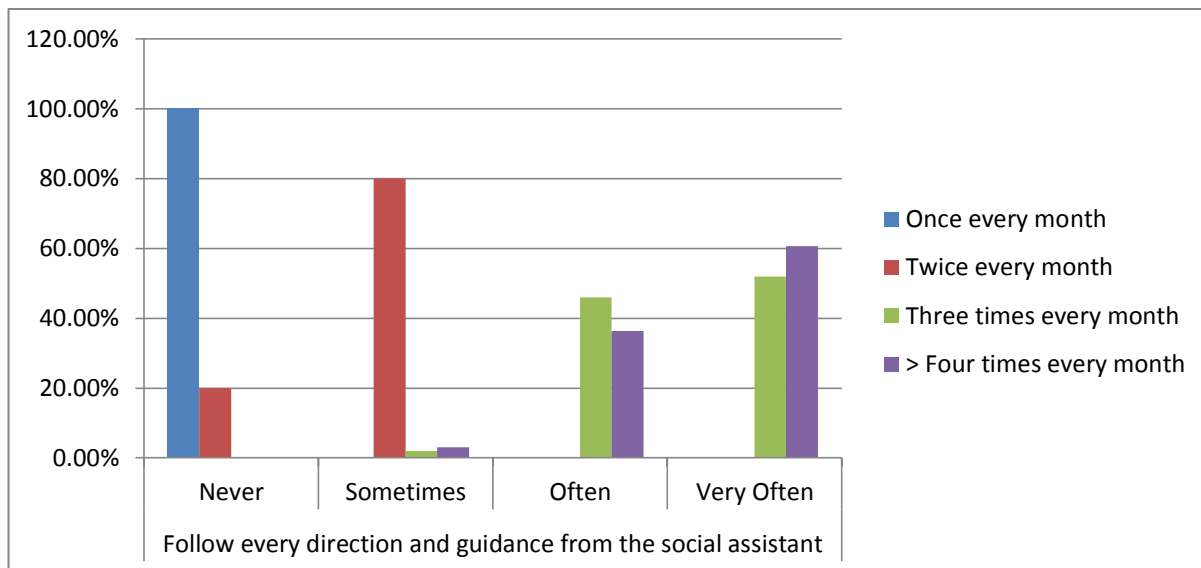
The diagram above explain that the more often KPM PKH participates in discussion group meetings, the more often they practice the way to educate and care for children at home. There are 63% of

KPM who often apply education and care to children when they attend meetings 3 times. Likewise for those who joined the discussion group more than 4 times, then 50% participated in applying what was

obtained from the KPM discussion group. But on the other side, what is interesting is that there are KPM that only have one

group discussion, but they can practice the results of the discussion in the KPM PKH group facilitated by social facilitators.

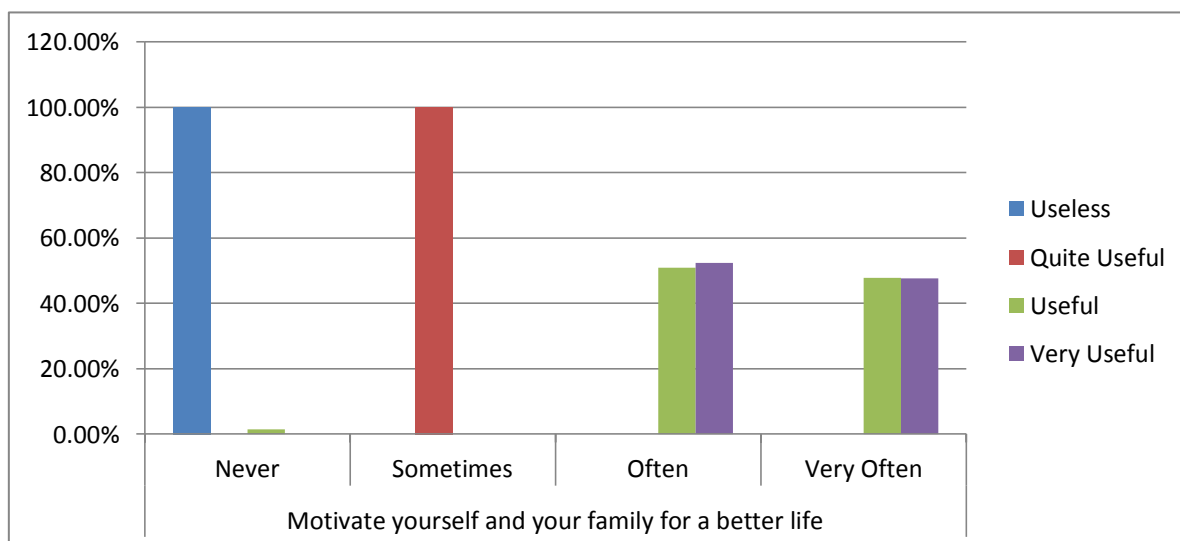
**Diagram 9. Frequency of KPM PKH Participation by following directions and guidance based on personal visits by social assistants**



