

[00:00:00]

**John Moe:** A note to our listeners, this episode contains mention of suicide.

**Music:** “FIX ME” from the album *Surviving the Dream* by FIDLAR.

*‘Cause it’s too hard to fix me*

*I know you’ll try*

*And if you fall in love*

*Then just give it time*

*‘Cause I’m the type of crazy that’s not the cute type*

*No, I get high just to get by*

*‘Cause it’s too hard to fix me*

*I know you’ll try*

*(Music fades out.)*

**John Moe:** That’s a song called “FIX ME” from the band FIDLAR off their new album, *Surviving the Dream*. I think it’s important to note that both the song title, “FIX ME”, and the band, FIDLAR, are written in all caps, which I think you can tell by the music.

It’s *Depresh Mode*. I’m John Moe. I’m glad you’re here.

**Music:** “FIX ME”.

*I’m in the bathroom, and I’m crying*

*I don’t know why I keep on lying*

*I’m in the ocean, and I’m surfing*

*I don’t know how to keep on living*

*But I keep trying*

*(Music fades out.)*

**John Moe:** FIDLAR from Los Angeles is known for short, fast, intense songs. They've been together since 2009, put out four albums, counting the new one. They've toured a lot, playing intense live shows for intense, dedicated fans. They've appeared on *Jimmy Fallon*, on *Conan*, a bunch of places.

The voice you heard there was lead singer and guitarist Zac Carper. And if it sounds like Zac has been going through some stuff? Well, yeah, he has. You and he have come to the right show. FIDLAR's name is an acronym. It stands for Fuck It, Dog. Life's a Risk. And Zac Carper has definitely engaged in risky behavior with his health over the years, using a wide range of substances including heroin, methamphetamine, crack. He's been to rehab. He's gotten cleaned up and been in recovery. His relationship to substances now is a little more, I guess, in the gray area. I'll talk about that in a minute.

Not long ago, Zac received a diagnosis of bipolar disorder type two. That's the type of bipolar where you don't get full-fledged mania—the very noticeable kind that often results in arrest and involuntary commitment—but you do get hypomania, a milder form that can nonetheless have a huge effect on your life and the lives of people around you. Along with, also, depressive crashes. Bipolar used to be referred to as manic depressive disorder. Now people say bipolar disorder.

Zac has been trying to make sense of his disorder, his mental health, his habits, and his life for a while now, and I thought it might be helpful for you to hear about that, even if you aren't in a garage rock punk band. And maybe you are in one of those. I don't know. One of the things Zac has tried is EMDR therapy: eye movement desensitization and reprocessing. You might have heard of that. You might not fully understand it, so I'm going to unpack what EMDR is a bit later in the show. But first I talked with Zac Carper, just before FIDLAR headed out on a big tour to promote their new album.

**Transition:** Spirited acoustic guitar.

**John Moe:** I understand that fairly recently, you received a diagnosis of bipolar disorder.

*(Zac confirms with a chuckle.)*

What led to that being diagnosed? What led you even to looking into whether that was the case?

**Zac Carper:** Well, that was—I've been going to therapy for the past couple years, and then the way—I remember I was trying to go... I was trying to talk about the creative process and how I write songs and what happens when I write songs, and it just kind of correlated to a lot of things that bipolar was. I just always saw it as a bad thing, so I was always scared to open up that box. But I guess it's like, not—I mean, it's like bipolar two or whatever. They call it hypomania, or hypomanic or some shit.

So, whenever I get into something, I get super stoked. And then it's like fucking three days later, and I got like three hours of sleep. *(Chuckles.)* You know? Like.

**John Moe:** How long has that been going on for you?

**Zac Carper:** It's been going on forever! I think that like—it was the first time when I was like able to admit to myself that's what happens, you know? Or it's just the first time I was able to look at it and be like, “Oh shit. Yeah, this is what happens.” And I also think it's gotten—I don't want to call it worse, because it's not worse, you know. It's just gotten more so as the older I got.

**John Moe:** Mm. What's the difference between worse and more so?

**Zac Carper:** I just notice it more. That's what it is.

[00:05:00]

It's probably because I'm not like on meth and heroin too. (*Chuckles.*) Because that was a big factor in not knowing what it was. You know what I'm saying?

