Policy Analysis of The Family Hope Program (PKH): From Context, Input, Process, Product As A Manifestation of Economic Independence

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Abstract.
This study aims to analyze the implementation of the Family Hope Program (PKH) policy based on the perspective of Context, Input, Process, and Product (CIPP) and explain its contribution to the realization of economic independence of beneficiary families in Kota Utara District, Gorontalo City. The research uses a qualitative approach with data collection techniques through observation, in-depth interviews, and documentation of PKH companions, beneficiary families, government officials, and related parties in East Wongkaditi Village and West Wongkaditi Village. Data analysis is carried out through data reduction, data presentation, and conclusion drawn. The results of the study show that in the context aspect, PKH is still very relevant to the socio-economic conditions of the community which is dominated by low-income groups and dependent on the informal sector so that the program becomes an important instrument in meeting the needs of education and health. In the input aspect, the implementation of the program is supported by regulations, funding, and information systems, but still faces limitations in the number of companions, inaccurate data on beneficiary families, and limited support facilities. In terms of the process, the verification mechanism, distribution of assistance, and assistance have run according to the provisions, but their effectiveness is still influenced by inter-agency coordination, the quality of assistance, and technical obstacles in the implementation of the program. In terms of product, PKH is able to increase access to education and health and reduce the burden of household expenses, but it has not been fully able to encourage the realization of economic independence for beneficiary families in a sustainable manner. This study recommends strengthening the synergy of PKH with economic empowerment programs, increasing the capacity of companions, updating beneficiary data regularly, and developing an evaluation system oriented towards achieving economic independence. This study concludes that the effectiveness of PKH is not only determined by the success of the distribution of social assistance, but also by the ability of policies to transform beneficiary families into economically independent families through the implementation of integrated and sustainable policies.

Keywords: *Family Hope Program, Social Policy, CIPP, Economic Independence and Social Assistance.*

I. INTRODUCTION

Developing, including Indonesia, with deterministic structural characteristics. The existence of poverty is not solely triggered by internal household conditions, but is also accelerated by limited access to social opportunities, weak public service coverage, and low local economic carrying capacity. This empirical reality emphasizes the urgency that the poverty alleviation agenda must be comprehensively and sustainably orchestrated through the formulation of targeted state policies. This dynamic plays a crucial role as a substantial part of the study of the conception of the welfare state as well as a tangible manifestation of the enforcement of social justice for all elements of the Indonesian nation. The government explained that the problem of poverty in Indonesia sometimes needs to be overcome with special programs because poverty alleviation as a whole is considered one of the goals of increasing poverty and social needs.

In order to respond to these structural problems, the Indonesian government initiated and operationalized various social protection program instruments. The program includes Direct Cash Assistance (BLT), Smart Indonesia Card (KIP), Healthy Indonesia Card (KIS), Non-Cash Food Assistance (BPNT), and various other community social security schemes. This series of intervention programs is designed in an integrative manner to reduce the burden of domestic expenditure on poor families while opening up accessibility channels for the fulfillment of basic services. Each program carries a varied locus of orientation, and not all of the intervention schemes are focused on the long-term human capacity building agenda. The

purpose of this study is to describe and analyze the implementation of the Family Hope Program (PKH) and its inhibiting factors in the provision of assistance in Sintang Regency [1].

Of the many social security instruments rolled out, the Family Hope Program (PKH) is positioned as one of the most strategic interventions. PKH has successfully integrated the conditional cash assistance scheme with direct intervention steps in the education, health, and sociological welfare sectors of the family. The main goal of PKH is to reduce or minimize the problem of poverty and increase the access of the poor to basic services such as health and education [2]. This distinctive characteristic is what positions PKH very relevant to be researched, especially in the framework of the study of Pancasila and Citizenship Education (PPKn) which focuses on the internalization of social justice values, protection of citizens' rights, and the escalation of the quality of human resources as the main pillars of national development.

The Family Hope Program (PKH) is one of the pillars of conditional social assistance that is architected to break the chain of poverty across generations through the escalation of the quality of human resources in poor household clusters. Since its official implementation in 2007, PKH's position has not only been placed as an instrument for reducing short-term functional poverty, but also positioned as a form of long-term investment in the education, health, and social welfare insurance sectors. The Ministry of Social Affairs emphasized that PKH acts as a flagship program in the social protection system that aims to accelerate the progressive improvement of the quality of life of poor families. The research in Banyumas Regency aims to explore and analyze PKH Policies in Poverty Alleviation [3].

Previous research has examined the implementation of PKH policies from various perspectives. Sutikno et al. [4] analyzed the implementation of PKH in Gununglurah Village, Banyumas Regency, with a focus on improving economic welfare, education, and community empowerment. Darmadi et al. [5] examine the implementation of a national government program at the sub-district or local government level and the influence of the government system on its implementation in Waru District, Sidoarjo Regency. Another study by Darmin et al. [6] in Bukit Wolio Indah Village, Baubau City, found that the implementation of the Family Hope Program had been carried out according to procedures, but it was found that the facilities in the implementation were inadequate. Communication and access to information problems are also obstacles in the implementation of PKH in Bone-Bone Village, Baubau City [7].

Within the scope of Gorontalo Province, especially in the administrative area of Gorontalo City, the issue of poverty is still a crucial topic that requires academic attention. Kota Utara District is recorded as one of the areas with a relatively high concentration of PKH Beneficiary Families (KPM) when compared to several surrounding sub-districts. Portrait of data on recipients of the Family Hope Program (PKH) in East Wongkaditi Village and West Wongkaditi Village during the period 2021 to 2025 shows that the mapping of program beneficiaries is crystallized in three main component pillars, namely the education sector, the health sector, and the disability sector. In the East Wongkaditi Village area, the quantity of PKH beneficiaries in the education sector showed the most dominant figure, followed by the health sector, indicating that the majority of recipient families had school-age children and pregnant women/early childhood. The phenomenon of fluctuations in the number of beneficiaries and the lack of optimal economic independence in the two villages, even though PKH has been running regularly, shows that there is a gap in understanding how the policy works from the context, inputs, processes, to products in realizing economic independence. The implementation of the PKH policy in Kotayasa Village, Sumbang District, Banyumas Regency is in accordance with the rules and the obstacles faced can be overcome properly [8].

The novelty of this research does not lie in the selection of variables separately, but in the construction of a predictive model that places context, input, process, and product aspects as four integrative dimensions in analyzing PKH policies in Kota Utara District, Gorontalo City. This study specifically focuses on the dynamics of beneficiary fluctuations and the level of economic independence in East Wongkaditi and West Wongkaditi Villages, which shows a contradictory pattern between the high number of recipients and the lack of optimal economic independence. Unlike previous studies that tended to analyze PKH from only one or two aspects (e.g. implementation or impact), this study examines how the four dimensions interact with each other conceptually to produce economic independence in the local context. This approach is also enriched with the lens of Public Administration Science and Pancasila and Citizenship Education, which

have not been widely applied simultaneously in PKH analysis, to understand the mechanisms of social justice and human resource development.

This research contributes in three aspects, namely theoretical, practical, and empirical. Theoretically, this study develops a more comprehensive framework for the implementation of the Family Hope Program (PKH) policy through the integration of **context, input, process,** and **product (CIPP)** dimensions in realizing community economic independence, so that it can be a reference for the development of public policy studies in future research. Practically, the results of the research are expected to be input for the Gorontalo City Government and the Ministry of Social Affairs of the Republic of Indonesia in formulating a more effective, targeted, and sustainable PKH implementation strategy. Empirically, this study provides an in-depth overview of the dynamics of PKH implementation in East Wongkaditi Village and West Wongkaditi Village, North Kota District, Gorontalo City, which have typical characteristics of beneficiaries and program implementation dynamics. Based on these contributions, this research is directed to answer four main questions, namely: (1) what is the policy context of the Family Hope Program (PKH) in Kota Utara District, Gorontalo City; (2) how to input the Family Hope Program (PKH) in Kota Utara District, Gorontalo City; (3) how the implementation process of the Family Hope Program (PKH) in Kota Utara District, Gorontalo City; and (4) how the Family Hope Program (PKH) products in realizing economic independence in Kota Utara District, Gorontalo City.

