



# Understanding “Power Over”: An Introduction to Power Analysis

**Overview:** This activity explores different forms of power – formal (visible), shadow (hidden) and invisible power - and how they are exercised to gain and maintain power over others. Participants gain insight into the complexities of power and the need for a range of strategies to successfully respond to “power over.” This activity creates the framework for Power Analysis for Strategy.

**Purpose:** This activity introduces, defines and explores examples of formal, shadow/hidden and invisible power. It offers a framework that enables participants to analyze how power over operates in their own contexts and around issues of concern to them. This framework will serve as a foundation for the development of more comprehensive strategies that respond to power over others.

**Time:** 1 - 2.5 hours

**Materials:**

- Copies of handouts:
  - Three Faces of Power
  - Case Study
  - Using Power Framework Matrix
- Flip chart
- Markers
- Tape

**Credit:** Developed and adapted by JASS practitioners over the years

**Process:**

***In plenary:***

- Introduction: *In studying power, activists and scholars have identified ways that power is wielded over others to gain and maintain control over decisions, over resources, over*



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bodies and over voices. We refer to that power as Power Over. But to truly understand this power in its complexity, we break it down into different forms, each with a particular impact and expression. We will examine how those forms of power silence, exclude, marginalize and harm less powerful groups including women, racial and ethnic groups, working class and poor communities, indigenous people, etc.

- Introduce the case studies from the Treatment Action Campaign (TAC) in South Africa using the introduction to give background and context to the campaigns.

*Facilitator Note: You can use one or both stories – having small groups work all on the same story or dividing them, with some working on one and some working on the other. Alternately, if you prefer, you could use another case study or even a video that presents an organized effort to make change using a variety of strategies.*

- Ask participants to listen for ways that people tried to make change in their context and what they came up against. For instance:
  - How was the community and its demands disregarded, silenced, harmed or excluded – whether by formal decision makers such as the government and courts, or by outside players and institutions?
  - What were the beliefs and ideas that undermined or disempowered the activists?
  - Where and how did the activists' strategies succeed and why?
- Handout the case study and ask for volunteers to read it aloud. (If you are using two different case studies, small groups will read them themselves– either aloud or silently.)
- Divide the group in three to discuss the following questions – each group focuses on one form of power from the story:
  1. What laws, policies, budgets or formal decision-making bodies were involved in the story, and how did they treat the activists' demands?
  2. What did other powerful forces, interests or institutions outside government played a role in the story (e.g. corporate interests, influential players or organizations) and how did they keep community concerns from being addressed?
  3. What were the beliefs, norms, and values, either stated or unstated, that came up in the story and how were they used to discredit or marginalize the community concerns?



**In plenary:**

- Tape up 3 or 4 sheets of flip chart paper on the wall. At the center, put a circle with the main demand of the campaign. Then draw two more concentric circles around that center one. As each group shares its ideas, you will add to the flip chart.
- First have those that discussed the laws, policies, decision-making bodies present their key observations. Write those in the first circle.

*Facilitator Note: Help draw out as much as you can about the formal power role (e.g. why was the government reluctant to provide drugs at a reduced price? And underlying that, the unwillingness or inability to negotiate with drug companies; ideological beliefs by some that AZT drugs were the problem, etc.)*

- Then have the group that discussed the other powerful interests share their findings. Write those in the second circle.

*Facilitator Note: Probe role of drug companies: What kind of power is wielded here by Pfizer? Why are they able to keep low cost drugs out of South Africa?*

- Lastly, have the group that discussed beliefs, norms and values present its findings. Add those in the space outside the circles.

*Facilitator Note: Probe: As you read the story, what do you think the social attitudes were behind the government delaying the MTCT programmes? Why do you think TAC called the government immoral? What were the social attitudes that allowed the drug company's price levels to go unchallenged?*

- What does this diagram we have created tell us about the different obstacles and powerful actors that the community and activists came up against?
- Present the Three Faces of Power: Handout the definitions and use the circle diagram on the wall for examples. The activists in the story were dealing with different kinds of power that was used to stop their agenda. These circles can help us “see” how power was used and how that impacted the community and TAC. Researchers have worked with activists to create a framework for power over called the Three Faces of Power.
  - The first circle around the TAC demand is Formal Power: **Making Decisions & Enforcing the Rules** – define it, have the group draw examples from the story.
  - The second circle out is Shadow or Hidden Power: **Setting and Controlling the Political Agenda** – define and pull out examples.