**John Moe:** Yeah. So, does the hypomania, that kind of hyper fixation that you talked about—does that predate your time using substances?

**Zac Carper:** I think so. I would always notice when I would be recording like a song when I was like a teenager or something. I always related it to riding a surf. Like in surfing, you're just riding a wave. My dad used to always say, “You never remember a wave.” Because once you get on, and then the next thing you know, you're off. And you're like, oh shit, what happened? You know?

And I guess that's what people call like flow. And that's what I think he's talking about. So, when I write a song, sometimes I'm just like—four hours go by, and I'm just like, oh shit, what just happened? You know?

**John Moe:** Yeah.

**Zac Carper:** And that's always happened to me when I was like a kid, teenager. It really started only when I started writing.

**John Moe:** When was that?

**Zac Carper:** I think I wrote my first song when I was like 12.

**John Moe:** Uh-huh.

(*They chuckle.*)

What was that about? Do you remember the song?

**Zac Carper:** I have no idea! I mean, I remember the melody. I do remember it. I don't know what it's about. It's probably about—I don't know what it's about.

**John Moe:** When did drugs enter your life, in terms of using? And then later, of using a lot more?

**Zac Carper:** I don't remember the first time I got high, but it had to have been weed or getting drunk. (*Chuckles.*) You know? But it kicked off really in like high school with ice. We had the ice epidemic in Hawaii. Like, it was just everywhere was meth.

**John Moe:** Ice is another term for meth?

**Zac Carper:** Yeah. Yeah. Crystal meth. And yeah, it was just—it was easier to get ice than it was to like buy beer, get somebody to get you to buy beer. You know, it was just everywhere. And then cocaine, crack, blah, blah, blah, blah. Just go down the list.

**John Moe:** All in Hawaii, all in high school?

**Zac Carper:** Yeah. And then it really kind of ended in Hawaii for me with oxys. We would take our ice, and we would sell it to the vets. We'd trade them for their scripts. Because we had like a big veterans community, and they would get these like Oxycontin prescriptions. That was like kind of the beginning of that phase. And we would just trade them.

And then that's just like when it—you mix an upper and a downer together, you're gonna do some stupid, crazy shit that's gonna make you get in trouble. (*Laughs.*)

**John Moe:** And why were you doing it? Was it the fun, the thrill of getting high? Or was it just that everybody was doing it? Or was it the addiction being fed?

**Zac Carper:** Towards the end, you're just feeding the addiction. That's really what it is. At the beginning—you know, you're just fucking running away from feelings. Didn't know how to feel my shit. So, I would run away from it as much as possible. You know? Whether it's sadness or anger or—I don't know; even like joy or some shit. You just get scared of your feelings. So, you run away from that. And the way I did it was with drugs and alcohol.

**John Moe:** And then where did music fit in with all that? Where are the overlapping timelines here of adolescence, drugs, and music?

**Zac Carper:** I mean, music, I don't know how that kind of came into my life. It was probably from my grandpa. My grandpa was a professional musician. And I don't know, it just kind of spoke to me in a different way than anything else did. Before music, it was like computers. Before computers, it was drawing. Like, it's just all kind of—something with the kind of hands, you know, and just like the thought process that I just loved.

**John Moe:** That's interesting, because it seems to echo what you were saying about bipolar two, like this hyper focus of, you know, latching on to something. It sounds like you did that with computers and with art and with music as well.

**Zac Carper:** Yeah, yes. I just—I don't know how to do anything else. *(Laughs.)*

**John Moe:** Would you have the other side of bipolar? Would you have the crashes?

**Zac Carper:** The crash? *(Laughs.)* Oh, yeah.

**John Moe:** What was that like?

**Zac Carper:** I'd have the crashes for sure. Those were bad. I'd have bad crashes. They started manifesting physically, and that's when I started going to therapy. Because I was like having intense like chronic pain—back pain, leg pain, sciatica. Just—it started just coming out physically, you know. And that's when I like started going to therapy.

[00:10:00]

And I was just like, “Something is happening, and I need to fix this.” You know what I mean? Because I was just always in like physical pain. And then we just started opening it up, and it was really interesting. It was pretty wild.