The diagram above explains that the more often social assistants come to KPM PKH personally, the more often they follow every direction and guidance required in the program. By seeing there are 60% who are very often obedient by delivering face to face as much as 4 times

every month. Likewise with those who met the social assistance three times, 43% tended to carry out their directives often. Interpretation is then strengthened by those who only get two personal visits, 20% never follow directions or guideline from the mentoring process.

**Diagram 10. Frequency of KPM PKH Participation through JPS by motivating themselves and their families for a better life based on the counseling services provided**



The diagram above provides information that PKH KPM who feel the benefits of counseling services encourage self and family motivation to achieve a better life. The same percentage is seen, around 45% who feel the benefits and are even very useful, so they are motivated to try to live

their lives in a better direction than they are today. Conversely, those who sometimes and have never been motivated in themselves or their families are those who feel quite useful and not useful by providing counseling services in their daily life during mentoring mentoring.

### Effects of Cash Assistance and Social Assistance Services on Post-Earthquake Education and Health Participation in KPM PKH

**Tabel 9. Examination of Counseling Variables of BUT and JPS on KPM PKH Education Participation**

| Coefficients <sup>a</sup> |                             |            |                           |       |      |
|---------------------------|-----------------------------|------------|---------------------------|-------|------|
| Model                     | Unstandardized Coefficients |            | Standardized Coefficients |       |      |
|                           | B                           | Std. Error | Beta                      | t     | Sig. |
| 1 (Constant)              | 11,057                      | 3,250      |                           | 3,402 | ,001 |
| Total_X1                  | ,775                        | ,172       | ,363                      | 4,498 | ,000 |
| Total_X2                  | ,687                        | ,196       | ,283                      | 3,512 | ,001 |

Based on the table above, it can be concluded that there is a relationship strength of 77.5% in the variable Social Assistance to Educational Participation and 68.7% relationship strength in the Assistance Services variable to Education Participation. The explanation related to hypothesis testing as follows:

#### 1. Hypothesis Test 1

It is known that the significance value for the influence of X1 on Y is 0.001 <0.05 and the t value is 3.402 <t table 1.98010, so it can be concluded that H1 is accepted, which means there

is an influence of Cash Assistance (BUT) on Educational Participation.

#### 2. Hypothesis Test 2

It is known that the significance value for the effect of X2 on Y is 0,000 <0.05 and the value of t arithmetic is 4.498 <t table 1.98010, so it can be concluded that H2 is accepted which means there is an influence of Social Assistance Services (JPS) on Educational Participation.

