

**The Role of Social Workers in Empowering Poor Village Communities  
(Study of Indonesian Conditional Cash Transfer Programme (PKH) Facilitators in  
Jegulo Village, Tuban Regency)**

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**Abstrak**

*Program Pengentasan kemiskinan berbentuk sosial transfer pertama di Indonesia adalah Program Keluarga Harapan (PKH). PKH adalah program pemberian bantuan sosial bersyarat kepada keluarga dan/atau seseorang miskin dan rentan yang terdaftar data terpadu program penanganan fakir miskin, diolah oleh Pusat Data dan Informasi Kesejahteraan Sosial dan ditetapkan sebagai keluarga penerima manfaat PKH. Program Keluarga Harapan (PKH) dapat dikatakan sebagai program pemberdayaan masyarakat karena tujuan dan sasarannya langsung kepada perbaikan ekonomi, pendidikan dan kesehatan. Tujuan penelitian ini adalah untuk menganalisis peranan pendamping PKH dalam proses pemberdayaan. Penelitian ini menggunakan penelitian kualitatif deskriptif. Hasil penelitian menunjukkan bahwa telah dilaksanakan proses pemberdayaan dalam fasilitasi penerima bantuan dalam mengakses pelayanan sosial, pendidikan dan kesehatan. Selain itu, pendamping juga melaksanakan pengembangan kapasitas masyarakat melalui pendampingan usaha. Dalam menjalankan peran sebagai mediator antara masyarakat penerima bantuan dengan pemerintah dalam memperjuangkan hak penerima bantuan dengan baik. Dalam menjalankan peran dalam advokasi dan pembelaan terhadap masyarakat penerima dilakukan secara inklusi, memperjuangkan hak penerima baik dari masyarakat miskin, penyandang disabilitas dan penyandang gangguan jiwa yang juga memiliki hak sebagai penerima bantuan sosial.*

*Kata Kunci: Pendamping Sosial; Program keluarga Harapan; Kemiskinan*

**Abstract**

*The first poverty alleviation program in the form of social transfers in Indonesia is the Family Hope Program (PKH). PKH is a conditional social assistance program for poor and vulnerable families and/or individuals who are registered with integrated data on the program for handling the poor, processed by the Social Welfare Data and Information Center and designated as PKH beneficiary families. The Family Hope Program (PKH) can be said to be a community empowerment program because its goals and targets are directly aimed at improving the economy, education and health. The purpose of this study was to analyze the role of PKH assistants in the empowerment process. This research uses descriptive qualitative research. The results of the study indicate that an empowerment process has been carried out in facilitating beneficiaries in accessing social, education and health services. In addition, the assistant also carries out community capacity building through business assistance. In carrying out the role as a mediator between the beneficiary communities and the government in fighting for the rights of beneficiaries properly. In carrying out its role in advocating and advocating for recipient communities, it is carried out inclusively, fighting for the rights of beneficiaries, both from the poor, persons with disabilities and persons with mental disorders who also have rights as recipients of social assistance.*

*Keywords: Social Workers; Hope family program; Poverty*

## **INTRODUCTION**

Poverty has become a global problem experienced by all countries in the world, including Indonesia. The majority of Indonesian people are at a low economic level, this has caused the poverty rate in Indonesia to increase from year to year. Under these conditions, Indonesia faces complicated problems such as a high crime rate, low education level, and low health level (Iswanto, 2018). Problems like this often occur in a developing country with a large population (Gustomy et al., 2020). The government as the holder of the highest authority has the right to regulate and manage its own country. The 1945 Constitution of the Republic of Indonesia mandates that the state is obliged to protect the entire Indonesian nation and promote social welfare in the framework of realizing social justice for all Indonesian people.

To overcome poverty, the right strategy is needed so that it can improve the quality of life of the community, one of which is community empowerment (Haris, 2020). Community empowerment is an effort to transform community growth as a real force, to protect and fight for the interests and values of life in all aspects community (Dr. Sarintan Efratani Damanik, 2019). Community empowerment means increasing the ability or increasing independence of the community.

