

# Policy Implementation and Social Functioning of Persons with Disabilities: The Role of Social Support

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## Keywords:

policy implementation;  
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*implementasi kebijakan;  
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## Abstract

Rapid demographic and lifestyle changes have increased the urgency of public policies that respond to the needs of persons with disabilities. This study examines the influence of policy implementation on the social functioning of persons with disabilities, with particular attention to the role of social support. The research was conducted at the Griya Harapan Disabled Social Services Center (PPSGHD) in West Java Province using a quantitative approach and a 5-point Likert scale questionnaire administered to 100 respondents. Data were analyzed using PLS-SEM to assess both the measurement and structural models. The findings indicate that policy implementation significantly improves the social functioning of persons with disabilities but does not directly affect social support. Meanwhile, social support has a significant positive effect on social functioning, underscoring its important role in shaping functional outcomes. These results highlight that effective policy implementation needs to be complemented by strengthened social support to enhance the social functioning of persons with disabilities.

*Perubahan demografis dan gaya hidup yang cepat meningkatkan urgensi kebijakan publik yang responsif terhadap kebutuhan penyandang disabilitas. Penelitian ini bertujuan mengkaji pengaruh implementasi kebijakan terhadap keberfungsian sosial penyandang disabilitas, dengan perhatian khusus pada peran dukungan sosial. Penelitian dilakukan di Pusat Pelayanan Sosial Griya Harapan Disabilitas (PPSGHD) Provinsi Jawa Barat menggunakan pendekatan kuantitatif melalui kuesioner skala Likert 5 poin yang melibatkan 100 responden. Data dianalisis menggunakan PLS-SEM untuk menguji model pengukuran dan model struktural. Hasil penelitian menunjukkan bahwa implementasi kebijakan berpengaruh signifikan terhadap keberfungsian sosial penyandang disabilitas, namun tidak berpengaruh langsung terhadap dukungan sosial. Sementara itu, dukungan sosial berpengaruh positif dan signifikan terhadap keberfungsian sosial. Temuan ini menegaskan bahwa efektivitas implementasi kebijakan perlu dilengkapi dengan penguatan dukungan sosial untuk meningkatkan keberfungsian sosial penyandang disabilitas.*

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## A. Introduction

Persons with disabilities are an integral part of Indonesian society, enjoying equal rights, responsibilities, and opportunities with other citizens (Sholihah, 2016); (Affandi, 2022). This recognition is reinforced through Law Number 8 of 2016 concerning the Accessibility of Persons with Disabilities, which affirms the state's commitment to guaranteeing the rights, protection, and accessibility of persons with disabilities (Ndaumanu et al., 2022); (Riyadi, 2021). However, in social reality, various structural and social barriers still limit their participation and social functioning, particularly regarding access to education, employment, healthcare, and inclusive environments (Apsari & Raharjo, 2021); (Dewi et al., 2021).

Data from the 2024 National Socioeconomic Survey shows that persons with disabilities tend to experience lower labor force participation rates, with data showing participation of around 46% in 2020 compared to 71% for non-disabled individuals. In 2024, the labour force participation rate for persons with disabilities reached only 20.14%. Education levels are lower, with data showing participation at around 46% in 2020 compared to 71% for non-disabled children. Persons with disabilities also face a higher risk of poverty compared to the non-disabled population due to systemic barriers to access to education and employment, additional costs associated with disability, and lack of full participation in society (Nofiani et al., 2022). These conditions indicate that social functioning remains a critical challenge for persons with disabilities, requiring not only individual capacity development but also effective policy and social interventions.

The situation of persons with disabilities in West Java demonstrates the presence of the largest population in Indonesia, with challenges in accessing education and employment. In the 2020/2021 academic year, there were approximately 24,779 students with special needs in West Java enrolled in special schools (SLB) at various levels (elementary, junior high, and senior high) (Pusdatin Kemendikbud, 2022). The West Java Provincial Government promotes inclusive education through various programs, including educational assistance and the formation of working groups. Furthermore, 2021 data shows that only around 6.5 percent of persons with disabilities registered with the Ministry of Social Affairs are employed, leaving tens of thousands without decent employment (Ministry of Social Affairs, 2022). This regional context highlights the importance of examining how disability-related policies are implemented and experienced at the local service level.

