



Research Article

Subjective Well-being Description in Women Receiving the Family Hope Programme (Program Keluarga Harapan/PKH)

Istiqomah* and Nida Hasanati

Fakultas Psikologi Universitas Muhammadiyah, Malang, Indonesia

Abstract.

Subjective well-being is a person's perception of his life experiences, which consists of cognitive and affective evaluations of life and represents psychological well-being. The purpose of this study was to determine subjective well-being in women who received the Hope Family Programme. The research subjects were 80 women who received the Hope Family Programme in Blitar. The sampling technique used was quota sampling. Data analysis was done using quantitative descriptive analysis. The results of the analysis showed that 47.75% women who received the Hope Family Programme had a high positive effect, 52.5% had a low positive effect, 52.5% had a high negative affect, and 47.5% had a low negative effect. However, high life satisfaction was 52.5% and low life satisfaction was 47.5%.

Keywords: Family Hope Programme, subjective well-being

Corresponding Author: Istiqomah; email: istiqomah@umm.ac.id

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1. BACKGROUND

Poverty is still a problem faced by the Indonesian people. Poor family conditions encourage pre-prosperous families to not care about their conditions and ignore their inner welfare. Various programmes have been launched and among the government programmes to overcome poverty is the Family Hope Programme (Program Keluarga Harapan/PKH). Directorate general of budget, ministry of finance [1] described PKH as a protection system for the poor to maintain the social welfare of the poor as well as an effort to cut the poverty chain. PKH aims to reduce the number and break the chain of poverty, improve the quality of human resources, and change behaviour that is less supportive of improving the welfare of the poorest groups. This goal is related to efforts to accelerate the Millennium Development Goals (MDGs).

PKH participants are pre-prosperous families. Pre-prosperous families are families with below-average income, families who do not have a fixed income, have many family

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members, children who are still in school and there are pregnant women. The conditions of PKH recipient families are vulnerable to psychological problems, especially for women because they are the spearhead in managing the family economy. The psychological conditions experienced by women who receive the family hope programme include subjective well-being.

Subjective well-being (SWB) is an individual's subjective experience in his life, individual well-being can be determined by individual cognitive experiences and satisfaction [2]. Aspects of subjective well-being consist of two aspects, namely, cognitive and affective aspects. The cognitive aspect is an evaluation of life satisfaction which is interpreted as an assessment of life. The cognitive aspect is a process of evaluating overall life satisfaction (self-satisfaction), evaluation of cognitive judgements (thinking) that can satisfy their lives according to individual needs such as being able to interact interpersonally with others, having a good job, getting healthy, and getting enough income. The affective aspect is a process that can reflect an experience of events that have occurred in life. Subjective well-being influences personality, social relationships, and the influence of society and culture on an individual.

Individuals who have high subjective well-being feel more confident, can establish good social relationships, and show good performance at work. In addition, stressful situations in individuals with a high level of subjective well-being can perform stress coping against these circumstances so that they feel an effective life [3]. Subjective well-being in individuals Individuals who have high subjective well-being will be better at establishing relationships at work and have stress coping [4]. Low subjective well-being will have an impact on health levels. Diener and Chan [5]mentioned that low subjective well-being will have an impact on the quality of health and longevity of individuals in the future. High levels of Subjective Well-being in middle-aged individuals can reduce the risk of diseases such as high blood pressure and heart attacks. Conversely, low levels of Subjective Well-Being can lead to high blood pressure (5, 6).

Subjective well-being in mothers is very influential on the state of the family. The better the condition of the family, the better the condition of well-being felt by the mother. In line with Herbst's [7] research that a married woman has a higher level of subjective well-being than an unmarried one. The effect of socioeconomic differences on subjective well-being is well known. But not all individuals will have low subjective well-being when experiencing economic difficulties and unfavourable social conditions [8].

