

Brooks, C., Mirzoev, T., & Madill, A (Nov, 2020). The role of power in evidence-informed agenda-setting for mental health policy in Assam. Sixth Global Symposium on Health Systems Research (HSR2020), 8-12 November 2020.

*Background:* A review of evidence to (mental) health policy frameworks identified 'power' as a factor requiring greater exploration in understanding and strengthening the use of evidence in policymaking. The Indian State of Assam does not have a stand-alone mental health policy. Such a policy has, however, been recommended for all states in the recent National Mental Health Survey. Hence, the aim of this research is to explore how power - the ability of actors to make decisions and to have influence - affects the use of evidence in the agenda-setting process for mental health policy making in Assam.

*Method:* A document review was conducted, along with semi-structured interviews of key individuals identified from a stakeholder analysis. Veneklasen's expressions of power and Gaventa's power cube encompassing the levels, spaces, and forms of power, and their interrelationships, were used to analyse the data.

*Results:* First, users of mental health services and the community have influence but need to be empowered to capitalise on this potential. Hence, 'community' was added to the global, national, state (or local) levels of the power cube. Second, many interactions between the levels were identified and, due to the federal system in India, the balance of power between national and state level was found to be particularly important. Third, power was often considered to be 'visible in form', the key example being spaces in which key researchers and practitioners were invited to contribute evidence, invitations associated with length and significance of experience. Fourth, some stakeholders did not immediately recognise their already enacted power to influence policy but gave many significant examples of having done so. Finally, individuals often viewed their power and influence through being part of a team, reflecting the importance of collective action, co-creation of the agenda, and caution against researchers over-emphasising their own role.

*Conclusion:* Understanding how power affects mental health policy agenda setting in Assam will help facilitate the use of evidence. Findings suggest that for the prioritisation of issues that reflect community needs, evidence should also be translated to the community, as well as policymakers. Widening access to evidence will help create a more equal distribution of power, and enable greater, pro-active, participation of the community in the policymaking process. This will lead to an agenda that is co-produced and reflects the needs and demands of the community.