**John Moe:** Huh. So, you would—so, all your life you've had the kind of hyperfocus, hypomanic episodes, and then those would be followed by crashes that would affect you physically?

**Zac Carper:** Yeah. I would just get so sad that it would—shit would start hurting. And then I just started noticing the dialogue in my head was just so bad, and I wouldn't get out of bed for days. And I wouldn't leave the house. And I just wasn't taking care of myself. You know what I mean? Like—yeah.

**John Moe:** Yeah. Was the—is there a connection between the substance use and this bipolar disorder that wasn't diagnosed until recently where the substance is a way of medicating, self-medicating?

**Zac Carper:** I think so. That's what kind of, you know—I think that's like—if it's the easiest answer? *(Laughs.)* I'm just going to—I'm going to lean into that. You know what I mean? Like, just because I don't know what else it could be. Really.

**John Moe:** Yeah. When did you make a change in terms of the substance use?

**Zac Carper:** I got sober when I was like 27. And I was sober for like four or five years, fell off the wagon. Now I'm like perpetually like off and on. You know, I've been trying to stay sober, but I fall off the wagon every now and then. And it is what it is, but the difference is I just know when to like pick myself back up right now. Like, before, I think just because I was

doing a lot heavier—like, whenever I would relapse, it would be on like a lot heavier substances. And now I would like relapse just on drinking or whatever, you know? It is just the only job in the world that the people hiring you just go, “Here's a bunch of booze. Go do your job.”

*(They chuckle.)*

**John Moe:** We'll put it backstage.

**Zac Carper:** Yeah. “Oh, you want to hang out here all night and like, you know, meditate and shit like that? Oh, here's like three bottles of booze.” And you're just like, aw man! All your friends are with you, and you're just like, ah. But yeah. So.

**John Moe:** Yeah. I'm curious about this with people—especially with alcohol, because I know the way of thinking that, you know, “No, I can never have another drop. It can't ever pass my lips as long as I live.” And then I know other people who've had an addiction to alcohol, and they have the occasional glass of wine after a while. And like is there a divide in the way of thinking in that community about what constitutes sobriety?

**Zac Carper:** Oh yeah. 100%. *(Laughs.)*

**John Moe:** Yeah?

**Zac Carper:** But it's so personalized that like—I don't know. Some people need to stay sober completely. You know, one of my best friends, he cannot drink anymore. And it's just like, that's kind of where he's at. You know?

**John Moe:** What happens if he does?

**Zac Carper:** Oh, dude, *(chuckles.)* I've never seen somebody go down that quick before. Just ends up smoking crack again, shooting dope. Like, all within a week, it usually happens. I'm like, “Whoa, dude. That is quick.”

**John Moe:** Yeah, no, I had a—

**Zac Carper:** Some people just have that.

**John Moe:** Yeah, I had a friend who said if he has a glass of wine, the next thing—or he has a sip of wine, the next thing he'll be aware of is a bathroom coated in wine-colored vomit that that he's put up there on the wall. It's just—it's an inevitability.

**Zac Carper:** *(Laughing.)* Wow, that's awesome.

**John Moe:** Yeah. Well, not really. *(Laughs.)*

**Zac Carper:** Yeah, that's what I mean.

**John Moe:** Well, so then how are you managing the bipolar? Like, how does that intersect with your life and with your creativity and with touring and with everything else?

**Zac Carper:** Yeah, bro. *(Sighs.)* I've been trying to figure it out, honestly. The—I have been trying out different mood stabilizers, you know, through my psychiatrist. But it's really tough to figure it out right now in my life because of touring so much. I don't have like the luxury to be like, “Oh, just take this for a month and see how you feel.” It's like I can't have a fucking breakdown on the road, you know? *(Chuckles.)* Like, so I just do a lot of journaling.

[00:15:00]

Journaling has like fucking saved my life like crazy. I try to work out a bunch, you know. Just like move around. And yeah, like honestly, those are the two things right now.

**John Moe:** So, you're not doing meds at all for the bipolar?

**Zac Carper:** I want—like, I'm trying to, but I just don't have time right now to—like, I have to set aside like a month of like no touring and shit like that. So, I got prescribed a something Latuda or some shit. It's like a minor mood stabilizer or some shit. And it just tweaked me out a little bit too much. Like, and then I was on—like, I was taking it while I was on the road. And I was just like, “Oh, I think I'm having like a little bit of a freak out.” You know?

