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# ANALYSIS OF THE CONCEPT OF REGIONAL COMPETITIVENESS ON POVERTY IN THE EX-KARESIDENAN KEDU

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## Abstract

This study aims to analyze the influence of regional competitiveness consisting of HDI, regional fiscal capacity, GRDP growth, access to clean drinking water sources, and the BPJS Health program on the poverty rate in the former Kedu Residency, both simultaneously and partially. This study uses a quantitative method in the form of regression analysis with panel data. The type of data used is secondary data from 6 districts/cities in the former Kedu Residency for the 2016-2023 period obtained from the Central Statistics Agency which includes: data on the percentage of the number of poor people, HDI data, data on the ratio of regional fiscal capacity, the percentage of households with access to clean drinking water sources, and the percentage of BPJS Health participants in the PBI program. The results of the analysis using the Fixed Effect Model approach show that HDI has a negative and significant effect on poverty in the former Kedu Residency for the 2016-2023 period. The BPJS Health PBI program has a positive and significant effect on poverty in the former Kedu Residency for the 2016-2023 period. The ratio of regional fiscal capacity, GRDP growth, and access to clean drinking water sources do not significantly affect poverty in the former Kedu Residency for the period 2016-2023. However, the Human Development Index (HDI), the ratio of regional fiscal capacity, the rate of GDRP growth, access to clean drinking water sources, BPJS Kesehatan PBI program simultaneously or together have a significant effect on poverty in the former Kedu Residency for the period 2016-2023.

**Keyword : poverty, HDI, regional fiscal capacity, GRDP growth, access to adequate drinking water sources, and the BPJS health program**

## INTRODUCTION

Poverty is a condition that is often found in various countries, including Indonesia. The term refers to a situation where individuals or groups are financially unable to fulfill their basic needs, both food and non-food needs, in accordance with the established poverty line (BPS, 2022). As one of the main challenges in the economic field, poverty is a serious issue that requires special attention to be addressed immediately, given its role as a crucial indicator in the economic health of a country (Fikri et al., 2023).

Although Indonesia as a whole shows a downward trend in poverty, some provinces still face serious challenges related to poverty. One example is Central Java Province, which in 2023 ranked fifth out of six provinces in Java with a poverty rate of 10.77% (BPS, 2024). This condition indicates that the poverty problem in some areas of Central Java is still quite significant.

According to a statement by the Governor of Central Java at the time, Ganjar Pranowo, Central Java Province consists of 29 regencies and 6 cities. In an effort to address poverty, the provincial government designated a number of regions in the former Kedu Prefecture as economic development priorities in 2018. This designation was based on the high poverty rate in these areas, especially in Wonosobo and Kebumen districts, which have higher poverty rates than the provincial average.

In 2015, the poverty rate in Wonosobo Regency reached 22.02%, while in Kebumen Regency it was 21.32%. Both figures far exceeded the average poverty rate of Central Java Province, which

stood at 13.58% in the same year (Portaljateng, 2017). This shows the need for special attention for these two districts in overcoming poverty problems.

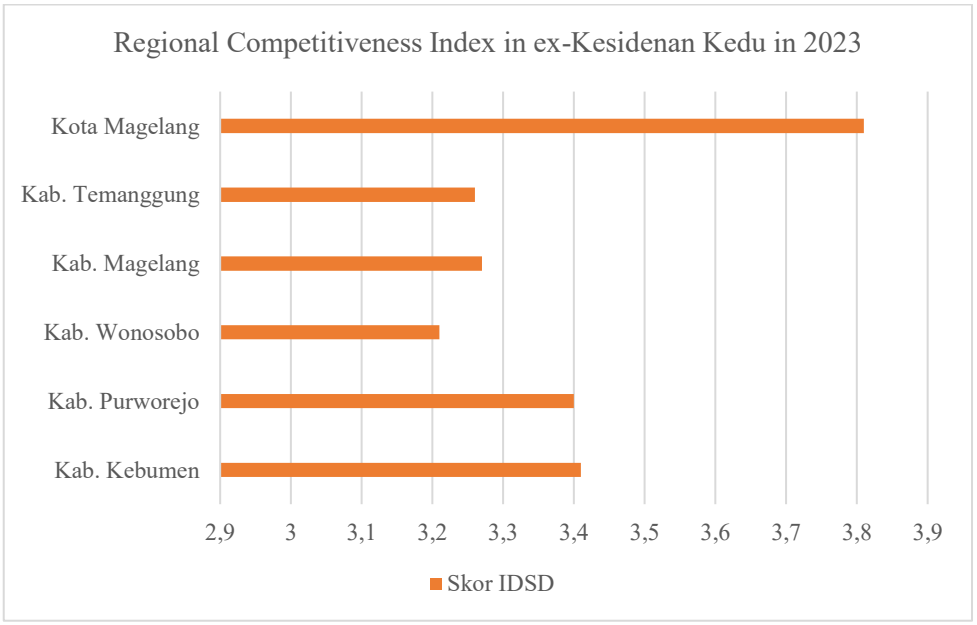
Table 1. Percentage of the poor population