In essence, empowerment is the creation of an atmosphere or climate that allows the potential of the community to develop (Kasmiah & Rahmi, 2020). This logic is based on the assumption that no society is completely powerless. Every community must have power, but sometimes they are not aware of it, or the power is still not known explicitly. In addition, empowerment should not trap people in a trap of dependence (charity), instead, empowerment should lead to a process of independence. Therefore, community empowerment will minimize social welfare problems in society, especially poverty which continues to increase every day, so the Indonesian government through the Ministry of Social Affairs issued the Indonesian Conditional Cash Transfer Programme (PKH). Where this program aims to develop a social protection system for the poor in Indonesia (Kholif et al., 2019).

As stated in the Regulation of the Minister of Social Affairs no. 1 of 2018 article 1 concerning the Indonesian Conditional Cash Transfer Programme, hereinafter abbreviated as PKH, is a program of providing conditional social assistance to families and/or someone poor and vulnerable who are registered with integrated data on the program for handling the poor, processed by the Social Welfare Data and Information Center and determined as a family PKH beneficiaries. The Indonesian Conditional Cash Transfer Programme (PKH) can be said to be a community empowerment program because its goals and objectives are directly aimed at improving the economy, education, and health which have an impact on the social welfare of beneficiary poor families (Fitrintia & Matsuyuki, 2023).

PKH is different from other social protection programs in the form of cash, such as Temporary Unconditional Cash Transfer (Bantuan Langsung Tunai (BLT), Unconditional Cash Transfer Programme (Bantuan Langsung Sementara Masyarakat (BLSM), and Family Welfare Cards (Kartu Keluarga Sejahtera (KKS) (Iswanto et al., 2021). PKH is the development of a social protection system in the form of conditional cash assistance to gain access to health and education services. So that in the long run, it can break the chain of poverty in Indonesia. PKH has a big mission to reduce poverty, this is based on the number of poor people in Indonesia as of September 2022 of 26.36 million people, an increase of 0.20 million people from March 2022, and a decrease of 0.14 million people from September 2021. The percentage of the urban poor population in March 2022 it was 7.50 percent, rising to 7.53 percent in September 2022. The government has also set a poverty reduction target of 7% and extreme poverty to 0% in

2024, as stated in the 2020-2024 RPJMN. PKH is expected to contribute significantly to reducing the number of poor people, reducing inequality, and increasing the Human Development Index (Chasanah et al., 2021).

Some actors play a role in the success of this community empowerment program, one of which is the PKH Facilitator who is a professional staff appointed by the Ministry of Social Affairs to assist poor PKH beneficiary families. This PKH Facilitator is needed for two reasons, firstly because most poor people do not have the power, voice, and ability to fight for their real rights. They need fighters who can represent them, and help them get their rights. Another reason is that the Regency/City PPKH cannot carry out its duties at all sub-district levels at the same time. Since the commencement of empowerment activities through the Indonesian Conditional Cash Transfer Programme it has been carried out in 122 sub-districts in Indonesia which are included in the treatment sub-district group, and one of the sub-districts implementing the PKH activity program is Soko District, Tuban Regency. In 2020, the number of poor people in Tuban Regency is 178,050 people (Santoso et al., 2023).

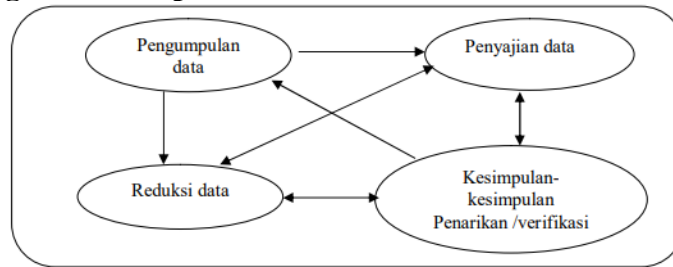
This research focuses on Jegulo Village, where Jegulo Village is one of the villages in the Soko District that has received the Indonesian Conditional Cash Transfer Programme. Another reason the researchers chose Jegulo Village was because there were still a large number of poor households, based on data from the Jegulo Village RPJM the number of poor households in Jegulo Village was 1,969 people. Meanwhile, the number of very poor households receiving the Indonesian Conditional Cash Transfer Programme (PKH) assistance was 409 people. In addition, the geographical location of Jegulo Village is in a mountainous area so the community settlements are spread out or not clustered. On the other hand, the level of education of the population is still low, and awareness of the importance of education and health is also an interesting thing to study. Thus, researchers wanted to know the role of the Indonesian Conditional Cash Transfer Programme (PKH) companion in community empowerment in Jegulo Village. Given the level of the role of the family companion of hope (PKH) in community empowerment, this is quite important for beneficiary families (KPM).

