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Family Needs Fulfillment Among Poor Single Mothers as Family Hope Program Beneficiaries: A Case Study in Sukajaya, Tarogong Kidul, Garut Regency

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ABSTRACT

The substantial number of single mothers in Indonesia reflects a significant dual-role burden, as they must simultaneously serve as economic providers and primary caregivers for their families. While prior studies have examined the economic impact of the Family Hope Program (PKH) or the psychological resilience of single mothers separately, few have integrated both dimensions within a single analytical framework. This study addresses that gap by asking: How do poor single-mother PKH beneficiaries fulfill the five pillars of family needs (physical, economic, educational, social, and emotional) in Sukajaya, Tarogong Kidul, Garut Regency? Using a qualitative case study approach, data were collected through in-depth interviews, passive participant observation, and documentation from six core and two supporting informants, and analyzed using the Miles and Huberman model. Findings reveal that PKH cash assistance substantially strengthens physical food security and children's access to education, effectively preventing school dropout. However, single mothers remain highly vulnerable in the emotional and social domains, experiencing chronic burnout, persistent social stigma, and time poverty that constrains parenting quality. The study concludes that cash transfers alone are insufficient; holistic policy synergy, combining clinical social work interventions, independent economic empowerment, and community-based peer-support groups, is essential to sustainably strengthen single-mother family resilience.

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■ INTRODUCTION

The family remains the smallest and most fundamental socio-economic unit in society's structure. It serves as the primary vehicle for primary socialization, character formation, the internalization of cultural values, and the fulfillment of basic human needs, both material and psychological. Legally, Law No. 52 of 2009 concerning Population Development and Family Building affirms that a family is not limited to the conventional definition of an intact nuclear family comprising a husband, wife, and children (Ram, 2025). The law explicitly recognizes that a family may also take the form of a single-parent unit, whether a father and child or a mother and child, resulting from a structural shift toward single parenthood. Although building an intact, harmonious, and functional family remains an ideal aspiration for most individuals, social realities such as divorce, the death of a spouse, internal conflict, and domestic violence frequently compel women to assume full control of their households as single mothers (Hakam, 2021).

The growth of single-mother-headed households has increasingly become an undeniable social trend at both the global and national levels. According to macro-level data released by the Central Bureau of Statistics (BPS, 2025), the percentage of female-headed households in Indonesia continues to rise, with the majority being small- to medium-sized family households. Nationally, households headed by women with 2–3 members account for the largest share (51.04%), followed by households with 4–5 members (23.08%), single-member households (20.45%), and households with six or more members (5.42%). This demographic pattern is even more pronounced at the provincial level in West Java, where female-headed households with 2–3 members reach 54.35%, followed by the 4–5-member category (19.48%), the 6-or-more

category (4.79%), and single-member households (21.38%).

Being a poor single mother while simultaneously holding status as a Family Hope Program (PKH) beneficiary places this group of women in a position of intersectional vulnerability (Hasan et al., 2023). On the one hand, they belong to the extremely poor or near-poor population that requires social safety net interventions from the government (Istyawan et al., 2025; Rahardjo et al., 2025). On the other hand, they must contend with a demanding dual role that depletes both material and emotional resources. Drawing on Younghusband (2023), a social role fundamentally involves four dimensions: the performance of concrete activities appropriate to one's social position, the intensity of social interaction it entails, the fulfillment of societal expectations and norms, and the internalization of deep emotional values (Radcliffe et al., 2022).

For a poor single mother receiving PKH assistance, these four dimensions must be carried out asymmetrically and independently. They are compelled to divide herself between the domestic-affective function traditionally attributed to mothers (nurturing, educating, and providing a sense of security) and the public-economic function typically held by a household head or husband, namely income generation, financial stability, and asset management. The absence of a partner to share responsibilities paralyzes the household division of labor, causing the entire burden to fall solely on the mother (Af Sandeberg et al., 2026; Skubiejute, 2025).

