The movement for global mental health calls for rapidly scaling up mental health services in low- and middle-income countries. This call has mobilised new resources, logics and solidarities while also igniting polemical scholarly debates about culture and power in the psyences. Over the past 10 years, Nepal has become a key site of global mental health research and practice. In the wake of the devastating 2015 earthquake, advocates worked to channel unprecedented financial and political support for mental health towards the sustainable expansion of services. My thesis charts these efforts to ‘scale up’ from the vantage point of an earthquake-affected community in the Himalayan foothills, foregrounding the perspectives of frontline clinicians, service users, and their families. It explores how the difficulties, necessities and possibilities of care in this environment shaped and were themselves shaped by newly introduced community mental health services.

My analysis draws attention to the way mental health care is being reimagined in and through the project of scaling up. I scrutinise the complex translations involved in bringing what mental health services have to offer into line with the desires, hopes and obligations of people on the front line of care in rural Nepal. I highlight disjuncture in the way mental health care’s object is enacted at the level of policy discourse, in clinical practice by newly trained paraprofessional clinicians and in the lives of service users and their families. Ultimately, I argue that the project of scaling up not only allows for but may depend on ‘mental health’ being different things in different places. Each chapter adds
to our conceptual toolbox for producing the kind of experience-near, contextualised analyses that this new terrain calls for; together they amount to my vision for a ‘peopled’ critical anthropology of global mental health.

**Keywords:** care, global mental health, medical anthropology, psychosocial counselling, humanitarianism

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