

IMPLEMENTATION OF QUALITY FAMILY VILLAGES IN BERINGIN IN PESISIR VILLAGE, LIMAPULUH DISTRICT, PEKANBARU CITY

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ABSTRACT

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The Quality Family Village (KB Village) is one of the government's strategies to create quality families through the integration of population programs, family planning, family development, and community empowerment. This study aims to analyze the implementation of the Beringin Quality Family Village in Pesisir Village, Limapuluh District, Pekanbaru City. The study used a descriptive method with a qualitative approach. Research informants were determined through a purposive sampling technique consisting of the Head of the KB Village Executive, Family Planning Field Counselors (PLKB), cadres, midwives, the Pesisir Village Head, and the community as program beneficiaries. Data collection was carried out through observation, interviews, and documentation, while data analysis used the Miles and Huberman model which includes data condensation, data presentation, and drawing conclusions. The results of the study indicate that the implementation of the Beringin Quality Family Village has been running in accordance with program provisions and is analyzed through three indicators: the suitability of the program with the target group, the suitability of the program with the implementing organization, and the suitability between the target group and the implementing organization. The program has been in accordance with community needs through various activity groups, but not all activities have been actively implemented. The implementing organization has received support from various parties and is coordinating and monitoring the program, although there are still limitations in reporting and data updates. Furthermore, communication between the implementers and the community has been good, but community participation in some activities remains relatively low. Therefore, strengthening the sustainability of activities, increasing community participation, and improving the monitoring and evaluation system are needed to support the achievement of the goal of developing quality families.

1. INTRODUCTION

Indonesia. While population growth can provide benefits in the form of an increased workforce,

uncontrolled growth has the potential to create various social and economic problems, particularly those related to the quality of human resources. If population growth is not balanced by the provision of adequate education, health, and welfare services, this condition can burden the government and hinder improvements in the community's quality of life (Gracellia & Amin, 2025). In Pekanbaru City, the population increased from 1,016,370 in 2023 to 1,026,670 in 2024. This increase is supported by a high number of fertile-age couples (PUS), totaling 131,127 couples, with a Total Fertility Rate (TFR) of 2.11, still above the national target of 2.1.

To control population growth, the government implemented the Family Planning Program (KB) based on Law Number 52 of 2009 concerning Population Development and Family Development. This program aims to regulate births, the ideal spacing and age of births, and pregnancy management to create quality families. Its implementation is reinforced by Government Regulation Number 87 of 2014 and is implemented by the National Population and Family Planning Agency (BKKBN), the agency responsible for population policy and family development in Indonesia.

In its implementation, the BKKBN developed the Family Development, Population, and Family Planning Program (Bangga Kencana), which focuses on the formation of quality families. One strategy used to strengthen this program at the community level is the establishment of Quality Family Villages (KB Villages), which integrate various population, family planning, family development, and community empowerment programs, implemented in an integrated manner by, for, and from the community (Setiawati, 2019).

The nomenclature change from Family Planning Villages to Quality Family Villages was implemented through Circular Letter of the Minister of Home Affairs Number 843.4/2879/SJ of 2020. This change aims to broaden the program's focus from previously solely focused on birth control to comprehensive family development. Thus, the Family Planning Village is expected to become a collaborative platform between the government, the community, and the private sector to sustainably improve the quality of life for families and communities (Batubara et al., 2024).

The Quality Family Village program is implemented through various activity groups

(Poktan), namely the Toddler Family Development Program (BKB), Youth Family Development Program (BKR), Elderly Family Development Program (BKL), the Family Welfare Income Improvement Program (UPPKA), and the Youth Information and Counseling Center (PIK-R). These activity groups are designed to cover all stages of the family life cycle, ensuring the comprehensive achievement of family development goals. In Pekanbaru City, this program is implemented by the Population Control and Family Planning Office (DisdaldukKB), with 83 Family Planning Villages, based on 2025 Family Information System (SIGA) data.

One of the Quality Family Villages in Pekanbaru City is the Beringin Family Planning Village in Pesisir Village, Limapuluh District. This location was chosen as the research object because it meets the criteria for establishing a Family Planning Village: it is located in a watershed area and has a relatively high population density. The population of Pesisir Village increased from 10,027 to 12,346 in 2023, necessitating more optimal family development efforts to support population quality improvement.

Despite having the same activity structure as other Family Planning Villages, program implementation in Beringin Village still faces various obstacles. Of the five activity groups initiated by the National Population and Family Planning Board (BKKBN), only the Toddler Family Development (BKB) and the Elderly Family Development (BKL) remain actively running activities, while the other groups have experienced a decline in activity. Furthermore, community participation in various activity groups remains relatively low. BKKBN SIGA data from 2025 shows that out of a total of 1,726 target farmer groups, only 181 people participated. The highest participation rate was for the BKB, with 111 participants out of 147 targets, while the BKL had only 26 participants out of 683 targets, and the BKR had 30 participants out of 896 targets. The UPPKA also only involved 14 participants.

