

## EXAMINING SOCIAL POLICIES IN INDONESIA FROM SUHARTO TO JOKOWI

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### ABSTRACT

Poverty remains a critical global issue, notably in Southeast Asia and various countries worldwide, generating substantial efforts for innovation and welfare improvement, as observed in Indonesia. The current community development paradigm stresses the importance of collective efforts between the government and the community, recognizing poverty's multifaceted impact on health, income, community structures, and access to assets. The study delves into the intricate landscape of poverty, a pervasive challenge both nationally and in Makassar City. The research aims to uncover extensive insights into the effectiveness and relevance of these policies in alleviating poverty. It uses qualitative research methods (observation methods, interviews, searching for data) with informants 7 recipients of policy assistance, 1 informant from Tamalanrea Jaya's Program Facilitator/Social Worker, and 2 informants from civil servants of the Tama Lana Jaya Sub-District. The results show that the implementation of social policies aimed at reducing the poverty rate has shown positive outcomes, particularly when beneficiaries receive assistance in the form of financial support, essential food items like rice, milk, and eggs, contributing to an enhancement in the quality of life and overall welfare of the impoverished. Additionally, issues such as dependence on government assistance, redundancy in policy cards, and the impact of high birth rates on program eligibility underscore the complexity of poverty-related challenges in the city.

**KEYWORD:** Social Policy, Indonesia evolution, revolution, President

### INTRODUCTION

Poverty is a persistent global concern that has sparked ongoing debates worldwide. It has evolved into a formidable challenge in social development throughout the 20th and 21st centuries, with several global programs attempting to address it (Soetomo, 2018; Edi S, 2020). Despite these efforts, the issue remains unsolved, and some initiatives have inadvertently exacerbated poverty. Blame is often directed at the state, which faces challenges in creating effective regulations and subsidies resilient to external pressures, given the limitations imposed by globalization on absolute state sovereignty. The Millennium Development Goals (MDGs) and Sustainable Development Goals (SDGs) target poverty elimination with a benchmark income of USD 1.25 per day. Individuals earning less than IDR 18,349 monthly, equivalent to USD 1.25 per day, are considered poor according to these global goals (Todaro, 2000; Jamasy, 2004).

Family size directly impacts income, leading to higher expenditures in larger families. Global efforts to eradicate poverty by 2030 emphasize interventions like social protection and providing productive assets for the poor (Yeboah. M, 2010; UN, 2015; Palash. K, 2016; Saddam. R, 2018). Remarkable progress has been achieved since 2000, resulting in a substantial decline in extreme poverty from 1.9 billion in 1990 to 836 million in 2015 worldwide (World Bank, 2016). However, recent data adjustments indicate a slight increase in the global \$1.90 headcount ratio from 9.2% to 9.3%, with the number of poor people rising from 689 million to 696 million in 2017.

Global poverty has significantly reduced from 36.2% in 1990 to 9.2% in 2017, with progress observed in most regions except the Middle East and North Africa due to conflict. The 2020 Joint Poverty and Prosperity Report offers detailed insights, showing minor changes in global poverty estimation between the March and September 2020 updates. East Asian and Pacific regions experienced a decline in poverty, dropping from 2.1% in 2015 to 1.0% in 2019, driven by reductions in China and the Philippines. Conversely, the Middle East and North Africa saw an increase from 2.1% in 2013 to 7% in 2018, influenced by conflicts in Yemen and Syria. Latin America's poverty remained stable, while Sub-Saharan Africa saw a decline in the poverty rate but an increase in the number of poor people, particularly in East Africa. Differences in poverty rates between East and West Africa diminish at higher poverty lines of US\$3.20 and US\$5.50.

Poverty remains a critical global issue, notably in Southeast Asia and various countries worldwide, generating substantial efforts for innovation and welfare improvement, as observed in Indonesia. The multifaceted impacts of poverty on individuals and society, intertwined causes and effects, persistently contribute to societal challenges. The broad and complex nature of poverty, influenced by economic, social, cultural, and demographic factors, draws attention from policymakers and global politics (Grigs et al., 2008; Mawardi, 2005; Kelly, 2005; Smeru, 2020; Triwibowo, 2016; Thabrany, 2014; Chambers, 1983).

Makassar actively addresses poverty through policies and programs, but public concerns persist (Susanti, 2013; Hadna, 2017). In Makassar, poverty is a pressing social issue, demanding serious government attention. The city employs the basic needs approach, measuring poverty as the economic inability to meet essential food and non-food needs. The Poverty Line (GK) calculation includes the Food Poverty Line (GKM) for minimum food needs and the Non-Food Poverty Line (GKNM) covering housing, clothing, education, health, and other necessities (BPS, Makassar in Figures 2021).

The 1945 Constitution emphasizes social security as a right, and Law Number 11 of 2009 outlines poverty reduction policies. Articles 19 and 20 (c) emphasize addressing poverty through various means. Researchers conducted case studies in the Tamalanrea Jaya Sub-District and Bakung Sub-District due to high poverty levels and issues of community resilience. Specific attention is needed for government policies, including repairing the Conditional Cash Transfer (CCT) system and Integrated Social Welfare Data (DTKS) to align with community needs.

Alleviating poverty is crucial for global development, prompting international collaboration like the Millennium Development Goals (MDGs). In Indonesia, poverty reduction efforts date back to the 1960s, emphasizing basic needs through strategies outlined in the Eight-Year National

Development Plan. Policies focused on education, housing, and healthcare aim to enhance national and family income, fostering prosperity. The ongoing community development paradigm stresses the importance of collective efforts between the government and the community, recognizing poverty's multifaceted impact on health, income, community structures, and access to assets.

In Indonesia, the late 1990s witnessed economic and political turmoil, leading to a severe crisis and a subsequent increase in poverty rates. Despite experiencing recovery, challenges persist, notably in addressing unexpected rises in the poverty rate due to factors like soaring rice prices. Government initiatives, including the Social Safety Net program, supported by the Asian Development Bank, aim to counteract these challenges. Improvements in human development indicators, such as education and healthcare services, have been observed, reflecting positive strides in recent years.