**John Moe:** What was happening? What do you mean by tweaked out?

**Zac Carper:** It was like kind of—when I say tweaked out, it was kind of like numbing me in a different way that I haven't felt before, you know? I couldn't remember my lyrics on stage. I couldn't like—I couldn't like get into the zone I need to get to when I'm playing a show.

**John Moe:** What is that zone? ‘Cause you have a very unique job. *(Chuckles.)* I think a lot of people haven't—you know, haven't done what you do. What is that like? What's the state you need to be in, in order to do your work?

**Zac Carper:** I just have to be like completely now. Like, completely now. And I don't think of anything else except what's happening right then and there. Sometimes thoughts will come in, but hardly any. Like, that's kind of like my meditation in a weird way of just like playing a show or like riding a wave. You know, it's very similar. Like, that zone that you get into like writing, what I was talking about. It's that for an hour.

**Transition:** Spirited acoustic guitar.

**John Moe:** Just ahead, more with Zac Carper about balancing the bipolar, the meds, having a demanding job, and trying to have a life. As we go to break, here's another track from FIDLAR's album, *Surviving the Dream*. A song called “HURT”.

**Music:** “HURT” from the album *Surviving the Dream* by FIDLAR.

*I know I'm not perfect*

*And I change my mind too much for you to understand*

*I know I'm not worth it*

*That's why I'm getting high*

*So much that I can't even stand*

*'Cause life moves fast*

*If you don't watch it, it's gonna...*

*(Music fades out.)*

**Transition:** Gentle acoustic guitar.

**John Moe:** Back with Zac Carper from FIDLAR. In this segment coming up here, Zac mentions John E. Sarno. Sarno was a professor at New York University School of Medicine who wrote a lot about the mind-body connection, particularly the psychological underpinnings of things like back pain and neck pain.

Tell me about the journaling. What's your approach to it? What do you write? How do you write? What goes into it?

**Zac Carper:** It's kind of evolved, you know. Or like, I kind of have my own version of it. But it's like a cross between the—like, I was saying I was developing like chronic pain. I started reading that Johnny Sarno guy, *Healing Back Pain, The Mind-Body Prescription*. And he talks about it's stuff that you—your feelings are making things physical. And he talks about journaling, and he says journal every day for 20 minutes.

And I started there, and then I was like, “Oh wow, this is really helping with my pain.” It was really weird. It was just stream of consciousness. Just wake up, blah, blah, blah, blah, blah, whatever, da, da, da, da, da, da. And then I read that book *The Artist's Way*. And she talks about that journaling three pages a day. So, I do three pages, but then when I don't know what to say—because sometimes I'll just write and write, and I just don't know what to say—I just say, “I can do this, I can do this, I can do this, I can do this, I can do this, I can do this.”

*(Laughs.)* I just do like a little mantra, and then I'll pick up—I'll be like, okay, and start writing again.

**John Moe:** Do you need to be in that same riding the wave state in order to write music?

**Zac Carper:** I don't need to be.



**John Moe:** Okay.

**Zac Carper:** I can do it—like, I do it in steps. Like, sometimes I'll just write a couple of lines of lyrics, you know? Sometimes I'll just think of words, and sometimes I'll think of melodies and shit. And then I'll piece it together later.

**John Moe:** So, are you—as we speak now, you're getting ready to go on tour. And how do you prepare—how are you preparing for this tour? I'll put it that way. Because I know you've been touring for many, many years; you've done a million shows.

[00:20:00]

But how is this preparation different?

**Zac Carper:** I'm trying to get as much sleep as possible. *(Laughs.)*

**John Moe:** Yeah. How are you planning for how it's going to be out on the road?

**Zac Carper:** There's not much you can do about the road. The road happens, and you can't plan too far ahead, because shit just happens. So, I mean, I'm just trying to eat healthy and exercise and do my journaling and—you know.

**John Moe:** And you're choosing not to go with any of the meds that they gave you, because of the state that that puts you in?

