ANALYSIS OF COMMUNICATION MEDIA ASSISTANCE ON THE PROGRAM KELUARGA HARAPAN (PKH) IN THE IMPLEMENTATION OF FAMILY DEVELOPMENT SESSION (FDS)

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Abstract

The Family Hope Program (PKH) is a conditional cash transfer program given to poor families in Indonesia. PKH in the long term is expected to be able to break the chain of poverty between generations through improving the conditions of education and health in PKH families which are obtained through FDS activities. The success of FDS cannot be separated from the use of communication media in improving the quality of beneficiary families as well as recipients of messages about education, health and improving the family economy. The method used in this study is a qualitative descriptive method. Research informants were determined by purposive sampling technique. Data collection techniques are carried out by means of observation, in-depth interviews (in-depth interview) and documentation. Data analysis procedures or techniques used are data reduction, data display, and conclusion drawing. The results of this study show Communication media in the form of videos, flipcharts and smart books that are used by PKH facilitators in the Family Development Session process make it very easy for mothers to receive material from their companions, and have a good impression on mothers participating in the family of hope program in Batu Putuk Village, Teluk Betung Barat, Bandar City. Lampung. In terms of health, education and economy, they are able to shape the mothers of PKH Beneficiaries into quality families.

Keywords: communication media, pkh facilitator, family development session (fds)

Abstrak

Program Keluarga Harapan (PKH) adalah program bantuan tunai bersyarat yang diberikan kepada keluarga miskin di Indonesia. PKH dalam jangka panjang diharapkan dapat memutus rantai kemiskinan antar generasi melalui perbaikan kondisi Pendidikan dan kesehatan dalam keluarga PKH yang di dapatkan melalui kegiatan FDS. Keberhasilan FDS tidak terlepas dari penggunaan media komunikasi dalam meningkatkan kualitas keluarga penerima manfaat sekaligus sebagai penerima pesan tentang pendidikan, kesehatan dan peningkatan ekonomi keluarga. Metode yang digunakan dalam penelitian ini ialah metode deskriptif kualitatif. informan penelitian ditentukan dengan teknik purposive sampling, teknik pengumpulan data dilakukan dengan cara observasi, wawancara mendalam (in depth interview) dan dokumentasi. Prosedur atau teknik analisis data yang digunakan yaitu data reduction, data
display, dan conclusion drawing. Hasil penelitian ini menunjukkan Media Komunikasi berupa video, flipcart dan buku pintar yang digunakan oleh pendamping PKH dalam Proses Family Development Session sangat memudahkan ibu-ibu menerima materi dari pendamping, dan berkesan baik bagi ibu-ibu peserta program keluarga harapan di Kelurahan Batu Putuk Teluk Betung Barat Kota Bandar Lampung. Jika ditinjau dari segi kesehatan, pendidikan dan ekonomi mampu membentuk ibu-ibu peserta Penerima Manfaat PKH menjadi keluarga yang berkualitas.

Kata Kunci: media komunikasi, pendamping PKH, family development session (FDS)

INTRODUCTION

The Family Hope Program (PKH) is a conditional cash transfer program given to poor families in Indonesia. PKH in the long term is expected to break the chain intergenerational poverty through improving education and health conditions in PKH families. With so that the next generation can get out of the poverty trap. By 2021, PKH has reached more than 10 million poor and very poor households in Indonesia. Currently, PKH continues to develop both in terms of the coverage of the number of Beneficiary Families (KPM) and the coverage of assistance. Program content continues to be improved, one of which is the implementation of the Family Development Session (FDS) intervention or also known as the Family Capacity Building Meeting (FDS).¹

The government is very serious in making the Grand Design Program for poverty alleviation, one of which is through this PKH, considering that the poverty rate in Indonesia is still at fairly high level. The poverty portrait released by the Central Statistics Agency of the Republic of Indonesia in 2019, in general, in the period March 1999 - 2019 the poverty rate in Indonesia decreased both in terms of number and percentage, with the exception of March 2006, September 2013, and March 2015. The number of poor people in Indonesia in March amounted to 25.14 million people (9.41%), down from March 2018 which was 25.95 million people (9.82%).²