The provision of social services for the poor, whether by the government or the private sector, is necessary for poverty alleviation in Indonesia. First and foremost, addressing the non-income dimensions of poverty in Indonesia is essential. High maternal mortality rates, for example, are indicators of poor human development that must be addressed by improving the quality of services available to the poor. (Abdi, 2021; Aryo, 2021) This is more than just a matter of government expenditure; it is also about improving the accountability system for service delivery mechanisms and even governance processes. Second, differences in access to services reflect the characteristics of regional inequality, which ultimately result in differences in the achievement of human development indicators in different regions. Thus, addressing poverty issues in the context of regional disparities requires making community services beneficial to the poor. In Indonesia, the poverty rate fluctuates. This is because of the number of workers and unemployed (people who do not work), which causes economic insecurity. The COVID-19 pandemic, which caused the economy to collapse, increased the poverty rate from 2019 to 2020.

During Joko Widodo's presidency (2014–2020), the government introduced several programs like the Family Hope Program, Rice for the Poor, and health-related cards to combat poverty. The rise in fuel prices in September 2022 led to a \$14 Direct Cash Assistance policy from September to December 2022. However, the distribution of benefits is uneven due to challenges with the Integrated Social Welfare Data. The study emphasizes a sustainable livelihood approach by Robert Chambers, focusing on empowering communities with diverse assets. The research reveals continued dependency on government assistance, limiting the independence of recipients. Poor individuals still face challenges meeting basic needs and require business capital for economic development.

The study delves into the intricate landscape of poverty, a pervasive challenge both nationally and in Makassar City. To tackle this issue effectively, a nuanced understanding of implemented social policies at both levels becomes imperative. The research aims to uncover extensive insights into the effectiveness and relevance of these policies in alleviating poverty. The study conducts an in-depth analysis of the correlation between social policy implementation and poverty, scrutinizing disparities in responses and policy efficacy between Makassar and the national context. This exploration originates from a keen interest in understanding how social policies address poverty

on different scales. This research endeavors to assess the tangible impact of social policy implementation on nurturing resilient communities, especially among impoverished families in Makassar. By evaluating how these policies contribute to community resilience, the study underscores the crucial role of social policies in poverty alleviation in Makassar City.

## LITERATURE REVIEW

### Social Policy on Poverty Issues

Over a century ago, poverty alleviation was always thought to be an important factor in a country's success in overcoming its economy. Therefore, all countries in the world need to develop government policies and programs that are carried out systematically, planned, and in synergy with the business world and society to reduce the number of poor people to increase the degree of people's welfare to live better in meeting their needs. (Nugroho,2014;Simartama,2008;Spiker,1995). What policies can then be implemented to assist people in breaking free from the cycle of poverty?

This paradigm also influenced economic growth during the 1950s and 1960s. On the one hand, economic growth has the potential to improve people's well-being. On the other hand, economic growth can exacerbate inequalities and, as a result, undermine efforts to alleviate poverty. According to (Midgley,2009; Suharto,2009) the greater the inequality in a country, the less likely economic growth is to contribute to an increase in the income of the poor. The ability of economic growth to reduce poverty is frequently measured in terms of the percentage of growth to poverty. Pro-poor growth policies can be viewed positively as an effort to encourage higher expenditure or income growth for the poor relative to the average expenditure/income growth for all groups (Suharto,2009). For developing countries, social policy is not only about social development and social welfare but broader than those. Social policy is not only a matter of poverty but also develops the quality of people who lack access to education, health, food, community resilience, human capital, and social capital so that it is better directed (Midgley,2009; Bridgman, P. &Davis,2004; Dye,2002). Social policies help poor people who are less able to access the development process. Social policy in developing countries starts from "zero", namely "social backwardness" which is different from social policy in developed countries with existing social problems. Therefore, it is necessary to increase the understanding that social policy in developing countries is more than just social welfare, but also development and social justice. (Midgley, 2009). Two approaches to understanding poverty are Cultural and Structural. The cultural approach states that poor people are poor because they do not have a strong mentality, culture, and ability to get out of their poverty life. The strategy is changing values and beliefs, and providing knowledge, skills, and abilities. The cultural poverty approach is Education, Training, and Counseling. The structural approach states that poor people are poor because of structural factors that make them unable to get out of their poverty. The structural approach that education, training, capacity building, cultural change, and mentality will be useless if the structure hinders social mobility for the progress of the poor (Owin,2004; Suharto,2005; Suparlan,2004).

## The Development of Poverty Reduction Policy in Indonesia

The development carried out by countries in the world has the same goal. It is to provide a sense of security and increase the welfare of all people (World Bank, 2017). The state must exist and always be present when talking about development. The presence of the country in overcoming poverty can be assessed, among other things, political will or the seriousness of the country in maintaining the status quo. Quoted by Suharto (2009), Political seriousness can be interpreted as encouragement in social development actors based on actions and results to be achieved. In the context of reducing poverty, in Indonesia, the government is aware that failure to address the problem of poverty can have an impact on various social, economic, social development, and social welfare problems in society (Nugroho, 2014; Simarmata, 2008). Therefore, only at the beginning of PELITA (Pembangunan Lima Tahun / Five Years Development in 1994), the Indonesian government was addressing the problem of reducing poverty as a national development goal (Hastuti et al., 2010). At that time, poverty alleviation continued to be the main agenda of national development which increased quality. Thus, people could be empowered. To understand the form of government attention to poverty reduction, let's look briefly at its development from the New Order era:

### 1. New Order Era

During the 1970s to 1990s, the New Order government focused its poverty alleviation programs on the intensification of the agricultural sector, the development of infrastructure for basic education and health services, and the development of labor-intensive industries. These various programs were designed to reduce the inflation rate, stabilize the prices of basic commodities, and encourage economic growth. The visible positive achievements included an increase in school enrollment rates, a decrease in illiteracy, relatively cheap and stable rice prices, as well as an increase in public nutrition, and health in general (Perdana and Maxwell, 2011). In two decades (1976-1996), the number of poor people decreased drastically from 40% to 11%.

