

## Effectiveness of PKH Implementation in Poverty Alleviation in Krangkeng Indramayu

### Efektivitas Implementasi PKH dalam Pengentasan Kemiskinan di Krangkeng Indramayu

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#### Abstract

*Poverty remains a multidimensional challenge in Indonesia, particularly in rural areas characterized by limited access to education, health services, and economic opportunities. The Program Keluarga Harapan (PKH), a conditional cash transfer program introduced by the Indonesian government, aims to alleviate poverty and improve human capital among low-income households. However, studies on PKH have largely focused on general outcomes, while limited attention has been given to how local implementation dynamics shape program effectiveness in specific rural contexts. This study examines the effectiveness of PKH implementation in poverty alleviation in Krangkeng Indramayu. This research employed a qualitative case study approach using in-depth interviews, observation, and documentation. Informants included beneficiary households, program coordinators, and PKH facilitators. The findings indicate that PKH implementation has been effective in reducing household expenditure burdens, improving access to education and health services, and encouraging behavioral changes among beneficiaries. Program effectiveness is supported by facilitator competence, local government support, and beneficiary participation. This study highlights the importance of local governance and community-based implementation in shaping PKH effectiveness and proposes strengthening facilitator capacity, improving data accuracy, and enhancing economic empowerment initiatives to improve long-term poverty alleviation outcomes.*

**Keywords:** Poverty Alleviation, Conditional Cash Transfer, PKH, Social Welfare, Program Effectiveness

#### Abstrak

Kemiskinan masih menjadi tantangan multidimensional di Indonesia, khususnya di wilayah pedesaan yang ditandai dengan keterbatasan akses terhadap pendidikan, layanan kesehatan, dan peluang ekonomi. Program Keluarga Harapan (PKH) sebagai program bantuan sosial bersyarat bertujuan untuk mengurangi kemiskinan sekaligus meningkatkan kualitas sumber daya manusia pada rumah tangga berpenghasilan rendah. Namun, penelitian tentang PKH selama ini lebih banyak menyoroiti hasil program

secara umum, sementara kajian mengenai bagaimana dinamika implementasi lokal membentuk efektivitas program di konteks pedesaan tertentu masih terbatas. Penelitian ini bertujuan menganalisis efektivitas implementasi PKH dalam pengentasan kemiskinan di Krangkeng Indramayu. Penelitian ini menggunakan pendekatan kualitatif dengan desain studi kasus melalui wawancara mendalam, observasi, dan dokumentasi. Informan penelitian meliputi keluarga penerima manfaat, koordinator program, dan pendamping PKH. Hasil penelitian menunjukkan bahwa implementasi PKH cukup efektif dalam mengurangi beban pengeluaran rumah tangga, meningkatkan akses pendidikan dan layanan kesehatan, serta mendorong perubahan perilaku penerima manfaat. Efektivitas program didukung oleh kompetensi pendamping, dukungan pemerintah lokal, dan partisipasi aktif penerima manfaat. Penelitian ini menegaskan pentingnya tata kelola lokal dan implementasi berbasis komunitas dalam menentukan efektivitas PKH, serta merekomendasikan penguatan kapasitas pendamping, peningkatan akurasi data, dan pengembangan pemberdayaan ekonomi.

**Kata Kunci:** *Pengentasan Kemiskinan, PKH, Bantuan Sosial Bersyarat, Kesejahteraan Sosial, Efektivitas Program*

## INTRODUCTION

Poverty remains one of the most persistent and multidimensional challenges in developing countries, including Indonesia. Despite sustained economic growth and various government interventions, poverty continues to affect vulnerable populations, particularly in rural areas characterized by limited access to education, health services, and employment opportunities. Poverty is not merely an economic condition, but also a social phenomenon shaped by structural inequality, limited access to resources, and social exclusion (Sen, 1999; World Bank, 2020). For this reason, poverty alleviation requires comprehensive and integrated interventions that address multiple dimensions of human welfare.

