

## Social Practices between Individuals with Mental Illness and Griya Schizofren Volunteers in Griya PMI (Indonesian Red Cross) Peduli Surakarta

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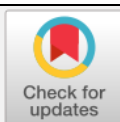
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### ABSTRACT

*This research discusses the social practices carried out by Griya Schizofren to address individuals with mental illness who are often disadvantaged due to the negative stigma of their illness. This research uses a phenomenological approach. Data were collected from observations, interviews, and documentation. The results show that Griya Schizofren, to reduce the stigma against individuals with mental illness, established social, economic, cultural, and symbolic relations with those who lived in Griya PMI Peduli (Indonesian Red Cross) Surakarta through voluntary activities for individuals with mental illness. Social welfare activities in individuals with mental illness had shifted to business activity that opened a new field. The habitus of individuals with mental illness positively developed. Griya Schizofren restructured individuals with mental illness in a new layer of the community by promoting it as a society that can work within its limitations and produce products demanded by the community in the form of wedding souvenirs. Field of Griya PMI Peduli became a more humane environment as the shelter for abandoned individuals with mental illness. It also proved that total institution is no longer a frightening but collaborative field for capital exchange. Hence, using the theory of Pierre Bourdieu, this research can answer how the stigma can be unfolded through works and capital exchange.*

**Keywords:** Griya PMI Peduli; Griya Schizofren; Individuals with Mental Illness; Social Practice; Stigma; Volunteers

## 1. Introduction

Rapid social change requires the community to adapt quickly. The economic crisis, few job vacancies, sexual abuse, and romance problems are often triggered by mental issues. The complexity of the problems faced, and the high demands of life in society have caused everyone to struggle in maintaining their existence. Additionally, *das sein* and *das sollen* far from the expectation has forced them to accept it willingly, but not everyone can accept those life problems. Many embrace pessimism and difficulty in controlling negative thoughts over the life they live in. Frequently, these factors trigger someone to experience mental illness. Complicated problems experienced and unmatched reality and expectations force them to accept the circumstances and the reality that happens to them.

Health physical will create mental health (soul) and social, vice versa. If mental is disorder or sick, physical and social aspects will experience the disorder. Health is a resource possessed by human beings and is not a life goal to be achieved. Health focuses on physical fitness and the soul in which individuals can be so tolerant and accept differences (Brook, 2017, p. 585 as cited in Darmawan & Rahmawati, 2020). Given this understanding, mental health requires many inner-self components such as mental, spiritual, physical endurance, and external aspect, such as social.

Individual health must be measured by its productivity, which means occupation or economic capability. For those under age children and adolescents, or retired and older adults, having activities, such as studying in school or college for children and adolescents, and social services for older adults (Notoatmojo, 2007, p. 3). It can be determined that an individual is categorized as mentally healthy if one can actualize themselves in society.

Mental illnesses have reached 12% of the total diseases and are predicted to increase to 25% by 2030. This phenomenon contributes to the increasing prevalence of mental illness every year in various countries. Based on a population census in America in 2004, approximately 26.2% of the population aged 18-30 years or older experience mental disorders (National Institute of Mental Health, 2011)

According to the research results in Indonesia, a minimum of 1-2% of Indonesia's population experiences schizophrenia. It implies that two up to four million people in Indonesia suffer from mental disorders. It is estimated that people with active schizophrenia are around 700,000-1,4 million. Moreover, individuals with mental illness treated in psychiatric hospitals in Indonesia almost reach 70% due to schizophrenia (Wicaksana, 2000).

Concerning Central Java Province, especially Surakarta city, mental illness can be seen from the number of visits at Surakarta Psychiatric Hospital in 2010, which recorded as many as 1,534 patients. In 2011, it increased to 1,828 patients and in 2012, had worsened to 2,151 patients with details of 2,817 inpatients and 1,728 outpatients. The highest number in 2013 reached 2,186 patients. As of October 2014, it decreased to 1,531 patients. The Government of Surakarta City enclosed in September 2016 that 2,095 Surakarta citizens were experiencing mental illness. The details are 760 people were affected by severe mental illness, while the remaining experienced mild mental illness with a higher percentage of women compared to men (health.detik.com, 2016).