Based on the description above, the implementation of the Quality Family Village Program in Beringin Family Planning Village, Pesisir Village, continues to exhibit various dynamics. This situation is interesting to examine further to understand the program's implementation at the community level and the factors that hinder its implementation in Pesisir Village, Limapuluh District, Pekanbaru City.

2. METHODS

This study used a qualitative approach with descriptive methods to gain an in-depth understanding of the implementation of the Beringin Quality Family Village in Pesisir Village, Limapuluh District, Pekanbaru City. The qualitative approach was used to comprehensively explain phenomena based on data and facts found in the field (Fiantika, 2022), while the descriptive method was used to systematically, factually, and accurately describe program implementation based on existing conditions. The research focused on the suitability of the program to the target group, the suitability of the program to the implementing organization, and the suitability between the target group and the implementing organization, including factors that hinder program implementation in achieving the goal of developing quality families.

The study was conducted in Beringin Quality Family Village, Pesisir Village, Limapuluh District, Pekanbaru City from April to June 2026. Research informants were selected using a purposive sampling technique, selecting informants based on their knowledge, experience, and direct involvement in program implementation (Lenaini, 2021). The informants consisted of the Head of the Family Planning Village Executive, Family Planning Field Counselors (PLKB), Family Planning Village cadres, midwives, the Pesisir Village Head, and community members as program beneficiaries, totaling nine informants.

Research data was obtained through observation, in-depth interviews, and documentation. The data collected covered the implementation of the Bangsa Kencana Program through activity groups (Poktan), community participation, program support resources, and various factors influencing the implementation of the Beringin Quality Family Village. The data were then analyzed using the Miles and Huberman interactive model, which includes data condensation, data presentation, and drawing and verifying conclusions (Fiantika, 2022). To ensure data validity, this study employed source triangulation and technical triangulation by comparing the results of interviews, observations, and documentation to obtain valid and accountable data..

3. RESULTS AND DISCUSSION

Program Suitability with Target Groups

Program suitability with target groups is one aspect used to assess the success of the Quality Family Village Program. A program is considered appropriate if its activities reach the target group and provide benefits in accordance with its stated objectives. In this study, the suitability of the Beringin Quality Family Village Program was analyzed through two aspects: the implementation of the Bangsa Kencana Program, which includes Toddler Family Development (BKB), Youth Family Development (BKR), Elderly Family Development (BKL), Acceptor Family Income Improvement Program (UPPKA), and the Youth Information and Counseling Center (PIK-R), and changes in community behavior after participating in program activities.

The results of the study indicate that the implementation of the Bangsa Kencana Program in Beringin Family Planning Village has not been uniform. Of the five activity groups, only BKB and BKL are still actively implemented routinely, while BKR, PIK-R, and UPPKA have not been implemented sustainably due to limited cadres, busy target groups, and low community participation. The Family Planning Program (BKB) is conducted monthly and integrated with the Integrated Health Post (Posyandu) through counseling on parenting patterns, nutrition, and monitoring child growth and development. Meanwhile, the Family Planning Program (BKL) is implemented through health counseling, home visits, and recording and reporting for families with elderly people. Nevertheless, implementers continue to strive to reach target groups through home visits as a form of commitment to providing services to the community.

Besides program implementation, program suitability is also reflected in the benefits experienced by the community. BKB and BKL activities have had a positive impact in the form of increased community knowledge regarding parenting patterns, nutritional fulfillment, and monitoring child growth and development, as well as family understanding of caring for the elderly, both physically and psychologically. These changes encourage the community to implement better parenting patterns, be more concerned about family health, and be more active in participating in Family Planning Village activities.

Based on research results, the Quality Family Village Program is not yet fully aligned with the target group in Beringin Family Planning Village. When compared to the Quality Family Village Guidelines, the implementation of BKB and BKL is aligned with the target group and the established activity formats through counseling, home visits, referrals, and recording and reporting. Both activities also provide benefits in the form of improved community knowledge, attitudes, and behavior. However, the inactivity of BKR, PIK-R, and UPPKA means that guidance has not reached the entire family life cycle in a sustainable manner, thus potentially hindering the achievement of comprehensive family development goals (Setiawati, 2019).