The condition of limitations owned by women who receive the family hope programme will certainly affect the feelings that arise in living their days, therefore the



problem in this study is how the description of the subjective well-being experience in women who receive the family hope programme. The purpose of the study was to describe the condition of subjective well-being in women who received the Family Hope programme in Blitar. While the benefits of research for women receiving the Family Hope programme are to find out their psychological condition and to improve subjective well-being. For PKH facilitators, it is useful as information in the mentoring process, because the PKH mentoring process also involves an emotional and interpersonal approach which will affect the achievement of the programme. This research is useful in the development of clinical psychology by examining the psychological condition of women who receive the family hope programme through improving subjective well-being.

1.1. Subjective Well-Being

Well-being is a condition where individuals have high happiness and low levels of stress overall. Diener defines happiness as the same as subjective well-being as a collection of positive affect and general life satisfaction felt by individuals. Subjective Well-Being is how individuals evaluate their lives including life satisfaction, marital satisfaction, low levels of depression, anxiety, positive mood, and positive emotions [2].

Subjective well-being according to Vandenbos [9] is the result of an evaluation related to the quality of life that accumulates the dynamics of emotions that exist in him. It aims to realise how well the circulation of life in individuals is. Subjective well-being is a person's perception of his life experience, which consists of cognitive and affective evaluations of life and represents psychological well-being [10].

According to Ed Diener [11] the definition of subjective well-being and happiness can be made into three categories. Firstly, subjective well-being is not a subjective statement but some quality desires that everyone wants to have. Second, subjective well-being is an overall assessment of one's life that refers to various criteria. The third meaning of subjective well-being when used in everyday conversation is where positive feelings outweigh negative feelings. Compton [10] argues that subjective well-being is divided into two main variables: happiness and life satisfaction. Happiness relates to an individual's emotional state and how the individual feels about themselves and their world. Life satisfaction tends to be mentioned as a global assessment of an individual's ability to accept his or her life. From some of the above definitions, it can be concluded that subjective well-being is a person's perception of his life experience, which consists of cognitive and affective evaluations of life and represents psychological



well-being [12]. According to Ryff [13], the aspects of subjective well-being consist of self-acceptance, positive relationships with others, autonomy/independence, mastery of the environment, life goals, and personal development.

There are two theoretical approaches used in subjective well-being, namely; 1) Bottom-up theories. The theory views that the happiness and life satisfaction that a person feels and experiences depends on the number of small happiness and a collection of happy events. In particular, subjective well-being is the sum of positive experiences that occur in a person's life. The more pleasant events that occur, the happier and more satisfied the individual will be. To improve subjective well-being, this theory assumes the need to change the environment and situations that will affect individual experiences, for example, adequate work, a safe home environment, and decent income/salary. 2) Top-down theories. The subjective well-being experienced by a person depends on the way the individual evaluates and interprets an event/occurrence in a positive light. This theoretical perspective considers that it is the individual who determines or plays a role in whether the events he experiences will create psychological well-being for him. This approach considers the type of personality, attitudes, and ways used to interpret an event. Thus, improving subjective well-being requires efforts that focus on changing one's perceptions, beliefs, and personality traits. Diener [14] introduced evaluation theory, where subjective well-being is determined by how individuals evaluate information or events experienced. This involves an active cognitive process as it determines how the information will be organised. How an event is evaluated is also influenced by temperament, the standards set by the individual, the mood of the moment, the situation, and cultural influences. In other words, subjective well-being includes cognitive and affective evaluations. Cognitive evaluations are made when a person consciously evaluates and rates their satisfaction with life as a whole or evaluative judgements regarding specific aspects of life, such as job satisfaction, interests, and relationships. Affective reactions in subjective wellbeing (SWB) in question are individual reactions to events in life which include pleasant emotions and unpleasant emotions.