To address this national challenge, the West Java Provincial Government established the Griya Harapan Difabel Social Service Center (PPSGHD) in Cimahi as a Regional Technical Implementation Unit (UPTD) of the Social Services Department. PPSGHD has a crucial mandate to provide social rehabilitation services, including skills training and social function training for neglected persons with disabilities (Ramadhana et al., 2024). Although PPSGHD has been running its program for some time, internal data and initial observations indicate variations in the success rate of post-service social adaptation. Some program alumni may have successfully achieved independence and good social inclusion, while others still struggle with discrimination and difficulties reintegrating into their home communities (Putri & Syarif, 2025). These variations suggest that policy implementation alone may not fully explain differences in post-rehabilitation social functioning outcomes.

persons with disabilities still face significant barriers to their social functioning, including active participation in society, developing social skills and independence, improving mental health, and establishing a positive identity (Jauhari, 2017);(Amalia & Zulyadi, 2024). In such situations, the quality of policy implementation is a key determinant of whether government regulations can truly improve their well-being and social functioning. Policy implementation goes beyond simply providing services, ensuring targeted program implementation, equitable accessibility, and creating an inclusive

environment. However, the effectiveness of policy implementation cannot stand alone (Triana & Astuti, 2022);(Suharto & Jifhani, 2024). The effectiveness of policy outcomes is often mediated by social conditions that shape how services are accessed, utilized, and sustained. Social support—whether from family, community, or institutional settings—is often a key factor in the success of the rehabilitation and social adjustment process for persons with disabilities. Social support can strengthen self-confidence, increase motivation, and help individuals adapt to environmental demands (Rosalina & Apsari, 2020);(Dayanti & Pribadi, 2022). In this sense, social support functions not merely as an outcome of policy but as a social mechanism that enables policy implementation to translate into improved social functioning. Unfortunately, research that positions social support as an intervening variable in the relationship between policy implementation and social functioning is still relatively limited.

Various previous studies have shown that policy implementation and social support play a crucial role in improving the well-being of persons with disabilities. (Ningrum, 2018) study emphasized that the success of inclusion policies depends on the readiness of implementing institutions to provide accessible services, although this research was limited to the educational context. Meanwhile, (Damra et al., 2023) found that social support—especially emotional and instrumental support—has a significant impact on the independence of persons with disabilities, but this study did not include policy variables.

Furthermore, (Amroni & Simbolon, 2025) identified gaps in policy implementation due to limited resources and inter-agency coordination, but did not examine their impact on the social functioning of service recipients. (Ramadhani et al., 2017) study also highlighted the strategic role of rehabilitation institutions in bridging policy and individual needs through training and mentoring programs, although social support variables were not integrated into the analytical model. These limitations indicate that the interaction between policy implementation, social support, and social functioning has not been comprehensively examined within a single analytical framework. Therefore, this research is crucial to fill this gap, particularly in the context of rehabilitation services at the Griya Harapan Social Service Center for the Disabled (PPSGHD) in West Java Province.

While various studies have examined policy implementation and social support separately, no study has explicitly analyzed the simultaneous relationship between policy implementation, social support as an intervening variable, and the social functioning of persons with disabilities in a single, integrated model, particularly in the context of social rehabilitation institutions. This study addresses this gap by positioning social support as a key explanatory factor in understanding how policy implementation influences social functioning. Therefore, there is a theoretical and empirical gap in understanding how policies work through social support to improve social functioning. The novelty of this research is evident in the model that combines policy implementation, social support as an intervening variable, and social functioning simultaneously—something that has not been examined in previous studies. In terms of method, the use of PLS-SEM with a small sample size provides a more precise analytical approach to examine the direct and indirect influences between variables. Contextually, this research is also distinct because it was conducted at the PPSGHD in West Java Province, a social rehabilitation institution rarely used as a research site, thus providing new insights into how policies are actually implemented and impact the lives of persons with disabilities. Accordingly, this research proposes an integrated model that examines the direct effect of policy implementation on social functioning and the role of social support in shaping functional outcomes among persons with disabilities.