This condition of imbalanced workload is well documented in prior literature. Lestari et al. (2023) found that single-parent women working in informal, low-wage occupations bear a compounded burden, as limited education and skills confine them to physically demanding jobs while they remain solely responsible for all domestic tasks and childcare. In a similar vein, Hasan et al. (2023) argued that Indonesia's Family Hope Program (PKH), while providing a crucial economic cushion, tends to place the entire burden of family welfare on women, reinforcing gendered expectations and exposing single mothers as female heads of household to persistent social stigma. Furthermore, the multidimensional impact of this dual role extends into physical and psychological health. Sriyani et al. (2026) demonstrated that working single mothers in Indonesia experience parental burnout across three layers of exhaustion (physical, emotional, and mental)driven by relentless activity without rest, guilt over insufficient caregiving, and persistent anxiety about their children's future. From a relational standpoint, Lie et al. (2022) found that the work-life balance of working single mothers is frequently compromised, limiting the quality and quantity of time available for their children and placing strain on the caregiving relationship.

Although the government has introduced the Family Hope Program (PKH) as a conditional cash transfer to improve access to health and education services for low-income families, field realities suggest that this assistance remains stimulative rather than transformative in nature, and has not yet fully resolved the root causes of comprehensive family needs fulfillment (Mohamed Esa et al., 2025; Vo & Canty, 2023). Consumption patterns, coping mechanisms, and how low-income single mothers construct their roles amid the limitations of PKH assistance are highly context-dependent and shaped by their surrounding environment.

Sukajaya sub-district, located in Tarogong Kidul, Garut Regency, was selected as the study site for several critical and strategic reasons. First, this area records a notably dense concentration of poor single-mother PKH beneficiaries within a single locality, providing a rich data foundation for observing variations in strategies for fulfilling needs. Second, the area's geographic location and accessibility allowed the researchers to conduct intimate, participatory observation to obtain high data validity. Third, and most importantly, studies examining the specific dynamics of dual-role performance among poor single mother PKH beneficiaries in allocating material and non-material resources remain very limited in Garut Regency.

Most prior studies have tended to focus either on the general economic impact of PKH or on the psychological resilience of single mothers in isolation, rarely integrating both dimensions within a single analytical framework (Hasan et al., 2023; Lie et al., 2022; Rahardjo et al., 2025; Sriyani et al., 2026). This represents a clear research gap: the absence of a holistic account of how poor single-mother PKH beneficiaries navigate the simultaneous fulfillment of physical, economic, educational, social, and emotional needs within a single coherent framework.

This study addresses that gap by offering an integrated analysis that combines role theory, survival strategy, and feminist social work to examine five pillars of family needs fulfillment among poor single mothers within a single locus (Dominelli, 2017; Younghusband, 2023). Its novelty lies in synthesizing the material and non-material dimensions of the

dual-role experience, rather than treating them as separate lines of inquiry, within the specific socio-geographic context of Sukajaya, Tarogong Kidul, Garut Regency.

Building on this background and considering the compounding structural, economic, and psychosocial constraints that poor single mother PKH beneficiaries face, the central research question guiding this study is: how do poor single mother PKH beneficiaries in Sukajaya, Tarogong Kidul, Garut Regency fulfill the five pillars of family needs (physical, economic, educational, social, and emotional) while simultaneously performing the dual economic-provider and caregiving roles demanded of them, and what coping strategies do they employ to sustain their families amid the limitations of cash-transfer assistance?

Building on this central question, this study formulates five specific sub-questions, each corresponding to one pillar of family needs, to guide a systematic mapping between the research findings and the conceptual framework:

1. How do poor single mother PKH beneficiaries fulfill their families' physical needs, particularly food security and basic material provisions, given the limited and periodic nature of PKH cash assistance?
2. What strategies do poor single mother PKH beneficiaries employ to meet their families' economic needs beyond the scope of PKH assistance?
3. In what ways does PKH assistance shape poor single mothers' capacity to fulfill their children's educational needs and prevent school dropout?
4. How do poor single mother PKH beneficiaries fulfill their families' social needs while navigating persistent social stigma within their community environment?
5. How do poor single mother PKH beneficiaries fulfill their families' emotional needs, including their own psychological well-being, amid the demands of their dual role?

■ METHOD

Research Approach

This study employed a qualitative approach using a descriptive case study design. The qualitative approach was selected because the researchers sought to understand, explore, and describe the social phenomenon of family needs fulfillment holistically, in depth, and naturalistically, directly from the perspective of the actors experiencing it—in this case, poor single mothers (Fortune et al., 2013). The issue of family needs fulfillment and dual-role performance constitutes a complex, meaning-laden reality involving emotional dimensions that cannot be adequately captured through quantitative measurement alone.

The case study method was employed to investigate in depth the real-life context of poor single-mother beneficiaries of the Family Hope Program (PKH). Through this design, the researchers explored the uniqueness of coping mechanisms, psychosocial constraints, and the specific ways in which informants managed PKH cash assistance within the research setting.