The Central Statistics Agency of Lampung Province (2020) released the percentage figures for the poor by regencies/cities in Lampung Province in 2019, respectively from the smallest to the largest as follows: Mesuji 7.47%, Tulang Bawang Barat, 7, 75%, Metro 8.68%, Bandar Lampung 8.71%, Tulang Bawang 9.35%, Pringsewu 10.15%, Central Lampung 12.03%, Tanggamus 12.05%, West Lampung 12.92%, Way Right 13.07%, South Lampung 14.31%, West Coast 14.48%, Pesawaran 15.19%, East Lampung 15.24%, and North Lampung 19.90%.

At the provincial level, Bandar Lampung City still ranks fourth with the smallest percentage of poor people. The struggle to achieve these achievements is of course carried out by applying various policies and programs that are carried out in a systematic, planned, synergistic and sustainable manner. Bandar Lampung City still needs to continue to improve its efforts in

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poverty alleviation to reduce the number of poor people in order to improve the degree of community welfare.

Recognizing the importance of improving the quality and welfare of families, the government strives and has high hopes for the success of the PKH program. Currently PKH continues to develop both in terms of coverage of the number of KPM and coverage of assistance. Program content continues to be improved, one of which is the implementation of the Family Development Session (FDS) intervention or also known as the Family Capacity Building Meeting (P2K2).

Referring to a journal written by Budhi Rahardjo, Suryo Ediyono, Desy Kurnia Putri, with the title Implementation of Empowerment of the Poor through Family Development Session (FDS) in the Family Hope Program (PKH) Implementation of Empowerment of the Poor through Family Development Session (FDS) in the Family Hope Program (PKH) Family Development Session (FDS) which is the implementation of empowerment activities in PKH in the form of a community learning process which is expected to increase the independence and welfare of KPM. In general, this study aims to determine the implementation of the process and barriers to empowerment of FDS PKH in Manang Village. This research is descriptive qualitative, with a case study approach, conducted in August with 7 informants. Data was collected by means of in-depth interviews, observation, and documentation. The types and sources of data in the form of primary and secondary data were selected by purposive sampling. Methods of data analysis using the method of Miles and Huberman. The results of this study are that FDS empowerment has been running since 2017, supporting factors for FDS implementation are PKH mentors who have been trained, while the obstacles to FDS are at the stage of material transformation which is not optimal due to the short FDS implementation time, and there is an inaccuracy in the FDS material provided with the needs of KPM.

FDS activities are learning activities with various practical materials, namely health, education, economy, and family welfare. Each material is summarized in a module with successive sessions. The FDS module was developed by the Central Implementing Family Hope Program (PPKH). FDS activities are carried out once a month with a duration of 2 hours. The facilitator in FDS activities is the PKH assistant.

PKH facilitators, as government partners, are a key component in the FDS program, because they not only act as officers who monitor compliance with Beneficiary Families (KPM) but also act as facilitators. So it is necessary to prepare PKH assistants as facilitators who have professional and quality abilities, have knowledge, abilities, skills and high commitment to the success of this program. The ability of the companion will determine the success of the FDS, especially the community/audience filled by various groups ranging from breastfeeding mothers to the elderly. Accuracy in applying the method and use of communication media will determine whether the coaching message carried out is effective or not for the realization of FDS objectives. So that the study of the Analysis of Communication Media Assistance for the Family Hope Program (PKH) in the Implementation of Family Development Sessions (FDS) in the Batu Putuk Region, Teluk Betung Barat District, Bandar Lampung City is expected to

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help identify Steps and efforts that need to be taken to improve program implementation FDS at the KPM level in the future.