II. METHOD

Family Hope Program (PKH) in Gorontalo City. A qualitative approach facilitates an in-depth understanding of a phenomenon from a participant's point of view, and is useful for exploring the meaning behind complex data. The descriptive design aims to provide a comprehensive overview of the implementation of PKH based on the CIPP (Context, Input, Process, Product) framework in order to realize economic independence. Magfira and Saharuddin also used the CIPP evaluation model with a qualitative descriptive approach in evaluating PKH in Bantul Regency. This research focuses mainly on the interpretation and understanding of the experiences and views of informants related to the implementation of the program. This approach is relevant for examining the dynamics of public policy and its influence on community welfare, and the results can produce a rich and contextual understanding of PKH. This research took place in East Wongkaditi Village and West Wongkaditi Village, North Kota District, Gorontalo City. The selection of the location is based on the high concentration of PKH Beneficiary Families (KPM) and the fluctuation in the number of beneficiaries from 2021 to 2025. The researcher involved six key informants as research subjects, selected through the purposive method. The informants consisted of the city-level PKH coordinator, PKH companions in both villages, and three PKH KPMs who had experienced the benefits of the program. The researcher selected informants based on the criteria of relevance and their ability to provide in-depth information about the context, inputs, processes, and products of PKH.

The use of purposive sampling techniques aims to obtain informants who have direct knowledge and experience related to the implementation of PKH. The limited number of informants allowed researchers to conduct in-depth interviews and intensive participatory observations. Data collection involves three main techniques, namely in-depth interviews, observations, and documentation. Researchers conducted in-depth interviews with key informants to gain their perspectives on the implementation of PKH, including the challenges and successes found [9]. The interview questions are structured in a semi-structured manner, allowing for a broader exploration of the topic. Observations were carried out at the research site to directly observe the interaction between PKH and KPM companions, as well as the socio-economic conditions of the beneficiary communities. Hidayat also utilizes observations, interviews, and documentation in his qualitative research. Documentation includes tracking secondary data such as program reports, beneficiary data, and regulations related to PKH that are relevant to the research objectives. This triangulation data collection aims to increase the validity and credibility of research findings. This study uses the Miles and Huberman interactive data analysis model, which includes data reduction, data presentation, and conclusion drawn. Data reduction is done by summarizing, selecting the main points, focusing on key points, looking for patterns, and removing unnecessary ones from interview transcripts and observation notes. This process is done

manually, with researchers reading, marking, and categorizing important information using thematic codes. The presentation of data is presented in the form of a systematic descriptive narrative, supported by direct quotations from informants to enrich interpretation. Conclusions are drawn inductively, move from specific data to broader generalizations, and are verified continuously throughout the study.

The researcher ensures the validity of the data through triangulation of sources and methods. Source triangulation involves comparing information obtained from various informants (coordinators, facilitators, and KPM) to ensure consistency and reliability of data. The triangulation method is carried out by comparing data from interviews, observations, and documentation to check the suitability of information. The researcher also conducts member checking by reconfirming the interpretation of the data to the informant to ensure that the researcher's understanding is in accordance with their perspective. This process helps reduce bias and increase the credibility of research findings. Kanuna et al. [10] also emphasized the importance of evaluations that include effectiveness, efficiency, adequacy, equity, responsiveness, and precision in program implementation. This study adopts the Context, Input, Process, Product (CIPP) evaluation framework developed by Stufflebeam to comprehensively analyze PKH. The context evaluation focuses on identifying the needs, problems, and opportunities underlying the PKH policy, including program objectives and the socio-economic environment in Gorontalo. Input evaluation reviews the resources used, such as budgets, facilities, and human resource qualifications. Evaluate the process of reviewing program implementation in the field, including aid distribution mechanisms, communication, and coordination between related parties. The product evaluation assesses the results and impact of the program, especially on improving the welfare and economic independence of KPM. The CIPP approach allows for a thorough analysis of various aspects of PKH policies.

III. RESULT AND DISCUSSION

Context and Input of the Family Hope Program in Kota Utara District, Gorontalo City

Conformity of Policy Programs with Real Needs of the Community

The findings of the research collected from the field confirm that the socio-economic conditions of the beneficiaries of the Family Hope Program in North Kota District are generally still classified as middle to lower economic clusters. The livelihood structure of citizens is dominated by activities in the informal sector with an uncertain level of daily income, thus implicating the emergence of sociological difficulties in meeting basic domestic needs independently, especially in the basic education sector and family health maintenance. Based on formal documentation from the social authority, the volume of distribution of underprivileged residents who rely on the social safety net program is recorded to be still on a fairly high quantity scale, with a map of the distribution of membership presented in a structured manner in the following graph.

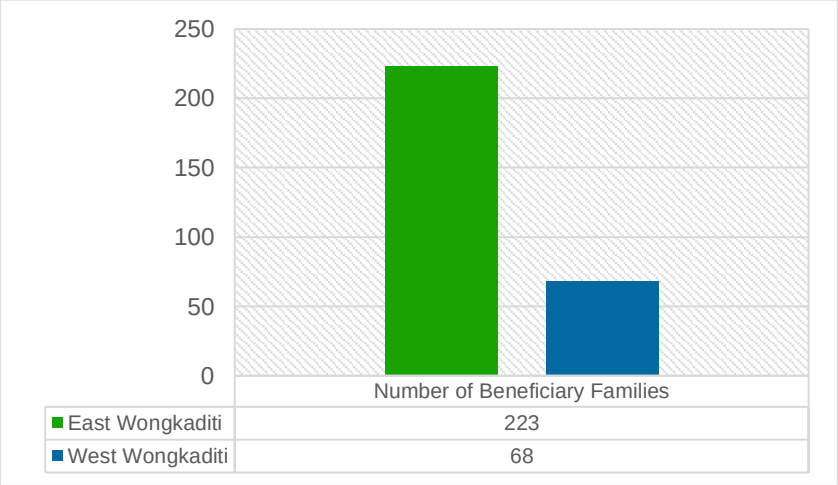

Fig. 1. KPM PKH Data for North Kota District in 2025

Source: Gorontalo City Social Service, 2025 (Modification of researcher's data, 2026).

Through the visualization of the data presented in the graph, the objective reality on the ground confirms that the decentralization of social capital assistance is still the main focus for hundreds of families. Information from the People's Welfare Authority in East Wongkaditi Village validates that the uncertainty of residents' monthly wages triggers the high urgency of dependence on state subsidies, which is reinforced by a similar assessment from the West Wongkaditi Village regarding the low average economic cluster of families receiving assistance in their area. In line with this sociological reality, confirmation from the beneficiary community groups in the education category, especially parents of elementary school students, proves that this cash support makes a very significant contribution in easing the burden of financing children's schools and maintaining the sustainability of their educational future. Through these field dynamics, this study universally shows that the implementation of the Family Hope Program is considered very relevant and in accordance with the basic needs of the community in the North Kota District area, especially in supporting the fulfillment of the needs of the basic education sector and the maintenance of the family health sector. This reality is strengthened by the recognition of the beneficiary clusters in the health category, especially the pregnant women's group, who feel the magnitude of the benefits of this subsidy when they have to deal with the agenda of periodic medical examinations at integrated service posts and when they meet the operational needs of children's learning. The facilitators also validated this argument by stating that the presence of this program acts as a sociological safety net instrument that is very urgent for the survival of low-income households. However, behind the high value of these benefits, this study captures the existence of a sociological gap where some residents still have paradigm limitations by conceptualizing this assistance as limited to periodic cash disbursements from the government, without understanding the philosophical essence of the program as a medium for accelerating long-term social empowerment.