However, the government also sees that many poor people have not been reached by these programs. To overcome this, the government then rolled out Program Inpres Desa Tertinggal (IDT) in 1993-1998. This program aimed to improve the welfare of the community in 20,000 Sub-District throughout Indonesia which were categorized as the poorest or most disadvantaged.

Although the IDT Program yielded some positive results, several studies found flaws in its targeting methods which created loopholes for misuse of program funds. The reason was that policymakers and program-implementing government agencies faced difficulties in identifying and determining effectively and accurately the poor beneficiaries.

### 2. 1998 – 2004 Period

When the economic crisis occurred in Indonesia in 1997, the situation was difficult for the government to control then triggered political turmoil which resulted in the fall of the New Order regime. The unemployment rate increased, and so did the prices of basic goods and the cost of social services. The hurricane of the crisis has wiped out Indonesia's brilliant achievements in reducing poverty over the previous three decades. The percentage of poor people again rose to 24% in 1998.

Facing these conditions, the government through Program Jaring Pengaman Sosial (JPS) intervened in various sectors of life to help people affected by the crisis. Jobs were created through labor-intensive programs and the provision of credit assistance to small and medium enterprises. Subsidies for food, electricity, fuel, health, and the agricultural sector were given to anticipate the worst impact of the crisis, especially on the poor.

The JPS program in the food sector is known as Operasi Pasar Khusus (OPK). Poor people who meet the criteria are allowed to buy rice at prices below market prices. This program became a food subsidy program that was implemented in later periods such as the Rice Program for Keluarga Beras Miskin (Raskin) into Beras Sejahtera (Rastra) and transformed into Bantuan Pangan Nontunai (BPNT).

### 3. 2005 – 2014 Period

The sharp rise in world oil prices in 2005 forced the government to reduce energy subsidies and increase fuel prices and basic electricity tariffs. This condition was exacerbated by the increase in rice prices so the inflation rate soared to 18%. As a result, the number of poor people also increased from 16% to 17.8% in 2006.

To overcome the impact caused by the increase in these prices, the government implemented programs such as Bantuan Langsung Tunai (BLT). BLT was a grant of Rp. 100,000 per month for 6 months and then extended for another 6 months considering the impact of the crisis on 18.6 million poor households which are distributed through post offices throughout Indonesia.

Another program to help the poor deal with the impact of rising fuel prices and electricity tariffs was Bantuan Operasional Sekolah (BOS) and Asuransi Kesehatan untuk Masyarakat Miskin (Askeskin). BOS was handed over to schools and can be used for operational activities, including improving school facilities as well as teacher salary assistance. As for Askeskin, this program provides free health services for the poor. In 2006, Askeskin was transformed into Community Health Insurance/ Jaminan Kesehatan Masyarakat (Jamkesmas), and since 2014 Askeskin has transformed back into Contribution Assistance Recipients/ Penerima Bantuan Iuran (PBI) for National Health Insurance/ Jaminan Kesehatan Nasional (JKN).

## METHOD

This study investigates social policy in Makassar using a qualitative approach, starting from the era of President Soeharto (1968–1998) to Jokowi (2014–2024). The period of this study reflects Indonesia's political transition from the twentieth to the twenty-first centuries. The end of the Suharto era marked a significant shift in Indonesian politics from centralization to decentralization. Changes in the government system have had a significant impact on the types of social policies implemented and the rate of success in reducing poverty across the country. During President Soeharto's administration, he implemented poverty policy programs, including the Presidential Instruction for Disadvantaged Sub-District, rice assistance, health assistance, and education assistance. Until now, precisely during President Joko Wi Dodo's era (2014–present). The research site was in Makassar City in 2 regional studies, namely Tamalanrea Jaya Sub-District and Bakung Sub-District with the duration of the last 35 years of social policy (President Suharto to Joko

Widodo). It used qualitative research methods (observation methods, interviews, searching for data) with informants 7 recipients of policy assistance in the Tamalanrea Jaya Sub-District, 1 informant from Tamalanrea Jaya's Program Facilitator/Social Worker, 2 informants from civil servants of the Tamalanrea Jaya Sub-District. From the Bakung Sub-District, 7 recipients of policy assistance, 2 informants for Civil Servants of the Bakung Sub-District, and 1 informant accompanying the policy program/Social Worker for the Bakung Sub-District. From the Makassar city government, 1 informant from the South Sulawesi Province Social Service, 1 informant from the South Sulawesi Province Cooperative Office. From university academics who understand policy and poverty, namely experts in their fields, namely Hasanuddin University (1 informant Professor, 1 informant Associate Professor, and 1 informant with a Master's degree).

## **RESULTS AND DISCUSSION**

### **Under President Suharto's Presidency (1967 – 1998)**

President Suharto's government focused on stabilizing the economic and political situation by attempting to stabilize the prices of necessities from late 1966 to late 1968. The poverty-relief program is part of Soeharto's Rencana Pembangunan Lima Tahun (REPELITA).

#### ***Introduction to Poverty Problems and Policies under President Soeharto***

National development from PJP I (Pembangunan Jangka Panjang 1) to the end of Repelita (Five Year Development Plan) VI has resulted in a fourfold increase in real per capita income. One year before the start of PJP I (1968), the Indonesian population's per capita income was only around IDR 18.4 thousand. Per capita income had increased to around IDR 1.8 million and IDR 2.0 million in 1993 and 1994, respectively. The industrial sector played a significant role in the GDP, growth, employment, and increased exports, particularly non-oil and gas exports, resulting in Indonesia being classified as a newly industrialized country (NIC). Six years of compulsory education were implemented and are currently being supplemented with nine years. Meanwhile, public health and nutrition improved, resulting in a 10-year increase in life expectancy to 64 years in 1996.