In response to this challenge, the Indonesian government introduced the Program Keluarga Harapan (PKH) in 2007 as a conditional cash transfer (CCT) program designed to reduce poverty and improve human capital among low-income households. More broadly, CCT programs have been widely implemented across developing countries as an important policy instrument for poverty reduction and long-term social welfare improvement. By providing financial assistance to poor households while requiring compliance with conditions such as school attendance and access to health services, these programs are expected to reduce immediate economic vulnerability while strengthening human capital investment (Fiszbein & Schady, 2009). In this sense, CCTs are also recognized as part of wider social protection strategies aimed at protecting vulnerable households from chronic deprivation and intergenerational disadvantage.

Previous studies have shown that conditional cash transfer programs contribute to improved educational participation, better health access, and reduced poverty vulnerability. More recent evidence further confirms that cash transfer programs continue to generate positive effects on education, nutrition, and health-related behaviour, particularly when supported by adequate coverage and implementation capacity. Comparative evidence from countries such as Mexico and Brazil also demonstrates that programs such as Progresá and Bolsa Família have significantly

contributed to poverty reduction and human capital development (Bastagli et al., 2016). In the Indonesian context, PKH has also been found to increase household consumption, although the benefits are not always distributed evenly, especially among the poorest households under existing program arrangements.

However, the effectiveness of conditional cash transfer programs is not determined solely by policy design. Their success is also shaped by local implementation dynamics, including targeting accuracy, institutional coordination, facilitator performance, and beneficiary participation (Handa et al., 2018). In many cases, differences in local governance capacity produce variations in program outcomes across regions. This suggests that evaluating PKH at the local level is crucial for understanding how social protection policies actually work in practice.

This study is informed by three conceptual lenses. First, effectiveness theory is used to assess the extent to which PKH achieves its intended objectives, particularly in reducing household vulnerability and improving access to education and health services. Second, social protection theory is used to position PKH as part of the state's effort to protect poor and vulnerable households from chronic poverty and social risk. Third, implementation theory is employed to explain that policy outcomes are shaped not only by formal policy design, but also by actors, institutional coordination, administrative capacity, and local delivery processes. From this perspective, PKH effectiveness should be understood not merely as a matter of benefit distribution, but also as a matter of how policy is implemented in specific local contexts.

Indramayu Regency represents one of the regions where poverty remains a significant socio-economic issue. According to statistical data, the poverty rate in Indramayu reached approximately 12.77 percent, indicating persistent social and economic vulnerability in the region. Within Indramayu, Krangkeng Sub-district is identified as one of the areas with a high concentration of PKH beneficiaries, totaling 2,398 beneficiary households. This makes Krangkeng a relevant and strategic site for examining PKH implementation at the local level. The significance of this setting lies in the fact that social protection outcomes are often mediated by subnational governance capacity, local administrative practices, and the socio-economic characteristics of beneficiary communities.

Studies on PKH in Indonesia have generally highlighted the program's positive contribution to household welfare, education, health access, and social assistance delivery. Nevertheless, much of the existing literature tends to focus on general outcomes of the program rather than on how PKH effectiveness is shaped by local implementation processes in specific rural contexts. As a result, limited attention has been paid to the interaction between facilitator performance, local government support, targeting practices, and beneficiary participation in determining program effectiveness on the ground. This gap is important because PKH is implemented not in an abstract policy environment, but within concrete local institutional and social settings.

In this regard, the present study positions itself within the gap between broad evaluations of PKH outcomes and the need for grounded analysis of local implementation dynamics. Its novelty lies in examining PKH effectiveness in Krangkeng Indramayu not merely as an outcome of cash transfer distribution, but as a locally mediated social protection process shaped by facilitators, village-level support,

institutional coordination, and beneficiary participation. This perspective allows the study to move beyond administrative assessment and toward a more contextual understanding of how poverty alleviation programs function in rural Indonesia.