Research Informants

Informants in this study were not randomly sampled but were purposively selected as subjects considered most knowledgeable about and directly experiencing the phenomenon under investigation (Silverman, 2025). The researchers employed a purposive sampling technique to identify eight informants in total: six poor single-mother PKH beneficiaries as core informants and two supporting informants (PKH companions and local community leaders).

The inclusion criteria applied were as follows: (1) women with single-mother status due to divorce or widowhood; (2) responsibility for raising school-aged or preschool-aged children, a key component in PKH eligibility assessment; and (3) formally registered as active PKH beneficiaries in Sukajaya. Informants were recruited until data saturation was reached, at which point further data collection no longer yielded new variations in findings. To strengthen data validity, the researchers also involved supporting informants, namely the PKH companion for Tarogong Kidul and local neighborhood unit (RT/RW) leaders.

Ethical Considerations

Given the vulnerability of the study population—poor single mothers as PKH beneficiaries—this study followed established ethical research standards. Ethical approval was obtained from the Research Center of Politeknik Kesejahteraan Sosial (Poltekesos) Bandung prior to data collection. All informants received a clear explanation of the study's purpose, procedures, and potential risks, and provided informed consent voluntarily, with the right to withdraw at any stage without affecting their PKH status. To protect informants' privacy, all core informants are identified using pseudonyms rather than real names. This study followed the Global Social Work Statement of Ethical Principles, particularly its principles of human dignity,

informed consent, confidentiality, and social justice.

Data Collection Techniques

To obtain valid, in-depth, and trustworthy data, the researchers combined three data collection techniques through method triangulation (Shaw et al., 2020):

In-depth interviews. Face-to-face interviews were conducted using a semi-structured interview guide, allowing the researchers flexibility to develop questions organically in the field to explore the emotional aspects, mental burden, social barriers, and economic strategies as subjectively experienced by informants.

The semi-structured interview guide operationalized the five pillars of family needs into concrete thematic prompts: (1) physical needs, covering food security, housing conditions, and daily subsistence strategies; (2) economic needs, covering income sources, PKH fund allocation, and informal labor activities; (3) educational needs, covering school-related expenses and children's educational participation; (4) social needs, covering community relations, social support, and experiences of stigma; and (5) emotional needs, covering psychological burden, coping mechanisms, and access to emotional support. This thematic structure allowed the researchers to probe each dimension consistently across informants while remaining flexible enough to explore emergent, informant-specific narratives.

Passive participant observation. The researchers were present at the research site and carefully observed informants' daily activities without direct involvement. Observed aspects included the physical condition of informants' homes, mother-child interaction patterns, and informants' work routines in securing supplementary income.

Fieldwork observation was conducted over less than one month, with each core informant visited three to five times to capture variation in daily routines and reduce the influence of atypical, one-off circumstances. Each observation session lasted more than two hours and followed informants' natural daily rhythm, allowing researchers to systematically observe three key aspects: the physical condition of informants' homes (housing quality, sanitation, and food availability), mother-child interaction patterns (supervision, communication, and affective engagement), and informants' work routines in securing supplementary income (type of informal labor, working hours, and income variability). The researchers were present at the research site without direct involvement in these activities, minimizing observer influence on informants' natural behavior.

The fieldwork period was not arbitrarily determined. Observation for each informant was considered complete when the final two visits no longer produced new variations in the three observed aspects (housing condition, mother-child interaction, and income-generating routines), consistent with the saturation principle applied in informant recruitment.

This study instead applied persistent observation, which prioritizes depth and intensity of contact with phenomena directly relevant to the research focus. The cumulative contact achieved (three to five visits per informant, each more than two hours, combined with interviews and follow-up member checking) provided sufficiently intensive exposure to capture recurring patterns of emotional burden and social stigma despite the relatively short calendar span.

Documentation. Secondary data were collected in the form of interview photographs, demographic records from the Sukajaya sub-district office, PKH membership cards, and other supporting documents relevant to the fulfillment of family needs.