#### ***PJP (Long long-term development)***

National development from PJP I (Pembangunan Jangka Panjang 1) to the end of Repelita (Five Year Development Plan) VI has resulted in a fourfold increase in real per capita income. The first year of long-term development/Pembangunan jangka panjang (PJP I) was carried out in 1969 for 5 years, divided into REPELITA (Five-Year Development Plans/Rencana Pembangunan Lima Tahun) 1 to 5, the total of the long-term development phase one was 25 years. The main goal of this first long-term development is to achieve a strong foundation for the Indonesian nation to grow and develop using the strength of the State to create a just and prosperous people or society based on the ideological pillars of the Indonesian State. In the implementation of the Long Term Development Phase 1 (PJP), the most important development realization is placed in the economic

sector which includes agriculture, poverty, and policies to fulfill the basic needs of the people and the Indonesian nation's economy to be balanced and advanced.

All of these have had a real impact on poverty reduction. One indicator that provides an overview of the increase in people's welfare is the decrease in the number of people living below the poverty line. The poverty line is determined by the population's ability to meet the calorie needs of 2,100 calories per capita per day and basic non-food needs for example, the monthly income of the poor and depending on the amount of food eaten such as meat, fish, chicken, and eggs per day. If there are not enough 2100 calories per day to eat, this category is included in poverty in Indonesia. All of that has been determined by the government and researchers in the field of poverty (Ardiansyah,2009; Suharto,2005).

### ***Presidential Instruction Program for Disadvantaged Sub-District (IDT)***

During the reign of President Soeharto, rural development was limited to the spread of agricultural technology or the modernization of traditional structures in the Sub-District through relationships with elements from outside in such a way that new attitudes and skills can be spread among the villagers to help foster regional development movements (Chambers, 1983; Ismawan, 1985; Kartodirjo, 1987). Rural development should be reviewed on a broader scale, including not only technical, social, and cultural issues that affect rural development but also political and policy aspects.

## **Social Policies Period of President BJ Habibie's Presidency (1998 – 1999)**

### ***Program Opening Summary***

In 1997, Indonesia was hit by a severe economic crisis that impacted the entire country. As a result, the successful development of the previous three decades appeared to have been swallowed up by the crisis (Arsyad, 2004; Hill, 2001). In general, the negative impact has been that people's purchasing power has plummeted, causing many residents to fall into poverty and struggle to meet their social needs. In response, the government launched a rescue program, which was packaged in the Social Safety Net (JPS) program and funded with domestic and foreign loans. Social safety nets in the basic social sector are implemented through the Social Protection Sector Development Program (SPSDP) and the Health and Nutrition Sector Development Program (HNSDP), which are funded by Asian Development Bank (ADB) loan funds. (Bappenas,2004).

In general, the Social Safety Net (JPS) policy program seeks to protect the poor from the negative effects of the economic crisis by expanding access to various basic social services as widely as possible while maintaining service quality. Thus, the poor can access quality social services even if they cannot afford to pay. The JPS components are as follows: (a) low-cost food assistance, (b) health services, (c) educational assistance, and (d) increased employment opportunities.

### ***Social Safety Net Policy Program (JPS)***

The JPS program was developed using a framework technique, which involved identifying the community's problems as a result of the economic crisis's impact. The history of the world's



nations demonstrates that the quality of human resources has proven to be very important in determining the progress and success of a country and a nation's development. Therefore, people must have access to basic social services, including both economic and physical access. According to the 1945 Constitution, the constitution of the central and regional governments is obliged to meet the basic social needs of all citizens to improve people's welfare as a whole and evenly. Many people are unable to access health care as a result of the economic downturn. Furthermore, because the majority of people lack health insurance, more people are unable to access health care. Aside from that, the economic crisis exacerbated the deterioration of healthcare services—poor healthcare services, such as medicines and medical devices, and low operational costs.

The economic crisis had an impact on the world of education as well. Due to the crisis, parents were unable to enroll their children in school. As a result, there has been an increase in students dropping out (not attending school) due to economic reasons. Residents with low levels of education have the potential to contribute to poverty and other social issues. Price increases, on the other hand, indirectly reduce educational quality. Aside from that, the economic crisis has resulted in other phenomena in urban areas, namely the emergence of beggars and buskers (people asking for money) on city streets and other public places. Busking and begging in public places is a way for poor families to meet their basic needs.

### ***Policy Jaring Pengaman Sosial (JPS)***

The term Jaring Pengaman Sosial (JPS) became very popular at the time, but in fact, JPS in many forms had long been implemented in Indonesia. Chapter XIV of the 1945 Constitution on National Economy and Social Welfare, specifically Article 34, reads, "Impoverished persons and abandoned children are to be taken care of by the state." Nonetheless, it has been a long time since it was implemented systematically (Edi Suharto, 2010; Bappenas, 2001). Jaring Pengaman Sosial (JPS) has been implemented in the form of food price stability, SD (Elementary School) and health care centers, the Presidential Instruction Program For Disadvantaged Villages (IDT), and various other forms of policy. Poverty eradication has an impact on fundamental issues as well as the impact of a crisis, which is carried out by the Social Safety Net policy.

### ***Basic Policy of the Social Safety Net Program***

In the aspect of providing a social safety net policy, the Indonesian government received a loan from the ADB (Asian Development Bank) at the time, which was used to address health and nutrition issues and basic education. It was known as the Social Safety Net. In general, this aimed to reduce the negative impacts of the economic crisis, particularly on poor families. One of the Indonesian government's efforts in the JPS program is to provide social protection services to improve the quality of human resources by reducing the negative impact of the economic crisis on the poor, allowing them to be empowered and access available services, particularly education, health, and nutrition. The community's protection lacks compassion (charity) because it can shape people's mentalities as beggars (people who ask for money on the street) who are always dependent on the community. Furthermore, this method tends to undermine existing social values. The JPS program intends to answer the emergence of an economic crisis through national

development with a populist dimension. The JPS program should be viewed as a stimulant effort to boost productivity as the foundation for long-term development.