**Hope Family Program**

Hope Family Program or PKH in this village as social protection program planned, directed, and sustainable, which has a vision of improving the quality of life of poor and vulnerable families through increasing accessibility to health, education, and welfare services designed by the Indonesian Ministry of Social Affairs.

In line with the dynamics of the problem of poverty in Indonesia, since it was first launched in 2007 until now, has undergone many improvement innovations to accommodate program needs. Finally, this program is stated in the Regulation of the Minister of Social Affairs Number 1 of 2018 concerning the Family Hope Program, it is known that the main things are as follows:

A. The Family Hope Program, hereinafter abbreviated as PKH, is a program of providing conditional social assistance to poor and vulnerable families and/or someone who is registered in the integrated data for the program for handling the poor, processed by the Center for Social Welfare Data and Information, and designated as beneficiary families Hope Family Program.

B. PKH aims to:
   - To improve the living standards of beneficiary families through access to education, health and social welfare services;
   - Reducing the burden of spending and increasing the income of poor and vulnerable families;
   - Introducing the benefits of formal financial products and services to beneficiary families.

C. PKH targets are families and/or someone who is poor and vulnerable and registered in the integrated data program for handling the poor, has components of health, education, and/or social welfare.

D. Health component criteria include:
   - pregnant/breastfeeding women; and
   - children aged 0 (zero) to 6 (six) years.

C. The education component criteria include:
   - Elementary school/madrasah Ibtidaiyah or equivalent.
   - Junior high school/madrasah tsanawiyah or equivalent; and
   - High school students/madrasah aliyah or equivalent and
   - Children aged 6 (six) to 21 (twenty one) years who have not completed the 12 (twelve) year compulsory education.

D. The criteria for social welfare components include:
   - elderly starting from 60 (sixty) years old; and
   - Persons with disabilities are prioritized for people with severe disabilities.

E. The beneficiary family, hereinafter referred to as the beneficiary family, is the family receiving the PKH social assistance that has met the requirements and stipulated in the decision. PKH Beneficiary Families are entitled to:
PKH Social Assistance
PKH Assistance
Services in health, education, and/or social welfare facilities
Complementary Assistance Programs in the fields of health, education, energy subsidies, economy, housing, and fulfillment of other basic needs.

F. PKH assistance by Social Facilitators consists of facilitation, mediation, and advocacy activities for PKH Beneficiary Families in accessing health, education, and social welfare facilities. PKH assistance aims to ensure that family members of PKH beneficiaries receive rights and fulfill obligations in accordance with the terms and conditions of PKH beneficiaries.

G. The Social Assistance is tasked with: ensuring that PKH beneficiary families receive the right amount of PKH Social Assistance and on target, holding family capacity building meetings with PKH beneficiary families at least 1 (one) time per month; and facilitating PKH beneficiary families in obtaining complementary assistance programs in the fields of health, education, energy subsidies, economy, housing, and meeting other basic needs.

Family Development Session (FDS)

In the general guidebook for the implementation of the PKH Family Development Session (FDS) or in other terms, the Family Capacity Building Meeting (P2K2), it is a structured behavior change intervention. FDS is given to all PKH KPM since the first year of PKH participation. FDS materials must be delivered through group meetings every month which is delivered by the PKH Social Facilitator to the assisted groups.

In the FDS implementation manual, the objectives of the FDS function are:¹⁴

a. Improving knowledge, attitudes, and behavior of KPM on health and nutrition for pregnant women, breastfeeding mothers, infants and toddlers.

b. Improving knowledge, attitudes, and behavior of KPM to improve the quality of child care and education in KPM.

c. Improving knowledge, attitudes, and behavior of KPM in managing family finances, increasing financial literacy, utilization of bank services, and strategies for opening a business for KPM.

d. Improving knowledge, attitudes, and behavior of KPM towards the prevention of violence and neglect of children.

e. Improving knowledge, attitudes, and behavior of KPM in family support for the welfare of the elderly and the treatment of severe disabilities.

f. Improving the quality of monthly meetings organized by companions.

g. PKH in changing the mindset and behavior of the beneficiary families.