Individuals with mental illness are mostly cast aside, then taken by the Civil Service Police Unit and social services to Griya PMI Peduli as the shelter to live in and receive medical and social care. Many of them are still unidentified, where they are from, and their families due to mental factors that inhibit them from remembering their backgrounds and identities. Low-income families can also register family members with mental illness for free by Griya PMI

Peduli Surakarta. Though patients have been entrusted, the families are unattached from the prejudice and stigma brought by family members with mental illness.

Society tends to perceive mental illness as fear; fear of the disease, fear of ignorance, and fear of violence. Particular cultures still believe that life problems are due to spirits, poisons, contaminated blood, and low moral integrity. Discrimination exists in work fields, community service, insurance services, and the right to receive education for individuals with mental illness (Andriyanti, 2004).

Commonly in Indonesia, if their family members experience mental illness, shame will eventually come, and they prefer to hide and isolate themselves. Some even treat them inhumanely. This phenomenon is related to the stigma of the general public, who perceive mental illness as an embarrassing disease and brings disgrace to the family. They neglect the mental illness and do not provide treatment to sufferers (Makmuroch, 2014).

Prejudice and stigma are unfortunately attached to individuals with mental illness. Stigma results in disconnected rights that individuals with mental illness should accept. Given the consciousness of this disadvantageous occurrence, the Griya Schizofren has been campaigning offline and online to reduce the stigma experienced by individuals with mental illness. Based on this reason, this research aims to find out the social practices carried out by Griya Schizofren to reduce the stigma against individuals with mental illness.

## **2. Literature Review**

### **2.1. Mental Illness**

American Psychiatric Association or APA defines mental illness behavior patterns/syndromes as psychological that occurs in individuals associated with distress experienced, for instance, painful symptoms, disability of important function with an increased risk of mortality, pain, loss of important independence, and disability (American Psychiatric Association, 1994).

Mental illness, also called a mental disorder, manifests a form of behavior deviation due to emotional distortion, determining the abnormalities in behavior. It occurs due to declined mental functions. Mental illnesses are disorders that affect one or more emotional functions. Mental illness is a brain disorder that disrupts emotions, thought processes, behavior, and perception (five senses). This mental illness causes stress and suffering for sufferers and families (Stuart, 2007).

According to the Ministry of Health of the Republic of Indonesia (2010), mental illnesses are changes in mental function that cause interference with mental function and bring suffering to individuals and obstacles in carrying out social roles. Mental disorder or mental illness is a difficulty that individuals must face because of their relationship with others, difficulties due to perception of life, and attitude towards oneself (Kurniawan, 2016).

According to Keliat et al., as cited in Prabowo (2014), there are characteristics of mental disorders that can be identified as follows:

- Self-seclusion.
- Unable to recognize others.
- Sudden unwarranted anger.
- Slurring.
- Unable to take care of themselves

## 2.2. Social Practices

The theory of social practice from Pierre Bourdieu is used in this study to find the formation of new habitus in the community within the Pusur River area. Conceptually, this theory consists of the concepts of habitus, capital, field, and social practice. Social practice can be written in the following formula:  $(\text{Habitus} \times \text{Capital}) + \text{Field} = \text{Practice}$  (Adib, 2012, p. 107). Through the capital at stake in the field, the individual as an agent is formed and forms habitus. Cultural reproduction is the result of the formation of new habitus.

Bourdieu designed habitus as something that produces or is produced by social reality. Habitus comes from the knowledge and understanding of individuals about their social reality, which will then produce a contribution to social reality itself. Based on this reason, individual knowledge has a constitutive contribution to creating social reality (Ritzer, 2012, pp. 903-904).

The most important aspect of social practice besides habitus is capital. Capital is defined by Bourdieu as very broad and not only limited to economic aspects but includes material aspects such as symbolic and cultural. For Bourdieu, capital is a social relation in an exchange system (Harker et al., 2009, p. 16). Capital is then classified into Economic Capital, Social Capital, Cultural Capital, and Symbolic Capital.