### ***Social Safety Net Program***

Loan funds from ABD were used to cover the costs of the Social Protection Sector Development Program (SPSDP) and the Health Nutrition Sector Development Program (HNSDP) components. To maintain the state's financial balance, loans for program components are managed directly by the Ministry of Finance. The SPSPDP program's funding is allocated following the government's existing funding system. The fund distribution system is carried out directly to program beneficiaries through financial institutions. In the early stages of this discussion, it was proposed that Indonesian People's Banks throughout Indonesia directly distribute the JPS funds to the target group.

### ***The Impact of the Social Safety Net Program***

The overall impact of the JPS program for basic social services (education, health, social welfare, and family) on improving the community's social conditions has been extremely positive (Bappenas,2001). Even though this program is not intended to address all problems in the basic social service system, it can at least maintain the quality of human resources during times of crisis as a short-term intervention. On the other hand, while this program is not an instrument for eradicating poverty, it has helped the poor temporarily relieve the burden of financing education, health, and family planning during times of crisis. The JPS program was designed as an emergency program to reduce the negative impacts of the prolonged economic crisis; as a result, the JPS program faced obstacles and risks that were potentially greater than expected.

### **Period of President Susilo Bambang Yudhoyono's Presidency (2004 – 2014)**

Poverty is a serious issue that must be addressed. Poverty alleviation must be carried out in a coordinated and systematic manner so that all citizens can live in dignity. Therefore, all stakeholders must work together to achieve success. The 2010-2014 National Medium-Term Development Plan (RPJMN) contains Indonesia's major development agenda, which is then regulated into the annual Government Work Plan (RKP). The 2010 RKP has the theme "National Economic Recovery and Maintaining People's Welfare," while the 2011 RKP has the theme "Acceleration of Equitable Economic Growth Supported by Consolidation of Regional Central Governance and Synergy." The RPJMN 2010-2014 has also set targets for economic development and improvement of people's welfare, including (1) economic growth, with a projection of 7.0–7.7% in 2014; (2) unemployment reduction, with a target of 5–6% by the end of 2014; and (3) poverty reduction, with a target of 8–10% by the end of 2014. (Report Kementerian Perencanaan dan Pembangunan Nasional/ Badan Perencanaan dan Pembangunan Nasional,2015).

Under President Susilo Bambang Yudhoyono's administration (2004–2014), the National Team for the Acceleration of Poverty Reduction (TNP2K) coordinated the implementation of two presidential regulations (Perpres), namely Presidential Decree No.13 of 2009 on poverty reduction coordination and Presidential Decree No.15 of 2010 on poverty alleviation acceleration. The

National Team for the Acceleration of Poverty Reduction (TNP2K) is directly chaired by the vice president and coordinates with all ministries involved in poverty programs. (Suharto,2005).

### ***Family Hope Program (PKH)***

Through Law No. 13 of 2014 on Handling the Poor, the Ministry of Social Affairs has created specific programs related to neglect, alienation, poverty, and disasters, which many people know and feel. The Family Hope Program (PKH) is one of them. The Indonesian government launched the Family Hope Program (PKH) in 2007, the country's first conditional cash transfer program. PKH has been implemented in several countries, particularly in Latin American countries, under various program names, including Mexico and Brazil. Mexico was the first Latin American country to implement a conditional cash transfer program known as Progresa in 1997. In exchange for conditions such as children's school attendance and health check-ups for all household members, cash assistance of up to \$60 per family is provided. After expanding its reach, the program changed its name to Oportunidades in 2002. Brazil launched the Bolsa Escola program in 2001. This program has been quite successful, as it has reached more than five million households in that country in less than a year. Bolsa Escola provides cash to poor households with children aged 6 to 15 years old every month, with the condition that the child attends school; the money earned for one family is US\$15 per month. This program was renamed Bolsa Familia in 2003 (UNDP, 2006).

### ***Community Health Insurance (JAMKESMAS)***

Article 33 of the 1945 Constitution of the Republic of Indonesia mandates the implementation of social security for all people. Article 34 paragraph 2, states that the state develops a social security system for everybody and empowers the weak and underprivileged in society following their dignity as human beings. Article 28 H of the 1945 Constitution of the Republic of Indonesia and Law No. 23 of 1992 on Health stipulates that everyone has the right to receive health services. Because of this, every individual, family, and community has the right to receive protection for their health, and the state is responsible for regulating so that the right to a healthy life is fulfilled for its people, including the poor and disadvantaged. At the end of 2004, the Government issued a policy program as one of the models of the social security system, especially in the health sector, namely the Health Insurance Program for the Poor (PJKMM), which was enforced by Decree of the Minister of Health of the Republic of Indonesia No. 1241/Menkes/SK/XI/2004, where the government appoints PT Asuransi Kesehatan as the organizer for the Health Insurance Program for the Poor.

### ***Rice for the Poor (Raskin)***

Based on the General Guidelines for RASKIN (rice for poor households) issued by the Coordinating Ministry for People's Welfare in 2009, RASKIN is an actual form of the government's commitment to fulfilling food needs for the poor aimed at reducing the burden of poor household expenditure. In addition, it is also intended to increase access for the poor in fulfilling their basic food needs as one of the people's basic rights. This is one of the central and regional government programs that are important in increasing national food security. The RASKIN program is included in cluster I of the poverty alleviation program on Social Assistance

and Protection, which synergizes with other development programs, such as programs to improve nutrition, health, and education. The synergy between these various programs is important in increasing the effectiveness of each program in achieving its goals. The effectiveness of the 2009 RASKIN Program can be improved through coordination between related agencies/institutions both at the central and regional levels. Coordination is carried out starting from planning, implementing, monitoring, and controlling, by prioritizing the important role of community participation.