- The third face of power, **Invisible Power: Shaping Meaning, Values and Norms** is all around the other circles. Define and pull out examples. Note how the promotion of beliefs – that HIV is shameful or that treatment is a privilege not a right – can keep citizens disempowered.
- Note how Formal and Hidden power use Invisible Power to bolster their power. Also how in some contexts Hidden Power is as powerful or more than the government, with its own paramilitary forces and impunity before the law.
  - Ask for comments, clarifications, any insights?
  - Strategies to Counter Power Over – Brainstorm together:
    - What strategies did TAC use to impact decisions made by formal power (ministries, courts, officials, policies)?
    - How did they challenge and counter the power of the shadow power interests (e.g. the pharmaceutical industry)?
    - How did they work to shift the social norms and beliefs impacting them and defining the political debate? (for example: what did wearing T-shirts that said HIV+ on them say symbolically and why was that important in terms of invisible power?)
- What are you seeing that you haven't seen before? Any a-has?
  - Ask for questions, clarification and observations.
  - Seeing that 3 faces of power at work, what do you think would happen if we only pay attention to and focus on formal power in our strategies?
  - Refer to iceberg image (below) – *If we only address what's visible, we miss a large part of what is really happening with decision making and power dynamics.* Ask for examples.





*Facilitator Note: The picture of the iceberg serves as a visual illustration of the dangers of focusing on only the most visible, structural components of power. Focusing on the visible is focusing only on the tip of the iceberg without tackling its deepest roots which are hidden / invisible but very powerful and potentially destructive bedrocks if not understood. To dismantle the building blocks of patriarchy, power and oppression requires an analysis that allows you to see all the layers at play and thus enables the development of strategies appropriate to our own contexts and power dynamics.*

- Synthesize and wrap up: This is the foundation of a power analysis that can help groups develop a full spectrum of strategies and not get caught in the trap of only addressing formal power.



***Promoting Justice and Solidarity on the Issue of AIDS:  
The Treatment Action Campaign Story***

*Summary of a case developed for Just Associates by Debbie Budlender 2004 and updated by Valerie Miller 2013.*

In Western countries the number of people dying of AIDS-related causes dropped sharply by the mid-1990s because of anti-retroviral (ARV) drugs. In developing countries people continue to die because pharmaceutical companies charge high prices for these drugs even as growing numbers of women are infected. Most people who are ill cannot afford the drugs unless government buys and supplies them. The Treatment Action Campaign of South Africa has won great gains for people living with HIV/AIDS. It is a story of organizing, awareness raising, policy advocacy and activism. As a case study, it provides important lessons about the dynamics, strategies and challenges of power and what is needed to be effective over the long run.

**What is TAC?**

TAC was founded by two former anti-apartheid activists one of whom is HIV positive. It was launched on December 10<sup>th</sup>, 1998, International Human Rights Day, during a period of major political transition. Drugs for HIV/AIDS at that time cost between US\$10-15,000 per year. As a non-profit association, TAC has worked to:

- Campaign for affordable treatment for all people with HIV/AIDS and for an end to stigma.
- Fight for treatment for pregnant women with HIV to reduce the number of children who get infected.
- Campaign for health rights and a health system that provides equal treatment to all South Africans.
- Educate its members and others about the virus and HIV/AIDS treatment.
- Teach people with HIV how to live healthier lives.
- Activate and train a leadership of community people living with HIV.

TAC has some big long term aims, such as improving the health system and living conditions of poor people in South Africa. But its most successful campaigns focus their activities around specific goals and problems. In the process, it has built a strong constituency-based organization with members who have expanded their capacities, solidarity and knowledge while developing a belief in their rights and themselves as citizens and agents of change.