Community Understanding of Program Vision and Objectives

The level of public understanding and literacy regarding the main vision of this policy is still factually not evenly distributed among the constituents. The assessment of the assistance staff confirms the tendency where the beneficiaries put a simplistic perspective by considering this program as nothing more than a channel for the distribution of free cash from the central authority. This pragmatic mindset is reinforced by the findings of the beneficiary groups in the category of disability and the elderly, where their main orientation is solely focused on the use of absolute assistance funds in order to continue the fulfillment of the family's daily consumption structure without internalizing the substance of the policy's great mission, which is actually directed to boost the quality of human resources in a sustainable manner through the prerequisites of commitment in the field of education and health maintenance. Universally, this series of research findings on this aspect of the context constructs five essential conclusions that are interrelated. First, the existence of this social protection guarantee is certainly still very urgent to be maintained for the public in Kota Utara District. Second, the distribution of financial stimulus has proven to be effective in facilitating affordable access to children's school financing and basic family medical services. Third, the climate of economic dependence on state subsidy programs still overshadows most of the financial behavior of the public. Fourth, the distribution of citizens' understanding of the roadmap and the long-term goals of this protection policy still shows wide inequality. Fifth, the limitations of the sociological structure of the domestic economy are the main determinants that drive the high participation rate and volume of program absorption in the study area.

Evaluation of Input Readiness and Validity of Membership Data

The analysis of the input aspects in this study is directed to measure the extent of the readiness of the resource components that support the running of the Family Hope Program in Kota Utara District. The scope of observation in this input dimension includes the adequacy of the quantity of assistance personnel, the level of validity of the database of underprivileged residents, the availability of operational supporting infrastructure, the accuracy of the aid distribution system, and the quality of the inter-agency coordination network. The mapping of this input component plays a very fundamental role because the level of achievement of the effectiveness of the success of the program in the field is highly determined by the readiness of the implementing apparatus, the neatness of the cyber administration system, and the solid institutional support involved. In the human resources sector, the assistance staff holds a very strategic

function in overseeing policy socialization, overseeing the verification process of education and health commitments, leading the educational forum for the Family Ability Building Meeting, and conducting attached supervision of the development of beneficiary families. Despite carrying a very complex functional burden, the findings of the study illustrate the existence of quite unequal limitations in the quantity aspect where for the entire area of Kota Utara District only one assistant is allocated who is required to supervise and monitor the development of more than six hundred beneficiary families. Confirmation from the assistants shows that this imbalance in the supervision ratio has an impact on the lack of optimal provision of service interventions to each head of family, which is strengthened by observations from the People's Welfare Affairs of East Wongkaditi Village regarding the high workload of assistants in the midst of the large population of residents who must be served. Despite being faced with quantity barriers, in terms of functional capacity, it is proven that the accompanying staff have equipped themselves with mature field experience and a good understanding of regulations obtained from participation in the ministry's basic training.

Another crucial issue that emerged in this input dimension was the lack of optimal validity of beneficiary family data, which until now still triggers various administrative problems at the lower level. The study found a ripple of complaints from the public who questioned the accuracy of the target setting because there were still households with established economic indicators that still enjoyed assistance disbursements, while on the other hand there were still residents with poor sociological economic conditions but had not been accommodated in the Integrated Social Welfare Data. Information from the ranks of the village in West Wongkaditi along with accompanying reports validated that the chaos of the accuracy of poverty data is the main axis of the emergence of social jealousy ripples among residents. Responding to these obstacles, periodic data updates continue to be pursued through the submission of new proposals by the village government which is balanced with the factual verification process in the field, with the dynamics of the annual data movement detailed in the graph below.

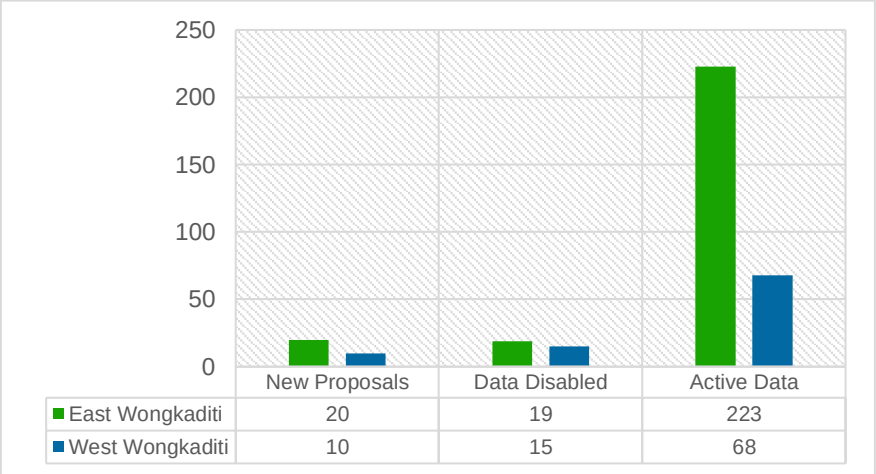

Fig. 2. DTKS Update Data for North Kota District in 2025

Source: Gorontalo City Social Service, 2025 (Modification of researcher's data, 2026).

Based on the comparison of the figures presented in the graph, the movement of membership data shows quite active dynamics in both regions throughout 2025. The fluctuations in the number of new proposals and the deactivation of old membership reflect that the socio-economic status of the community in the field moves dynamically, thus demanding a consistent and sustainable data validation scheme to reduce the potential for sociological jealousy in the midst of community life.

Governance of Facilities, Distribution Systems, and Inter-Agency Communication Networks

The implementation of program administration in Kota Utara District has been supported by the use of the Next Generation Social Welfare Information System digital device. The findings of the study show that the implementation of information technology is very helpful in simplifying the bureaucratic flow of structuring and updating poverty data, although at the operational level it is still often colored by technical obstacles in the form of disruptions in the stability of the internet network which triggers delays in the

process of inputting companion data. From the aspect of physical infrastructure, the absence of special building facilities forced the agenda of the Family Ability Improvement Meeting to be held by hitchhiking in the hall of the village office or using the residential area owned by local residents. Although the education process had to take place in the midst of very simple facilities, the entire series of programs could still be executed well thanks to the high commitment of partnerships from the village leaders and the local non-governmental organization. Regarding the precise mechanism for distributing financial assistance, the process of transferring funds is carried out non-cash directly to the banking account of each beneficiary without any deduction by any person. This distribution pattern refers to a periodic schedule arranged into four stages of structured distribution as described in the following details.

Table 1. PKH Assistance Distribution Schedule in 2025

Internships	Distribution Period
Phase I	January – March
Stage II	April – June
Phase III	July – September
Stage IV	October – December

Source: Gorontalo City Social Service, 2025 (Modification of researcher's data, 2026).

Although this distribution system has a clear periodic management as illustrated in the graph, the results of the study reveal information bottlenecks where residents often experience delays in receiving certainty of the disbursement schedule. This condition of information uncertainty results in the emergence of sociological anxiety from the health component of pregnant women, and has the potential to delay the fulfillment of urgent children's school operations for beneficiaries of the education category, which leads to delays in the procurement of learning materials. The last factor evaluated in the input dimension is inter-institutional coordination involving partnerships between program facilitators, village authorities, sub-district ranks, schools, and health center agencies. The findings of the study indicate that this communication network has been built but has not operated optimally, which is characterized by frequent delays in the supply of educational data from schools and medical records from health centers, thus hindering the smooth verification process of conditional commitments. Nevertheless, the results of the observation prove that a harmonious communication relationship between the companion and the village apparatus is proven to be able to eliminate various frictions and solve the administrative problems of beneficiaries at the lower level quickly. As a final conclusion on the input aspect, this study formulates five basic findings, namely the limited number of accompanying personnel that is not proportional to the burden of the beneficiary population, the low level of accuracy and validity of integrated social welfare data, the existence of technical obstacles to the operation of supporting digital systems, the implementation of direct fund distribution mechanisms in accordance with formal regulations, and the need to strengthen cross-sector communication systems Especially in the aspect of synchronization of commitment data. Thus, the program input system basically has a sufficient supporting foundation, but it is urgent to restructure the quantity of field workers, clean the database of underprivileged residents, and strengthen the commitment to disclosure of distribution schedule information.