Mutual agreement between facilitators and participants in determining the schedule will affect the quantity and quality of FDS implementation. The discussion group was conducted by one facilitator for 15-20 PKH member households who live close by. The meeting time and

location are agreed upon between the facilitator and PKH participants, with the principle of not burdening the PKH Beneficiary Families. The material for the Family Development Session (FDS) itself consists of:

Education and Parenting among others, be a better parent, understanding the development and behavior of children, understanding how early childhood learns, helping children succeed in school. Health and Nutrition among others, the importance of nutrition and health services for pregnant women, the importance of nutrition for breastfeeding mothers and toddlers, pain in children and environmental health, financial Management and Business Planning, Managing family finances, Be careful about borrowing and saving, starting a business, child Protection Efforts to prevent violence and wrong behavior in children among others, abandonment, exploitation of children, Social Welfare, Services for people with severe disabilities. The importance of the welfare of the elderly, FDS Execution Time FDS is given as the obligation of the PKH Facilitator to the PKH KPM who is his assistant in a meeting which is held once a month. In its implementation, FDS becomes part of the performance measure of a facilitator with supervision from district/city coordinators and regional coordinators.

PKH Facilitator

PKH facilitators are needed because most PKH participants have limited ability to fight for their rights. By because that, Assistance activities are needed that aim to help them get their rights as PKH participants and other rights related to complementarity programs, both those provided by the Central Government and Regional Governments, such as: RASKIN, BSM (KIP), JKN-Health (KIS), PSKS, KUBE, UEP, Housing Suitable for Living and so on.

PKH facilitators are also needed to assist the tasks of the Central/Regional UPPKH in identifying and reporting all problems that arise in the implementation of PKH, as well as to carry out follow-up handling and resolution in a fast time. a. Implementation Planning by Facilitator

- The facilitator makes a P2K2 implementation plan for the assisted KPM with the format in the manual.
- The P2K2 meeting is held by 1 (one) facilitator for the assisted group.
- In normal working area conditions, the maximum number of P2K2 participants is 40 people.
- Facilitators and participants agree on the location of the P2K2 implementation.
- Facilitators are not allowed to charge meeting fees such as consumption and the like from PKH participants.
- Companion is not required to provide consumption in P2K2
- Facilitators are required to use supporting equipment such as modules, smart books, posters, flipcharts and brochures provided during the training.

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5Introduction to P2K2 Module Revision 2018 h 26
• The facilitator must refer to the steps in the module in delivering FDS material
• Facilitators should encourage active participation of PKH participants in discussions and exchange of opinions.
• In the implementation of the Health FDS, the Facilitator coordinates with the local Puskesmas to get support from the existing Midwife and Nutrition Health Worker to deliver health materials.

b. FDS Implementation Recording and Reporting

The recording and reporting of the FDS implementation is carried out as part of the counterpart performance appraisal. FDS recording and reporting is also part of monitoring the implementation of P2K 2. This reporting is carried out in stages starting from the Facilitator, Regency Coordinator/Supervisor, and Regional Coordinator. The reporting and recording format refers to the 2019 PKH implementation guidebook.

Family Quality Improvement

Basically, the quality of life is related to the achievement of an ideal or desired human life. Goodinson and Singleton put forward the definition of quality of life as the degree of satisfaction with the acceptance of the current life situation. *The World Health Organization* describes the quality of life based on current life experiences as a whole. An individual's perception of their position in life in the context of the culture and value system in which they live and live in relation to their life goals, expectations, standards and life focus. This concept includes several broad dimensions, namely: physical health, psychological health, social relationships and the environment.7

According to Taylor, quality of life describes an individual's ability to maximize physical, social, psychological, and work functions which are indicators of recovery or adaptability in chronic illness. Furthermore, Padilla and Grant define quality of life as a personal statement of the positive or negative attributes that characterize a person's life and describe an individual's ability to function and satisfaction in doing so. Improving the quality of life will be more widespread and guaranteed if basic abilities that include a long and healthy life, knowledge (and mastery of science and technology) and have access to the resources needed to live a decent life (purchasing power) are owned by the population.