| Year | City/District at Eks Karesidenan Kedu | | | | | |
|---|---|---|---|---|---|---|
| | City Magelang | District Magelang | District Temanggung | District Kebumen | District Purworejo | District Wonosobo |
| 2017 | 8,75 | 12,42 | 11,46 | 19,60 | 13,81 | 20,32 |
| 2018 | 7,87 | 11,23 | 9,87 | 17,47 | 11,67 | 17,58 |
| 2019 | 7,46 | 10,67 | 9,42 | 16,82 | 11,45 | 16,63 |
| 2020 | 7,58 | 11,27 | 9,96 | 17,59 | 11,78 | 17,36 |
| 2021 | 7,75 | 11,91 | 10,17 | 17,83 | 12,40 | 17,67 |
| 2022 | 7,10 | 11,09 | 9,33 | 16,41 | 11,53 | 16,17 |
| 2023 | 6,11 | 10,96 | 9,26 | 16,34 | 11,33 | 15,58 |

Source : Survei Sosial Ekonomi Nasional BPS 2017-2023

In addition to the impact of the Covid-19 pandemic, the high percentage of poor people in the ex-Kesidenan Kedu region is also influenced by a number of other factors. Inequality in the quality of governance, the low quality of human resources, and the uneven economic conditions of the community in each district and city in the Kedu region are the main causes of the problem.

Based on the IDSD score for 2023, Magelang City achieved the highest score of 3.81, followed by Kebumen Regency with a score of 3.41. Meanwhile, Wonosobo district is in the lowest position with a score of 3.21. When viewed from the percentage of poor people in the same year, Magelang City is also in the best position with the lowest poverty rate of 6.11%. In contrast, Kabupaten Kebumen recorded the highest percentage of poor people in the Kedu region, at 16.34%. In fact, based on the IDSD score, Kabupaten Kebumen ranks second after Kota Magelang. This fact shows the need for a more in-depth study of the relationship between the competitiveness of a region and its poverty rate.




Source : BRIN 2024

Picture 1. IDSD Score in Districts/Municipalities of ex-Kesidenan Kedu in 2023

In terms of population growth, Kebumen Regency recorded the highest rate in Kedu with 1.28%, while Magelang City was at the lowest position with 0.25%. However, other indicators such as the percentage of BPJS Health participants in the PBI program show that Magelang City has the lowest rate, which is 52.49%. In contrast, Wonosobo district recorded the highest rate of 73.30%. This fact shows that there are other factors that influence the poverty rate in the Kedu region.

Various studies on regional competitiveness have been developed by experts. Kitson et al. (2004) used three main indicators to assess competitiveness, namely productivity, employment rate, and standard of living. According to Kitson, the main pillars of competitiveness include productive capital, human capital, socio-institutional capital, cultural capital, infrastructure, and knowledge. Meanwhile, Delgado et al. (2012) define competitiveness as the output produced per working-age individual, supported by a country's resources. Delgado also emphasizes the importance of social infrastructure such as health and education, political institutions, monetary and fiscal policies, and microeconomic conditions in supporting competitiveness. Investment attractiveness is also considered an important element.