Through these field dynamics, this study universally shows that the implementation of the Family Hope Program is considered very relevant and in accordance with the basic needs of the community in the North Kota District area, especially in supporting the fulfillment of the needs of the basic education sector and the maintenance of the family health sector. This reality is strengthened by the recognition of the beneficiary clusters in the health category, especially the pregnant women's group, who feel the magnitude of the benefits of this subsidy when they have to deal with the agenda of periodic medical examinations at integrated service posts and when they meet the basic operational needs of children. The facilitators also validated this argument by stating that the presence of this program acts as a sociological safety net instrument that is very urgent for the survival of low-income households. However, behind the high value of

these benefits, this study captures the existence of a sociological gap where some residents still have paradigm limitations by conceptualizing this assistance as limited to periodic cash disbursements from the government. The level of public understanding and literacy regarding the main vision of this policy has not been factually distributed evenly among the constituents. The assessment of the assistance staff confirms the tendency where the beneficiaries put a simplistic perspective by considering this program as nothing more than a channel for the distribution of free cash from the central authority. This pragmatic mindset is reinforced by the findings of the beneficiary groups in the category of disability and the elderly, where their main orientation is solely focused on the use of absolute assistance funds in order to continue the fulfillment of the family's daily consumption structure without internalizing the substance of the policy's great mission, which is actually directed to boost the quality of human resources in a sustainable manner through the prerequisites of commitment in the field of education and health maintenance.

Process and Results of the Family Hope Program in Kota Utara District, Gorontalo City

Evaluation of Process Stages and Dynamics of Field Education

The process analysis in this study is directed to measure the operational quality of policy implementation in the field and identify various obstacles that arise during the implementation stage. The scope of evaluation of this process includes the effectiveness of policy socialization, the intensity of family education forums, the accuracy of periodic commitment verification, the mechanism of distributing aid, and the efficiency of cross-sector monitoring. Mapping on this process dimension holds a very fundamental urgency to detect various operational bottlenecks, given that the success of a policy does not only depend on the availability of resource allocation but is highly determined by the consistency of real execution at the lower level. In the initial stage, the process of socializing the program organized by the accompanying staff with the ranks of the village through the environmental forum was monitored that it had not resulted in an even spread of understanding in the community. This obstacle can be seen from the concentration of the paradigm of residents in East Wongkaditi Village which simplifies this program to be limited to routine fund distribution channels from the government. Field observations show that there is a literacy imbalance where residents who are active in group forums show much better maturity of understanding, while some other residents, such as the beneficiary group of the education component, are often hampered to attend socialization due to the clash of domestic work schedules and childcare matters at home. This condition has a direct impact on the running of the Family Capacity Building Meeting which is a vital instrument in transferring knowledge about childcare, maternal health, domestic economic stability, and social welfare. The reality in Kota Utara District shows that this educational intervention has not been carried out optimally and routinely in all fostered groups. The operational track record throughout 2025 captures the fluctuations in the realization of activities triggered by the constraints of absenteeism and limited time allocation of support staff, as explained in the following data details.

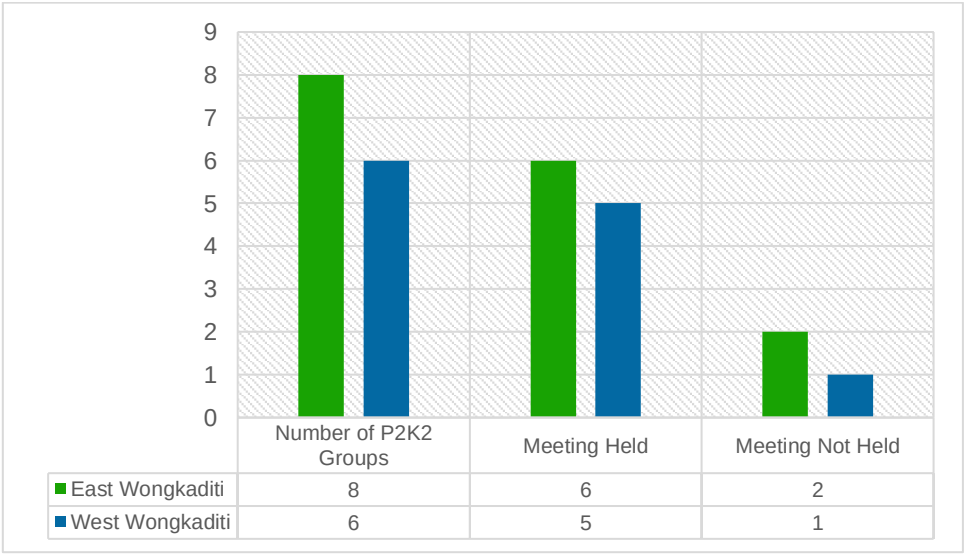

Fig. 3. Implementation of P2K2 Activities in North Kota District in 2025

Source: Gorontalo City Social Service, 2025 (Modification of researcher's data, 2026).

Based on the comparison of the data on the graph, it can be seen that there is a deviation between the planned schedule and the realization of meetings in the two sub-districts. The main obstacle reported by the assistance staff is rooted in the instability of the level of attendance of residents which often clashes with personal agendas, although on the other hand residents from the health component confirmed that the material presented is basically very crucial because it discusses child nutrition and the fulfillment of basic family needs. Through in-depth observation, it is proven that the activeness in this forum is positively correlated with the high level of parental awareness in overseeing children's growth and development, although it is undeniable that some constituents still view the attendance at the forum purely as a burden to fulfill administrative obligations in order to secure their assistance participation status.

Verification of Basic Sector Commitments and Procedures for Distributing Funds

The implementation of commitment verification in the education and health sectors requires a solid cooperation between companions, school institutions, and public health service centers. However, on a practical level, the process of monitoring this conditional commitment is still colored by bureaucratic obstacles in the form of delays in the supply of student attendance data from the school and medical records from the health center, which was confirmed by the village authorities in West Wongkaditi as the main trigger for the postponement of the schedule for updating the membership status by the companions. In terms of fulfilling obligations, the majority of residents from the education component have shown good compliance in ensuring the presence of children in the classroom. However, ripples of micro-financial problems are still found where some children are forced to skip school due to the absence of daily transportation costs or the completeness of learning uniforms. On the other hand, in the health component, the level of compliance was observed to be much more stable, which was characterized by the routine of pregnant women and toddlers in utilizing medical examination services at the nearest posyandu. Regarding the mechanism for distributing financial stimulus, the procedure for direct fund transfers to the bank accounts of each beneficiary family has generally been carried out with great transparency without any indication of nominal deductions by any party. This social security distribution system refers to an annual four-quarter scheme set by the central social authority, with periodic details given in the graph below.

Table 2. PKH Assistance Distribution Schedule in 2025

Internships	Distribution Period
Phase I	January – March
Stage II	April – June
Phase III	July – September
Stage IV	October – December

Source: Gorontalo City Social Service, 2025 (Modification of researcher's data, 2026).