Capital plays a vital role in social practice. Cultural capital, according to Bourdieu, covers art, education, and forms of language (Harker et al., 2009, p. 16). Bourdieu conceptualized social capital as relationships and networks which are useful resources for the determination and reproduction of social positions (Krisdinanto, 2014, p. 203). Economic capital consists of the means of production (machinery, land, labor), materials (income, goods), and money (Krisdinanto, 2014, p. 203). Economic capital is the root of all types of capital and can be combined into other forms of capital. Bourdieu explains symbolic capital as the accumulation of prestige, honor, and fame built on knowledge and recognition (Krisdinanto, 2014, p. 203).

Field, according to Bourdieu, is a social space in which struggle or strive takes place, not in a physical sense but a process of transforming or maintaining power (Mahar, 2009, p. 14). For Bourdieu, the change in habitus is termed habitus that produces and is produced by social reality. On one side, it is structuring and structured structures (Ritzer, 2012, p. 905).

## 3. Research Methodology

This research uses qualitative research with a phenomenological approach. Data in this study were obtained through observations, interviews, and documentation. The research field is at Griya PMI Peduli Surakarta, located at Jl. Sumbing Raya Mertoudan, Mojosongo Village, Jebres Subdistrict, Surakarta, Central Java Province. Based on Griya PMI Peduli data in 2015, 157 residents consist of 46 females and 111 males. Out of them, 53 have been reunited with their families and continue to increase every day due to individuals with mental illness patients inhabiting Griya PMI Peduli Surakarta with health conditions that could allow them to interact with others. Besides, they interacted with volunteers from the Griya Schizofren community as the general public, and their relationships have social, cultural, capital, and symbolic relations that are interexchange.

## 4. Results and Discussions

### 4.1. Griya PMI and Griya Schizofren

Griya PMI Peduli Surakarta becomes the flagship program of the Indonesian Red Cross of Surakarta city that distinguishes it from other Indonesian Red Cross. The Indonesian Red Cross attempts to bring social services to humanitarian issues, blood donations, and disaster rapid response programs. From a total of land in Mojosongo, 5,000m<sup>2</sup> were invested and divided into



3 areas for the construction of Griya PMI Peduli, Griya Bahagia, and Griya Ceria. Griya PMI Peduli has been operating since 2012 as a shelter for abandoned individuals with mental illness on the streets, especially in Surakarta city.

Griya PMI Peduli was built inspired by Mr. Jami'in, a commoner who worked as masons in Jombang, East Java Province. His human calling was to accommodate and take care of more than 200 individuals with mental illness patients. Based on the inspiration and intention to lighten the burden on others, the Indonesian Red Cross attempted to do what Mr. Jami'in had done by establishing Griya PMI Peduli at Mojosongo, Surakarta. Given to data of Griya PMI Peduli, it currently has residents (refers to patients in Griya PMI Peduli) as many as 101 people consisting of 38 females and 63 males. In 2014, 53 had been reunited with their families, increasing each day (PMI Kota Surakarta, 2014).

This program will not be accomplished and developed without the support of the entire community. Therefore, the Indonesian Red Cross of Surakarta city always encourages its people to care for each other by inviting the community to actively contribute to the humanity wallet through a donation intended for those who experience mental disorders and are neglected. In Griya PMI Peduli, its residents will be given both medical and spiritual care through a spiritual approach. It is expected to bring a positive impact on their health aspect. Furthermore, Griya PMI Peduli also provides skills to those who have improved psychologically, such as entrepreneurship, arts, sports, and catering.

The treatment of 101 displaced individuals with mental illness patients under the supervision of the Griya PMI Peduli Surakarta is still dependent on the assistance of the Social, Manpower, and Transmigration Office of Surakarta. It occurs as Griya PMI Peduli residents are not financed by the Social Security Organizing Agency (Badan Penyelenggara Jaminan Sosial or BPJS). BPJS becomes important to facilitate accessing health facilities, such as routine control of mental and physical health and accessing medicines as they will take medication for life to maintain their mental stability. Regularly, the control and access of medicines for Griya PMI Peduli Surakarta residents still need to wait for recommendations from the Social, Manpower, and Transmigration Office of Surakarta.