In this research, there are three variables that will be studied, namely variables X, Y and Z. The relationship between the three is described through the following conceptual framework:

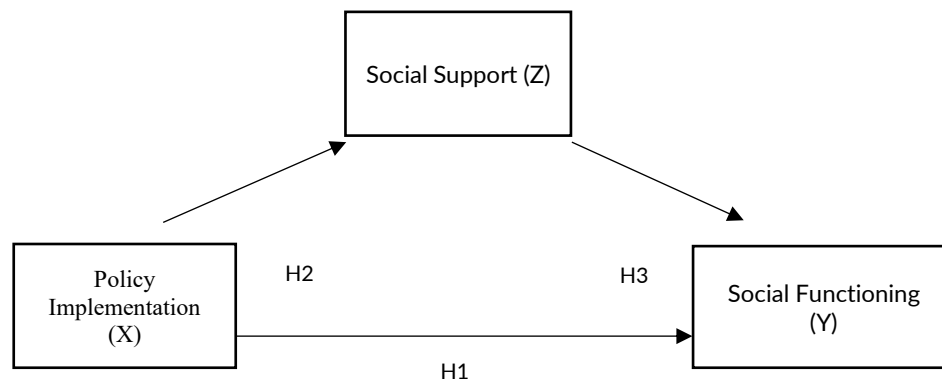


Figure 1  
Conceptual Framework

Note. Author's conceptualisation based on the research model and hypotheses, 2024.

### Hypotheses

H1: Policy implementation influences the social functioning of persons with disabilities

H2: Policy implementation influences social support

H3: Social support influences the social functioning of persons with disabilities

## B. Research Methods

This study employed a non-experimental quantitative design with a cross-sectional approach. The aim was to examine the effect of policy implementation on the social functioning of persons with disabilities, with social support as an intervening (mediator) variable. According (Purnasari, 2021), the quantitative approach is grounded in the philosophy of positivism and is conducted through a systematic data collection and analysis process to obtain accurate data. The population in this study was 100 persons with disabilities who received integrated rehabilitation services at the Griya Harapan Social Services Centre for the Disabled (PPSGHD) in West Java Province. Due to the relatively small population size, a census sampling technique (total sampling) was used, thus representing the entire population. Data collection was conducted using a Google Form-based questionnaire with a Likert scale of 1–5 (1 = strongly disagree to 5 = strongly agree), as recommended by Malhotra (2010) in (Sahir, 2021), who considered this scale practical, flexible, and reliable. The research instrument was not pilot tested because all items were adapted from instruments used in previous studies and proven valid and reliable. Furthermore, the limited population size (N = 100) meant that conducting a pilot test could potentially reduce the number of respondents for the main analysis, so it was decided to use the instrument directly for the main data collection. Data analysis was conducted using the Partial Least Squares (PLS) method, a variance-based approach in Structural Equation Modelling (SEM) that is suitable for use when data does not meet the assumption of multivariate normality. The analysis phase included testing the outer model to assess the validity and reliability of indicators, as well as the inner model to assess the relationships between constructs and latent variables (Sarwono, 2010).

Table 1  
Operational Variables

No	Variable	Indicator	Items	Source
1	Policy implementation (X)	Communication	1. Clarity of Information 2. Biased Policy Information	Edward II (1980)
		Resource	1. Fulfillment of budget requirements 2. Facility Fulfillment	
		Disposition	1. Fulfillment of assigned tasks 2. Desire to work	
		Bureaucratic Structure	1. Easy bureaucratic procedures 2. Good bureaucratic development	
2	Social functioning (Y)	ability to carry out social roles.	1. Individuals are able to carry out their duties, roles and functions. 2. Individuals can be responsible for their duties and obligations.	Achlis (2011)
		Ability to meet needs	1. Individuals are affectionate towards themselves, other people and the environment. 2. Individuals can pursue their hobbies and interests.	
		Ability to solve social problems	1. Individuals are able to fight for their goals, hopes and aspirations in life	
3.	Social Support	Award Support	1. Forward encouragement of ideas 2. Expression of appreciation	Sarafino (2014)
		Instrumental support	1. Providing material assistance 2. Providing training assistance	
		Information Support	1. Providing advice or	

Note. Adapted from Edward III (1980), Achlis (2011), and Sarafino (2014); modified by the author, 2024.