In this study, the Human Development Index (HDI) is used as an indicator of human capital, while regional fiscal capacity represents the performance of local government monetary/fiscal policy. Productive capital factors are represented by indicators of GDRP growth, access to decent drinking water sources, and participation in the BPJS Health program, which also reflects social infrastructure.

Based on these various indicators of regional competitiveness, this study will focus on five independent variables, namely HDI, regional fiscal capacity, GDRP growth, access to safe drinking water, and the BPJS Health program, to analyze their influence on the poverty rate in the ex-Kesidenan Kedu region.

## LITERATURE REVIEW

### Economic Growth

Economic growth, according to Boediono (2009), is the process of increasing income per capita in the long run, which involves three main aspects: the process itself, the increase in output per capita, and the long-term perspective. This growth can be seen from two perspectives, namely total production and population, illustrating the extent to which economic activity is able to generate additional income for society in a given period (Sukirno, 2006). The increase in output per capita is highly dependent on Growth Domestic Regional Product (GDRP) and population, so it must consider changes in total product and population. However, economists agree that an increase in output per capita is not enough; sustainable economic growth must be driven by the internal forces of the economy. The establishment of growth-promoting factors is necessary to support gradual economic development over time (Mawati & Anwar, 2018).

### Poverty

According to the Central Bureau of Statistics (BPS, 2022), poverty can be divided into two main categories:

1. Absolute poverty is a condition where individuals or groups are unable to fulfill their minimal basic needs, including basic necessities such as food, clothing, shelter, health, and education.
2. Relative Poverty refers to the condition of a person or group who is said to be poor because their income is lower than the average income in the region. This poverty arises due to inequality in the distribution of income in society.

However, over time, the understanding of poverty has grown to be more complex, not just limited to the economic dimension. The definition of poverty is increasingly broad and covers various aspects of life. Poverty can be understood as a situation experienced by individuals or groups who do not have enough resources to fulfill the minimum needs of a decent life (Addae-Korankye, 2019).

In addition, poverty is considered a multidimensional problem, which includes not only economic aspects, but also health, education, social, and political aspects (Asrol & Ahmad, 2018).

### Regional Competitiveness Index

The Regional Competitiveness Index (IDSD) is a tool to measure the competitiveness of a region, which aims to assess productivity at the provincial, district or city level (BRIN, 2023). Productivity itself is a major factor in determining competitiveness, as it plays a role in achieving a high standard of living (Hanafi et al., 2017).

### Human Development Index

The Human Development Index (HDI) is a measure used to assess the quality of human resources in a country or region (Estrada & Wenagama, 2020). Based on data from BPS (2020), the HDI describes the achievements of the population in a region in three important aspects, namely health, education, and income. Thus, HDI becomes a standard to assess the extent to which a region is successful in human development (Heppi, 2018).

### Regional Fiscal Capacity

Fiscal capacity refers to the financial ability of a region to finance various government, development and public service activities. This definition is regulated in the Minister of Finance Regulation (PMK).

### Growth Domestic Regional Product (GDRP)

Growth Domestic Regional Product (GDRP) is an important indicator that measures the economic performance of a region in the long term. GRDP reflects the total value added generated by all production units in the region, which includes all final goods and services produced during a certain period (BPS, 2016).

### Infrastructure Access to Adequate Drinking Water Sources

In this case, households can be considered to have adequate access to drinking water if their main source is from one of the protected water sources, such as piped water or protected wells. If the main source of water is bottled water, it is advisable to check the quality of the water source used for other purposes in the household, such as cooking and sanitation, to ensure continued access to safe water.

### BPJS Health Program

Programs such as the National Health Insurance (JKN) and Healthy Indonesia Card (KIS) are initiatives managed by BPJS Kesehatan with the aim of providing access to proper healthcare services for the underprivileged. Through these programs, it is hoped that the poor will be able to reduce their health expenditure and obtain better health protection, which in turn can improve their overall quality of life.