## **METHOD**

Bagian This type of research in writing uses descriptive qualitative research. Researchers want to solve the problem by describing or describing the current state of the research object based on existing facts and describing it in the form of words and language obtained from observations, interviews, and documents. Through this descriptive qualitative research, the researcher intends to describe events or phenomena by what happened in the field, and the resulting data are in the form of written or spoken words from people and observed behavior related to the Role of the Indonesian Conditional Cash Transfer Programme (PKH) Companion in Community Empowerment in Jegulo Village, Soko District, Tuban Regency systematically and by the facts in the field. The focus of this research is based on the Regulation of the Minister of Social Affairs of the Republic of Indonesia Number 1 of 2018 concerning the Indonesian Conditional Cash Transfer Programme in Chapter V Article 49 paragraph (1) states that PKH Facilitators as referred to in Article 32 letter f consist of facilitation, mediation and advocacy activities for PKH Beneficiary Families in accessing health, education, and social welfare facilities. Which consists of three criteria namely Facilitation; Mediation; Advocacy. This study uses primary and secondary data sources. Primary data sources are data sources that directly provide data to data collectors. The primary data source in this study was conducted by interview or interview. Namely interviews with Savar Subianto (PKH Facilitator in Jegulo village), Siti Auwliyah (head of the PKH hamlet group of Jegulo),

Ruminten (head of the PKH hamlet group of Gabor), Puknur Aeni (head of the Dringu hamlet group). Secondary data in this study came from several books, journals, the internet, and from the RPJMDes, Archives of documentation of PKH Facilitators in Jegulo village. In the process of data analysis in research on the role of the companion of the Indonesian Conditional Cash Transfer Programme (PKH) in empowering communities in Jegulo village using interactive model data analysis from Miles, Huberman, and Saldana (Miles et al., 2014).

**Figure 1. Components of Interactive Model Data Analysis.**



Source: Miles and Huberman (Miles, Huberman and Saldana, 2014: 14)

**RESULT AND DISCUSSION**

**Result**

To find out the role of the Family Hope Program companion in empowerment, the researcher used concepts originating from the focus of the research. Based on the Regulation of the Minister of Social Affairs of the Republic of Indonesia Number 1 of 2018 concerning the Family Hope Program in Chapter V Article 49 paragraph (1) states that PKH Facilitators as referred to in Article 32 letter F consists of facilitation, mediation, and advocacy activities for PKH beneficiary families in accessing health, education and social welfare services.

**1) Role in Facilitation**

In carrying out the facilitation role the researcher uses the theory from Sulistiyani (2016) which consists of three variables, namely the awareness process, knowledge transformation, and capacity building. The process of raising awareness of the need to get out of the poverty zone is carried out through regular meetings held by program assistants. interviews with research informants were conducted to find out how the awareness and motivation process was given to beneficiary families (KPM). The following is the answer from Savar (PKH Facilitator in Jegulo village)

"Every time there is a meeting once a month there is a material called P2K2 (Family Capacity Building Meeting) which is a family development material session, of course, there is motivation, and encouragement, so that PKH participants are also aware of themselves and their families and the environment, so they can develop their capacities. to change family conditions for the better, aware of the importance of utilizing health and education facilities, willing to learn to participate in every activity of the PKH program."

Based on the interview results above, PKH assistants provide motivation and encouragement to PKH participants when there are P2K2 group meeting activities (family capacity-building meetings). and participants to be aware of utilizing health and education facilities. In addition, to increase awareness of participation in education and health services, researchers interviewed informants to find out how the motivation given to beneficiary family members (KPM) who have toddlers and school children to attend health and education facilities.