Table 2  
Respondent Characteristics (N = 100)\*\*

Variable	Category	n	%
Age	18–25 years	20	20
	26–35 years	35	35
	36–45 years	25	25
	>45 years	20	20
Gender	Male	55	55
	Female	45	45
Marital Status	Single	42	42
	Married	46	46
	Divorced/Widowed	12	12

Note. Primary data collected through questionnaire survey and processed by the author, 2024.

## C. Results and Discussion

### 1. Measurement Model (Outer Model)

#### a. Convergent Validity

The scheme of the PLS model used in the research is depicted in Figure 2. Using the SmartPLS 3.0 application, the Partial Least Squares method is used in this research.

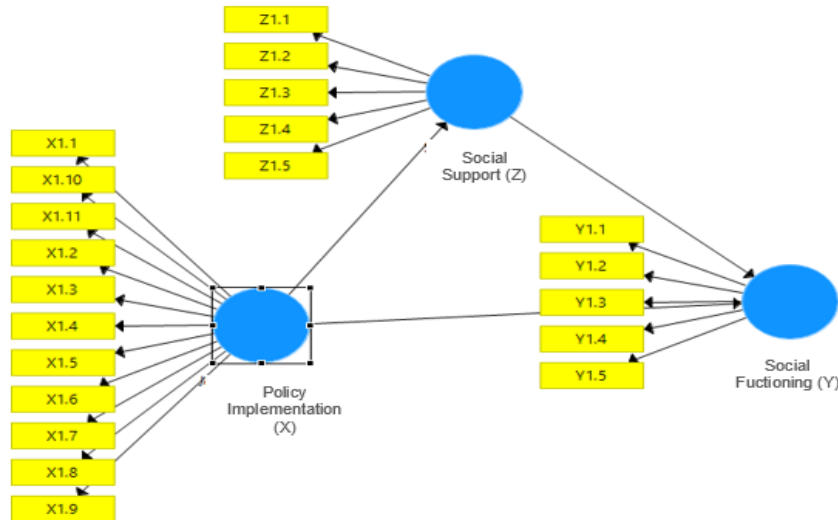


Figure 2  
schematic of the PLS model

Note. Author's data processing using SmartPLS 3.0, 2024.

Before proceeding to the data analysis stage using a structural equation model with Partial Least Squares (PLS), a critical first step is to test the outer model to verify the validity and reliability of each indicator. The goal is to assess how well each indicator is able to correctly estimate the associated latent variable.

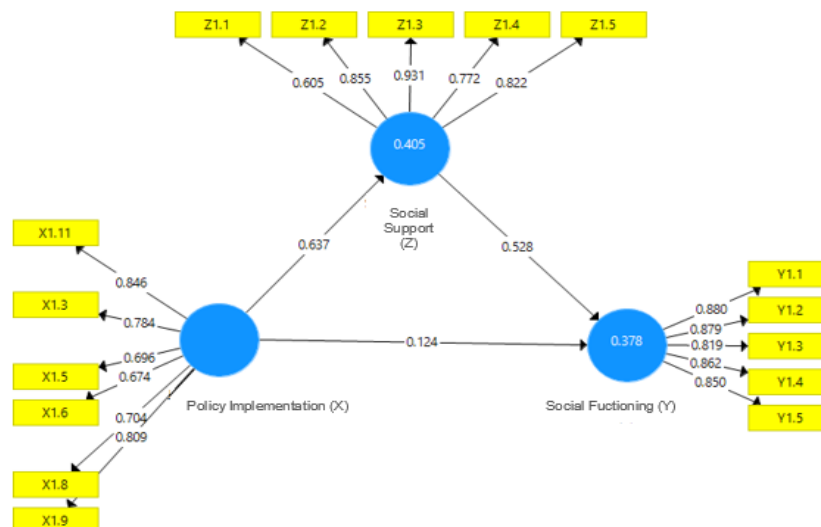


Figure 3

Test Results of the PLS (Outer Model) Measurement Model Path Diagram

Note. Author's analysis using SmartPLS 3.0, 2024.