To address this issue, this study uses a qualitative case study approach focused on the local implementation of PKH in Krangkeng Indramayu. Accordingly, the study addresses three research questions: (1) How effective is PKH implementation in poverty alleviation in Krangkeng Indramayu? (2) What factors influence the effectiveness of PKH implementation in the study area? and (3) How can PKH implementation be improved to support more sustainable poverty alleviation?

Based on these questions, this study aims to examine the effectiveness of PKH implementation in poverty alleviation efforts in Krangkeng Indramayu, identify the factors influencing program effectiveness, and formulate strategies for improving program outcomes. This study contributes to the literature on poverty alleviation and social protection by emphasizing the importance of local governance dynamics in determining program success. In addition, its findings offer practical policy recommendations for strengthening the implementation of conditional cash transfer programs in rural and economically vulnerable regions in Indonesia.

## **METHOD**

This study employed a qualitative case study approach to examine the effectiveness of PKH implementation in poverty alleviation in Krangkeng Indramayu. A qualitative approach was chosen because the study seeks to understand program implementation not only as an administrative process, but also as a social practice shaped by the experiences, perceptions, and interactions of the actors involved. The object of this study is the implementation of PKH, with particular attention to its effectiveness, the factors supporting or constraining it, and possible strategies for improving its outcomes in the local context.

The research site was selected purposively. Krangkeng Indramayu was chosen because it has a relatively high number of PKH beneficiaries and persistent poverty conditions, making it a relevant setting for examining the implementation of social assistance in a rural area. This setting also provides an important context for understanding how PKH operates in a community characterized by socio-economic vulnerability and limited access to resources.

Informants were selected purposively based on their direct involvement in PKH implementation. They consisted of beneficiary households, PKH facilitators, sub-district coordinators, and regency-level coordinators. Beneficiary informants were selected based on their experience as PKH recipients, while facilitators and coordinators were selected based on their institutional roles and direct knowledge of program implementation. This selection enabled the study to capture perspectives from both policy implementers and program recipients, thereby providing a more comprehensive understanding of PKH implementation at the local level.

Data were collected through in-depth interviews, observation, and documentation. In-depth interviews were used to explore the experiences, perceptions, and challenges encountered in PKH implementation. Observation was conducted to understand

program activities and social interactions in their natural setting, while documentation was used to support and validate the data obtained from interviews and observation. In this way, the study combined multiple sources of evidence to strengthen the depth and credibility of the findings.

Data analysis followed the interactive model of Miles, Huberman, and Saldaña (2014), which consists of data condensation, data display, and conclusion drawing or verification. The analysis was conducted in stages, beginning with the reduction and organization of field data, followed by the categorization of themes, interpretation of patterns, and final verification of findings. To ensure data validity, this study applied source triangulation, method triangulation, and member checking by comparing information across informants and confirming selected findings with participants.

## FINDINGS AND DISCUSSION

### Findings

**Table 1. research Informants**

No.	Informant Category	Position/Role	Relevance
1	Regency coordinator	PKH coordinator at regency level	Program monitoring and policy implementation
2	Sub-district coordinator	PKH coordinator at sub-district level	Field coordination and supervision
3	Facilitator	PKH field facilitator	Direct assistance and monitoring of beneficiaries
4	Beneficiary household 1	PKH recipient	Experience of receiving PKH benefits
5	Beneficiary household 2	PKH recipient	Experience of compliance and use of PKH assistance

### Effectiveness of PKH Implementation

The findings show that PKH implementation in Krangkeng Indramayu has contributed to reducing the economic vulnerability of beneficiary households. In practice, the assistance was mainly used to support daily needs, children's education, and family health expenses. This finding suggests that PKH plays an important role in easing the short-term expenditure burden of poor households, especially in a rural setting where income is often unstable and seasonal. One beneficiary clearly stated that, *"Since joining PKH, my family's economic condition has improved... the assistance really helps reduce our daily expenses"* (Beneficiary 1, 2025). This statement indicates that, at the household level, PKH is not perceived merely as formal government aid, but as a meaningful resource for maintaining basic welfare.