## **Period of President Joko Widodo's Presidency (2014 – present)**

### ***Smart Indonesia Program***

The Smart Indonesia Program (PIP) is one of the social policies in the aspect of education for Primary Education and Secondary Education, known as PIP Disdakmen. This program is intended for children aged 6 (six) years to 21 (twenty-one) years to get education services up to the completion of primary and secondary education. In 2022, the PIP recipients will be 17,927,308 Indonesian people.

### ***Family Hope Program (PKH)***

In 2007, the Indonesian government launched the Family Hope Program (PKH). This program is the first conditional cash transfer program in Indonesia. It aims to improve human quality by providing conditional cash assistance to poor families in accessing certain health and education services. Since 2007, the Indonesian government has been implementing PKH to accelerate poverty alleviation. The Social Protection Program, also known internationally as Conditional Cash Transfers (CCT), has proven to be quite successful in tackling poverty in many countries, especially the poverty problem. As a conditional social assistance program, PKH has opened up access to poor families, especially pregnant women, and children, to take advantage of the various health service facilities (faskes) and educational service facilities (fasdik) available around them. The benefits of PKH have also begun to be encouraged to include persons with disabilities and the elderly by maintaining the level of social welfare following the mandate of the constitution and the Nawacita of the President of the Republic of Indonesia. People are encouraged to have access to and use basic social services for health, education, food and nutrition, care, and assistance through PKH, as well as access to various other social protection programs that are complementary and sustainable.

The Family Hope Program aspires to be an epicenter and center of excellence in poverty reduction, bringing together various national social protection and empowerment programs. PKH's main mission to reduce poverty is becoming more visible, given that the number of poor people in Indonesia in March 2016 was still 10.86% of the total population or 28.01 million people (Central Bureau of Statistics, 2016). According to the 2015-2019 RPJMN, the government set a poverty reduction target of 7-8% in 2019. PKH is expected to contribute significantly to reducing the number of poor people and reducing inequality (Gini ratio) while also increasing the Human Development Index (IPM). PKH contributes to lowering the expenditure burden of very poor

households (direct consumption impact) while also investing in future generations through improved health and education (the impact of human capital development). This combination of short-term and long-term assistance is the government's long-term strategy for alleviating poverty among PKH beneficiaries.

### ***Kartu Indonesia Sehat (KIS)***

As previously stated, the Kartu Indonesia Sehat (KIS) is a policy initiative launched by President Joko Widodo and Vice President Jusuf Kalla to help people live healthier and more prosperous lives. Joko Widodo officially launched KIS, along with KIP (Kartu Indonesia Pintar) 14 days after being sworn in as the 7th President of the Republic of Indonesia. The presence of this KIS caused a lot of confusion at the time. This is because when KIS was introduced, there was already a National Health Insurance program (JKN) administered by the Badan Penyelenggara Jaminan Sosial (BPJS). Kartu Indonesia Sehat (KIS) is a card that serves as health insurance for the general public, allowing them to receive free health services. This KIS function is available to users in every primary and advanced health facility. The card is part of a program aimed at expanding the previous health program, BPJS Health, which was launched on March 1, 2014, by former President SBY (Susilo Bambang Yudhoyono). Even though both are state-funded health programs, there are differences between KIS and BPJS Health. The main difference is visible in the program's target or beneficiary. If BPJS is a program in which members must register and pay, then KIS members are drawn from those who cannot afford it, cards are issued by the government, and contributions are paid by the government.

### ***Kartu Indonesia Pintar (KIP)***

Through Presidential Instruction Number 7 of 2014, the President of the Republic of Indonesia instructed Ministers, Heads of State Institutions, and Heads of Regional Governments to implement Productive Family Programs, such as the Potensi Sumber Kesejahteraan Sosial (PSKS), Program Indonesia Sehat (PIS), and Program Indonesia Pintar (PIP). To achieve these objectives, related agencies and institutions should take proactive measures following their respective duties, functions, and authorities in a coordinated and integrated manner to increase program effectiveness and efficiency. The Indonesia Smart Card is a government effort to provide people with opportunities to receive a proper education. This program is expected to produce an excellent generation and ensure that young people receive a proper education.

KIP recipients are enrolled as students in the Community Learning Activity Centers (PKBM), Learning Activity Centers (SKB), and Course and Training Institute (LKP), as well as the Non-Formal Basic Data of Education (DAPODIK) unit. The Anggaran Pendapatan Belanja Negara (APBN). Through the Ministries of Education and Culture and Religious Affairs, this assistance fund provides cash assistance to all school-age children from low-income families. The Program Indonesia Pintar (PIP) replaces the Bantuan Siswa Miskin (BSM), which has been in place since 2008. The Smart Indonesia Card (KIP) ensures school-age children from low-income families, regardless of whether they attend school or not (Ministry of Education and Culture of the Republic of Indonesia).

### ***Bantuan Langsung Tunai (BLT)***

Poverty has existed in the reality of human life in very alarming forms and conditions because poverty cannot be simply eliminated. Poverty remains an unresolved social problem in developing countries such as Indonesia. Poverty in developing countries encourages governments to implement policies or programs to address the issue. One of the policy programs to alleviate poverty is direct cash assistance (BLT). Bantuan Langsung Tunai (BLT) is a fund that provides cash to the poor after the government decides to raise fuel prices by reducing subsidies, but the difference is given to the poor. Direct Cash Assistance (BLT) is an implementation of Presidential Instruction No. 3 of 2008 on the implementation of the direct Bantuan Langsung Tunai (BLT) for Rumah Tangga Sasaran (RTS) to compensate for fuel subsidy reductions. The BLT-RTS program's implementation must directly reach and provide direct benefits to the poor (who are classified as RTS), encourage mutual social responsibility, and be capable of fostering public trust in the government, which must consistently pay attention to target households, who undoubtedly feel the heavy burden of rising fuel prices. The BLT program is intended to compensate for increases in the cost of living caused by increases in fuel prices. As a result, the amount of BLT is calculated as an increase in the poor's cost of living due to price increases (inflation) caused directly or indirectly by an increase in fuel prices.