In addition to the assistance of the Government of Surakarta City, Griya PMI Peduli Surakarta relies on donors and the Indonesian Red Cross. These aids are beneficial to those who are sick and require urgent treatment. The average residents of Griya PMI Peduli already have stable emotions and are no longer aggressive. If the patient's aggressive attitude recurred, it would be followed up with the assistance of medical experts in Surakarta City Psychiatric Hospital. If conditions have improved, they will be returned to Griya PMI Peduli as the shelter for those abandoned.

Every patient under Griya PMI Peduli is not charged because Indonesian Red Cross funds cover the financing. In addition, there are some permanent donors to help individuals with mental illness patients' healing process. More patients from Griya PMI Peduli are expected to be treated and enjoy their lives with their families.

Griya Schizofren is a volunteer community looking for donors to assist mental illness patients at Griya PMI Peduli. Griya means house. Schizofren stands for Social, Humanity, and Friendly. Griya Schizofren is a youth community concerned with mental disorders in Surakarta and Aceh. Located in Griya PMI Peduli Surakarta, the shelter to accommodate individuals with mental illnesses, youths studying in Universitas Sebelas Maret are present to fill the solitude of individuals with mental illness since they live alone with no relatives. Individuals with mental illness patients are taken from the streets, had neither kith nor kin, no love nor humanity from

their surrounding community due to the stigma of “lunatic” as dangerous individuals. This stigma causes increasing exclusion and alienation.

The youth members of Griya Schizofren help the funding by selling a variety of creative products such as clothes, finding sponsors, providing singing therapy, selling handicrafts, Quran reciting therapy, storytelling and singing, drawing and coloring, and feeding and supervising medicine consumption as well as other social therapies. It aims to build positive communication and help individuals with mental illness patients and provide social support. This social therapy is deliberately given to sharpen the social sensitivity of students as a young generation and change the mindset that people with mental illness are not harmful.

Griya Schizofren initially established a youth community concerned for mental disorder patients whose office is located at Kampung Gulon, Surakarta. Schizofren is derived from Social, Humanity, and Friendly, which are the principles in moving. It implies that we are a **Social** community, a medium that drives young people to assist others with the principle of non-profit based on self-calling and willingness. **Humanity**; our supports as human beings who humanize others and are eager to change the public’s perception about mental illness patients, and **Friendly**; considering mental illness patients as part of society. In 2018, Griya Schizofren had approximately 20 volunteers. The volunteers consist of young people registered in Surakarta, both public universities and private universities.

Additionally, Griya Schizofren also gives scholarships for volunteers called ‘volunteer scholarships’ as educational and housing scholarships. Our motive is to nourish the concern of the young generation for individuals with mental illness patients as pioneers of acts of kindness from small things. There is no discrimination and stigma against individuals with mental illness.

## **4.2. Individuals with Mental Illness Social Practices and Griya Schizofren Volunteers**

### **4.2.1. Habitus**

Bourdieu formulates the concept of habitus as mental or cognitive structures, whichever people deal with the social world (Ritzer, 2012, p. 903). Bourdieu became famous due to the Habitus theory. This theory encapsulates the concept of habitus with a sociological and philosophical analysis of human behavior. It can be defined that habitus is social values that individuals live and are created through the socialization process of values that have lasted a long time. Those values are well-established into thinking and behavior patterns internalized within the individual. A strong habitus may affect the body (physical). Habitus instilled and settled into physical behavior is called Hexis (Wattimena, 2012)

Griya Schizofren is a community established by students of the Department of Sociology, Faculty of Social and Political Sciences, Universitas Sebelas Maret, in 2012. The name of Griya Schizofren itself is the abbreviation of Sc from Social; Hi stands for Humanity; Zo stands for Zone (area); Fren is abbreviated from Friend. Whereas, Griya denotes medium. Thus, Griya Schizofren is a forum for young people eager to participate in the social community as part of humanity’s calling by creating an area of friendship for individuals with mental illness.