Program Compliance with Implementing Organization

The alignment of the program with the implementing organization demonstrates the organization's ability to implement the Bangsa Kencana Program through planning, resource support, collaboration, and monitoring and evaluation. These four aspects serve as the basis for assessing the extent to which the implementing organization is able to support the sustainability of the Beringin Quality Family Village Program.

The study results indicate that the planning of the Bangsa Kencana Program in Beringin KB Village has been carried out through the preparation of a work plan at the end of each year, involving KB Village administrators, cadres, PLKB, sub-district government, neighborhood associations (RT/RW), community leaders, and other relevant parties, in accordance with community needs. Information regarding the planned and implemented activities is also documented on the KB Village website. This is in line with BKKBN Regulation Number 20 of 2023, which regulates the preparation of Community Work Plans (RKM), mapping community needs, and coordination in the implementation of Quality Family Villages. However, administrative limitations remain, as the latest work plan document cannot be directly displayed, and the website information does not clearly state the implementation period.

In terms of facilities and infrastructure, Beringin KB Village is supported by seven integrated health posts (Posyandu) spread across the village. Two Posyandu have their own buildings, while the other five still utilize residents' terraces for activities. Furthermore, Beringin KB Village also has its own

building as its activity center, although limited supporting facilities have resulted in some activities being transferred to the Bangsa Kencana Center. Budgetary support is provided through coaching, cadre training, provision of outreach media, and monitoring and evaluation activities. However, some activities are still carried out independently due to the lack of a dedicated operational budget at the KB Village level. This situation indicates that operational support, as stipulated in BKKBN Regulation No. 14 of 2023, still needs to be strengthened. Overall, the availability of resources has supported the implementation of the Bangsa Kencana Program, although limitations remain in terms of cadre engagement, supporting facilities, and budget, which could potentially impact the program's effectiveness and sustainability.

The implementation of the Bangsa Kencana Program is also supported by cross-sectoral collaboration involving the village government, community health centers (Puskesmas), and external parties. The village plays a role in community coordination and mobilization, while the Community Health Center (Puskesmas) provides health services and education through integrated Posyandu (Integrated Health Post) activities with the Family Planning and Family Planning (BKB). Furthermore, PT Bank Negara Indonesia (BNI) supports the implementation of the Foster Parents Movement to Prevent Stunting (GENTING) Program by providing assistance to families at risk of stunting. Program monitoring and evaluation have also been conducted through evaluation meetings involving the village government, Kampung KB administrators, cadres, and PLKB, and are supported by the Kampung KB website-based reporting system. Although the website has been utilized as a documentation and reporting tool, the lack of consistent information updates has prevented its function as a monitoring and evaluation tool from functioning optimally.

Based on research findings, the Quality Family Village Program in Kampung KB Beringin is supported by the implementing organization through program planning, resource availability, cross-sectoral collaboration, and monitoring and evaluation. This support demonstrates that the implementing organization has fulfilled its role in supporting the implementation of the Bangsa Kencana Program. However, strengthening aspects of planning documentation, cadre engagement, operational facilities and budgets, and updating

information on the website are still needed to ensure more effective and sustainable program implementation.

Compatibility between Target Group and Implementing Organization

The alignment between the target group and the implementing organization demonstrates how the program implementer is able to build relationships with the community so that the designed activities are understood, accepted, and participated in by the target group. This relationship is reflected not only in the delivery of information about the Bangsa Kencana Program, but also in community involvement in each activity. Therefore, this alignment is analyzed through two aspects: the intensity of program socialization and communication to the community and community participation in the Beringin Quality Family Village activities.

The research results indicate that the socialization and communication of the Bangsa Kencana Program in the Beringin Family Planning Village were carried out continuously through various media, such as Posyandu (Integrated Health Post) and BKB (Community Development Center) activities, outreach, home visits, WhatsApp groups, and social media. Information obtained from the government, including information about the GENTING Program, was relayed back to the community by the KB Village managers and cadres. Communication was also two-way, as the community was given the opportunity to raise questions, provide input, and address any challenges encountered during the activities. The delivery of information in simple language and the responsiveness of cadres helped the community understand the program's goals and benefits. Thus, the program implementers have strived to establish open communication so that information is easily received by the target group.

Community participation in the Beringin Family Planning Village activities continues to show uneven levels of involvement. In 2025, the Toddler Family Development (BKB) program was attended by 111 participants out of 147 targeted groups, while the Elderly Family Development (BKL) program was attended by only 26 participants out of 683 targeted groups. This low participation is influenced by busy work schedules, household responsibilities, limited time, and a unequal understanding of the program's importance. Furthermore, the BKR, UPPKA, and PIK-R activities have not been actively

implemented, resulting in limited community involvement in these groups. This situation indicates that community participation in the Bangsa Kencana Program has not been equitable, despite various outreach efforts and outreach efforts by program implementers.