### **Social Policy Evolution in Indonesia**

The evolution of social policy in Indonesia from President Soeharto to President Jokowi Dodo is currently influential on the welfare of the community, especially the poor. There are lots of social policies issued by the Indonesian government with the changing of presidents. Yet, these policies can have a good impact on society, for example, the Jaring Pengaman Sosial (JPS) in 1997-1998. At that time, Indonesia was experiencing an economic crisis such as rising food prices, so the impact was extraordinary. skills) welfare can be even better. Then, in the era of President Susilo Bambang Yudhoyono, assistance such as direct cash assistance (BLT), namely giving money per month, a sustainable PKH for education resilience for school children, and a healthy Indonesian card for underprivileged people who are sick. Thus, they can go to the hospital, but the house is not livable, i.e. repair of poor people's houses. then in the era of President Joko Widodo's sustainable policies before President Susilo Bambang Yudhoyono.

Social policies and service programs have been carried out by the government. Even though a social policy has been well designed, it does not mean that its implementation will be following the expected goals. The success of a policy is seen from how the policy can be transformed into a more applicable guide to guide the implementation of the policy. This thinking is reinforced by the views of Blackmore and Griggs (2007: 1) who defined social policy objectives as efforts to improve social welfare (although often fail) and to meet individual needs such as education, health, housing, and social security. Meeting individual needs and increasing social welfare shows that the value of social justice is very strong in social policies. From this statement, it can be seen that social policy has two main objectives, namely increasing social welfare and meeting individual needs. The separation of the two targets shows that social policy is not only related to services in

the fields of education, health, housing, and social security but also to efforts that encourage the creation of social welfare in society. Another view regarding the understanding of social policy can also be seen in Jamrozik's opinion regarding the definition of social policy. Social policy was put forward by Jamrozik (2001: 37) as a mechanism for allocating existing resources in society to achieve certain outcomes according to the expectations of the dominant values of society and the goals and objectives of predetermined policies. Furthermore, it is explained by Jamrozik that social policy is essentially the regulation of social relations that aims to emphasize certain values and interests.

### **The Impact of National Social Policies on the Poor Community in Makassar**

Social policy is from the government to reduce poverty in all regions of Indonesia. Makassar is one of the cities with a fairly high poverty rate. Therefore, the Government of Indonesia through the Makassar city government, in this case the Mayor (government official) provides social policies in Makassar to reduce poverty. Lots of policies range from Bantuan Sosial Tunai, Program Keluarga Harapan, Kartu Indonesia Pintar, Kartu Indonesia Sehat, and Bantuan Pangan Non Tunai such as giving rice, milk, and eggs. However, the reality shows that the implementation of this policy has positive and negative impacts.

The implementation of social policies aimed at reducing the poverty rate in Makassar has shown positive outcomes, particularly when beneficiaries receive assistance in the form of financial support, and essential food items like rice, milk, and eggs, contributing to an enhancement in the quality of life and overall welfare of the impoverished. This success is attributed to the collaborative efforts of the Makassar city government, the Ministry of Social Affairs of the Republic of Indonesia, the Makassar City Social Service, and dedicated program assistants or social workers in the field ensuring the proper execution of these assistance programs. Despite the achievements, challenges persist, as some impoverished individuals have not fully embraced the policies. Concerns raised in the field include uneven distribution of assistance due to discrepancies in the Data Terpadu Kesejahteraan Sosial (DTKS) system, leading to eligible individuals not receiving the aid they require. Additionally, issues such as dependence on government assistance, redundancy in policy cards, and the impact of high birth rates on program eligibility underscore the complexity of poverty-related challenges in Makassar. Efforts to address these concerns and refine the implementation of social policies remain crucial for a more equitable and effective poverty alleviation strategy.

### **Sustainable Development Goals, Social Policies, and Eradicate Poverty**

SDGs stands for The Sustainable Development Goals which means sustainable development goals (TPB). The SDGs are a collection of 17 global goals set by the United Nations (United Nations). The goals are broad and interrelated although each has its targets to achieve. The number of targets is 169. The definition of SDGs (Sustainable Development Goals) and 17 SDGs goals cover various issues of social and economic development. These include poverty, hunger, health, education, climate change, water, sanitation, energy, environment, and social justice. SDGs are

also known as Transforming Our World: the 2030 Agenda for Sustainable Development or "Transforming Our World: The 2030 Agenda for Sustainable Development". The SDGs concept continues the development concept of the Millennium Development Goals (MDGs) where the concept ended in 2015. Thus, the development framework related to changes in the world situation which originally used the MDGs concept has now been replaced by SDGs. The percentage of the population living below the national poverty line is the number of people below the national poverty line divided by the total population in the same period expressed in percent (%). The poverty line is a representation of the minimum number of rupiah needed to meet the minimum basic needs of food which is equivalent to 2100 calories for food.

Indonesia as an SDGS member country by reducing poverty includes social policies consisting of social protection by assisting the poor in need. Hence, the government through the Ministry of Finance and the Ministry of Social Affairs annually issues 78 trillion APBN (State Budget) funds for policy programs to 10 million program recipients throughout Indonesia. In essence, social protection programs have the noble objective of overcoming poverty and social vulnerability through efforts to increase and improve the capacity of the population to protect themselves from disasters and loss of income. Indonesia already has various social protection programs, starting from the Kartu Indonesia Pintar (KIP), Program Bidikmisi Anak Usia Sekolah, Program Keluarga Harapan (PKH), Jaminan Kesehatan Nasional (JKN), Bantuan Sosial Pangan (BSP), Program Beras Untuk Keluarga Sejahtera (Rastra), Bantuan Pangan Non Tunai (BPNT), Kredit Usaha Rakyat (KUR), Bantuan Usaha Usia Kerja/Produktif Kelompok Usaha Bersama (KUBE), MSME Training, 3 kg electricity and gas energy subsidies, Employment BPJS, Advanced Assistance, and Rehabilitation Age, uninhabitable housing assistance/self-help Housing Stimulant Assistance (RTLH/BSPS), and others.