## #1 The mother-to-child transmission campaign

Here we look at TAC's mother-to-child transmission campaign, which fought for ARVs for pregnant mothers so that they would not pass on the virus to their babies. TAC took up this campaign because it realised that if government provided drugs to prevent mother-to-child transmission (MTCT) it could save the lives of about 65,000 babies each year. TAC also had research which showed that it is cheaper to test, counsel and provide treatment and formula feeding to infected mothers than to care for children who become HIV-positive. Despite these facts, in 1998 South Africa's Minister of Health cancelled pilot projects that would have provided ARV drugs for pregnant women with HIV.

In December 1998, TAC launched a petition that called on the government to give free ARV drugs to HIV-positive pregnant women. In six months TAC collected more than 100,000 signatures which were publicly presented to the Minister of Welfare and Minister of Finance when the government "AIDS train" arrived at Cape Town station (a fact-finding and citizen consultation tour focused on AIDS.) TAC asked these ministers for a meeting to discuss an affordable treatment plan. TAC also gave copies of this statement to all members of parliament. The March 1999 demonstration was one of the first where TAC members appeared in T-shirts with "HIV-positive" written boldly on the front.

Later in March, on National Human Rights Day, TAC organised a Fast to Save Lives in Cape Town, Durban and Soweto. The fast was supported by many religious leaders, health professionals and even some top government officials. About 500 people lay down in front of one of Johannesburg's public hospitals to symbolise the people who were dying. A few days later the Minister of Health announced she would join TAC's fight against high drug prices. However, very soon afterwards there was a cabinet reshuffle and the new Minister of Health was much less supportive.

In April TAC wrote to Glaxo Wellcome, the manufacturers of AZT, the main drug then used to prevent mother-to-child transmission. TAC asked Glaxo to sell AZT at cost price. To strengthen the demand, activists protested outside Glaxo's headquarters and Glaxo offices in Cape Town and Johannesburg. TAC representatives met drug company officials to demand that the prices of AZT be reduced. Glaxo refused to say how much it cost to manufacture the drug or to reduce the price.

Later in September TAC representatives met the new Health Minister. She told them that the government wanted to provide MTCT, but did not want to start something it could not afford in the long-term. But she said that the government would start pilot projects to test the drugs. Before that happened, however, President Mbeki denounced AZT as 'toxic' and 'racist and western capitalist' saying this toxicity – not the cost – was the reason that the government did not provide drugs to prevent MTCT. He, and his Health Minister supported a treatment of garlic, lemon, olive oil and African potatoes.



Because of the poor response, TAC decided to take the government to court to force it to meet its Constitutional duty to provide healthcare to women and children. In February TAC protested at the opening of Parliament, saying it was immoral, uneconomical and unlawful to delay MTCT programmes.

In July 2000, TAC organised a Global March for Treatment before the International AIDS Conference in Durban. The march was attended by thousands of people, including many popular leaders. At the conference, former President Nelson Mandela called openly for MTCT programmes during his closing speech. In August 2000, the Health Ministry announced 11 pilot projects to provide MTCT drugs.

*Postscript:* The government continued to delay and TAC took them to court. The Constitutional Court ruled in TAC's favour in 2002.

## **#2 The Christopher Moraka Defiance Campaign**

The Defiance Campaign against Unjust Trade Laws and Patent Abuse aimed to expose drug companies that abuse patent laws and set the prices of drugs so high that poor people and countries cannot afford them. It was also about setting a moral example for the government to emulate. The campaign was named after TAC volunteer Christopher Moraka, who died in July 2000 because he could not afford a drug which would have treated his oral thrush (an infection associated with AIDS). Government had to pay R30 for one capsule of the drug that Moraka needed, private doctors paid R80, and pharmacies sold it for more than R100. But in Thailand generic manufacturers sold a similar drug for less than R2.

The campaign began before Moraka's death, in March 2000. In that month TAC met executives of Pfizer, the company that manufactures this drug, and asked them to reduce its price, or to allow South Africans to manufacture or import a generic version of the drug. Pfizer refused both these options. But said it would donate a limited amount of the drug for use by government.