The educational function of PKH also emerged strongly from the field findings. Beneficiaries explained that the assistance was frequently used to pay for uniforms, transportation, books, and other school-related needs. In addition to reducing educational costs, PKH also contributed to greater parental awareness of the importance of schooling. As one beneficiary explained, *"They are now more enthusiastic about going to school because their educational needs are fulfilled"* (Beneficiary 2,

2025). This finding is important because it shows that the effect of PKH is not limited to material assistance, but also includes changes in household priorities regarding children's education.

A similar pattern was found in relation to health access. Beneficiaries reported more frequent visits to health facilities, especially for pregnant women, toddlers, and other vulnerable family members. A local coordinator explained that beneficiaries had become *“more concerned about children's education, and pregnant women are no longer afraid to go to the health centre for pregnancy check-ups”* (Sub-district Coordinator, 2025). This indicates that the conditional aspect of PKH has encouraged health-seeking behaviour, thereby supporting the program's role in improving basic human development outcomes.

Taken together, these findings indicate that PKH implementation in Krangkeng Indramayu has been relatively effective in achieving its short-term objectives. The program reduces expenditure pressure, facilitates access to education and health services, and encourages changes in household behaviour. In this sense, PKH functions not only as a cash assistance scheme, but also as a social protection mechanism that supports welfare improvement and human capital development.

### **Targeting Accuracy and Data Updating Challenges**

Another important finding concerns the relative accuracy of PKH targeting in Krangkeng Indramayu. Informants generally considered that program distribution had followed the intended mechanism and that the use of integrated welfare data and the *Kartu Keluarga Sejahtera* (KKS) helped improve transparency. A sub-district coordinator emphasized that, *“KKS is important, not only to withdraw the funds, but also as the official identity of beneficiary households”* (Sub-district Coordinator, 2025). This indicates that KKS functions not only as a payment instrument, but also as an administrative tool that supports accountability in the distribution process.

The implementation of *Pertemuan Peningkatan Kemampuan Keluarga* (P2K2) also strengthened the effectiveness of the program. These meetings served as a regular platform through which facilitators delivered information, reinforced awareness, and guided beneficiaries on family financial management, education, and health. In this regard, PKH implementation was not limited to the transfer of funds, but also included communicative and educative elements intended to shape beneficiary behaviour. This finding strengthens the argument that PKH works most effectively when assistance is accompanied by continuous interaction between facilitators and beneficiary households.

However, the study also found that targeting effectiveness remains constrained by data updating problems. Several informants noted that changes in household conditions were not always immediately reflected in the administrative system. As a result, some households whose conditions had improved remained in the program, while the updating of beneficiary status often depended on the speed and quality of local reporting. This finding suggests that although targeting mechanisms are generally functioning, their effectiveness is still vulnerable to bureaucratic delay and incomplete local data synchronization.

These issues indicate that targeting accuracy should not be understood as a one-time administrative achievement, but as an ongoing process requiring continuous verification and data updating. In the context of rural social assistance programs, data quality remains central to ensuring that benefits reach the intended recipients and that social protection programs remain both fair and effective.

### **Facilitator Role and Local Governance Support**

The findings further reveal that PKH effectiveness in Krangkeng Indramayu is strongly shaped by the performance of facilitators and the quality of local institutional support. Facilitators were identified as key actors who bridged government policy and beneficiary households. Their responsibilities included monitoring compliance, organizing meetings, assisting with administrative issues, and ensuring that beneficiaries understood program requirements. As one local coordinator explained, *“My responsibility is to supervise and monitor the performance of PKH facilitators in Krangkeng and make sure the program runs properly”* (Sub-district Coordinator, 2025). This indicates that the success of PKH is closely tied to everyday field-level implementation rather than to policy design alone.

Facilitators were also described as playing an active role in regular visits, communication, and guidance. Their engagement increased beneficiary awareness and helped households comply with educational and health requirements. In addition, facilitators often acted as intermediaries in addressing administrative problems, such as blocked cards, delayed access to assistance, or confusion regarding eligibility. This suggests that facilitator competence, motivation, and consistency are central to the practical effectiveness of PKH in local settings.