*Uses and Gratification Theory*

The *uses and gratification* theory is a development of the theory or model of the hypodermic needle. This theory was introduced by Herbert Blumer and Elihu Katz in 1974 in their book *The Uses on Mass Communication: Current Perspectives on Gratification Research*. This theory says that media users play an active role in choosing and using a media. Media users try to find the best media sources in an effort to meet their needs. That is, the *uses and gratification* theory assumes that users have alternative choices to satisfy needs.8

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7Vergi, nurul Sagia, 2013, Quality of Retirement Life. in the Journal of the Faculty of Psychology UIN Suska
8Nurudin, Introduction to Mass Communication, (Jakarta: PT. RAJAGRAFINDO PERSADA), pp. 191-192
Symbolic Convergence Theory

Bormann states that his theory is built within the framework of a narrative paradigm that believes that humans are Homo Narrans. Namely, beings who exchange stories or narratives that describe their experiences and social realities. In his popular book *The Force of Fantasy Restoring the American Dream*, Ernest Bormann states that the goal of this theory is to explain how individuals converse with one another so that they share a common consciousness and create a sense of identity.

Symbolic Convergence Theory (SCT) explains the meanings, emotions, values and motives for action in rhetoric that is shared by people trying to understand from common experiences such as the diversity of life. This theory explores the phenomenon of message exchange that raises group awareness which has implications for the presence of shared meanings, motives and feelings. This means that this theory tries to explain how people collectively build a shared symbolic awareness through a process of exchanging messages to act for the people or groups of people involved in it.⁹

Communication media

Communication media is a tool or means used to convey messages from communicators to audiences. The dominant media in communication are the human senses such as ears and eyes. Media is also a window that allows us to be able to see a more distant environment, as interpreters who help understand experience, as a basis for conveying information, as interactive communication that includes audience opinions, as markers giving instructions or instructions, as filters or sharing experiences and focus on other people, a mirror that reflects on us and obstacles which covers the truth.

Communication media is also described as a means used to produce, reproduce, process and distribute and convey information. Communication media plays an important role in people’s lives. In simple terms, a communication medium is an intermediary in conveying information from a communicator to a communicant that aims to be efficient in disseminating information or messages. Communication is a form of conversation that takes place on the basis of a common perception. Communication in English, *communication* comes from the Latin word *communication* and comes from the word *communis* which means the same.¹⁰ The successful use of communication media can improve the quality of beneficiary families as well as recipients of messages about education, health and improving the family’s economy. The use of media is a supporter of success in a social assistance technique in the field. More specifically, the Minister of Social Affairs Regulation Number 10 of 2014 explains that social extension techniques consist of:

- Communication: is an effort to convey information from social educators to counseling targets by using channels or media that are understood by both parties and have the same meaning from the messages conveyed.

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¹⁰Communication theory, Theorie of Human Communication; Stephen W. Littlejohn and Karen A. Foss; Salemba Publishers
Information: is a communication effort in the form of messages or information given from one person to another.

Motivation: is an effort to direct the power and potential of social counseling targets so that they are willing to actively participate in realizing the goals to be achieved.

Education: is an effort to convince the target of counseling through teaching, inculcating values, opinions, and rules that are considered correct, both through intensive communication and a conducive learning process.

METHOD

The method used in this study is a qualitative descriptive method. This method presents directly the nature of the relationship between the researcher and the resource person. The research subject is the use of communication media for the Family Hope Program Companion (PKH). While the primary data in this study is in the form of the opinion of the subject (person) individually or in groups of observations or surveys of activities Family Development Session meeting and the results of observations in the field were PKH companions in Batu Putuk Village, Teluk Betung Barat, which consisted of 3 people. The secondary data is in the form of supporting books, namely books that explain the original literature. Tertiary materials, namely materials that provide instructions or explanations for primary and secondary data, including the Big Indonesian Dictionary and scientific work guides.