Based on the findings depicted in Figure 2, it is evident that each indicator within every variable exhibits a substantial outer loading value on its respective construct compared to other constructs in cross-loading. This observation suggests that the indicator data possess commendable discriminant validity, meeting the requisite criteria. The robustness of the indicators in aligning with their intended constructs reinforces the confidence in the validity of the research model. Such a meticulous examination of the data underscores the reliability and accuracy of the research outcomes, providing a solid foundation for drawing meaningful conclusions and implications from the study's results.

#### b. Discriminant Validity

In addition to examining cross-loading values, the analysis also considers the Average Variance Extracted (AVE) for each variable. The obtained results indicate that the indicators in this study demonstrate excellent discriminant validity, as evidenced by their substantial AVE values. Adequate discriminant validity is not only evident in the cross-loading analysis but also in the AVE, where values exceeding 0.5 are deemed satisfactory. This reinforces the confidence in the reliability and accuracy of the variables' measurement in capturing the intended constructs, thus enhancing the credibility of the research findings.

Table 3  
Average Variant Extracted (AVE)

Variable	AVE	Cut off	Information
Policy implementation (X)	0.570	0.5	Valid
Social functioning (Y)	0.647	0.5	Valid
Social Support (Z)	0.641	0.5	Valid

Note. Author's analysis using SmartPLS 3.0 based on survey data, 2024.

Based on the insights provided in Table 3, it is apparent that for assessing convergent validity, if each variable exhibits an Average Variance Extracted (AVE) value below 0.5 while maintaining a composite reliability exceeding 0.6, the construct is still deemed to possess sufficient convergent validity. That is, although the AVE value of each variable may not reach the generally accepted threshold, as long as the composite reliability reaches or exceeds 0.6, the construct is still considered reliable in measuring the associated latent variable. This shows that although there may be variations in the AVE value for each variable, with high composite reliability, the construct can still be relied on as a valid measuring tool in the research context in question.

Table 4  
HTMT Test

Construct	X – Policy Implementation	Z – Social Support	Y – Social Functioning
Policy Implementation (X)	—	0.682	0.423
Social Support (Z)	0.682	—	0.591
Social Functioning (Y)	0.423	0.591	—

Note. Author's analysis using SmartPLS 3.0 based on survey data, 2024.

The HTMT test results show that all values are below 0.90, indicating that discriminant validity is fulfilled. The values are also not excessively high, which means each construct in the model is clearly distinct and does not overlap. In addition, the magnitude of the HTMT values is logical and aligns with the direction and strength of relationships in the path model. Therefore, it can be concluded that the separation quality between variables in this research is good and reliable.

### c. Composite Reliability

To evaluate the reliability of variable indicators, Composite Reliability is employed. A variable is considered to meet Composite Reliability if its value surpasses 0.6. Below are the Composite Reliability values for each variable in this study.

Table 5  
Composite Reliability

Variable	AVE	Cut off	Information
Policy implementation (X)	0.888	0.6	Reliable
Social functioning (Y)	0.933	0.6	Reliable
Social Support (Z)	0.900	0.6	Reliable

Note. Author's PLS-SEM analysis, 2024.

Based on the table presented, with all factors showing a stable composite reliability value above 0.6, it can be concluded that all factors in this study have a high level of dependence. High composite quality indicates that the observed latent variables are consistent and reliable, and have good ability to measure the construct being studied. Thus, these results indicate that each factor in the study has strong consistency in measurement, strengthening the validity and reliability of using these variables in further analysis. This leads to the conclusion that the factors considered in the research have a high dependence on each other, providing a deeper understanding of the relationship between these variables in the context of the research in question.

## 2. Structural Model Testing (Inner Model)

### a. R Square ( $R^2$ )

In Partial Least Squares (PLS) analysis, the significance of the structural model, particularly the dependent construct, which encompasses path coefficients or t-values for each path, is assessed through  $R^2$ .  $R^2$  indicates the proportion of variance in the dependent variable explained by changes in the independent variable. A higher  $R^2$  value signifies a better fit for the model's expectation.

Table 6  
Test Results for  $R^2$  values

Variable	R Square
Social Functioning (Y)	0.377
Social Support (Z)	0.404

Note. Author's analysis using SmartPLS 3.0 based on survey data, 2024.