## RESEARCH METHODOLOGY

The model applied in this study aims to analyze the relationship between the independent variable and the dependent variable. Multiple regression analysis is used as the main method because it allows the identification of the effect of one or more independent variables on the dependent variable. Sugiyono (2012: 275) explains that this analysis can function as a predictor tool that helps project changes in the dependent variable based on fluctuations in the independent variable. In the context of this study, the regression model used has been adjusted to describe the relationship between the variables that are the focus of the study, thus allowing a deeper understanding of the phenomenon being studied.

$$P0_{it} = \alpha + \beta_1 IPM_{it} + \beta_2 KFD_{it} + \beta_3 LPPD_{it} + \beta_4 SAML_{it} + \beta_5 PBI_{it} + e_{it}$$

Information :

$P0$ = Percentage of poor population

$\alpha$ = Constant

$\beta_1$ = Regression coefficient on IPM variable

$\beta_2$ = Regression coefficient on the KFD variable

$\beta_3$ = Regression coefficient on the LPPD variable

$\beta_4$ = Regression coefficient on the SAML variable

$\beta_5$ = Regression coefficient on the PBI variable

$IPM$ = Human Development Index

$KFD$ = Regional Fiscal Capacity

$LPPD$ = GDRP growth rate

$SAML$ = Percentage of households that have access to a decent drinking water source

$PBI$ = Percentage of PBI program participation

$e$ = Error

$i$ = *Cross section* (6 city/district)

$t$ = *Time series* (2016-2023)

## RESULTS AND DISCUSSIONS

### Results

### Panel Data Regression Model Selection Data

The testing process is necessary to determine the most appropriate panel data regression model for analysis. Model estimation is done through three main approaches, namely CEM, FEM and REM. The selection of the best model is done by applying a series of tests, including the Chow test, Hausman test, and Lagrange Multiplier test. The results of the chow test and hausman test show that the most appropriate estimation model to use is the Fixed Effect Model. Therefore, the Fixed Effect Model is the best model used in this study and there is no need to do the Lagrange Multiplier test.

### Classical Assumption Test

### Normality Test

Based on the normality test results, it can be stated that the independent variables and the dependent variable are normally distributed with the results of Asymp. Sig. (2-tailed)[c] is 0,200[d] > 0.05.

### Multicollinearity Test

Based on the results of the multicollinearity assumption test, all independent variables in the regression model are not affected by multicollinearity symptoms because the sig value of all inter-variable results shows <0.80.

### Heteroscedasticity Test

Based on the results of the heteroscedasticity assumption test, each variable produces a Sig. (2-tailed) which is greater than the significance level of 0.05. So, that there are no symptoms of heteroscedasticity.

### Statical Test

### Determination coefficient

Based on the data processing results, the Adjusted R-Square (R^2) is 0.499 or 49.9%. This means that the percentage of independent variables, namely HDI, KFD, LPPD, SAML, and PBI can explain information on the dependent variable, namely poverty, by 49.9%. While the remaining 50.1% is explained by other factors outside the regression model.

### F test

Based on the regression results, the F-statistic is 10.373, meaning that the independent variables simultaneously or together affect the dependent variable because the F-statistic is greater

than the F-table, namely 2.58883 and the probability value of the F-statistic shows less than the significance level, namely 0.05. So that the equation is declared to have passed the F-statistic test.

### Panel Data Regression Estimation

Data analysis was carried out using the Fixed Effect Method (FEM). The data processed is panel data with the object of research of 6 regencies / cities in the former Kedu Prefecture with the period 2016-2023. This analysis is to see the effect of the Human Development Index (HDI), the ratio of regional fiscal capacity, the growth rate of GDRP, the percentage of households that have access to decent drinking water sources, the percentage of BPJS Health participants in the PBI program on the poverty rate in the former Kedu Prefecture.

Table 2. Fixed Effect Result

| Variable | Coefficient Value | t-Statistic | Probability |
|---|---|---|---|
| Konstanta | 52,402 | 5,603 | <0,001 |
| IPM | -0,572 | -4,552 | <0,001 |
| KFD | -0,548 | -0,466 | 0,643 |
| LPPD | -0,207 | -1,100 | 0,277 |
| SAML | -0,041 | -1,120 | 0,269 |
| PBI | 0,117 | 2,272 | 0,028 |

Source : Processed data (2024)

The following are the results of the regression equation based on these results :

$$P0_{it} = 54{,}402 - 0{,}572\, IPM_{it} - 0{,}548\, KFD_{it} - 0{,}207\, LPPD_{it} - 0{,}041\, SAML_{it} + 0{,}117\, PBI_{it}$$

The explanation is as follows :

### Human Development Index (HDI)

Based on the regression results, it is known that HDI has a negative and significant effect on poverty in the former Kedu Karesidenan with a significant value of <0.001, which is (<0.001) <0.05 or the significance level. The resulting coefficient value of -4.552 means that HDI has a negative effect, when every 1% increase in HDI will cause a decrease in poverty by 4.552%.