**Zac Carper:** Yeah, I did this last—I just got back from Australia yesterday, and I did it without the meds and stuff like that. And it was—it works. It works. I can do it. I just gotta... I gotta get more sleep. That's what it is.

**John Moe:** Yeah. Are you able to kind of bank sleep before you go? Like, because you're not going to get as much on the road?

**Zac Carper:** No, no. No, no, you can't. But I'm just trying to savor it, I guess, you know?

**John Moe:** Yeah. Do you think—I mean, having learned now about bipolar two, do you think it's more common with people than they realize? Do you think there's a lot of undiagnosed bipolar two cases out there?

**Zac Carper:** I think 100%. 100%. Especially with like the hypomanic creative thing. I mean, I think a lot of creative people are like that. It's just figuring out how to manage it. You know?

**John Moe:** Yeah. Yeah. Do you manage it differently since your diagnosis? I mean, the diagnosis was only a few months ago, right?

**Zac Carper:** It was like a year ago. I mean, now that I know it's real. You know what I mean? I'm just like, okay, I don't—I'm not like tripping out on like, "Why am I waking up like every hour just singing this fricking song in my head that I've been making?" You know what I mean? Like, it's just I know what's happening, so I'm able to like, alright, just gotta figure out how to come down off this cloud.

**John Moe:** Yeah, yeah. Are you—? I mean, it's really interesting to me that, you know, you were given the diagnosis—and diagnoses are—people think that they're a lot narrower than they are. Because, you know, anybody's mental health, anybody's mental framework is very, very complicated and not always easily summarized in a word or two or in some acronyms. Do you—? It's interesting to me that you were kind of presented with this, and then you chose not to go down the route of meds, but to be really conscious and to kind of manage it.

And we're not recommending that anybody do one or the other, obviously. Do you think that's the long-term plan for you? Is that you'll skip the meds and try to get this done through journaling and mindfulness?

**Zac Carper:** That is the goal. (*Laughs.*) That is the goal, but I need to see the other side first.

**John Moe:** Mm! What other side?

**Zac Carper:** Which is like, okay, me with meds (*laughs*) and being able to do what I do. Like, I need to see—if that does work, then great. But... it's funny, because I'm so scared to change my brain chemistry, but I was like willing to like shoot up smack and meth. You know? And take a bunch of different kind—DMT and shit like that. But like, I'm scared of head meds. I don't know why.

**John Moe:** You're scared of the ones that come from a laboratory and not from a guy on the corner.

**Zac Carper:** Yeah. Yeah. Yeah, exactly. Exactly.

**John Moe:** Wow. Why is that?

**Zac Carper:** I don't know. I don't know. Because the ones from the guy in the corner are way more fun.

(*They laugh.*)

But yeah, I like I said, it's just been—once I got it diagnosed, it was like, okay, now I know. I know it's gonna take me a while to like get on the med train. But I'll figure it out.

**John Moe:** Well, when are you planning to try the meds then?

**Zac Carper:** (*Sucks in a breath through his teeth.*) I don't know.

*(They chuckle.)*

I'm trying it out right now with just the mindfulness and exercising and, you know, the journaling and stuff like that. Like, I'm trying to do it that way.

**John Moe:** Okay. How's that going?

**Zac Carper:** It's going good. It is going good.

**John Moe:** Do you still get hypomanic?

[00:25:00]

Do you still get crashes?

**Zac Carper:** Usually on tour, not so much. You know? Touring is such a routine-based thing that I think it really helps me just be like, “No, I got to go to bed right now.” You know? And to me going to bed sometimes is just like learning how to just be still. You know, maybe if I'm not sleeping, I'm just kind of like relaxing my body at least. It's better than not, you know? So, yeah.

**John Moe:** Do you get the crashes at all?

**Zac Carper:** Not so much on tour. It's only when I'm like at home writing or being creative like in any way, kind of. *(Laughs.)*

**John Moe:** Do you still get those physical manifestations that you were talking about with the crashes?

**Zac Carper:** They're getting a lot better. They are getting a lot better. So, it's just a combination of it all working together. You know? Especially the exercise and shit is just—I don't want to do it. But when I do it, I feel so much better.