Social protection consists of social assistance and social security. Social assistance is a transfer of money, goods, and services from the government to the poor/vulnerable without requiring certain contributions to be made. Social security is protection with an insurance scheme that requires a certain number of contributions to its participants. Some of the problems of social assistance include the accuracy which is still very low, and the targets for each program are different. The provision of sectoral data is not integrated. The ownership of data and access to population documents for the poor/vulnerable poor is still limited, the distribution is slow and not on target to target beneficiaries, poor communication, and emergency coordination, the demographic groups of the elderly and disabled who have not received attention, and the lack of optimal outreach and education to potential beneficiaries. based on data of BAPPENAS (Badan Pembangunan Nasional) in 2020 on the level of accuracy of program distribution in 2019. It showed several problems related to lack of accuracy, for example, many families should not be eligible to receive BPNT/Rastra and KUBE, the accuracy rate of BPNT/Rastra is only 44%, PKH 42.6%, KIP 46, 4%, KUBE 45%, and PBI 57.7%. In addition, only 50 out of 514 regencies/cities have updated their data of Data Terpadu Kesejahteraan Sosial (DTKS) over 50%. Of the 50 regencies/cities that have updated the DTKS data, even though it has been updated two to four times in one year, it turns out that the accuracy of the socio-economic data is still low. Hence, it is



necessary to update the DTKS data as a whole by the Central Government and it is very urgent to increase the Government's capacity in updating and collecting data on the number of poor people.

### **Policy Implications for Indonesian Community Development**

The Indonesian government has made various efforts to alleviate poverty, which have taken the form of policies and programs, both direct and indirect. A direct policy program is given directly to the poor, such as direct Bantuan Langsung Tunai (BLT) and Beras Miskin (Raskin), whereas indirect policy, such as the IDT (Inpres Desa Tertinggal) program, is given indirectly to the poor. Despite efforts, poverty cannot be completely eradicated, which means that poverty can be found in almost any area, urban or rural. The current poverty programs, both government and non-government, are generally only temporary, which means that the program will run as long as there is still a budget (funds), and when the funds run out, the program activities will be completed. In other words, the poverty programs that have been implemented thus far have been project-based rather than program-based. It's no surprise that the poverty relief program is unsustainable. In the end, Indonesia's absolute poverty rate remains high.

Several stages of activity appear to be required in developing a policy or program to combat poverty in Indonesia. Starting with an assessment, for example, at this stage, formulating or categorizing the dimensions and factors causing poverty, analyzing the needs and potentials that can be developed, and formulating the forms of programs desired by the poor are all possible. Furthermore, parties that can be involved in anti-poverty activities or programs are identified, as well as a timetable for their implementation. Following the completion of this stage, proceed to the activity implementation stage, followed by the monitoring and evaluation stage.

### **Transformation of Poverty Policy**

The government has implemented the poverty reduction program in Indonesia since the Old Order, precisely since the 1960s, through the strategy of meeting the people's basic needs, which is contained in the Eight-Year National Development Plan (Penasbede). Based on TAP MPRS Resolution No. II/MPRS/1960 on the Major Guidelines of the National Overall Planned Development Phase One 1961–1969, development patterns at the time were more focused on achieving equal welfare for the people. Development at the time was geared toward increasing national income, which shaped the Indonesian people's prosperity (Biro Perancangan Negara, 1956). Prosperity is realized through various policies that increase income independently. The government has prioritized education, housing, and health care, followed by policies to increase national and family income. The Eight-Year National Planned Development document contains the complete program for improving the population's quality (Penasbede, 1961–1969). Based on the description of government policies at the time, it was clear that improving people's quality of life by tackling poverty was the main purpose of development in resilient communities.

The current policy programs run by the government to tackle poverty are the Family Hope Program (PKH) and Non-Cash Food Assistance, which started in 2007. One of the goals of PKH is to provide social protection for very poor families (KSM). This activity is part of the poverty

reduction strategy by providing assistance and conditional cash. In the short term, this policy program is expected to be able to help the poor reduce their expenditure burden, while in the long term, it is hoped that there will be sustainable behavior change in the role of education and health to produce a smart generation.

## CONCLUSION

The problem of poverty in the world is endless because there is an increasing number of people due to poverty, and economic, social, educational, and cultural pressures. In Indonesia, the number of poor people has decreased from year to year, due to the many program policies that have been received by the poor from the era of President Soeharto to the present President Jokowi Dodo. However, this policy has not been obtained by some of the poor because the implementation has not run well. In Makassar, poverty rates have started to decrease due to the distribution of existing policies so that the poor always hope for government assistance. Thus, socialization is needed between the government, social workers as program assistants, and the poor.

The Indonesian government is obliged to improve the welfare of society, especially the poor community. Thus, social policies can reduce poverty throughout Indonesia. With social policy, each program has one solution card. First, one card is enough to handle all policies. Second, is the provision of skills to the poor so that they have good skills so they don't depend on the government because they need to be provided with social capital for each individual so that they are economically capable and survive. Third is the need for participation from the poor themselves in policy making.

## SUGGESTION

To address the persistent issue of poverty in Indonesia, particularly in Makassar, it is imperative to enhance the implementation of social policies and ensure that the benefits reach all deserving individuals. The government should focus on improving the efficiency of policy execution to reach those who have not yet received assistance. Socialization efforts are crucial to informing the poor about the available programs and how they can access them. Additionally, considering the multifaceted nature of poverty, a more integrated approach is recommended. Introducing a unified card system for various social policies can streamline the process, making it more accessible and manageable for both the government and beneficiaries.

Moreover, there is a need to shift the focus from mere financial aid to skill development. Providing skills to the poor can empower them to be self-reliant, reducing dependence on government support. This entails investing in education and vocational training programs to equip individuals with the necessary skills for sustainable livelihoods. Social capital development is equally vital, as it contributes to the economic capability and overall resilience of individuals.

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