The second is the transformation of knowledge. In this activity, the community will undergo a learning process about knowledge and skill proficiency. In community empowerment, the learning process aims to develop self-potential and change people's mindsets. The following are the results of interviews with Siti auwliyah, Ruminten, Puknur aeni (Head of the PKH group in Jegulo hamlet, Gambor hamlet, Dringu hamlet).

"We were given an understanding, each meeting has materials and books. how to educate children, raise children, what is the correct way to treat the elderly, manage finances so that it is not wasteful and what is the correct borrowing/debt like."

Based on the results of the interviews above, it can be concluded that PKH assistants provide education to PKH participants. This can be seen from the PKH Facilitators in providing education by being given material during P2K2 group meetings. In addition, efforts were made to improve skills. In this case, PKH facilitators provided innovations to PKH participants in an activity or meeting. This is so that the process of empowerment can deliver the independence of a group or individual. Here's an interview with Savar (PKH Facilitator in Jegulo village).

"So far this includes group businesses, so they formed a joint business group, the name is *Amanah* one group of 10 people, these 10 people also receive PKH assistance, not from other communities or outsiders. So those who receive PKH are provided with capital for businesses, so yesterday some of the businesses that were running were selling gasoline, some were making snacks and fried foods, although there are some obstacles currently from managing them."

**Picture 1. assisted by a business group with PKH members in Jegulo Village**



Source: Research archives, 2022

Based on the results of the interviews above, it can be concluded that PKH assistants form a joint but independent business group called "AMANAHA". The joint venture group consists of 10 people per group. This business group is at the initiative of the PKH companion. PKH participants are given capital to open home industry businesses such as opening stalls, shops, and selling fried foods, from the results of these businesses they can increase income to realize the independence of PKH participants.

## **2) Role in Mediation**

PKH Facilitators have a role as a mediator, namely a mediator if there are problems or conflicts in the community or coordinating with the government. Because in community development programs, people are often faced with a conflict of interest and a conflict of values. That's when the role of a companion as a mediator is needed to help solve problems. The following is the result of an interview with Mr. Savar:

"What often arises conflicts come from outside PKH participants, the community in general, due to data on beneficiaries. very vulnerable because the data assistants cannot propose, so the targetability of the data becomes a problem resulting in conflict in the community. The companion can only explain what it is, that cannot propose, indeed from the center's data "

Based on the results of the interviews above, it can be concluded that whenever there is a conflict or problem regarding PKH assistance, PKH tries to explain as it is to the conflicting parties that the data on recipients of assistance is from the central government. From the role of the companion as a mediator, it can be seen that the companion has made efforts to become an intermediary to resolve problems if there is a conflict between beneficiary residents and non-recipient residents due to mistargeting regarding the KPM data, the assistant explains in what it is that the assistance recipient data comes from Central government. it aims to condition a problem so that the community empowerment process goes well. Likewise the role of the PKH assistant as a mediator in coordinating with the village government. This can be known whenever there is a need related to changes in PKH beneficiary data, as well as when coordinating assistance is disbursed.

## **3) Advocacy Role**

PKH Facilitators have a role to defend the interests of PKH participants so that they can obtain their rights as PKH participants to obtain complementarity program rights and provide advocacy for family members who experience disabilities (special needs) to obtain convenience in accessing social services. At this stage, the researcher interviewed informants to find out how the assistants defended the interests and rights of beneficiary families (KPM) so that their rights were fulfilled. The following is the answer from Savar (PKH Facilitator in Jegulo village)

"For the complementarity assistance of PKH participants, actually the government's reference data comes from PKH participants. So PKH beneficiaries must get KIS, KIP, and BPNT assistance. But in reality, not all of them got KIS, KIP, or BPNT. So that PKH participants cannot get any of this assistance. As a companion, we continue to strive to fix existing data and problems to be reported to the district UPPKH, mas, so we cannot evaluate them"

The role of the companion as an advocate, namely defending the interests of PKH participants to obtain the rights of the complementarity program and for families of PKH participants who experience disabilities. Facilitators are trying to fix the data of PKH participants who do not receive complementarity program assistance to which the participants are entitled by reporting it to the central government so that at the disbursement stage they can receive assistance. Meanwhile, for families of PKH participants who have special needs, the companion informs their families that the money from the assistance is used to meet the needs and needs of these persons with disabilities. The companion also helps identify the needs and needs of the person with disabilities to be assisted.