### Regional Fiscal Capacity

Based on the regression results, it is known that the regional fiscal capacity ratio does not have a significant effect on poverty in the former Kedu Prefecture with a significant value of 0.643, which is 0.643>0.05 or the significance level. This result is not in accordance with the initial hypothesis.

### Growth Domestic Regional Product (GDRP)

Based on the regression results, it is known that the ratio of Growth Domestic Regional Product (GDRP) has no significant effect on poverty in the former Kedu Karesidenan with a significant value of 0.277, which is 0.277>0.05 or the significance level. This result is not in accordance with the initial hypothesis.

### Infrastructure Access to Adequate Drinking Water Sources

Based on the regression results, it is known that the source of decent drinking water has a positive and significant effect on poverty in the former Kedu Karesidenan with a significant value of 0.269, which is 0.269>0.05 or the significance level. This result is not in accordance with the initial hypothesis.

### BPJS Health Program

Based on the regression results, it is known that PBI participants have a significant influence on poverty in the former Kedu Karesidenan with a significant value of 0.028 which is 0.028 <0.05 or the significance level. The resulting coefficient value of 2.272 means that the percentage of PBI

participants has a positive influence, when every 1% increase in PBI participants will cause an increase in poverty by 2.272%.

## DISCUSSIONS

### The Effect of Human Development Index (HDI) on Poverty

The results of this study are in line with research by Endrawati, Nujum, and Selong (2023) Human Development Index (HDI) has a negative and significant effect on poverty. If the HDI achievement in a region increases, the poverty rate in the region will decrease. Based on the theory of the vicious circle of poverty, one way to get out of poverty is by breaking part or all of the cycle. In relation to HDI, the cycles are productivity and income. The quality of the population with good education and health is supported by fair economic policies for the lower middle class. This is expected to open up opportunities for the community to increase productivity so that the income earned is higher.

### The Effect of Regional Fiscal Capacity Ratio on Poverty

Based on the Pearson Correlation test results, the relationship between the regional fiscal capacity variable and poverty shows a value of 0.1191. According to Sugiyono (2021), this means that the relationship between the two variables is very weak, so that the regional fiscal capacity variable has no effect on poverty in the former Kedu Prefecture.

The cause of the absence of the effect of the regional fiscal capacity ratio on poverty in the former Kedu Prefecture is the fluctuating regional capacity ratio and almost all districts/cities in the former Kedu Prefecture fall into the low category in the regional fiscal capacity ratio each year. This means that districts/cities in the former Kedu Prefecture have not been able to effectively finance local government activities, development, and services to the community. In addition, there is still a lack of regional income obtained and ineffective allocation of the APBD. One way that the government can increase regional fiscal capacity is to increase regional own-source revenue (PAD) as regional expenditure. This research is in line with research from Aulia (2014) which states that regional fiscal capacity does not have a close relationship with the poverty rate. In addition, Somantri (2022) stated that regional fiscal capacity is not effective in reducing poverty in villages. This can certainly lead to a rural-urban poverty gap in a region.

### The Effect of GDRP Growth Rate on Poverty

Based on the Pearson Correlation test results, the relationship between the GDRP growth rate variable and poverty shows a value of 0.0568. According to Sugiyono (2021), this means that the relationship between the two variables is very weak, so the GRDP growth rate variable has no effect on poverty in the former Kedu Prefecture. The results of this study are in line with research by Nainggolan (2020) which states the result that the GDRP growth rate has no significant effect on poverty.