Based on research results, the alignment between the target group and the implementing organization in the Bangsa Kencana Family Planning Program in the Beringin Quality Family Village is demonstrated through ongoing outreach and communication, as well as community involvement in various program activities. This indicates that the implementing organization has been able to adapt the program's implementation to the characteristics and needs of the target group. However, it is still necessary to increase community participation in all activity groups so that target involvement in the implementation of the Bangsa Kencana Program can take place more evenly.

Factors Inhibiting the Implementation of the Beringin Quality Family Village in Pesisir Village, Limapuluh District, Pekanbaru City

1. Community Participation

Low community participation is one of the obstacles to the implementation of the Beringin Quality Family Village (KB) Program. Although information about activities has been disseminated through various media such as WhatsApp groups, integrated health posts (Posyandu), outreach programs, and cadre visits, not all residents are actively involved. This is influenced by busy work schedules, limited time, obligations to meet family economic needs, and the continued lack of understanding of the importance of Kampung KB activities. Furthermore, BKL activities still face challenges such as incomplete data collection on the elderly and difficulties in reaching targets due to limited family involvement.

2. Inactivity of Several Farmer Groups

Implementation of the Bangsa Kencana Program in Kampung KB Beringin continues to face obstacles because several activity groups (Poktan) are not yet actively operating. Activities such as BKR, PIK-R, Posyandu Remaja, and UPPKA have experienced decreased activity due to limited cadre mobilizers, difficulty in gathering target groups, especially adolescents who are busy with school and work, and low community participation. These conditions have resulted in the implementation of activities not being evenly

distributed across all target groups. 3. Limited Cadre Engagement and Development

Cadres are a crucial resource in supporting the success of the Beringin Family Planning Village Program, but their involvement is still suboptimal. Although a sufficient number of cadres are available, some remain less active in carrying out activities. Furthermore, cadre development and capacity building activities previously conducted by the Population and Family Planning Office (Disdalduk KB) and the Community Empowerment Center (PLKB) have begun to decrease, limiting cadres' knowledge and skills in supporting program implementation.

4. Limited Facilities and Infrastructure

Limited facilities and infrastructure are one of the obstacles to the implementation of the Beringin Family Planning Village Program. In Pesisir Village, some integrated health posts (Posyandu) still do not have their own buildings and are still using residents' terraces as their activity locations. Furthermore, supporting facilities within the Family Planning Village building are also inadequate, such as limited internet access and fans, forcing some activities to be shifted to the Bangga Kencana Hall.

5. Budgetary Limitations

Implementation of the Beringin Family Planning Village Program faces funding constraints due to the lack of a dedicated budget allocated regularly to support program activities. As a result, some activities, such as meetings, coaching, and community outreach, are still conducted independently, depending on the capabilities of the implementers. This situation limits the space for activity implementation and can impact program sustainability.

6. Limited Documentation and Reporting

Documentation and reporting of Beringin KB Village activities continue to face challenges because information on the KB Village website is not regularly updated. Based on observations, some available data still uses information from previous years and does not clearly state the activity period. This situation prevents the website from functioning optimally as a tool for program documentation, monitoring, and evaluation.

4. CONCLUSION

The implementation of the Beringin Quality Family Village in Pesisir Village, Limapuluh District, Pekanbaru City has been carried out through various Bangga Kencana Program activities aimed at target groups according to family life stages. Based on indicators of program suitability with target groups, the activities implemented have provided benefits to the community, although there are still differences in the level of community activity and involvement in each activity group (Poktan). Regarding the indicator of program suitability with implementing organizations, the implementation of the Beringin Family Planning Village is supported by activity planning, coordination and collaboration with various parties, and program monitoring and evaluation. Meanwhile, regarding the indicator of suitability between target groups and implementing organizations, program socialization and communication have been carried out through various Family Planning Village activities so that the target community can learn about and participate in available activities. Thus, the implementation of the Beringin Quality Family Village demonstrates the link between the program, implementing organizations, and target groups in supporting the implementation of the Bangga Kencana Program. Factors hindering the implementation of the Beringin Quality Family Village in Pesisir Village, Limapuluh District, Pekanbaru City include low community participation, inactivity of several activity groups (Poktan), limited cadre activity and development, limited facilities and infrastructure, budget constraints, and suboptimal program documentation and reporting. These obstacles have resulted in several Bangga Kencana Program activities not being optimally implemented and not covering all target groups evenly. This condition indicates that the sustainability of the Beringin Family Planning Village still requires resource support, increased community involvement, and strengthening program management from the implementing party.

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