#### 3. Hypothesis Test 3

**Tabel 10. Analysis of Multiple Linear Regression for BUT and JPS Variables in Education.**

| ANOVA <sup>a</sup> |            |                |     |             |        |                   |
|--------------------|------------|----------------|-----|-------------|--------|-------------------|
| Model              |            | Sum of Squares | df  | Mean Square | F      | Sig.              |
| 1                  | Regression | 341,495        | 2   | 170,748     | 18,287 | ,000 <sup>b</sup> |
|                    | Residual   | 1111,128       | 119 | 9,337       |        |                   |
|                    | Total      | 1452,623       | 121 |             |        |                   |

Based on the above output known that the significance value for the influence of BUT and JPS simultaneously on Y is 0,000

<0.05 and the calculated F value is 18.287> F table 3.07, therefore it can be concluded that H3 is accepted which means that there

is an influence of Cash Assistance and Services Stimulating Social Assistance for Educational Participation and Childcare.

The test results of the cash assistance influence on participation above can be related to the type of community participation according to the Secretariat of Village Development (1999), namely material incentive participation. The definition stated is that the community participates when resources are available in the form of wages to carry out an activity. Financial assistance is provided so that KPM can use it to meet the educational and childcare needs.

The use of cash assistance is inseparable from the conditions required by KPM in spending it so that it is right on target. The goal to be achieved in this participation process is to increase the ability of KPM directly involved in the program to make long-term decisions. As stated by Weber in Ritzer (2007) that every decision that we take requires careful consideration so as to avoid regret due to wrong choice.

However, there is not seen in the use of cash assistance, that is the principle of freedom to choice in allocating the assistance obtained. This is related to the opinion stated by Effendi in Irene Astuti D (2009: 37) that vertical participation with the understanding participation occurs because of certain conditions in the community that have a status relationship as subordinates, followers or clients.

In the process of using cash assistance, there are some technical disbursements that may be experienced by KPM such as ATM blocked, BUTAB lost, rejected by the banking system, etc. In the end the KPM could not get the money and could not be used to fund children's educational needs. In this case KPM can try to recognize the problems they face and solve them as a form of participation. Thus they can have the ability to anticipate dependence on aid while prioritizing the interests of education

and childcare even though they have not yet received financial support from the hope family program. As explained by Isbandi (2007: 27) that participation is community participation in the process of identifying problems and potential that exists in the community, selection and decision making about alternative solutions to deal with problems and evaluate changes that occur.

Timeliness of disbursement of cash assistance is also be an the important thing in reducing the burden of family expenses within a certain period. If there is a delay, the KPM cannot fulfill their children's education and health needs, so they have to undo their wishes. This problem can be one of the inhibiting factors in KPM participation. Therefore, the provision of information related to the conditions experienced by KPM is very necessary to be careful in managing finances to anticipate the problem of delays in disbursement. Therefore when the tutoring payment has arrived or requires children's school supplies, the KPM has a spare fee. That was explained by the Parsons action system in Ritzer (2007: 385), one of which was the function of adaptation, defined as a system that addresses urgent external site needs.

Financing needs do not absolutely have to come from cash assistance but must be taken into account in managing finances from family income. Children's allowance or transportation is also a small thing which is certainly a part of daily expenses and must be prepared by KPM. However, when the disbursement of aid is constrained, automatically the money saved must be taken for more basic needs. Therefore, such adjustments must be known by KPM so as not to get caught up in the cost of living costs. This is related to the concept of behavioral organisms in Parsons's explanation in Ritzer (2007: 379) which explains that the conditioning and learning processes that occur in an individual's life



affect the genetic makeup or behavior patterns.

The gift giving is a form of appreciation for children's behavior so that maintenance occurs on these achievements. This scheme is found in George C. Homans' view of social exchange based on the idea that each individual will consider his interests in interacting with others. It is clearly associated with a successful proposition which means that the more often a person's behavior is valued, the more often that person does the same thing. But there is also a discourse about this theory because not always the rewards obtained produce the same effect because someone does not prioritize excessive profits.

PKH's point of view has been that the presence of increasing school attendance and increasing numbers automatically increases human capital that empowers KPM. But the quality of education in schools must also be a concern even though PKH does not have the authority to intervene in children's school curricula. Something that PKH can do is to encourage the capacity building activities of students from their limitations at school. Children's education participation does not only depend on how much time is spent at school but also the joy and quietness of the child at home affects children's learning achievement.