Although the mechanism for the distribution of periodic funds has been neatly structured as depicted in the table, the study found a communication gap where information about the exact date of disbursement was often too late to reach the lower level. Obstacles to the dissemination of this information force groups of elderly and disabled residents to continue to carry out manual confirmation to the accompanying staff, even the People's Welfare Affairs of East Wongkaditi Village reported that the village office was often used as a center for residents' complaints when there was a shift in the distribution timeline. In general, monitoring, routine coordination, and cross-sector communication have proven to be able to boost citizen compliance, although strengthening the aspects of cyber data synchronization and institutional communication is still absolutely necessary in order to improve the running of the program in the North City **District Main Findings of** the process aspect; first, the policy socialization agenda has been running, but the distribution of citizens' understanding of the substance of program independence still shows wide inequality. Second, the implementation of the mandatory P2K2 education forum has not run consistently due to the clash of constituent domestic work schedules and limited apparatus time. Third, verification of compliance with

education and medical commitments is hampered by the slow supply of administrative data from basic sector partner institutions. Fourth, the distribution system of stimulant funds is considered accountable and clean from levies, running in line with the central regulatory scheme. Fifth, the monitoring and inter-agency partnership function requires a massive restructuring of the reliability of interorganizational communication systems and the accuracy of cyber data integration.

Product Evaluation: Educational Accessibility and Medical Sector Awareness

The evaluation of the product dimension is focused on measuring the extent to which the program's operational goals have been achieved, as well as capturing the real impact of the Family Hope Program's intervention on the sociological economic transformation of residents in East Wongkaditi and West Wongkaditi Villages. In the education sector, this policy has proven to make a significant positive contribution in ensuring the continuity of school for children from underprivileged families. The allocation of assistance funds is factually used by the community to support uniform shopping, book procurement, stationery fulfillment, and financing children's daily transportation modes. Based on documentation from social authorities, the proportion of participation in this education component is recorded to still dominate the map of the distribution of beneficiaries in the research area, with the following details of the school level structure.

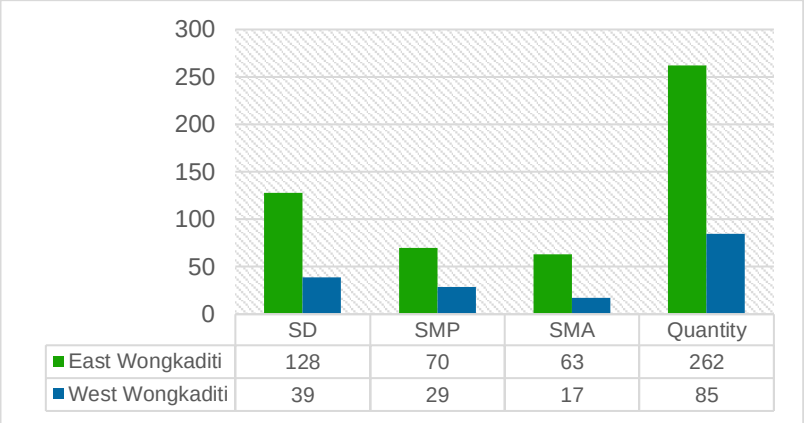

Fig. 4. Number of PKH Recipients of the Education Component in 2025

Source: Gorontalo City Social Service, 2025 (Modification of researcher's data, 2026).

Through the visualization of the numbers in the table, the large volume of participation in East Wongkaditi Village reflects the high dependence and the scale of the need for education subsidies in the area compared to West Wongkaditi Village. The confirmation from the parents of the students shows an extraordinary sense of help in the midst of the current high escalation of education costs, which is strengthened by the observation of the village regarding the decrease in class attendance rates and the minimization of the risk of school dropouts among low-income families, although objectively the nominal assistance received is admitted to not be able to cover all the needs of the school which continues to increase every year. A positive impact that is no less essential was also recorded in the health sector, where there was a fairly massive surge in sociological awareness from beneficiaries regarding the importance of regular preventive medical maintenance. Based on periodic records compiled from sub-district level public health centers, the dynamics of increasing visits to medical facilities by program constituents show a very positive growth trend.

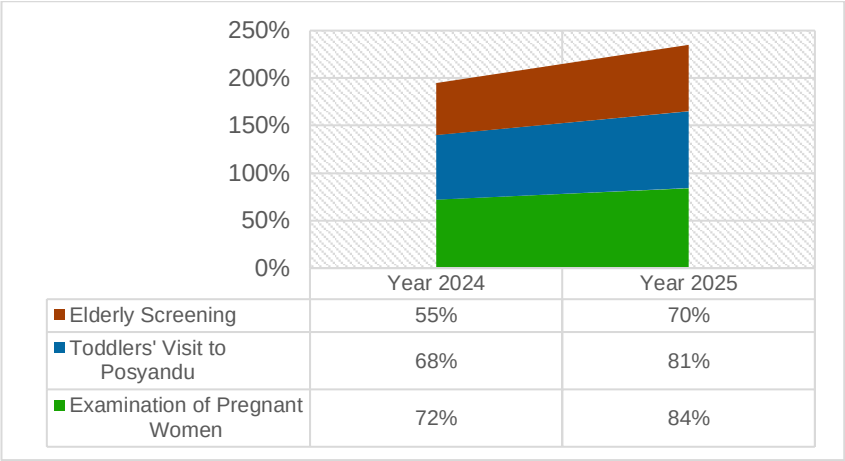

Fig. 5. Level of Health Visits for PKH Recipients in 2025

Source: Gorontalo City Social Service, 2025 (Modification of researcher's data, 2026).

The percentage growth presented in the graph shows the success of the program in stimulating changes in the community's hygienic and medical behavior, where the necessity of fulfilling program commitments forces pregnant women, toddlers, and elderly groups to be more disciplined in visiting integrated service posts. The recognition from the People's Welfare of West Wongkaditi Village also validated the improvement of healthy living awareness which is of much higher quality when juxtaposed with conditions in previous years, although time constraints and work routines are still reasons for a small number of people not to use health facilities continuously.

Analysis of Domestic Independence and Barriers to Graduation

Although the program has been successful in reducing the burden of domestic daily expenditure on food, education, and family clinical care, the in-depth findings indicate that these social safety net interventions have not been able to significantly boost people's income structures. This is due to the characteristics of this social protection policy which is more oriented towards short-term consumptive assistance schemes than productive economic empowerment programs. As a result, the level of dependence of residents on state subsidies is still very concentrated, which has a direct impact on the low rate of voluntary membership relinquishment or independent graduation in the North Kota District area, as recorded in the following data overview.

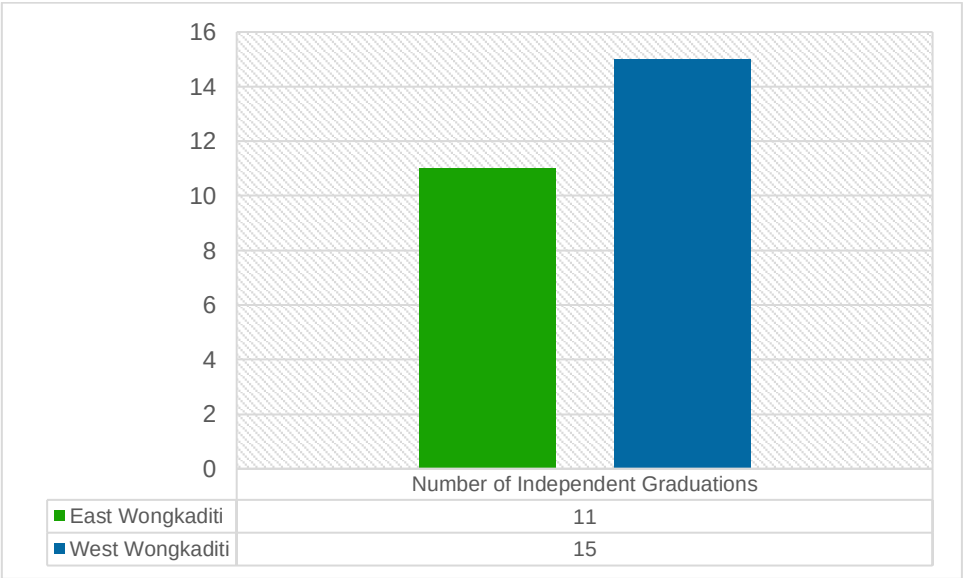

Fig. 6. Number of KPM Independent Graduates in 2025

Source: Gorontalo City Social Service, 2025 (Modification of researcher's data, 2026).