**Discussion**

The discussion that will be described is the result of researchers conducting interviews with informants then conducting observations and the last is conducting documentation, to find out the role of the Family Hope Program companion in empowerment, researchers use concepts originating from the focus of research Based on the Regulation of the Minister of Social Affairs of the Republic of Indonesia Number 1 the Year 2018 concerning the Family Hope Program in Chapter V Article 49 paragraph (1) states that PKH Facilitators as referred to in Article 32 letter f consist of facilitation, mediation and advocacy activities for PKH Beneficiary Families in accessing health, education, and social welfare facilities.

**1) Facilitation Role**

The role of PKH assistants in providing motivation, encouragement, and convenience to PKH participants is to increase capacity and encourage the independence of PKH participants through PKH assistance program activities. In carrying out the facilitation role the researcher uses the theory from Sulistiyani (2016) which consists of three variables, namely the awareness process, knowledge transformation, and capacity building.

The high poverty rate in Jegulo Village makes it necessary to have a reform movement to make them aware of the importance of changing their living conditions. Based on data from the Village Medium Term Development Plan (RPJM Desa) the poverty rate in Jegulo village is still relatively high.

**Table 2. Community welfare**

Rich	Currently	Poor Households
149 families/ 327 people	448 households/ 980 people	861 families/ 1969 people

Source: Jegulo Village RPJMDes 2015-2020

From the data above it can be concluded that the poverty rate in Jegulo Still Village is very high, namely 1969 people. For this reason, there is a need for awareness efforts by providing motivation, assistance, and full support from PKH Facilitators.

This touch of awareness will open the will and awareness of PKH beneficiary families about their current condition and thus will stimulate beneficiary family awareness (KPM) about the need to improve living conditions to create a better future. A touch of awareness can be in the form of enthusiasm, and motivation which is expected to lead PKH participants to have a willingness to learn and change their mindset. Facilitators motivate PKH participants when there are P2K2 group meeting activities (Family Capacity Building Meetings). The motivation given by the mentor is to stimulate awareness of beneficiary families (KPM) so that they always take part in every empowerment program activity through PKH assistance. Through the P2K2 activities, PKH participants are also motivated to carry out activities that are productive and useful, especially for PKH participants who have toddlers and school children, so that they are aware that it is important to be present in utilizing the services of health and education facilities.

In ensuring the presence of PKH participant families, assistants verify absences by visiting the midwife and school directly every month to serve as a report. This aims to make it easier for





example, entrepreneurship skills training. because of that assistants need to develop and explore the potential that exists in the area they are assisting.

In building the independence capabilities of PKH assistants, they form an independent joint venture group called "AMANAHA" in one group consisting of ten PKH participants. The independent joint venture group was formed at the initiative of a companion to provide business capital to PKH participants who wish to start a business but are constrained by capital. This is intended so that PKH participants can increase their independence through joint group businesses, as revealed by the companion for the ongoing businesses that sell gasoline, open stalls, and sell fried snacks.

To increase the independence of PKH participants by forming joint business groups, the implementation is still not optimal because, in terms of management and administrators, it is not well structured, so developing the joint group business is hampered. Meanwhile, the companion also did not take part in directing the business idea to be created and did not provide basic knowledge in managing a business.

## **2) Mediation Role**

Then the role of the companion as a mediator in empowering the community, because in development programs the community is often faced with a conflict of interest and a conflict of values. That the assistant in carrying out his role can be said to be good. This can be seen from the PKH Facilitators' efforts to act as intermediaries and liaisons when conflicts or problems occur between beneficiary families (KPM) and non-beneficiary residents.