As per Table 6, the R-Square value for the incentives variable (Z) in relation to social support is 0.404. This indicates that policy implementation (X) accounts for 40.4% of the variance in the social support variable (Z), while the remaining 59.6% is attributed to other factors. Similarly, for the social functioning variable (Y), the R-Square is 0.377, implying that policy implementation (X) explains 37.7% of the variability in social functioning, with the remaining 62.3% influenced by various other factors.

### b. Q-Square ( $Q^2$ )

A Q-square value greater than 0 (zero) indicates that the model has predictive relevance. The following Q-square test results can be seen in this calculation:

Table 7



Q-Square		
Variable Endogen	Q-Square (Q <sup>2</sup> ) Individual	Category
Z	0.404	Medium
Y	0.377	Medium
Q <sup>2</sup> Model Total	0.629	High

Note. Author's analysis using SmartPLS 3.0 based on survey data, 2024.

The calculation results show that the Z variable has a Q-Square value of 0.404 and the Y variable is 0.377, both of which are in the medium category, so the model has quite good predictive ability for each endogenous construct.

#### c. F-Square (f<sup>2</sup>)

F-Square (f<sup>2</sup>) is a measure used to assess the relative impact of an exogenous variable on an endogenous variable by examining how much the R<sup>2</sup> value changes when a specific predictor is removed from the model.

According to Cohen's (1988) guidelines, an f<sup>2</sup> value of 0.02 indicates a small effect, 0.15 indicates a medium effect, and 0.35 indicates a large effect. Therefore, f<sup>2</sup> provides important information about the practical significance of relationships beyond statistical significance alone.

Table 8 f-square		
Relation	f <sup>2</sup>	Category
X → Z	0.681	High
X → Y	0.159	Medium
Z → Y	0.582	High

Note. Author's analysis using SmartPLS 3.0 based on survey data, 2024.

The f-square results indicate that social support has the strongest effect on social functioning (f<sup>2</sup> = 0.582), which falls into the large category. This finding suggests that emotional, instrumental, and informational support play a substantial role in enhancing the daily social functioning of persons with disabilities.

Policy implementation also shows a meaningful effect on social functioning (f<sup>2</sup> = 0.159), categorized as a medium effect. This implies that effective policy communication, adequate resources, and supportive bureaucratic structures contribute to improved social functioning, although policy implementation alone is not sufficient to fully determine social outcomes.

Interestingly, policy implementation demonstrates a large effect size on social support (f<sup>2</sup> = 0.681), even though the direct path is not statistically significant. This finding suggests that policy implementation has the potential to shape social support structures indirectly; however, this influence may not yet be fully realized in observable social support outcomes due to contextual, cultural, or community-level factors.

Overall, the f-square analysis strengthens the structural model by demonstrating that policy implementation and social support differ in their substantive influence on social functioning, with social support emerging as the most dominant explanatory factor.

#### d. Hypotheses Testing

Testing hypotheses through coefficient and significance differences can help determine whether a variable acts as a mediator in the relationship between independent and dependent variables. By examining the implications of testing inward models, this approach enables the assessment of whether specific variables serve as mediators in hierarchical responsibility. To gain a

comprehensive understanding of the factors involved, it is advisable to conduct either a full or partial mediation analysis, particularly by disaggregating coefficient values using a bootstrapping technique. A path coefficient ranging from -1 to 1 indicates a positive or decent relationship if the coefficient falls between 0 and 1. Conversely, if the coefficient falls between 0 and -1, it indicates a negative relationship between the variables. Regarding the T-measure, values exceeding 1.96 are considered statistically significant, while those below 1.96 are deemed insignificant. Hypotheses are accepted if the p-value is less than 0.05.

Table 9  
Direct effect hypotheses test results

Variables	Original Sample	Standard Deviation	T Statistics	P Values	Hypotheses
XY	0.636	0.072	8,733	0,000	Accepted
XZ	0.123	0.152	0.812	0.415	Rejected
ZY	0.527	0.151	3,471	0.001	Accepted

Note. Author's analysis using bootstrapping in SmartPLS 3.0 based on survey data, 2024.