Data Analysis Techniques

Data analysis in this study was conducted interactively and continuously before, during, and after field data collection. The researchers adopted the qualitative data analysis model developed by Miles et al. (2018), which consists of three simultaneous streams of activity operating in a cyclical, iterative

Data Collection ⇄ Data Reduction ⇄ Data Display ⇄ Conclusion Drawing/Verification

Data reduction involved summarizing, selecting key points, focusing on essential information, and discarding irrelevant data from field notes and interview transcripts. Raw data were first categorized according to the five pillars of family needs (physical, economic, educational, social, and emotional). Within each pillar, data were further cross-coded using a priori codes derived from the study's theoretical framework, so that the theoretical perspectives used in the discussion could be traced back to the reduction stage rather than appearing only during interpretation. Two coding families were used. The first, from Younghusband’s role theory, covered role performance, role intensity, role expectation,

and role internalization.

The second, from Dominelli's feminist social work perspective, covered feminization of poverty, sacrificial motherhood, symbolic violence and stigma, and structural gender bias. Coding was carried out manually using a coding matrix, following the coding tree logic commonly applied in qualitative software such as NVivo or MAXQDA. Data display involved presenting the reduced and coded data as systematic narrative text, matrices, or descriptive tables to clarify relationships among phenomena. Conclusion drawing and verification involved in-depth interpretation of the displayed data, identifying meaningful patterns across codes, and formulating preliminary conclusions, which were continuously re-verified against field notes, the coding matrix, and relevant theoretical frameworks.

Data Trustworthiness

To strengthen the trustworthiness of the findings, this study applied source triangulation in addition to method triangulation, cross-checking core informants' accounts against those of supporting informants, namely, the PKH companion and local community leaders (RT/RW). Credibility was further reinforced through informal member checking, in which preliminary interpretations were revisited and clarified with informants during follow-up interviews to confirm the accuracy of meaning.

■ RESULTS AND DISCUSSION

Field findings reveal that poor single mother PKH beneficiaries in Sukajaya face multidimensional challenges across all five pillars of family needs, with material and non-material burdens compounding one another.

Physical and economic dimension. PKH cash assistance functions as a critical social safety net, but its periodic and limited nominal value means informants cannot rely on it entirely. To cover non-food physical needs, such as housing repairs and children's clothing, informants are forced into an unstable informal labor market: laundry work, ironing services, or small fried-snack vending, all of which yield fluctuating daily income far below Garut's regional minimum wage. The absence of capital and low educational attainment leaves them with no bargaining power in the formal labor market. This income uncertainty often pushes mothers into extreme secondary coping strategies, most notably sacrificing their own caloric intake to ensure their children eat adequately. As Ibu NY (41 years old, divorced, laundry worker) described:

> *"When the PKH money comes in, thank God, I immediately buy a sack of rice and eggs for the kids. At least their stomachs are taken care of first. However, that amount isn't enough to cover rent, buy clothes, or buy daily snacks. So, I rack my brain every morning; I go around looking for neighbors' laundry to do. If I only make twenty thousand rupiah a day, I make it work. Often, I eat the kids' leftover rice, or plain meatball broth with warm rice, as long as the children can eat eggs and chicken. For me it is simple, as long as my children are full and can keep living." (Interview, July 12, 2025)*

Educational and social dimension. PKH's educational component demonstrably reduces school dropout, as funds are consistently directed toward books, shoes, uniforms, and daily transportation costs. However, this material success in education contrasts sharply with a decline in the fulfillment of children's social and developmental needs. The core barrier is time poverty: long working hours outside the home leave mothers unable to supervise their children's study discipline, daily activities, or peer environment. This is compounded by persistent negative social stigma; divorced or widowed status is often associated with suspicion or regarded as a social burden by neighbors, prompting many mothers to withdraw socially and limit their participation in community activities. Ibu AM (36 years old, widowed, mobile fried-snack vendor) illustrated this compounded burden:

> *"For school costs, thank God PKH helps a lot; my middle-school child can buy a uniform and books. However, I sell fried snacks from noon until sunset. At home, no one watches the kids, no one tells them to study, and no one checks whom they are hanging out with. Sometimes I feel sad coming home tired and seeing his grades drop. Moreover, the neighbors' gossip: if I come home late, I get accused of all sorts of things. My child even cried once because a friend teased him for not having a father. So now I would rather stay home with my kids than go out and hear people's talk." (Interview, July 17, 2025)*

At emotional dimension, this is the most fragile and psychologically draining pillar. Mothers instinctively compensate emotionally, offering double affection and warmth to fill the absence of a father figure, while suppressing