According to Diener, several factors affect subjective well-being, among others: 1) Disposition is conceptualised as the basis of individual personality, and is considered as something that is very large to be inherited and becomes a stable factor in an individual's personality. 2) Traits, usually extroverted traits are at higher levels of happiness because they have greater sensitivity to positive rewards or have a stronger reaction to a pleasant event. 3) Other personality, other personality dimensions also have a relationship with subjective well-being. Two of the "Big Five" personality dimensions are agreeableness



and conscientiousness. And others have narrower personality traits, such as optimism and self-esteem have a relationship with subjective well-being. 4) Social relationships, good social relationships will affect the level of subjective well-being. Because having good social relationships will bring positive things such as social support and emotional closeness so that it affects the level of subjective well-being in individuals. 5) Income, income can also affect subjective well-being in a person, according to surveys that have been conducted, it is not uncommon for someone to admit that subjective well-being also depends on how much income. In addition to material income, other factors such as being respected, valued, friends, and having a good job will also affect subjective well-being in an individual. 6) Unemployment, this unemployment factor is also an influence on subjective well-being, usually individuals who are in a period of unemployment can reduce their level of subjective well-being in themselves.

1.2. Family Hope Programme (Program Keluarga Harapan /PKH)

Recipients of the program keluarga harapan (PKH) are underprivileged families who have children who are still in school, children under five, and pregnant women. Starting from poor conditions, irregular work, even unemployment, and the burden that must be borne by a large family because they have many children, thus encouraging them to do anything to survive. Attention to children is lacking because they are busy working, what is in their minds is how to survive and get a lot of money, so the parenting patterns they apply to their children are also not good.

PKH is an effort to build a social protection system for the poor in improving the social welfare of the poor and breaking the poverty chain. The target recipients of the PKH programme are very poor families (RTSM). The PKH program is expected to encourage changes in the behaviour of PKH recipients, namely children can go to school, and get health facilities. The programme provides cash to poor households who are required to fulfill the terms and conditions that have been set. These requirements can be in the form of attendance at educational facilities (for children of a certain age) or attendance at health facilities (for children under five and pregnant women).

2. RESEARCH METHODS

The method section contains the variables or concepts studied in the study, sampling methods, research subjects, instruments used, treatment designs or manipulations, data collection procedures, and data analysis techniques.



2.1. Sampling Method

The sampling technique used was quota sampling. Quota sampling is a technique to determine a sample from a population that has certain characteristics until the desired quota amount.

2.2. Research subject

The research subject is the main source of research data, namely those who have data about what is being studied [15]. The research subjects that will be used are women who receive the family hope programme in Blitar City as many as 80 subjects.

Frequency % No. Category Age 20-30 6.3 31-40 20 25 41-50 45 56.3 >50 10 12.5 Occupation Housewive 55 68.8 1.3 Farmer 19 Freelancer 23.8 6.3 5 Self-Employed Number of children 11 32.5 1 child 2 children 33 41.3 22.5 3 children 18 > 3 children 18 3.8 Status 69 86.3 Merried Divorced 5 6.3 6 Widowed (deceased divorce) 7.5

TABLE 1: Descriptive Data of Subjects

2.3. Research Instruments

Subjective well-being is a set of positive affect and general life satisfaction that an individual experiences. The self-judgment in subjective well-being is comprised of cognitive and affective evaluation of someone who has been experiencing all their life. Cognitive evaluation is someone's life satisfaction which they have felt during their lifetimes, whereas affective evaluation is someone's judgement about the positive and negative feelings that they have experienced before. The research instrument in this research was a subjective well-being scale by Diener, which was adapted to Indonesian by [16].



The subjective well-being scale consists of Satisfaction With Life Scale (SWLS) and Positive Affect Negative Affect Schedule (PANAS). Satisfaction with Life Scale was utilised to measure the life satisfaction aspect of an individual. SWLS scale has 5 items and has seven ranks which were ranked number 1 (Strongly Disagree) to rank number 7 (Strongly Agree). Whereas, the scoring for the Satisfaction with Life scale was 1 = Strongly disagree, 2 = Disagree, 3 = Somewhat Disagree, 4 = Neither Agree nor Disagree, 5 = Somewhat Agree, 6 = Agree, and 7 = Strongly Agree.