Research informants were determined by purposive sampling technique. So the informants in this study are people who have data and information. There were 10 informants in this study with the following criteria:
1. Active management of PKH recipient families in Batu Putuk Village
2. Have participated in all series of FDS activities
3. Willing to provide complete and accurate information.

Data collection techniques are the methods used by researchers to obtain data in a study. According to Creswell, based on the type of qualitative data, the data collection technique can be done by means of observation. Observations in this study were carried out by direct observation in the field to obtain more valid data. The objects observed in this research include: Actor (PKH administrators), Activity (activities carried out by PKH administrators), Act (actions or behavior of PKH administrators), and Felling (emotions and expressions of PKH administrators when interacting with other fellow administrators). Interview, This interview was conducted with the aim of extracting data through direct dialogue from credible sources and knowing complete information.

The interview technique used in this research is an in-depth interview (in-depth interview). The type of interview in this study uses the type of interview guide approach (general interview guide approach). The informants in in-depth interviews in this study are people who can provide information about the object under study. Informant The resource persons include PKH administrators and document studies. Data collection using a documentation technique is called document study, namely studying various sources of documents related to the subject of research as a complement to the results of observations.
and interviews. Documents used as data in this research can be in the form of pictures, writings, or momentous works related to the object of research\textsuperscript{11}

The data analysis procedure or technique used in this study is the Huberman and Miles Model data analysis procedure. This model states that there are three stages in analyzing data, namely data reduction, data display, and conclusion drawing. \textsuperscript{12}Schematically, the Huberman and Miles model data analysis process is as follows:

\begin{center}
\begin{tikzpicture}
    \node (data) at (0,0) {Pengumpulan Data};
    \node (display) at (2,0) {Penyajian Data};
    \node (reduce) at (0,-1) {Reduksi Data};
    \node (draw) at (2,-1) {Penarikan Kesimpulan};
    \draw [->] (data) -- (reduce);
    \draw [->] (data) -- (display);
    \draw [->] (display) -- (draw);
    \draw [->] (reduce) -- (draw);
\end{tikzpicture}
\end{center}

\textit{3.1 Data Analysis Schematic}

\section*{DISCUSSION}

The Family Hope Program Assistance has entered Batu Putuk Village since 2011 accompanied by Mrs. Mila Santi and then in 2016 as the number of PKH beneficiaries increased, Mr. Abdi Sahreza also assisted. The last addition of companions in 2018 with a total of three PKH facilitators in Batu Putuk. The number of recipients of PKH Benefits in Samasundu Village, namely from 2012 to 2020, are:

\begin{table}[h]
\centering
\begin{tabular}{|c|c|c|}
\hline
No & Companion Name & Number of KPM \\
\hline
1 & Mila Santi & 235 \\
2 & Abdi Sahreza & 215 \\
3 & M.Mansyur & 320 \\
\hline
\multicolumn{2}{|c|}{Amount} & 770 \\
\hline
\end{tabular}
\caption{Table 3.1 Number of PKH Assistance Recipients for Each Companion}
\end{table}

PKH Facilitator Communication Media in Batu Putuk Village, Teluk Betung Barat at the Implementation of the \textit{Family Development Session}

In accordance with the duties and functions of the PKH assistant itself, namely to socialize the PKH program so that PKH recipients have knowledge about the aims and objectives of the program. So the PKH Facilitator must be able to deliver materials to various participants, namely in terms of age and all levels of education. At the practical level, the PKH Facilitator delivers \textit{Family Development Session materials} to KPM in very interactive, communicative packaging, and is accompanied by examples in the form of videos, plipcar films and educational smart books. The FDS implementation is carried out every month by the facilitator.