The lack of independent graduation rates presented in the table confirms the views of the assistance staff regarding the mental and financial unpreparedness of residents to leave the aid zone due to the unstable economic income base, as well as the general tendency where some beneficiaries do not have the

sociological initiative to release the program independently. Changes in people's behavior are indeed beginning to sprout in the priority realm of children's education and clinical discipline, but the reluctance to give up membership status shows that there is a sociological comfort zone that hinders independence. This objective condition constructs various main findings in the aspect of product evaluation, where on the one hand program interventions have been proven to make a real contribution to reducing the risk of child dropout and securing the sustainability of children's education from underprivileged families. In addition, in other basic sectors, there was a positive acceleration of medical awareness among constituents which was marked by an increase in the graph of regular preventive visits to public health service posts. The benefits of financial protection are also clearly recorded because the disbursement of this assistance funds is effective in mitigating micro-financial shocks by reducing the burden of daily consumption expenditures of underprivileged households. However, on the other hand, this policy is considered to have not succeeded in stimulating the diversification of domestic income of beneficiary families due to the design structure of the program which is still generally still consumptive-charitable (pure social assistance). The implication of the determination of these factors boils down to the low ratio of independent membership graduation in the North City District area, which is sociologically caused by the lack of a solid foundation of real economic independence at the beneficiary family level.

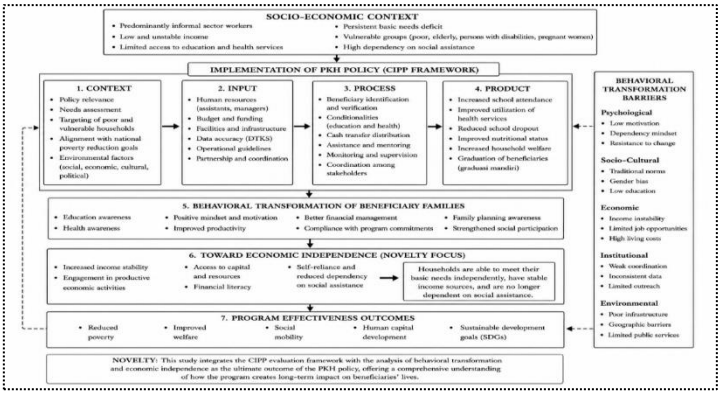

Fig. 7. Conceptual Model of Research Findings on the Effectiveness of the Family Hope Program (PKH) in Kota Utara District, Gorontalo City

The Conceptual Framework of CCT Effectiveness diagram above illustrates a comprehensive policy evaluation model prepared based on the results of research in Kota Utara District, Gorontalo City to map the dynamics of the implementation of the Family Hope Program (PKH) as a conditional social assistance program (*Conditional Cash Transfer/CCT*)) from upstream to downstream, while critically dismantling various sociological anomalies that hinder the achievement of independent graduation of beneficiary families. Structurally, this policy locomotive is driven by Socio-Economic Conditions in the informal sector which is characterized by uncertainty and very concentrated domestic income instability, thus causally triggering High Demand for Social Assistance due to micro-scale financial vulnerability and persistent deficit in the fulfillment of basic living needs. These objective conditions then initiated the Implementation of the CCT/PKH Program based on the CIPP policy intervention model which moves simultaneously through three strategic pillars, namely the Education Pillar which requires the level of school attendance to trigger the escalation of human capital and break the intergenerational chain of poverty; Health Pillar which requires clinical compliance at posyandu in order to secure children's growth and development charts and reduce stunting rates; and the Social Welfare Pillar which is oriented towards expanding financial inclusion and the accuracy of beneficiary data integration. The accumulation of the performance of these three pillars empirically succeeded in stimulating the Behavioral Transformation of Beneficiary Families in the form of increasing medical-educational awareness, which is the main foundation in pursuing Program Effectiveness Outcomes such as alleviating extreme poverty, improving daily welfare, and creating vertical social mobility that is in line with the Sustainable Development Goals (SDGs).

However, the findings of the study in Kota Utara District, Gorontalo City show that the most crucial scientific *novelty* of this model sharply highlights the existence of Behavioral Transformation Barriers that act as structural anchors that resstrain the pace of KPM to exit the relief zone. These barriers crystallize into

five multisectoral dimensions that are intertwined in the field, starting from Psychological Barriers in the form of low self-motivation, resistance to change, and the concentration of *dependency mindset* due to the comfort zone of assistance; Socio-Cultural Barriers Influenced by the Confines of Traditional Norms, Gender Bias, and Low Education Levels; and Economic Barriers in the form of uncertainty of real income, high cost of living, and lack of access to formal employment. This complexity is exacerbated by Institutional Barriers indicated by weak cross-sector coordination, inconsistency in the validity of administrative data, and limited reach of companions; which is exacerbated spatially by Environmental Barriers in the form of limited public services, geographical isolation, and poor physical infrastructure in the local area. As a resolution to the meeting of the positive impact of the program with the thickness of the sociological barrier, the conceptual model of this research results leads to the urgency of Policy & Program Improvement which mandates the need for a radical transformation from the original consumptive-charitable program structure to a *data-driven policy* design), strengthening institutional coordination, as well as accelerating adaptive *empowerment and capacity building* programs in order to create a solid and sustainable foundation for family economic independence for families benefiting from the Family Hope Program in Kota Utara District, Gorontalo City.

Analyzing the policies of the Family Hope Program (PKH) in Kota Utara District, Gorontalo City, using the Context, Input, Process, and Product (CIPP) evaluation framework developed by Stufflebeam. This comprehensive analysis highlights how various elements of PKH policies interact to achieve the goals of economic prosperity and independence. The interpretation of the research findings is carried out by comparing the results found in the field with relevant theories and previous research, especially related to the concept of the welfare state and the implementation of public policies. The focus of the discussion also includes the identification of driving and inhibiting factors in the realization of economic independence of PKH beneficiary families. The context of the implementation of the Family Hope Program (PKH) in Kota Utara District shows that this policy is very relevant to the basic needs of the community. The socio-economic conditions of residents in the region are generally still in the middle to lower cluster, with the dominance of informal jobs that generate erratic incomes. This economic reality has led to a high dependence of families on social safety net programs, especially to support basic education needs and maintenance of family health. This finding is consistent with the statement of Yasin and Aris [3] who explained that PKH is one of the strategic policies for poverty alleviation and efforts to improve people's living standards. PKH beneficiaries directly feel the positive impact of this assistance, especially in easing the burden of financing children's schools and accessing medical services. The recognition of the beneficiary cluster in the education category indicates the significant contribution of cash in maintaining the sustainability of children's education.

The research of Sutikno et al. [4] discusses the implementation of the Family Hope Program policy in Gununglurah Village, Cilongok District, Banyumas Regency as a government program in improving community welfare in the fields of economy, education, and increasing empowerment productivity. Pregnant women as a beneficiary group in the health category, feel the benefits of subsidies for periodic medical examinations at integrated service posts and operational needs for children's learning. Facilitators validate this argument by stating that the presence of this program serves as a sociological safety net instrument that is very important for the survival of low-income households [11]. This pragmatic mindset was reinforced by findings in a group of beneficiaries with disabilities and the elderly, where their main orientation was solely focused on the utilization of relief funds to meet the family's daily consumption needs. Most residents do not fully understand the philosophical essence of the program as a medium for accelerating long-term social empowerment.

Public perception that tends to see PKH as mere cash assistance, without internalizing the long-term empowerment mission, is a challenge in the context of policy implementation. Fajri [2] explained that PKH was launched to reduce or minimize the problem of poverty by increasing poor people's access to health and education services. This phenomenon shows that there is a gap in the communication strategy of the program which should not only focus on the distribution of aid, but also on education about PKH's strategic goals in breaking the chain of poverty across generations. This uneven level of understanding can hinder the success

of programs in achieving the goal of economic independence. More intensive and adaptive education on the characteristics of beneficiaries is crucial to change the consumptive paradigm to be productive and empowered.