The Positive Affect Negative Affect Schedule or PANAS is a scale developed to measure the positive and negative aspects. This scale is developed by Watson, Clark, & Tellegen (1988), and comprised of 20 questions, 10 questions for positive affect and 10 questions for negative affect. Every item has 5 ranks; 1 = Almost Never, 2 = Rarely, 3 = Sometimes, 4 = Often, 5 = Almost Always

2.4. Research design

This research employs a non-experimental quantitative descriptive method. The descriptive method aims to create an objective depiction or description of a situation with numbers, and data collecting until the interpretation of the data [17]. According to [18], quantitative data is a research method which has a foundation of concrete data that usually in this method, numbers that will be calculated using statistics. The statistical calculations were utilised to test the hypothesis and calculate the result, thus producing a summary of the research.

2.5. Data Collection Procedures

The procedures for this study are 1) Find the phenomenon related to the psychological condition of women who receive the family hope programme 2) Next, a literature study to understand the theory, develop the research method and find and prepare the research instrument. 3) Conducting the study and lastly, 4) Analysing the research data

2.6. Data analysis technique

Descriptive statistics are utilised to analyse and create a depiction of the general subjective well-being condition of women who receive the family hope programme. Moreover, it also described the condition related to age, jobs, marital status, and the number of children. The data is analysed with SPSS Software.



3. RESULT

The result of data analysis of women recipients of the family hope programme revealed that:

Standard Scale Mean Category Frequency Deviation Panas (Positive 80 64.5625 6.81369 Hiah 38 47.5 42 52.5 and Negative Iow 42 Affect Schedule) High 52.5 Positive Affect 38 47.5 Iow Negative Affect SWLS 80 4.95678 47 52.5 21.7500 High (Satisfaction 38 47.5 Low with Life Scale)

TABLE 2: Descriptive Data.

According to the data above, it was found that 47.5% of recipients of the family hope programme have a high positive affect compared to the 52.5% who have a low positive affect. The life satisfaction of women who receive the family hope programme which was categorised as high was 52.5%, whereas the low category was 47.5%.

The analysis result revealed that women who live alone (either divorced or widowed) tended to have low positive affect. Of 11 divorced or widowed women, only 2 have a positive affect. 2 out of 5 women who worked as entrepreneurs have a high positive affect, and 8 out of 19 women who worked as freelancers have a positive affect. Continuing the trend, only 27 out of 55 housewives have a high positive affect. It can be seen from the Data in Table 1 that in the age range between 20-30 years old 3 out of 5 participants have a positive affect, in the age range of 31-40 years old only 3 out of 20 have a high positive affect, in 41-50 years old range 32 out of 45 have a high positive affect and lastly, in age range of >50 years old 6 out of 10 have a high positive affect.

If it is sorted by the number of children they have, from 11 women who only have one child, only 4 have a high positive affect. In the category of women who have two children, 14 of them have a high positive affect. Out of 18 women who have 3 children, 15 of them have a high positive affect, and in 18 women who have more than 3 children, only 6 of them have a high positive affect. The women who received the family hope programme who have a negative affect were sorted by the number of children they have, in the first category of one child 4 out of 11. In the second group of women with 2 children, 7 out of 11 have a negative affect, moreover, in the category of women with 3 children, 7 out of 18 have a negative affect. In the last group of more than 3 children 7



out of 11 have a negative affect. Based on this description, it could be summarised that subjective well-being is also affected by the number of children a family has.

The result of life satisfaction sorted by marital status revealed that 38 women in marital relationships have high life satisfaction in contrast with only 4 women in divorced and widowed categories have high life satisfaction. According to the category of job, 34 housewives, 5 freelancers, 2 entrepreneurs and 1 farmer have high satisfaction with life respectively. Furthermore, based on the age group, 4 people in the age group of 20-30 years old, 9 people in the group of 31-40 years old, 24 people in the category of 41-50 years old, and 4 people in the last category of >50 years old which have high life satisfaction.