\begin{flushright}
\textsuperscript{11}JR Faco, \textit{Qualitative Research Methods: Types, Characteristics and Advantages}, (Jakarta: Grasindo, 2010), p. 67.
\end{flushright}
Use of Flipchart

Flipchart has various forms according to the material needs presented by PKH facilitators. The use of flipcharts is a communication strategy in using media, choosing flipcharts has its own advantages, besides attracting participants to understand because it has pictures, it also makes it easier for technical assistants because it is more practical and easy. The use of flipcharts in the implementation of the FDS materials was very effective because the facilitators were helped in presenting the FDS materials and KPM also found it easy to accept the materials presented by the PKH facilitators.

Use of Communication Media Through Video

To attract participants' interest and enthusiasm, the use of video as a communication medium seems to have an important role in the socialization process in the group room. Video is also practical in helping communicators explain the material, but also has more value in terms of technical aspects. The communicator can control when to play and dismiss. In accordance with the interview with the PKH assistant in Batu Village, it can be concluded that the use of communication media through video can not only be a means to strengthen explanations, it can also increase the enthusiasm of PKH participants in group meetings. The use of video can also eliminate boredom during the socialization process.

Family development session materials improve quality Family of Hope Family Program in Batu Putuk Village

The purpose of holding FDS training activities for Family Hope Program participants is as a learning medium for Family Hope Program participants, in this case mothers as family economic regulators so that they are able to change for the better, both in terms of human resources, as well as from an economic perspective. This activity also aims to make the participants more confident in social life and more independent, even though the PKH program no longer supports them with cash transfers. The Family Development Session (FDS) or Family Capacity Building Meeting (P2K2) aims to provide awareness to KPM to act independently in terms of overcoming problems in the family such as child care and education, economic management and business planning, health and nutrition, child protection and knowing about social welfare. Family Development Session materials include:

- **Health**: includes: nutrition, services for pregnant and maternity women, services for postpartum and breastfeeding mothers, services for infants and adolescents, and clean and healthy living behavior (PBHS)
- **Education**: which includes: being great parents, understanding early childhood behavior and learning, improving children's language skills, and helping children succeed in school.
- **Economics**: includes: improving family finances, savings and credit, micro, small and medium enterprises, entrepreneurship, and marketing. financial management and business planning
- **Child Protection**: includes: child protection, children's rights including children with special needs, preventing domestic violence.
Quality of PKH Beneficiary Families in Batu Putuk Village

PKH has been running in Batu Putuk Village since 2011 which has had a positive impact on KPM PKH beneficiaries. The implementation of PKH as a form of social protection for poor families seeks to reduce and empower groups who are vulnerable to poverty. PKH exists as an instrument to improve the welfare of the poor. The results of research in the field show the success of the Family Hope Program in Improving the Quality of Families in Batu Putuk Village, there are several contributions made by this program, namely

Health

In line with the objectives of the PKH program itself, apart from providing assistance to improve the economy, health also appears to be an important element in the indicators of prosperity. The health impact has had a fairly good effect on the Beneficiary Families of the Family Hope Program in Batu Putuk Village, especially in the fulfillment of balanced nutritional needs for pregnant women, children under five, school-aged children and the elderly. Fulfillment of balanced nutrition certainly has an impact on the quality of health of the families of the Beneficiaries of the Family Hope Program, as stated above

After conducting interviews in the field of Health, the researchers obtained information that the assistance received by the mothers was actually used for nutritional needs for the health of their families, and also mothers who have children under five are also diligent in attending the posyandu every month. In addition, the presence of PKH, especially in Batu Putuk Village, is an aid that has a significant impact on success in improving the lives of poor families as a social safety net.

Education

Aspects of the impact of education on Beneficiary Families of the Family Hope Program in Batu Putuk Village is not far. This is different from the health aspect, where the education aspect also has a very high impact on the Family of Hope program. With the government assistance which is conditional in nature, all children participating in the Family Program Expectations are required to assess formal education starting from the kindergarten level to the highest level. Beneficiary families feel the burden is reduced by the assistance for education so that educational needs have been guaranteed from the amount of assistance received. From the results of the interview, it was explained how the PKH assistance really helped the recipient families in the children's education sector. Children feel motivated to study hard because their learning facilities are fulfilled.