Education is the most important thing for KPM children so they must try to send their children to college. One way is to save early to prepare the costs needed while in college. The action can be said as a rational choice proposed by Ritzer (2007: 357) which refers to the basic principles of classical economic theory which focuses on the actor as the owner of the goal to be achieved.

Likewise with the results of the test the effect of assistance services on participation above can be associated with the opinion of Made Pidarta in Siti Irene

Astuti D. (2009: 31-32) which says that participation is the involvement of a person or several people in an activity. Involvement can be in the form of mental and emotional as well as physical involvement in using all the capabilities they have (taking the initiative) in all activities carried out as well as supporting the achievement of objectives and responsibilities for all engagements.

The family capacity building meeting is an effort to internalize the achievement of the objectives of social assistance. To create behavioral changes, various kinds of information about the welfare family are provided in the activity. The encouragement includes the values of knowledge that are built to be accustomed so that it becomes a standard that must be obeyed by KPM. Thus referred to by Parsons in Ritzer (2007: 365) as a personality system that has a motivational orientation.

The formation of this discussion group became one of KPM's participation activities to share support that was responsive to the conditions experienced together. As alluded to by Mikkelsen (1999: 64) that strengthening dialogue between local communities is a form of participation. They have equal responsibility in the process of carrying out the conditions required in the social assistance program. That way the results of the discussion affect every decision that will be taken in family life.

The above assistance is done through a persuasive approach so that KPM is more motivated to follow the advice given. With more special attention, KPM can participate interactively in recognizing the problems within themselves and finding together solutions to the challenges faced in the family. When referring to the opinion of Cohen and Uphoff in Irene AD (2009: 40), then this level of participation is the lowest because it tends to be in the form of indoctrination called manipulation.

Furthermore, in this activity there is a consensus building stage in which the facilitator negotiates the cause and effect of the understanding given so that KPM wants to implement the rules in the PKH program. This consensus is not agreed between individuals and groups but the adjustment of the ways between the individual facilitator and individual KPM. Commitments that are built together persuasively can be more attached to one's memory because they involve emotional. This process is explained by the Secretariat of Village Development (1999: 23) as a form of consultation participation. Every problem faced requires a response that opens KPM's insight to take solution's.

The above concept becomes the work orientation rather than the functional targets, not just procedural administrative techniques. It is meant that the effort change of the behavior of hopeful family program participants who receive cash assistance on condition that the education component be aware of the right beneficiaries in reducing the burden on family needs and thinking for a better family future.

## CONCLUSION

In general, this study concludes that the Family Hope Program (PKH) has a dynamic positive correlation by looking at the effect of social assistance on education and health participation of Beneficiary Families (KPM). The description below is the conclusions of the symptoms studied:

- a. The receipt of cash assistance and social assistance services by KPM PKH is considered to be still on target in its implementation, even though their situation is in the process of recovery due to the earthquake affected.
- b. Most KPMs show active participation in educational activities and early

childhood or school age care required in PKH.

- c. Most KPMs show active participation in fulfilling the health and nutrition activities of pregnant or breastfeeding women as required in PKH.
- d. There is a strength of relationships and positive influence on the analysis of Social Assistance and Social Assistance Services on PKPM KPM Education Participation.
- e. There is a strength of relationship and positive influence on the analysis of Social Assistance and Social Assistance Services to the Health Participation of KPM PKH.

**Acknowledgments.** I am very grateful that this research was sponsored by BPI LPDP from the Indonesian Ministry of Finance. I am very grateful that this research was sponsored by BPI LPDP from the Indonesian Ministry of Finance. In addition, I am also endless thanks to Dr. Sakaria, M.Si as the first supervisor and Dr. Buchari Mengge MA as the second supervisor have educated, directed and guided the main researcher / Moh. Nofri Norman in conducting this research.

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