4. DISCUSSION

According to top-down theories, subjective well-being is experienced by someone depending on how this individual evaluates and interprets a situation with a positive perspective. This theory adopted a perspective where an individual is the one who determines and plays a role to decide whether an experienced event would create their subjective well-being. This approach deliberated on personality type, attitude, and the way they interpret a situation, thus in creating subjective well-being, an effort to change the perception, belief and manner of someone was needed. The situation of subjective well-being of women who received the family hope programme was not all at a low level. This result indicates that subjective well-being relies upon each individual and their self-regulation.

An economic factor is also one of the reasons why someone has low subjective well-being. A family with low income would cause they are unable to fulfil their basic necessity, so the family members need to work harder and have less time for themselves. However, not all women the recipient of the family hope programme have the same mindset and perception. [8] reported that not all individuals would have low subjective well-being in an unfavourable condition such as encountering economic and social hardship. A study in China found that the factors that affect Elderlies subjective well-being were education level, social support, income and health. The psychological well-being of women who received the family hope programme is inseparable from social inequality, economy, and education factors. The ability to understand and accept themselves is also a determiner factor. The result supports the previous result by [19], which stated that subjective well-being is closely related to the demographic, health, and income factors.



Family income is an important aspect of Family Hope Programme recipients. Income is closely related to jobs. Having a job means that women would have some income, thus they would be able to fulfil their family necessities. These statements are in agreement with studies by[20] stated that a job could offer high stimulation so an individual could feel joy, a chance to fulfil their curiosity and develop their skills, receive social support, financially stable and have an identity and goal in life. So, it could be summarised that having a job significantly correlates with happiness because an unemployed individual often has a high level of stress. These income and jobs aspects are one of the ways to increase subjective well-being

The employed women who receive Family Hope Programme Wanita tended to have higher subjective well- being. This result is possible because these individuals felt that they have a safety net, even if they have a bare minimum income. This finding is align with the study by [12] which said that 67% of wealth sufficiency contributed to subjective well-being. An individual's happiness is also affected by their thoughts (Diener). Even though they are not able to fulfil their basic necessity, they have good self-acceptance about their life, thus wealth sufficiency is not a predictor of subjective well-being. An individual who has a high gratitude level and can perceive the happiness and satisfaction of life which they feel and encounter would perceive that they are happy even in poverty. This is because they manage to find the smallest joy and collect it into a group of the happiest experience in their life. This research is conducted in Blitar, East Java, Indonesia. Culture also influences someone's subjective well-being. Especially in Javanese culture, with *nrimo* and always feel gratitude for everything they have. This notion is further supported by [12], which found that subjective well-being in Javanese is influenced by gratitude.

Someone's job status is also related to happiness. Someone who have permanent work and specific skill for their job rarely gets laid off. Individuals would be calmer which automatically affects their subjective well- being. This result is consistent with a study by [21], which stated that a working individual is happier than the unemployed one. An individual who works with a specific skill is also happier than a worker who did not have a specific skill.

The outcome revealed that women who live alone either divorced or widowed tended to have lower positive affect. [21] gave the same definition for happiness and subjective well-being which was a positive psychological condition characterised as high satisfaction with life, high level of positive emotion and low level of negative emotion.



According to the age of the participants, in the age category of 20-30 years old, 3 out of 5 subjects have positive affect compared to the category of 31-40 years old, 3 out of 20 people have high positive affect. In the age group of 41-50 years old, 32 out of 45 recipients have a high positive affect, whereas, for people who are older than 50 years old, 6 out of 10 have a high positive affect.

The number of dependents in one household was determined by the number of family members. The more children a family have, the larger of basic needs that must be met by the family. According to [22], the number of dependents in a household comprised of children, unemployed productive age family members, and elderly would decrease the well-being of a family, thus leading to poverty in a family or household.

The life satisfaction of women, recipients of family hope programme was categorised as high (52.5%). This result is caused by the notion of even if someone lives in poverty, if they could maintain a positive perception about their life, they would attain subjective well-being. Oishi [23] explained that subjective well-being is a condition where an individual experiencing life satisfaction, often feels happiness and rarely feels sadness or anger.