This understanding gap reflects that although the program is widely accepted, its full potential to drive behavioral transformation and independence has not been optimally realized. A study by Dewi et al. [12] in Lawang Kidul District shows that the implementation of the PKH policy is going well despite experiencing several obstacles, but still trying to improve the quality of life of very poor families. These barriers underscore the importance of an in-depth contextual evaluation, not only on the identification of needs, but also on the beneficiaries' understanding and perception of the program itself. Government policies in determining PKH fund recipients also still find problems at the village level, so they are a concern in the implementation of the program [13]. This is the foundation for the development of more effective intervention strategies, which are able to overcome the dependency mentality and encourage the active participation of KPM in achieving economic independence.

This series of findings on this aspect of the context constructs several essential conclusions that are closely interrelated. First, the existence of this social protection guarantee is still very urgent to be maintained for the public in North Kota District. Second, the distribution of financial stimulus has proven to be effective in facilitating affordable access to children's school financing and basic family medical services. Third, the climate of economic dependence on state subsidy programs still overshadows most of people's financial behavior. Fourth, the distribution of citizens' understanding of the roadmap and the long-term goals of this protection policy still shows wide inequality. Fifth, the limitations of the sociological structure of the domestic economy are the main determinants that drive the high participation rate and volume of program absorption in the study area. The evaluation of inputs in the implementation of the Family Hope Program shows that there are several significant challenges related to the availability of resources and data validity. The limited quantity of support staff, where one companion must manage more than six hundred Beneficiary Families (KPM) in Kota Utara District, is the main obstacle. Silitonga and Nawawi [1] highlight the implementation of the Family Hope Program (PKH) and the inhibiting factors in its implementation in providing assistance. This constraint hinders the process of policy socialization and inherent oversight that is essential for program success. In terms of functional capacity, the accompanying staff has equipped themselves with mature field experience and a good understanding of regulations, as a result of participation in the ministry's basic training. Research by Majid and Dewi [7] also found that the implementation of the PKH policy still has many obstacles in terms of communication and information that have not been maximized, especially due to the lack of access. The shortage of the quantity of support workers can exacerbate this communication barrier, causing KPM to not get enough information about the schedule for receiving assistance or updating data.

Another crucial issue that emerged in the input dimension was the lack of optimal validity of beneficiary family data, which until now still triggers various administrative problems at the lower level. It was found that there were ripples of complaints from the community who questioned the accuracy of the target setting because there were still households with established economic indicators that continued to enjoy aid disbursements, while on the other hand there were still residents with economically sociological conditions that were concerning but had not been accommodated in the Integrated Social Welfare Data [13]. The chaos of the accuracy of poverty data is the main axis of the emergence of social jealousy ripples among citizens, so that regular data updates are a crucial effort to reduce the potential for sociological jealousy. The dynamics of active data updates show the socio-economic status of communities in the field moving dynamically, demanding a consistent and sustainable data validation scheme. The governance of facilities and the aid distribution system show efficiency in the distribution of funds. The use of the Next Generation Social Welfare Information System (SIKS-NG) digital tool helps simplify the bureaucratic flow of structuring and updating poverty data. SIKS-NG's operations are still colored by technical obstacles in the form of disruptions in the stability of the internet network which trigger delays in the process of inputting companion data. Regarding the precise mechanism for distributing financial assistance, the process of transferring funds is carried out non-cash directly to the bank account of each beneficiary without any

deduction by any individual, as explained by Umasugi and Adam [14] regarding the distribution mechanism through HIMBARA and PT. Pos Indonesia. There is a blockage of information related to the schedule of disbursement of funds, which results in sociological anxiety and has the potential to delay the fulfillment of urgent operations for KPM.

The last factor evaluated in the input dimension is inter-institutional coordination involving partnerships between program facilitators, village authorities, sub-district ranks, schools, and health center agencies. This communication network has been built but has not operated optimally, marked by frequent delays in the supply of educational data from schools and medical records from the health center, thus hindering the smooth process of verification of conditional commitments. A harmonious communication relationship between the companion and the village apparatus has been proven to be able to eliminate various frictions and solve the administrative problems of beneficiaries at the lower level quickly. The conclusion in this input aspect is the limited number of accompanying personnel that is not proportional to the burden of the beneficiary population, the low level of accuracy and validity of integrated social welfare data, the existence of technical obstacles in the operation of supporting digital systems, the implementation of a direct fund distribution mechanism in accordance with formal regulations, and the need to strengthen cross-sector communication systems, especially in the aspect of commitment data synchronization. The program input system basically has a sufficient supporting foundation, but it is urgent to restructure the quantity of field workers, clean up the database of underprivileged residents, and strengthen the commitment to disclosure of distribution schedule information. This restructuring is important to increase the efficiency and effectiveness of PKH implementation, so that the program can run more smoothly and achieve the expected goals in encouraging economic independence. These barriers in the input aspect indicate that despite good policy intentions, suboptimal resource and system support can hinder the achievement of the long-term goals of PKH. Majid and Dewi [7] show that the implementation of the PKH policy still has many obstacles in the communication aspect, where the information conveyed has not been maximized due to lack of access when providing information.

Analysis of the process in the implementation of the Family Hope Program (PKH) reveals that the operational quality of implementation in the field still faces various challenges, despite significant efforts that have been made. The socialization of the program organized by the assistance staff and the ranks of the village through the environmental forum has not been observed to have resulted in the spread of understanding evenly in the community. This obstacle can be seen from the concentration of the residents' paradigm that simplifies this program to the extent of routine fund distribution channels from the government. Pratiwi and Agustana [15] also discuss factors that affect the implementation of PKH, where communication is one of the crucial aspects. Field observations show that there is a literacy imbalance, where residents who are active in group forums show much better maturity in understanding, while some other residents, such as the beneficiary group of the education component, are often hampered to attend socialization due to the clash of domestic work schedules and childcare matters. This condition has a direct impact on the running of the Family Capacity Building Meeting (P2K2) which is a vital instrument in transferring knowledge about childcare, maternal health, domestic economic stability, and social welfare. The reality in Kota Utara District shows that this educational intervention has not been carried out optimally and routinely in all fostered groups. Darmadi et al. [5] also found that even though the implementation of government programs at the regional level is running, there are obstacles that affect its implementation. The operational track record throughout 2025 captures the fluctuations in the realization of P2K2 activities triggered by the constraints of absenteeism and limited time allocation of assistance personnel. The main obstacle reported by the support staff is rooted in the instability of the level of attendance of residents which often clashes with personal agendas. Residents from the health component confirmed that the material presented was basically very crucial because it discussed child nutrition and the fulfillment of basic family needs. The activeness in this forum is positively correlated with the high level of parental awareness in overseeing children's growth and development, showing that when the educational process is running, a positive impact on behavior change can occur.

The implementation of commitment verification in the education and health sectors requires a solid cooperation between companions, school institutions, and public health service centers. On a practical level, the process of monitoring this conditional commitment is still colored by bureaucratic obstacles in the form of delays in the supply of student attendance data from schools and medical records from the health center. Sutikno & Yusuf [8] in their research found that the factors that are obstacles in the implementation of the Family Hope program are the improvement of the quality of human resources and the lack of coordination between related institutions. This delay is the main trigger for the delay in the schedule of updating the membership status by the companion, which can affect the accuracy and accuracy of policy evaluation. In terms of fulfilling obligations, the majority of residents from the education component have shown good compliance in ensuring the presence of children in the classroom. The ripple of micro-financial problems is still found where some children are forced to skip school due to the absence of daily transportation costs or the completeness of learning uniforms. In the health component, the level of compliance was observed to be much more stable, which was characterized by the routine of pregnant women and toddlers in utilizing medical examination services at the nearest posyandu. The mechanism for distributing financial stimulus, namely the direct transfer of funds to the banking accounts of each beneficiary family, has generally run very transparently without any indication of nominal cuts by any party. Asnawai et al. [16] stated that the distribution of PKH assistance from a program approach has not been fully running well and there are still aspects that need to be improved. Although the mechanism for distributing periodic funds has been neatly structured, the study found communication gaps where information about the exact date of disbursement is often too late to reach the lower levels. This obstacle to the dissemination of information forces groups of elderly and disabled residents to continue to carry out manual confirmation to the accompanying staff. Monitoring, routine coordination, and cross-sector communication have proven to be able to increase citizen compliance, although strengthening the aspects of cyber data synchronization and institutional communication is still an important factor to improve the running of programs in North Kota District. This process needs to be more adaptive to encourage economic independence, not just ensure compliance.