As a community that aims to humanize humans, especially those with a mental illness, volunteers aged 18-30 years are provided with information and training about mental illnesses. The training was carried out to recognize this disease, the character of patients, the approach needed, build social interaction, and interact directly with individuals with mental illness at Griya PMI Peduli Surakarta. Patients consisting of 101 individuals with mental illness are treated in Griya PMI Peduli Surakarta. They were taken from the streets by the Civil service

police Unit of Surakarta or Surakarta community and Social Services for further care in a special institution for mental illness rather than abandoned on the streets. These mentally ill individuals are often injured due to accidents, impregnated by irresponsible perpetrators, and living without a toilet and healthy food. Thus, people find it uncomfortable or scared when they pass on the streets, and stigma emerges due to what people know and what is caused by individuals with mental illness.

The volunteers are also equipped with technical skills to develop skills and activities to mentor individuals with mental illness at Griya PMI Peduli Surakarta. Volunteers are trained in storytelling skills at Griya PMI Peduli Surakarta. Storytelling techniques are easy to apply and use fairy tale accessories to attract the attention of easily-distracted patients to focus due to the mental illness they experience.

Volunteers also invite patients to sing, draw, and color in artsy activities and common knowledge to sharpen patients' competitive emotions and get prizes in the form of snacks they like. Such gifts are gifts not provided by Griya PMI Peduli Surakarta.

Following the assistance, volunteers from the Griya Schizofren and students from various universities in Surakarta are trained to write to note their feelings and share them on social media, in photo postings with captions explaining those activities. Volunteers are also encouraged to write to later be published in an anthology book containing their perceptions and feelings while accompanying individuals with mental illness patients.

Griya Schizofren's volunteer has an agreed routine schedule. In a weekly schedule, everyone must attend once with two hours of assistance activities such as painting on Monday, singing on Tuesday, storytelling on Wednesday, and smart quizzes on Thursday as activities that bond closeness and social interaction with individuals with mental illness. The social volunteer contract with Griya Schizofren is valid for one year. Some even continue until post-college. Hence, due to their unique characters, individuals with mental illness are close friends with the volunteers. Some are quiet, talkative, closed, open, and so forth. This closeness makes volunteers and individuals with mental illness are inseparable from one another. Their reasons for carrying out this activity besides social and humanitarian missions are also triggered to have the courage to argue, debate, and tell their experiences about mental illness and that individuals with mental illness are not detrimental.

From the point of view of Bourdieu's habitus theory, this active volunteer from the Griya Schizofren community already has the correct habitus to become a structuring of structure individuals with mental illness within the community through reading, writing, discussing, gathering, and conducting activities together with individuals with mental illness. The same habitus allows volunteers to become public speakers and winners in national competitions from the ideas and thoughts submitted to educate the public with appropriate information about mental issues. This is also an effort to unravel the stigma given by the community because of the influence of generalized media to judge individuals with mental illness.

Volunteers obtained habitus from living the values in the social, humanitarian community environment, prioritizing the spirit of humanizing humanity. Because individuals with mental illnesses are human beings who are considered dangerous to other humans, they are secluded or chained not to threaten the safety of others. They also learn to reunite individuals with mental illness to the community as part of a society that cannot escape from their life with others as social beings who are dependent. This appreciation of values then settles into ways of thinking and behavior patterns volunteers firmly hold, internalize, and practice in daily life in the Griya Schizofren community.

#### 4.2.2. Modal

The debate of the habitus and field concepts presents several views that an activity similar to that of the competitive market creates the concept of capital and its strategy. Capital in economic can be identified. The categorization is divided into four elements: economic capital, cultural capital, social capital, and symbolic capital (Ritzer & Goodman, 2009, p. 583). Capital gives chances to earn opportunities in life. Capital divided into four types can be obtained if one has the right habitus in life. Capital is a concentration of power, a specific power that operates in the field. Each field demands special capital to live well and survive (Harker et al., 2009). This capital is eventually exchanged into social practices.