5. CONCLUSION

According to the obtained data, it is found that 47.5% of family hope programme recipients have high positive affect, in contrast with 52.5% of respondents who have low positive affect. For future research, it would be interesting to explore this topic deeper by adding some variables. The result of this study could be utilised as an initial assessment while providing some assistance to the Family Hope Programme.

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Ethics Policy

Ethical policies include the conflict-of-interest statements, informed consent procedures, and ethical committee approval. Requirements can vary by discipline. If you are unclear about the requirements for your study, check with your colleagues and advisors, and also the Conference Organizer(s).

References

- [1] Direktorat Jenderal Anggran Kementerian Keuangan. Program Keluarga Harapan. Progr Kel Harapan 2015:17.
- [2] Diener E. Subjective well-being. Psychological Bulletin. 1984;95:542–575. https://doi.org/10.1037/0033-2909.95.3.542
- [3] Biswas-diener R, Diener E, Tamir M. The psychology of subjective well-being. American Academy of Arts and Sciences. 2004;133:18–25.
- [4] Pavot W, Diener E. The subjective evaluation of well-being in adulthood: Findings and implications. Ageing International. 2004;29:113–135.
- [5] Diener E, Chan MY. Happy people live longer: Subjective well-being contributes to health and longevity. Applied Psychology: Health and Well-Being. 2011;3:1–43.
- [6] Steptoe A, Hamer M, Chida Y. The effects of acute psychological stress on circulating inflammatory factors in humans: A review and meta-analysis. Brain, Behavior, and Immunity. 2007;21:901–912.
- [7] Herbst CM. Welfare reform and the subjective well-being of single mothers. Journal of Population Economics. 2013;26:203–238.
- [8] Zhao S, Du H, Li Q, Wu Q, Chi P. Growth mindset of socioeconomic status boosts subjective well-being: A longitudinal study. Personality and Individual Differences. 2021;168:110301.
- [9] VandenBos G. A dictionary of psychology. Washington: 2007.
- [10] Compton WC. Introduction to positive psychology. In Lewis S, editor. Positive psychology at work. 2005. 1–10 p.
- [11] Diener E. The science of well-being. 2007. 11–58 p.
- [12] Mujamiasih M, Prihastuty R, Hariyadi S. Subjective well-being (SWB): Studi indigenous karyawan bersuku Jawa. J Soc Ind Psychol. 2013;2:36–42.
- [13] Ryff CD, Keyes CLM. The structure of psychological well-being revisited. Journal of Personality and Social Psychology. 1995;69:719–727.



- [14] Diener E. Subjective well-being: The science of happiness and a proposal for a national index. American Psychologist. 2000;55:34–43.
- [15] Azwar S. Penyusunan Skala Psikologi(Edisi 2). 2014.
- [16] Akhtar H. Evaluasi properti psikometris dan perbandingan model pengukuran konstruk subjective well-being. J Psikol. 2019;18:29.
- [17] Arikunto S. Prosedur penelitian (Suatu Pendekatan Praktek). Jakarta: 2006.
- [18] Sugiyono. Metode penelitian pendidikan (pendekatan kuantitatif, kualitatif dan R&D). Bandung: Penerbit Alfabeta; 2015.
- [19] Xu W, Sun H, Zhu B, Bai W, Yu X, Duan R, et al. Analysis of factors affecting the high subjective well-being of chinese residents based on the 2014 china family panel study. International Journal of Environmental Research and Public Health. 2019;16.
- [20] Csikszentmihalyi, M., Abuhamdeh S, Nakamura J. Handbook of competence and motivation (pp. 598–608). Guilford Publications; 2005.
- [21] Carr A. Positive psychology: The science of happiness and human strength. New York, Brunner: Routledge. 2004. 278–279 p.
- [22] Mok KH. The search for new governance of higher education in Asia. International and development education series. European Research Studies Journal. 2010;XXI(2):586–600.
- [23] Diener E, Suh E, Oishi S. Recent findings on subjective well-being. Indian Journal of Clinical Psychology. 1997;24:25–41.