Table 1. Summary of family needs fulfillment across five pillars

Family Needs	Positive Impact of PKH	Remaining Challenges	Informant Coping Strategy
Physical	PKH cash assistance secures staple food (rice, eggs, cooking oil), functioning as a critical safety net for household food security.	Periodic, limited nominal value is insufficient to cover non-food needs (housing repairs, clothing); mothers often sacrifice their own caloric intake.	Strict "safety-first" prioritization, staple food secured first via PKH; non-food needs covered through informal daily labor (laundry, ironing, vending).
Economic	Provides a baseline economic cushion that partially offsets extreme income insecurity.	The absence of capital and low educational attainment leave mothers without bargaining power in the formal labor market, and their income remains below the regional minimum wage.	Diversified informal income streams layered on top of PKH as a buffering mechanism, though the underlying poverty trap remains unresolved.
Educational	Funds effectively cover books, shoes, uniforms, and transportation, preventing school dropout.	Time poverty from long working hours leaves mothers unable to supervise children's study discipline or academic performance.	Disciplined, non-negotiable earmarking of PKH funds specifically for school-related costs even amid tight budgets.
Social	No direct impact: social needs fall outside PKH's conditional cash-transfer design.	Persistent stigma toward divorced/widowed status; neighborhood gossip and moral judgment; social participation further constrained by time poverty.	Selective social withdrawal, limiting community engagement to protect themselves and children from judgment, trading social participation for psychological self-protection.
Emotional	No direct impact: emotional needs fall outside PKH's conditional cash-transfer design.	Chronic emotional burnout, persistent anxiety over children's future, and near-total absence of a support system for emotional catharsis.	Internal emotional labor, suppressing personal distress, performing strength in front of children, privately processing grief in isolation.

their own distress to protect their children's mental stability. Beneath this composure lies an accumulation of chronic emotional burnout and constant anxiety over their children's future, with almost no accessible support system for emotional catharsis. Ibu SR (45 years old, divorced, clothes ironing worker) captured this isolation:

> *"Every day I have to look strong in front of my kids. If I cry, their mental state will collapse too. However, honestly, I am very fragile inside. Every night after the kids sleep, I often cry alone in the bathroom until my chest feels tight. I am physically exhausted from ironing all day, plus thinking about tomorrow's meals, next month's rent, whether there will be money if my child continues school. My head feels like it is going to burst. I have no one to talk to—if I tell a neighbor, I am afraid it will just become gossip. So I hold it in myself, stay strong for my children, even though my soul feels empty and so tired." (Interview, July 19, 2025)*

Taken together, these findings indicate a consistent pattern: PKH substantially mitigates material vulnerability (physical and educational) but leaves the non-material dimensions (social and emotional) largely unaddressed, a gap that intensifies as economic pressure and role overload accumulate over time.