Economy

Improving the family economy is a vital object in the goals of this PKH program. In the economic field, PKH recipients find it helpful. From the results of these interviews researchers can obtain information that the community in Batu Putuk Village every time they disburse assistance for the Family Hope Program they insert their assistance for the family's economic needs and some even use it as family business capital. This shows that the Family Program
assistance Hope through the Ministry of Social Affairs of the Republic of Indonesia has a good impact in helping the economy of the residents of Batu Putuk Village, Teluk Betung Barat.

Implementation of Communication Media in the Implementation of Family Development Session (FDS)

Communication media in the form of Video, flipcart and Smart Books have proven to have a positive impact on the success of the FDS itself. Apart from being a medium so that participants do not experience a saturation point in the socialization process, the most important thing is that the message conveyed is more structured and easy to accept.

The media used in the FDS process found the following results.

- Learning tools for the implementation of FDS consist of; FDS implementation guide module for Facilitators, Smart Books for PKH Participants, Posters, Flipcharts, Brochures, Smart Books.
- The FDS implementation guide modules, Posters, Flipcharts, and Brochures for Facilitators were reproduced by the Education and Training Center for distribution to the Education and Training Center in FDS training activities for PKH Facilitators.
- Smart Books for PKH Participants are reproduced by the Directorate of Family Social Security, distributed to PKH implementers at the district level.
- Smart Books for PKH Participants must be received by PKH implementers in the Regency no later than 2 months after the end of the FDS Training.

The Family Development Session program is able to solve problems faced by families so that family life and family living standards can improve, in line with that, Family Development Session (FDS) or this Family Capacity Building Meeting (P2K2) aims to provide awareness to KPM to act independently in terms of overcoming problems in the family such as child care and education, economic management and business planning. Family Development Session materials cover health, education, economics and child protection. Health itself includes: nutrition, maternity and maternity services, postpartum and breastfeeding mothers, infant and adolescent services, and clean and healthy living behavior (PBHS). Education includes: being great parents, understanding behavior and early childhood learning, improving children's good behavior, play as a way for children to learn, improve children's language skills, and help children succeed in school. While in the economic field, the Family Development Session program includes: family financial management, savings and credit, micro, small and medium enterprises, entrepreneurship, and marketing. Meanwhile, in the field of child protection, it includes: child protection, children's rights including children with special needs, preventing domestic violence, maternal protection, health and nutrition, child protection and knowing about social welfare.

One indicator of the success of the PKH program is how the FDS implementation runs smoothly through the media. Because FDS itself provides an understanding for participants to live prosperously and not depend on the value of assistance from the government. Based on the data collected by the researchers, the level of participation in the Batu Putuk Village area has decreased every year, which means that the level of poverty in this area is decreasing. For this success, the percentage of the role of the communication media certainly
has a role in it, considering that mental strengthening and knowledge to become an independent family is in the routine FDS sessions held by the facilitator.

CONCLUSION

Communication media in the form of videos, flipcarts and smart books used by PKH assistants, Batu Putuk Village, Teluk Betung Barat, Bandar Lampung City in the Family Development Session Process, made it very easy for mothers to receive materials from companions. In addition, each media used by the facilitator also has its own advantages in the process of delivering the material, so that the material presented can be understood and impressed well for the mothers of the hope family program participants in Batu Putuk Village, Teluk Betung Barat, Bandar Lampung City.

The role of communication media in the socialization process when FDS is able to add insight and knowledge in managing household life in terms of child care and education, family financial management and social protection (Protection of Violence in Children), in terms of health, education and economy is able to form mothers-to-be. Mothers of PKH Beneficiaries become quality families.

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