The problem that often occurs comes from the outside community related to the inaccuracy of the targeting of the PKH assistance program received by beneficiary families (KPM), these outsiders think that it is the companion who determines PKH membership, causing jealousy among residents, in response to this problem the PKH assistant explains to residents regarding the criteria that must be met to obtain PKH assistance. By explaining to the residents that the assistance data comes from the central government, the assistant cannot propose or replace the data that has been determined, while the assistant's task is to coordinate with the village government to validate the recipient's data according to the name and address determined by the social ministry.

## **3) Advocacy Role**

Judging from the role of the assistant as an advocate in empowering the community, it shows that the assistant is carrying out his role well. Seen in defending the interests of PKH participants to obtain complementarity program rights and advocating for families of PKH participants who experience disabilities. PKH participants should have received assistance from other programs such as KIS (healthy Indonesian card), KIP (smart Indonesian card), and BPNT (non-cash food assistance) but in reality, some PKH participants did not receive any of these assistance.

In carrying out their role as advocates, assistants fix the data of participants who do not receive complementarity program assistance by recording and reporting it to PKH operators so that later in the disbursement stage, PKH participants get the assistance they are entitled to. This is by what is contained in the PKH companion workbook regarding the obligations of PKH companions in point (6), namely to provide assistance and advocacy to PKH participants so that they obtain their rights as PKH participants and to obtain complementary program rights.

Meanwhile, in advocating for the interests of family members of PKH participants who have special needs (disabilities), assistants have identified the needs and needs of persons with disabilities to fulfill their rights by assisting in the form of wheelchairs and treatment at health facilities. This is by what is contained in the PKH companion workbook related to the task of PKH companion support in number (4), namely providing advocacy to PKH participant family members with disabilities (with special needs) to obtain convenience in accessing social services.

## **PENUTUP**

In carrying out its function as a facilitator in empowering the community, it can be said that it is still not optimal. This is due to the results of empowerment which seem to have increased only in terms of health and education, while from an economic perspective, the companion took the initiative to form a joint business group but the implementation was less than optimal in terms of management and management and the companion also did not take part in directing the business idea to be made by PKH participants. In terms of skills training, assistants also do not provide them, which of the skills training is expected to later develop the potential of PKH participants, for example, skills training in entrepreneurship, and skills in making handicrafts. By being given this skill, it can help usher in the process of independence for PKH participants. Meanwhile, in terms of health and education, PKH participants are slowly starting to implement it with verification of attendance by mentors in accessing health and education facilities. It can be proven by PKH participants being diligent in coming to the posyandu to check on the health conditions of pregnancy and toddler health, while from an educational perspective, it can be seen from the increasing level of attendance of children at school. This change occurred because of supervision from the companion which was carried out routinely every month.

In addition, in carrying out the function as a mediator in empowering the community, the assistant tries to become a mediator and liaison when conflicts or problems occur, to solve problems that occur, the assistant explains to residents who do not receive assistance, that PKH participant data has been determined by the Ministry of Social Affairs. Meanwhile, for validating PKH beneficiary data, the assistant cooperates with the village government to ensure that the data is from the Ministry of Social Affairs so that there are no mistakes. In addition, the assistant as an advocate for community empowerment has been carried out according to the procedure. This can be seen in the role of the assistant in seeking the rights and interests of PKH participants but not getting these rights to obtain complementary assistance. This is done by improving PKH participant data to be reported to sub-district PKH operators. As well as companions also provide advocacy to families of persons with disabilities by identifying the needs and requirements of persons with disabilities so that what are their rights can be fulfilled. There are three suggestions that the researchers gave, namely (1) PKH Facilitators need to provide skills training to PKH participants, even though they do not provide them directly, but assistants can act as a liaison to find competent personnel to provide skills to PKH participants; (2) PKH Facilitators need to increase verification of PKH participants' attendance to fulfill commitments in accessing Health and Education services. This is intended so that PKH beneficiary families always feel supervised by companions so that they are diligent in accessing health and education services; (3) PKH Facilitators must also have innovations that can accelerate the success of the PKH program, especially innovations that can increase the capacity and independence of PKH participants, especially from an economic perspective, this aims to increase the income of PKH participant families so that they can lead to an independent process.

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