At the same time, external support from village government and local institutions was also found to be important. Village authorities assisted with identifying beneficiaries and facilitating implementation at the community level, while coordination with health and education institutions supported beneficiaries’ access to basic services. These findings show that PKH effectiveness is not produced by the program alone, but by a broader network of local governance and institutional collaboration. In this sense, the program works more effectively when facilitators, village governments, and service institutions operate in a coordinated manner.

**Table 2. Factors Supporting PKH Effectiveness in Krangkeng Indramayu**

<b>No.</b>	<b>Factors</b>	<b>Description</b>
1	Facilitator competence	Active monitoring, guidance, and assistance to beneficiaries
2	Local government support	Administrative support and coordination at village level
3	Cross-sector coordination	Linkages with schools, health centres, and related institutions
4	Beneficiary participation	Attendance in meetings and compliance with program conditions
5	Data administration	Use of KKS and integrated data to support

	targeting accuracy
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**Economic Empowerment as a Limitation of PKH**

Although PKH has been effective in reducing short-term poverty vulnerability, the findings also indicate an important limitation: the program has not yet fully ensured long-term economic independence for beneficiary households. Most beneficiaries experienced PKH primarily as a form of consumption support that reduced expenditure pressure, rather than as a pathway toward sustainable livelihood improvement. This means that PKH is effective as a protective mechanism, but its transformative function remains limited when not linked to economic empowerment initiatives.

This limitation became visible in the gap between improved access to education and health, on the one hand, and the absence of more sustainable income-generating opportunities, on the other. While beneficiaries gained support for schooling and health expenses, the program by itself did not necessarily create new economic capacities. As a result, the reduction of poverty achieved through PKH remains vulnerable to reversal if households continue to depend on unstable informal work without additional support for economic strengthening.

For this reason, the findings suggest that PKH should be understood as necessary but not sufficient for sustainable poverty alleviation. Its long-term effectiveness depends on whether social assistance can be linked with broader empowerment measures, such as skills training, micro-enterprise development, or community-based livelihood support. In this respect, PKH needs to be seen as one component within a broader anti-poverty strategy rather than as a standalone solution.

**Discussion**  
**Effectiveness of PKH Implementation in Krangkeng Indramayu**

The findings of this study show that PKH implementation in Krangkeng Indramayu has been relatively effective in reducing short-term household vulnerability. The reduction of expenditure burdens, improved access to education and health services, and greater awareness among beneficiary households indicate that PKH functions as an important local social protection instrument. This finding is consistent with the broader literature on conditional cash transfer (CCT) programs, which shows that such programs can reduce immediate poverty vulnerability while strengthening household investment in human capital (Fiszbein & Schady, 2009; Bastagli et al., 2016). Recent evidence also confirms that cash transfer programs contribute positively to health- and education-related outcomes when supported by adequate implementation capacity and service access (Barbado et al., 2024).

In the case of Krangkeng Indramayu, PKH appears to work not only as a mechanism for distributing cash assistance, but also as a program that encourages behavioural adjustment among beneficiary households. The program supports school attendance, routine health check-ups, and the prioritization of essential household needs. These findings reinforce the view that social assistance can be effective when its

implementation combines financial transfers with continuous engagement between facilitators and beneficiaries. At the same time, the findings also suggest that the benefits of PKH remain concentrated in the domain of short-term protection rather than long-term structural transformation. This is in line with recent evidence from Indonesia showing that social policy interventions can improve specific welfare outcomes but still require complementary support to produce broader and more durable social change (Priebe & Sumarto, 2025).

### **Local Governance and Facilitator Support**

This study also demonstrates that PKH effectiveness is strongly mediated by local implementation dynamics. The role of facilitators, village-level support, and cross-sector coordination emerged as central factors shaping program outcomes in Krangkeng Indramayu. Rather than operating automatically through policy design alone, PKH depends on the quality of relationships and institutional processes at the local level. Facilitators, in particular, serve as the main link between policy and practice by translating program rules into everyday guidance, monitoring compliance, and resolving administrative barriers faced by beneficiaries.