Based on Table 5, it can be seen that hypotheses testing in this research can be concluded:

Table 9 shows that the t-statistic value for the policy implementation variable on the social functioning of persons with disabilities is greater than the t-table value, namely  $8.733 > 1.96$  and p-value  $0.000 < 0.05$ . So the variable implementation of the policy of fulfilling the rights of persons with disabilities significantly influences the social functioning of persons with disabilities in PPSGHD West Java Province. It can be concluded that hypotheses 1 is accepted.

Table 9 shows that the t-statistic value for the policy implementation variable for social support for persons with disabilities is smaller than the t-table value, namely  $0.812 < 1.96$  and p-value  $0.415 > 0.05$ . So the variable implementation of the policy of fulfilling the rights of persons with disabilities has no effect on social support for persons with disabilities in PPSGHD West Java Province. It can be concluded that hypotheses 2 is rejected.

Table 9 shows that the t-statistic value for the social support variable on the social functioning of persons with disabilities is greater than the t-table value, namely  $3.471 > 1.96$  and p-value  $0.001 < 0.05$ . So the variable is social support Disability significantly influences the social functioning of persons with disabilities in PPSGHD West Java Province. It can be concluded that hypotheses 3 is accepted.

### 3. Discussion

#### a. The Effect of Implementing Policies to Fulfill the Rights of Persons with Disabilities on Social Functioning

The findings of this study demonstrate that policy implementation has a statistically significant and positive effect on the social functioning of persons with disabilities at PPSGHD West Java. This result is further strengthened by the effect size ( $f^2$ ) analysis, which shows that policy implementation exerts a moderate practical effect on social functioning. This indicates that effective policy implementation not only reaches statistical significance but also contributes meaningfully to real improvements in daily social functioning, such as role performance, independence, and social participation.

Similarly, the significant role of resource sufficiency and bureaucratic structure supports (Lipsky, 2010) view that frontline service effectiveness depends on institutional capacity. Adequate staffing, proper facilities, and accessible information directly enhance service delivery and create a structured environment for rehabilitation. Well-defined SOPs ensure coherence and reduce implementation

gaps, which is consistent with findings from prior empirical studies showing that organizational readiness improves service outcomes for vulnerable groups. This interpretation is consistent with the effect size ( $f^2$ ) results, which indicate that policy implementation has a moderate substantive influence on social functioning. The moderate effect size suggests that institutional capacity strengthens social functioning when supported by adequate resources and clear administrative procedures, but its impact is maximized when combined with social and contextual support mechanisms. Together, these findings indicate that communication, resources, and strong administrative systems function interactively to produce meaningful improvements in the social functioning of persons with disabilities, offering both theoretical reinforcement and practical direction for strengthening disability-related policy implementation.

#### **b. Policy Implementation, Social Support, and the Social Functioning of Persons with Disabilities**

The rejection of H2, which stated that policy implementation had no significant impact on social support, indicates a structural disconnect between top-down policies and the daily lived experiences of persons with disabilities in the West Java PPSGHD. One key factor likely lies in the symbolic or centralized implementation of policies, which fail to directly address social inclusivity and community empowerment. Policies may meet formal criteria (regulations, programs, or budgets), but their delivery channels are ineffective in transforming these regulations into tangible social support that is felt by beneficiaries. Rather than enhancing support networks, policies may create dependency or reinforce new forms of stigma if their implementation is not supported by extensive outreach and a sensitive approach to the specific needs of individuals with disabilities (Widinarsih, 2019).

This interpretation is further clarified by the effect size ( $f^2$ ) results, which indicate that policy implementation has a large substantive effect on social support despite the absence of statistical significance. This finding suggests that while policy structures may influence the conditions surrounding social support, such influence does not automatically translate into perceived or experienced support at the individual level. The large effect size highlights unrealized policy potential, indicating that improvements in implementation strategies may strengthen social support if aligned with community engagement and relational dynamics.

Furthermore, in-depth analysis must consider the role of mediating variables not observed in the initial research. Social support is a construct that relies heavily on interpersonal interactions, cultural norms, and existing social capital within the local community, not solely the result of government policy interventions. Policy implementation may be hampered by cultural resistance or a lack of coordination between stakeholders (local governments, families, disability organizations, and civil society). When policies are implemented without building bridges with existing social networks, their significant impact on social support is negligible. Rejection of H2 requires researchers to shift their focus from "what the policy is" to "how the policy is perceived and integrated" within the social ecosystem of persons with disabilities in the region.