The evaluation of the product dimensions of the Family Hope Program (PKH) in North Kota District shows a significant positive impact on increasing educational accessibility and awareness of the medical sector. This policy has proven to make a real contribution in ensuring the continuity of school for children from underprivileged families, with the allocation of funds used to support uniform shopping, book procurement, stationery fulfillment, and financing children's daily transportation modes. This finding is in line with the research of Wijanarko and Rustianingsih [17] who stated that PKH is the government's flagship program in overcoming poverty problems and building a social protection system, where aid recipients will get access to education and health. The reduction in class attendance rates and minimization of the risk of school dropouts among low-income families indicate the effectiveness of the program in the education pillar. A positive impact that is no less essential was also recorded in the health sector, where there was a fairly massive surge in sociological awareness from beneficiaries regarding the importance of regular preventive medical maintenance. The increase in visits to medical facilities by the constituents of the program shows a very positive growth trend, reflecting the success of PKH in stimulating changes in the hygienic and medical behavior of the community. The necessity of fulfilling program commitments forces pregnant women, toddlers, and elderly groups to be more disciplined in coming to integrated service posts. Jatmiko et al. [18] found significant average differences between the welfare of beneficiary groups before and after receiving PKH assistance, although their effectiveness in eliminating welfare disparities was still limited.

Although the program has been successful in reducing the burden of domestic daily expenditure on food, education, and family clinical maintenance, the in-depth findings indicate that these social safety net interventions have not been able to significantly improve people's income structures. Research by Darmin et al. [6] found that the implementation of the Family Hope Program (PKH) in Bukit Wolio Indah Village, Baubau City has been implemented, with facilitators playing a crucial role in its implementation. The characteristics of this social protection policy, which is more oriented towards short-term consumptive assistance schemes rather than productive economic empowerment programs, are the root of the problem. As a result of the program design that tends to be consumptive-charitative, the level of dependence of citizens

on state subsidies is still very intense. This condition has a direct impact on the low rate of voluntary membership relinquishment or independent graduation in the North Kota District area. The lack of independent graduation rates confirms the view of the assistance staff regarding the mental and financial unpreparedness of residents to leave the aid zone due to the unstable economic income base, as well as the general tendency that some beneficiaries do not have the sociological initiative to release the program independently. Humairoh and Utomo [19] identified the characteristics of PKH recipients that affect the length of time they have been PKH members, which can explain the dynamics of the recipients' welfare status and the tendency to remain a member.

Changes in people's behavior are indeed beginning to sprout in the priority realm of children's education and clinical discipline, but the reluctance to give up membership status shows that there is a sociological comfort zone that hinders independence. The conceptual model of the research findings highlights the existence of Behavioral Transformation Barriers that act as structural anchors that hold KPM back from the rate at which KPM to exit the relief zone. These barriers crystallize into five intertwined multisectoral dimensions in the field, namely psychological, socio-cultural, economic, institutional, and environmental barriers, which simultaneously hinder the process of independent graduation. Psychological barriers include low self-motivation, resistance to change, and a concentrated dependency mentality due to the comfort zone of help. Socio-cultural barriers are influenced by traditional norms, gender bias, and low levels of education, while economic barriers are in the form of uncertainty of real income, high cost of living, and lack of access to formal employment. This complexity is exacerbated by institutional barriers indicated by weak cross-sector coordination, inconsistencies in the validity of administrative data, and limited reach of companions. Spatially, it is exacerbated by environmental barriers in the form of limited public services, geographical isolation, and poor physical infrastructure in the local area. As a resolution to the meeting of the positive impact of the program with the thickness of the sociological barrier, the conceptual model of this research results boils down to the urgency of Policy and Program Improvement, mandating the need for a radical transformation from the original consumption-charitable program structure to data-driven policy design, strengthening institutional coordination, and accelerating empowerment and capacity building programs building) that is adaptive in order to create a solid and sustainable foundation for family economic independence. Sawitri and Rahmat's research also found obstacles to implementation delays and barriers to access between villages, showing that environmental and infrastructure factors are still challenges in the distribution of aid.

IV. CONCLUSION

Based on the results of the study, it can be concluded that the policy analysis of the Family Hope Program (PKH) using the Context, Input, Process, and Product (CIPP) framework shows that the implementation of the program has made a positive contribution in supporting the fulfillment of basic needs of the community as well as being part of efforts to realize the economic independence of beneficiary families. In the context dimension, the socio-economic conditions of the community in North Kota District are still dominated by lower-middle-income groups who depend on the informal sector with uncertain income levels, so the existence of PKH is still an important instrument in helping to meet education and health needs. Fluctuations in the number of beneficiaries in the education, health, and disability components in East Wongkaditi Village and West Wongkaditi Village show that the program remains relevant in reaching vulnerable community groups. In the input dimension, the PKH policy has been prepared in accordance with the real needs of the community through the provision of conditional assistance oriented towards increasing access to education and health so that it can support the fulfillment of the basic needs of poor families and become a foundation for sustainable poverty reduction. In the process dimension, the implementation of PKH has been carried out through the stages of identifying potential beneficiaries, verifying data, distributing assistance, and mentoring which is generally quite effective, although there are still obstacles in inter-institutional coordination, data accuracy, validity of beneficiary data, and public understanding of program mechanisms and commitments. Furthermore, in the product dimension, the implementation of PKH has had a positive impact on reducing the burden of household expenditure and

increasing public access to education and health services, but it has not been fully able to realize the economic independence of beneficiary families in a sustainable manner because most of the recipients still depend on social assistance as a source of economic support.

These findings imply that the success of PKH implementation cannot be measured only by the distribution of aid and increased access to basic services, but must also be measured by the program's ability to encourage the transformation of beneficiary families towards economic independence through strengthening capacity, productivity, and economic empowerment. Theoretically, this study strengthens the application of the CIPP evaluation model as a comprehensive approach in evaluating social protection policies because it is able to integrate context analysis, resources, implementation processes, and policy outcomes in one evaluation framework. Practically, the results of the study provide input for the Gorontalo City Government, the Social Service, and the Ministry of Social Affairs of the Republic of Indonesia so that PKH management is not only oriented towards the distribution of social assistance, but also directed at strengthening economic empowerment programs, improving the competence of PKH companions, updating the beneficiary database regularly, as well as integration with skills training programs, access to capital, micro business development, and job creation. The novelty of this research lies in the development of PKH implementation analysis which does not stop at evaluating the effectiveness of the program based on the framework of Context, Input, Process, and Product, but directly relates it to the indicators of the realization of economic independence of beneficiary families as the main output of the policy, thus producing a more complete evaluation perspective compared to previous research which generally only focuses on the implementation aspect or effectiveness of aid distribution. Based on these findings, it is recommended that the government strengthen the synergy of PKH with cross-sectoral economic empowerment programs, improve the quality of assistance based on the needs of beneficiary families, build a monitoring and evaluation system oriented towards the achievement of economic independence, and set graduation indicators that are not only based on increasing income, but also on the ability of families to develop productive businesses, access resources financing, as well as maintaining the

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