These findings are consistent with implementation-oriented research showing that the effectiveness of social assistance programs depends heavily on frontline delivery systems, institutional coordination, and subnational administrative capacity (Handa et al., 2018). In Indonesia, reform assessments by the World Bank have similarly emphasized that improving the effectiveness of PKH requires stronger delivery systems, greater interoperability of social registries, and improved field-level institutional capacity (World Bank, 2024). The Krangkeng case therefore confirms that the local state, especially facilitators and village institutions, plays a decisive role in determining whether PKH functions merely as an administrative transfer or as an effective social protection process.

### **Targeting Accuracy and Data Updating Challenges**

Another important issue highlighted by this study is the question of targeting accuracy. The findings show that PKH targeting in Krangkeng Indramayu has generally worked as intended, supported by administrative tools such as the *Kartu Keluarga Sejahtera* and integrated beneficiary data. However, the persistence of delays in updating household conditions indicates that targeting remains vulnerable to bureaucratic lag. This means that targeting effectiveness cannot be understood as a fixed technical achievement, but rather as an ongoing governance process requiring continuous verification and adjustment.

This finding is relevant to wider debates in social assistance research, where outdated registries and weak delivery systems are widely recognized as causes of both inclusion and exclusion errors. In Indonesia, recent social assistance reform efforts

have also stressed that strengthening the social registry and updating local data are essential for improving targeting quality and accountability in PKH and related programs (World Bank, 2024). In this regard, the Krangkeng case illustrates that even when the formal distribution mechanism is functioning, fairness and efficiency still depend on the responsiveness of local data updating and administrative coordination.

### **Economic Empowerment as a Limitation of PKH**

Although PKH has proven effective in reducing short-term household vulnerability, the findings of this study indicate that its contribution to long-term economic independence remains limited. Most beneficiaries experience PKH primarily as a form of expenditure support rather than as a pathway to sustainable livelihood improvement. This suggests that PKH performs well as a protective mechanism, but less strongly as a transformative intervention capable of moving households toward lasting economic autonomy.

This limitation echoes broader international discussions on poverty reduction, which increasingly argue that social assistance alone is rarely sufficient to produce sustainable exits from poverty. Cash transfers are more effective when combined with complementary measures such as livelihood support, skills development, and economic inclusion strategies (Ruben, 2025). In the Indonesian context, recent reform efforts have likewise pointed to the importance of linking PKH beneficiaries with broader delivery-system improvements and complementary support mechanisms (World Bank, 2024). Therefore, the findings from Krangkeng Indramayu suggest that the long-term effectiveness of PKH would be strengthened if the program were more systematically integrated with economic empowerment initiatives rather than operating mainly as a consumption-support instrument.

### **CONCLUSION**

This study concludes that PKH implementation in Krangkeng Indramayu has been relatively effective in reducing short-term household vulnerability. The program has helped beneficiary households reduce expenditure burdens, improve access to education and health services, and strengthen awareness of the importance of investing in children's schooling and family health. In this sense, PKH functions not only as a cash transfer mechanism, but also as a local social protection instrument that supports basic welfare improvement.

The effectiveness of PKH in the study area is shaped by several interrelated factors, particularly facilitator competence, village-level support, cross-sector coordination, beneficiary participation, and the quality of administrative targeting. At the same time, the study finds that data updating remains a persistent challenge and that PKH's long-term poverty reduction capacity is still limited when the program is not connected to sustainable economic empowerment. These findings indicate that PKH effectiveness should be understood not merely in terms of benefit distribution, but also in terms of local implementation quality and institutional responsiveness.

This study contributes to the literature by showing that PKH effectiveness is mediated by local governance and community-based implementation processes. Accordingly, policy improvement should focus on strengthening facilitator capacity, improving beneficiary data systems, enhancing coordination across local institutions, and linking PKH with livelihood and economic empowerment initiatives in order to support more sustainable poverty alleviation.

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