#### **c. The Influence of Social Support on the Social Functioning of Persons with Disabilities**

The findings show that social support has a significant effect on the social functioning of individuals with disabilities in PPSGHD West Java Province. This result empirically confirms that social functioning is not solely shaped by internal capability, but is strongly influenced by the extent to which the surrounding environment provides consistent emotional, instrumental, and informational assistance. The statistical significance of this variable suggests that individuals with disabilities rely heavily on external social networks to navigate structural barriers, consistent with the social model of disability which posits that environmental support determines functional outcomes more than impairment itself.

This relationship is further supported by the effect size ( $f^2$ ) analysis, which shows that social support has a large substantive effect on social functioning. The large effect size indicates that variations in social support produce substantial differences in functional outcomes, making social support the most influential factor in the structural model. This finding reinforces the position of social support as a central explanatory mechanism through which individuals with disabilities translate available resources into effective social participation.

From a theoretical standpoint, the results align with (King et al., 2019), who argues that appreciation, instrumental aid, and informational support collectively shape adaptive functioning. The significance found in this study suggests that these forms of support operate as enabling resources that reduce daily functional burdens and increase participation. Empirically, this is in line with previous studies showing that higher levels of social support correlate with better community participation and lower functional stress among individuals with disabilities. Thus, the evidence supports the argument that social support is a practical mechanism through which individuals with disabilities can mobilize resources, expand opportunities, and increase their adaptive capacity.

These findings highlight that enhancing social functioning cannot rely only on policy or institutional interventions; it requires strengthening the social ecosystem surrounding individuals with disabilities. The empirical significance of social support underscores that family involvement, peer encouragement, and community engagement are measurable determinants of functional outcomes. Practically, this implies that targeted programs—such as caregiver training, community awareness campaigns, and disability-inclusive community networks—may produce more direct improvements in social functioning than structural reforms alone. The results therefore support the need for multi-level strategies that integrate formal support systems with community-based social reinforcement to optimize disability inclusion.

## D. Conclusions

The results of this study indicate that the implementation of disability rights policies significantly improves individuals' social functioning, thus reinforcing policy implementation theory that emphasizes the importance of effective communication, adequate resources, and supportive bureaucratic structures. However, the lack of a significant effect on social support indicates limitations in the effectiveness of formal policies in influencing more socio-cultural relational aspects. This finding contributes theoretically by clarifying that institutional policies have a strong capacity to improve individual functioning, but are not always able to influence social dynamics shaped by norms, stigma, and social networks. Methodologically, this study contributes by using a PLS-SEM approach to analyze relationships between variables in the context of a small population and data that are not always normally distributed. This method helps identify significant pathways of influence while also emphasizing the mediating role of social support, which only emerges within specific relationships, thus providing a deeper understanding of the policy's mechanisms of action at the individual level.

These conclusions are further supported by the effect size ( $f^2$ ) analysis, which demonstrates that policy implementation and social support differ in their substantive influence on social functioning. While policy implementation provides a structural foundation, social support emerges as the most influential factor in enhancing functional outcomes for persons with disabilities.

Practically, these findings emphasize the need for local governments, rehabilitation institutions, and other stakeholders to focus not only on policy implementation but also on strengthening community-based programs, family education, and stigma reduction campaigns. Strengthening social support networks can be achieved through inclusive activities, community involvement, and synergy between formal rehabilitation services and informal support. Policy implementation needs to be

integrated with socio-cultural interventions to maximize its benefits for the social functioning of persons with disabilities. Accordingly, effective disability policy should be understood not only as a regulatory framework but as part of a broader social ecosystem that enables meaningful inclusion and sustained social functioning. Further research is recommended to delve deeper into the factors influencing the formation of social support, such as the role of the family, community characteristics, societal attitudes, and the level of environmental inclusiveness. Longitudinal research is also needed to examine changes in social support and social functioning over time. Furthermore, exploring variables such as social stigma, community empowerment, and the effectiveness of community-based programs can complement our understanding of the context that determines the success of policy implementation for persons with disabilities.

## E. Acknowledgement

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## F. References

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