Habitus discussing, observing, reading, and writing about individuals with mental illness will produce cultural capital and intellectual capital for Griya Schizofren volunteers. This cultural capital makes these community volunteers have accurate knowledge about the character, attitudes, and behavior of individuals with mental illness obtained both directly and indirectly. From activities carried out, such as drawing, the drawing results are redesigned digitally to be printed into various media such as t-shirts, pillows, pouches, wallets, tote bags, or backpacks sold by Griya Schizofren's founder in the wedding souvenir business. Givo Indonesia, with the Instagram account of Givo.id, can convert capital owned by individuals with mental illness embodied in the drawings and then convert it into money due to customers who love the design as wedding souvenirs due to its high humanitarian value.

Diligent attitudes of individuals with mental illness in drawing in a business network, volunteers have a large social network earning economic capital income through social media. Capital is inanimate objects but alive and can be exchanged. From social capital, good relations established between Griya Schizofren volunteers and individuals with mental illness at Griya PMI Peduli produced productive activities in their spare time. This activity changes social capital to cultural capital because of teaching and learning about drawing from volunteers Griya Schizofren and individuals with mental illness. Then, this cultural capital is converted into economic capital since the drawings are marketed to other young people who desire unique souvenir designs and high social value by individuals with mental illness. Their designs have economic value because one design can be printed on thousands of forms of media, the business does not interfere with their mental health. If they experience recurrence, they must be treated at Psychiatric Hospitals since the drawing results are already in the form of paintings on paper which is then digitized for sale. Finally, individuals with mental illness can earn money (economic capital) from the sale of souvenirs whose profits are divided between production and them as designers.

#### 4.2.3. Field

The concept of habitus is inseparable from the field. These two basic concepts are interrelated. Bourdieu perceives the field as more relational than structural. The field is a network of relations between objective positions, which may be actors or institutions blocked by field structures. Bourdieu viewed the field as a battlefield: "the field is also battlefield" (Ritzer & Goodman, 2009, p. 583). The field is a competitive market with various types of capital, such as economic, cultural, social, and symbolic capital. It shows that the reality of differentiated societies, the scope of objective relations has a peculiarity that cannot be reduced to the relationships that govern other fields. Therefore, Bourdieu's thought states that in all society being dominant and dominated becomes meaningful. In this distinction, there are basic



principles of social organization. According to Bourdieu, this domination is very dependent on the situation, resources, and strategies of actors (Esra, 2011).

Habitus becomes the foundation of the formation of the field. On the other hand, the field becomes the locus for the performance of habitus. Field can be concluded as a power in which there are fighting over capital and for the sake of gaining certain access to those who have a hierarchy of power. Bourdieu uses the term capital to map power relations in society. Although the concept of capital is closely related to economics, Bourdieu still used this because of its characteristics which can explain the power relations. Based on the explanation, too, Bourdieu instilled his theoretical construction of capital with the sentence:

*"...Because capital is a social relation, i.e., an energy which only exists and only produces its effects in the field in which it is produced and reproduced, each of the properties attached to class is given its value and efficacy by the specific laws of each field" (1984, 113).*

Thus, Bourdieu's theory regarding capital has been separated from understanding Marxian traditions or formal economic concepts. This concept includes the ability to exercise control both in the future, others, and oneself. The mapping is not in a pyramid or hierarchy but rather a distinction based on capital ownership and composition. Under this approach, each social class cannot be interpreted separately but is always related to other classes.

As has been explained, capital is classified into four, including (1) Economic capital, which includes the means of production (machinery, land, labor), materials (income and goods), and money that is easily used for all goals and can be passed on from one generation to the next. (2) Cultural capital includes all intellectual qualifications produced through formal education or family inheritance. For example, the ability to present in public, ownership of cultural objects with high value (prestigious), certain knowledge and expertise from education results, and diplomas (education title). (3) Social capital refers to social networks owned by actors (individuals or groups) in relations with other parties of power; and (4) symbolic capital covers all forms of prestige, status, authority, and legitimacy (Fashri, 2007). This exchanged capital cannot be separated from the theory of capital exchange between volunteers Griya Schizofren and individuals with mental illness at Griya PMI Peduli.