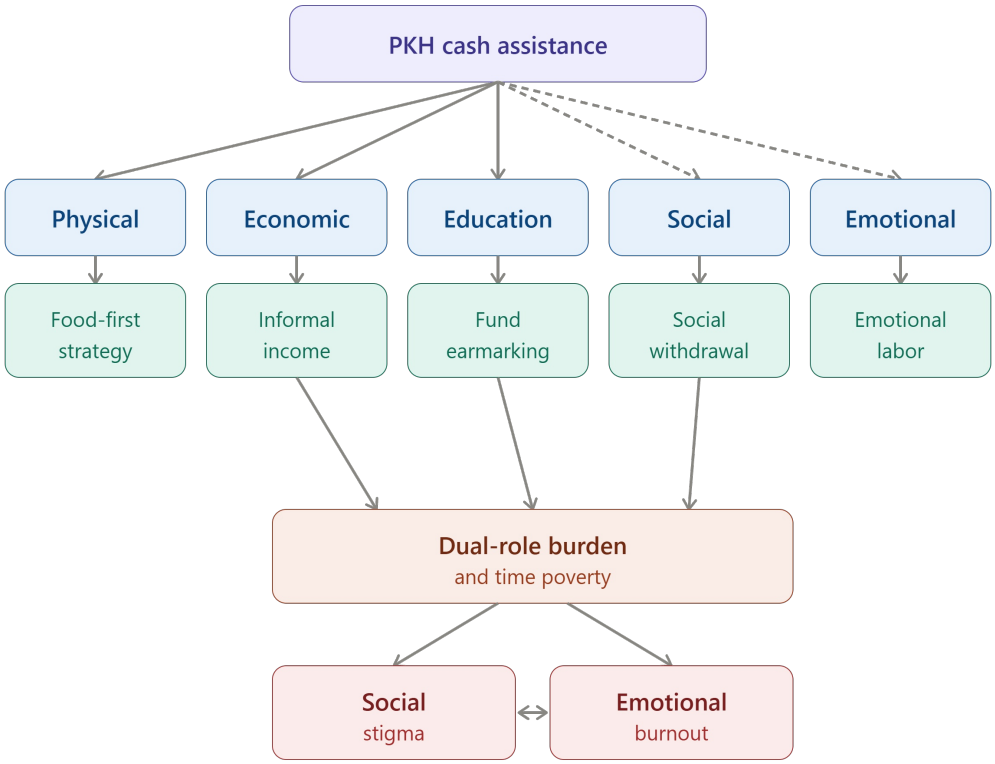

Figure 1. Asymmetric impact of PKH on material and non-material family needs

Strategies in Fulfilling the Five Pillars of Family Needs

Taken together, these findings indicate a consistent pattern. From a role-theory standpoint, this account exposes a structural incompatibility between the intensity of social interaction demanded by the economic-provider role and the interpersonal presence expected of the caregiving role Younghusband (2023); when time is scarce, mothers are compelled to sacrifice the latter to sustain the former. The resulting withdrawal from neighborhood life can likewise be read as a survival strategy, not a passive retreat, but a deliberate risk-management choice that trades social capital for protection against reputational harm to the family (Bolton & Laaser, 2013). Despite these challenges, informants demonstrated deliberate, resourceful strategies across all five need pillars, reflecting agency within severe structural constraints.

Physical needs were met through a strict prioritization hierarchy: PKH funds were allocated first to staple foods (rice, eggs, cooking oil) to ensure food security, while non-food needs were covered through informal daily labor. This reflects a "safety-first" survival logic: rather than pursuing capital accumulation, mothers minimize the risk of their children's hunger above all else, even at the cost of their own nutritional intake (Bolton & Laaser, 2013). Economic needs were addressed through diversified informal income streams, laundry services, ironing, and micro-vending, layered on top of PKH assistance to bridge the gap between periodic cash transfers and ongoing household expenses (Yuliani & Nasrudin, 2024). This strategy serves as a buffer against the structural absence of formal employment access, though it does not resolve the underlying poverty trap (Habibullah et al., 2024).

Educational needs were met through disciplined earmarking of PKH funds for school-related costs, including uniforms, books, and transportation, which informants treated as a non-negotiable priority even amid tight budgets, thereby directly contributing to reduced dropout rates (Nnaeme, 2022). Social needs were managed through a defensive strategy of selective social withdrawal: rather than confronting stigma directly, mothers

limited community engagement to protect themselves and their children from moral judgment, effectively trading social participation for psychological self-protection (Yamazaki et al., 2022). Emotional needs were addressed through internal emotional labor, suppressing personal distress, performing strength in front of children, and privately processing grief in isolation (e.g., crying alone) in the absence of any formal or informal support system (Taylor et al., 2022). Across all five pillars, a common strategic thread emerges: informants consistently prioritized their children's material and educational stability over their own physical, social, and emotional wellbeing, a pattern of self-sacrificial resource allocation that, while adaptive in the short term, is not sustainable without external structural support.

Feminist Social Work Perspective

Viewed through a feminist social work lens, the dynamics described above represent a clear manifestation of the feminization of poverty and invisible domestic exploitation (Dominelli, 2017). The state, through PKH, extends assistance in the name of child welfare, but implicitly transfers the entire burden of family economic recovery onto women, without providing supporting infrastructure such as free childcare or fair wage protections for informal female labor. The coping strategy of self-imposed hunger reflects how the social construction of sacrificial motherhood compels women to internalize physical suffering as a marker of being a "good mother," a normalization that feminist social work explicitly rejects (Hernández et al., 2022).

The persistent social stigma faced by informants can similarly be read as a product of patriarchal culture that privileges nuclear family normativity. When women lead households independently, their existence is perceived as a deviation from the idealized social order, triggering social sanctions such as gossip, exclusion, and negative labeling (Reed, 2022; Singh et al., 2022). From this perspective, the social withdrawal strategy adopted by informants is not a weakness but a defensive coping mechanism against the symbolic violence of their environment.