In May 2000, Moraka and other TAC volunteers gave evidence at a special Parliamentary hearing on drug prices. Pfizer did not attend the meeting, but Moraka made a direct appeal to them. TAC produced a poster with a photograph of the Pfizer chief executive officer, which named him as an "AIDS profiteer". TAC put up this poster all over Cape Town and Durban.

In July 2000, TAC and Medecins Sans Frontieres (MSF – Doctors without Borders) organised a conference on Treatment Access at the Durban City Hall, before the start of the International AIDS Conference. More than 1,000 people attended the conference. A further



4,000, including members of the Southern African Catholic Bishops Conference, joined the Global March for Treatment Access.

In the same month, after attending Moraka's funeral, TAC activists and Moraka's friends and family led a spontaneous march through the township where he was buried. They openly expressed their anger towards Pfizer and demanded treatment for all.

In October 2000, Zackie Achmat, one of TAC's leaders who also suffered from oral thrush, visited Thailand and bought large quantities of the much cheaper generic version of Pfizer's drug, which he brought with him when he returned to South Africa. When TAC announced Achmat's mission in a press conference, the public suddenly realised just how much medicine prices are inflated and that an alternative existed. Achmat was arrested upon his return.

At first Pfizer threatened to take TAC to court for breaking the patent laws. However, it quickly backtracked when it realised how much bad publicity it was getting. The police said that Achmat might face charges of smuggling. But several well-known doctors expressed their support for TAC's actions. TAC meanwhile applied to the Medicines Control Council for permission to distribute the drug. The Council gave permission for a medical centre to prescribe the generic drug to its patients.

In January 2001, TV soap opera star Morne Visser arrived at Cape Town Airport with more capsules from Thailand. Visser received a hero's welcome and the medicines were taken to the medical centre, which had permission to use them. In March 2001, a year after Pfizer executives first promised, the first donation from the company arrived at public health clinics. TAC welcomed this delayed victory. But it said it would continue to fight for drugs to be available at reasonable prices for people using private health services. In that same year, TAC began collaborating with Medecins Sans Frontieres to set up pilot clinics for ARV treatment programmes.



## Using the Power Framework: The Three Faces of Power Adapted by JASS

### **Formal Power: Making Decisions & Enforcing the Rules**

This kind of power includes the most visible and definable aspects of political power -- the formal rules, authorities, institutions, and procedures of decision-making and enforcing the rules. Examples include elections, laws, legislatures, budgets, courts and policing, government from local to global. Strategies that target this kind of power are usually trying to change one or more of the following: *who* makes decisions, *how* decisions are made, and *what* the outcome of a particular decision will be.

### **Shadow or Hidden Power: Setting the Political Agenda**

Often operating behind the scenes, powerful people and institutions exercise their influence by controlling who gets to the decision-making table and whose concerns get on the public agenda. Examples include: corporate interests, organised crime cartels, churches, social movements, paramilitaries. This form of power excludes and devalues the concerns of other less powerful groups, attacking and delegitimizing their leaders and ideas. By preventing important voices and issues from getting a fair public hearing, decision-making can be skewed to benefit the interests of a few. In response, strategies that focus on strengthening community organizations and movements can build collective power and new leadership to influence and shape the political agenda and increase their legitimacy and voice.

### **Invisible Power: Shaping Meaning, Values and Norms**

Invisible power isn't really invisible - we see it all around us, if we know what to look for. Through processes of socialization, culture and ideology, invisible power works to legitimize certain ideas, beliefs and behaviors, and delegitimize others. By influencing how individuals think about their place in the world, this form of power shapes people's beliefs, sense of self and acceptance of the status quo. Significant problems and issues are not only kept from the public agenda, but also from the minds and consciousness of the people involved. Challenging power at this level requires strategies that help people share their experiences, build confidence and political awareness and challenge oppressive ideas - transforming not only the way they perceive themselves but also the way others perceive the world.



### Using the Power Framework

The Campaign or Issue:		
Form of Power	How does it contribute to the problem or to block our demands?	Who are key actors?
Visible	E.g. decision to cancel pilot at community clinics to provide AZT medication for free	President and Minister
Hidden	E.g. Pharmaceutical industry	Pfizer
Invisible	E.g. HIV is spread by "bad women"	Conservative churches