The activities that build social interactions such as singing, storytelling, drawing, and smart quizzes have made volunteers understand that individuals with mental illness have tremendous potential. Their voices are beautiful. Their ability to tell stories is exceptional. Even the pictures produced are above average. This social capital is transformed into a cultural capital with the exchange of knowledge. Volunteers found new knowledge about individuals with mental illness's talents and potentials. Individuals with mental illness also found increasingly sharpened capabilities through training and mentoring activities from Griya Schizofren volunteers. This cultural capital is eventually transformed into economic capital when volunteers buy designs for prospective buyers looking for wedding souvenirs with an enterprise social concept. Volunteers who initially have social capital in Griya PMI Peduli expand their field to the wider community by campaigning and educating online and offline related to individuals with mental illness and their daily lives that are not widely recognized by the public to the distance of reality called stigma. Educated people buy products of individuals with mental illness and change economic capital to become symbolic capital. There is pride shared at weddings related to unique souvenirs made by stigmatized people, namely individuals with mental illness.

They (individuals with mental illness) have the ability as the general people have. This ability is a cultural capital that is often covered by stigma. But volunteers who interact with them in drawing and coloring activities can exchange economic, cultural, and symbolic capitals into the community. The community has become educated and gains new knowledge through its connection with volunteers on social media that individuals with mental illness are not detrimental, frightening, and unskilled people as described in television that terms them as "lunatic". This socio-cultural relationship eventually becomes an economic relationship that benefits many parties with the emergence of a business idea to elevate the individuals with mental illness in the creative economy through product designs and handmade products (craft). From the drawings of individuals with mental illness, volunteers combine it with technology (graphic design). So that it can produce wonderful, up-to-date, and marketable images that will be applied in various products such as pillows, pillowcases, mugs, tumblers, tote bags, pouches, bags, purses, backpacks, and clothes. This idea is expected to help individuals with mental illness psychologically and socially with economic support from their work (symbolic capital).

The function of capital, for Bourdieu, is social relations in an exchange system, which presents itself as something rare, worth looking for in certain social forms. Various types of capital can be exchanged with other types of capital. The most dramatic exchanges are exchanges in symbolic form. Because in this symbolic form, different forms of capital are perceived and recognized as something that becomes easily legitimized (Halim, 2014, p. 109). If observed, the most powerful of four capitals to unravel the stigma is symbolic capital that gives a different meaning to individuals with mental illness after their works are showcased. Individuals with mental illness are no longer on its shortcomings but on the strengths that are often stigmatized. Finally, using the theory of Pierre Bourdieu, this research can answer how the stigma can be explained with the products and capital exchange.

It may be simple, but efforts to unravel the stigma of individuals with mental illness begin with marketing their work simultaneously. From this business, volunteers change the social relations of mentoring into cultural relations that lead to socio-economic relations and broad impact because of symbolic relations to change the meaning of individuals with mental illness in Griya PMI Peduli Surakarta.

## 5. Conclusion

In conclusion, this research found several important concepts that capital must exist in a field to have meaningful forces. The relationship between habitus, field, and capital is interrelated and explains social practice. The characteristics of capital are interrelated with the habitus as an action and classification guide. Also, it is interrelated with the field in which capital operates. Meanwhile, the field is always surrounded by objective power relations based on capital combined with habitus.

The field has its own space in society. If one wishes to succeed in a field, one needs to possess the right habitus and capital. It also applies to the business field. Those who desire to be successful in business must have the right habitus (resilient to work and frugal), business capital (money as business capital), and cultural capital (extensive network). These three capitals are owned by Griya Schizofren volunteers who have been actualized as figures of kindness to the surrounding young people. In addition to the print and digital media and social media are widely used at their age. If other people possess the same habitus and capital as those individuals with mental illness, they are asked to join businesses. However, they live in a total

institution with packed rules, prohibitions, and limitations. It is more likely that they will not succeed.

Thus, the concepts of habitus, capital, and field are interrelated. To be successful in one of life, one needs to have the right habitus and capital for that specifically. If someone does not have the right habitus and capital for that field, then obviously, someone will fail in the chosen field.

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## 7. Declaration of Conflicting Interests

The authors have declared no potential conflicts of interest concerning the study, authorship, and/or publication of this article,

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