These two readings are not contradictory but describe different layers of the same act. The withdrawal itself is shaped by structural forces, namely stigma, patriarchal norms, and the absence of institutional protection for single mothers, which narrow the range of choices available to informants in the first place. Within that narrowed range, however, informants still exercise a form of bounded agency, actively choosing withdrawal over other available responses, such as confrontation or public appeal, with a clear intent to protect their children and preserve their remaining social standing. Structure sets the boundaries of what is possible, while agency operates in how informants act within those boundaries. Framed this way, social withdrawal is best understood neither as a pure choice nor as a pure submission, but as a strategic response constrained by and enacted within a structurally unequal environment.

At the psychological level, the emotional burden described by informants can be interpreted through the lens of the Superwoman myth. This patriarchal construct demands that single mothers be limitlessly capable, selfless, and resilient in the face of suffering (Sanner et al., 2024). This myth is particularly harmful because it normalizes the neglect of women's mental health and obscures the fact that their psychological distress stems from the state's failure to provide adequate psychosocial safety nets (Schmidt et al., 2025).

While Sanner et al. (2024) and Schmidt et al. (2025) theorize the Superwoman myth primarily within Western, individualized welfare contexts, the Garut findings both confirm and extend this construct. The core mechanism, women internalizing limitless capability as a marker of good motherhood, holds across contexts. However, in Sukajaya's collectivist, informal-economy setting, the myth manifests through a distinct mechanism largely absent from Western accounts: self-imposed caloric sacrifice as a direct, physical enactment of the myth, rather than merely a psychological or time-based strain. This suggests the Superwoman myth is not a fixed Western construct but one that adapts its expression to the material constraints of the economy in which single mothers are embedded.

Research Implications

Implications. These findings carry direct implications for policy and practice. First, PKH's current design (centered on conditional cash transfers) addresses material needs effectively but is structurally blind to non-material vulnerability; program evaluation frameworks should therefore incorporate psychosocial wellbeing indicators, not only economic and educational outcomes. Second, feminist social work practice in this context must move beyond individual casework toward macro-level advocacy, actively working to dismantle structural gender bias and to build community-based support systems that normalize and destigmatize single motherhood.

Third, consciousness-raising and safe-space interventions, such as peer-support groups for single mothers, are needed to help informants reframe their psychological fragility not as personal failure, but as a consequence of unjust social structures.

■ CONCLUSION

This study set out to examine how poor single-mother Family Hope Program (PKH) beneficiaries in Sukajaya, Tarogong Kidul, Garut Regency fulfill the five pillars of family needs amid the constraints of dual-role responsibilities. The evidence gathered leads to the conclusion that family needs fulfillment among this population is fundamentally uneven: material and structurally supported needs are met with relative success, while needs that depend on time, social capital, and psychosocial infrastructure remain persistently unmet, an asymmetry that is structural rather than incidental, arising from a policy design that treats poverty primarily as a material deficit rather than as a multidimensional condition shaped equally by gendered labor division, social stigma, and the absence of institutional care infrastructure.

This study is subject to limitations inherent to its single-case design: findings are based on eight informants in one regency. They are not statistically generalizable to poor single mother PKH beneficiaries nationally. Rather, they offer analytic transferability and deep, context-rich insights applicable to poor single mothers navigating comparable dual-role burdens in similar socio-geographic and informal-economy settings. The theoretical contribution of this study lies in demonstrating that survival strategy, role theory, structural functionalism, and feminist social work perspectives are not competing explanations but complementary layers of a single lived reality, offering a more holistic framework than prior studies that examined the economic or psychological dimensions of single motherhood in isolation. Practically, this implies that social protection policy cannot rely on cash assistance alone; it must be paired with structural interventions that redistribute the caregiving burden, expand independent economic capacity beyond precarious informal labor, and actively dismantle the social stigma that isolates single mothers from community support, with strengthened PKH companion facilitation and community-based peer networks serving as a necessary next step toward safeguarding both children's continuity and mothers' long-term psychological sustainability.

■ DECLARATION OF AI USE

During the preparation of this manuscript, the authors used Claude Sonnet 5 (Anthropic) as a writing-assistance tool, limited to checking US English grammar, correcting typographical errors, and improving sentence clarity and consistency. The AI tool was not used to generate, alter, or fabricate research data, findings, interpretations, or conclusions. All research content, including field data, interview results, analysis, and conclusions, is the authentic product of the authors' original fieldwork and academic reasoning. The authors reviewed, verified, and take full responsibility for the accuracy and integrity of the final manuscript.

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