The cause of the absence of the effect of the GDRP growth rate on poverty in the former Kedu Prefecture is due to uncorrelated data. There are years that experience a decrease in poverty and also a decrease in the GDRP growth rate in one year, and vice versa. In addition, the cause of the absence of the effect of GDRP growth on poverty in the former Kedu Prefecture is the high inequality of income distribution that occurs in the community. Income distribution shows how fairly or unfairly the results of a country's development are distributed among its citizens. Inequality in income distribution can lead to income inequality, which is the beginning of the problem of poverty (Hanum, 2018). This condition can be seen from the six districts/cities in the former Kedu Prefecture that fall into the moderate category of income distribution inequality, which is in the range of 0.30-0.49.

### The Effect of Percentage of Households with Access to Adequate Drinking Water Sources on Poverty

Based on the results of the Pearson Correlation test, the relationship between the variable percentage of households that have access to a decent drinking water source and poverty shows a value of 0.3139. According to Sugiyono (2021), this means that the relationship between the two variables is weak, so that the variable percentage of households that have access to a decent drinking water source has no effect on poverty in the former Kedu Prefecture.

Based on these results, it means that there is still a lack of quality of infrastructure for access to decent drinking water sources. The lack of quality of this infrastructure can cause health problems in the community, if it occurs on a prolonged basis it can cause poverty in the community as well. This study is in line with research from Sumardjoko and Akhmadi (2019) and (2023) which states that access to decent drinking water sources does not have a significant effect on poverty.

All districts/cities in the former Kedu Karesidenan have indeed met the MDGs threshold in 2015, which is 68.87%, only a few years in Kebumen District and Purworejo District have not met the threshold. Despite meeting the threshold, the quality of the water used is still poor and the majority of households do not use piped water with good quality. Therefore, access to safe drinking water infrastructure in the former Kedu Prefecture cannot affect poverty.

### The Effect of the Percentage of BPJS Health Participants in the PBI Program on Poverty

This research is in line with research from Pebrianti and Istiqomah (2022) and Ratisyah (2019) which state that the percentage of BPJS membership of the PBI program has a positive and significant effect on poverty. This means that the higher the percentage of BPJS membership in the PBI program borne by the government, the higher the poverty rate. The poverty condition of several districts/cities in the former Kedu Prefecture which is classified as high in Central Java is one of the causes of the percentage of BPJS membership in the PBI program having a positive effect on poverty.

The cause of the percentage of BPJS Kesehatan participants in the PBI program has not been able to reduce the number of poverty in the former Kedu Karesidenan due to errors in targeting, efforts to reduce poverty through health insurance provided actually increase government spending, which results in ineffectiveness and low efficiency of government spending in the health sector (Rolindrawan, 2015). BPJS PBI dues are one of the costs that depend on the government, where spending in the health sector has a positive impact on poverty. Research by Kinanti (2019) supports this, stating that the positive impact of government spending in the health sector on poverty occurs because the spending is to improve the quality of health, but is not matched by an increase in employment opportunities, resulting in higher unemployment rates, birth rates, and poverty rates.

## CONCLUSION

The purpose of the study is to examine the factors in regional competitiveness that cause poverty in the former Kedu Karesidenan. This study uses the Fixed Effect Model as the selected panel data regression model. Some research that can be concluded, namely the first Human Development Index (HDI) has a negative and significant effect on poverty in the former Kedu Karesidenan for the period 2016-2023, this result shows conformity with the existing hypothesis. Second, the ratio of regional fiscal capacity has no significant effect on poverty in the former Kedu Prefecture for the period 2016-2023, this result is not in accordance with the existing hypothesis. Third, the GRDP growth rate has no significant effect on poverty in the former Kedu Prefecture for the period 2016-2023, this result is not in accordance with the existing hypothesis. Fourth, access to decent drinking water sources does not have a significant effect on poverty in the former Kedu Prefecture for the period 2016-2023, this result is not in accordance with the existing hypothesis. Fifth, BPJS Kesehatan PBI program has a positive and significant effect on poverty in the former Kedu Prefecture for the period 2016-2023, this result is in accordance with the existing hypothesis. However, the Human Development Index (HDI), regional fiscal capacity ratio, GRDP growth rate, access to decent drinking water sources, BPJS Kesehatan PBI program simultaneously or together have a significant effect on poverty in the former Kedu Prefecture for the period 2016-2023.

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