**John Moe:** Yeah. Can I ask how old you are now?

**Zac Carper:** I'm 37.

**John Moe:** You're 37. What's a tour like for you and your band now, compared to what a tour was like when you were like in your early 20s?

**Zac Carper:** Wow. Definitely less partying, you know. We're all like older. And learning how to say, “No, I'm gonna go to bed,” or something. *(Chuckling.)* You know what I mean? Like, maybe I don't need to go to that bar. You know, shit like that. I'm... my process is a little different. 'Cause I can't really hang out with that many people after a show, just because I can't stay up all night talking. I have to sing the next day. And that's how you lose your voice. You lose your voice by talking all night.

**John Moe:** Yeah. And your singing is pretty athletic too. (*Chuckles.*)

**Zac Carper:** Yeah. I scream. I bark. I don't sing. I bark.

**John Moe:** Yeah. Yeah. You talked a little bit about having tried a bunch of things. Like, you tried yoga; that was hard. You tried meditation; your mind was too fast. Are you trying to get back to those things, or have you written those off entirely?

**Zac Carper:** No, no, I do my stretches and yoga stuff. I do meditate. I try to do this like meditation every day. I don't just like give up on it. I just—you know, I go through phases of it where I'm just like, okay. This is going to help me.

**John Moe:** There's a lot of arguments, back and forth. And you know, I've been doing podcasts about mental health for many years and with a lot of artists of all sorts. And this has always been a subject that people have strong opinions about. Which is: do you fear taking the meds, balancing out the bipolar, getting to kind of a more even keel—do you fear that will hurt your creativity or your creative output?

**Zac Carper:** Yeah, 100%. But! I'd rather just make less music (*laughs*) and be happy. But that—you know, it doesn't mean that I'm gonna be happy if I take the meds or whatever, but I'm kind of at that point. But I do think it might, you know! But it might not. It might make it better! That's what's crazy. I didn't think about that. It was just like—it might make it actually better.

And who knows? Like, what's the metric of “it that's gonna fuck up the creativity”? What, less output? Like, less things? You know what I mean? Or is it just like your stupid little metric you make up in your head that's like, “Oh, this is good, this is bad.” Like, who fucking knows?

**John Moe:** Right, right. How has like—‘cause you've been on a journey for a while. I mean, everyone's on a journey all the time with their mental health, but yours has included some definite hills and valleys and some real adventures with the substances and with the bipolar. How has that affected the relationships in your life?

**Zac Carper:** (*Blows air through his lips.*) Probably horribly, John. (*Giggles.*) Yeah, probably horribly. I mean, it's...

**John Moe:** Yeah? Is it hard to get close to people?

**Zac Carper:** It is! It is. It's hard to like connect.

**John Moe:** What do you do about that?

**Zac Carper:** And it's hard to not trust, but—I don't know. Yeah. Like, get to know people. I do like to get to know people too. I like to meet people. I like to hang out and talk, you know. Like, it's just a weird—

[00:30:00]

Like, it's such a crazy lifestyle. Like, we make so many friends being on the road, but we only see them once or twice a year, you know? Like, we're hardly ever home, so it's hard to nurture those relationships at home. It's just a wild—we're like circus people. Carnies, a bunch of carnies.

**John Moe:** Why do you keep doing it?

**Zac Carper:** Oh man, I love it. I love playing shows. I write music—yeah.

**John Moe:** You love the circus life?

**Zac Carper:** I write music to play shows. That's why. It's like... that's the thing, for some reason. Playing a show. Entertaining, I guess. You know?

**John Moe:** Tell me about that. Because I haven't been to one of your shows yet. Now I really want to go. But what is that experience for you, and why is it so meaningful? Because it seems like very intense shows that you put on, I'm sure.

**Zac Carper:** It's like an hour-long wave. I didn't really start falling in love with shows until FIDLAR started. And it just feels very cathartic. It feels very good to play shows.

**John Moe:** Is it a break from everything else? Is it getting out of your mind a little bit and taking a little leave of absence from your brain?

**Zac Carper:** 100%. It's a break. It's also just like... I don't know, you just—you literally—yeah, like what you're saying. You just literally can't think of anything else when you're doing it. You know?

**John Moe:** As I said, I listened to the new album. I drove all around St. Paul with it today. It was a really fun ride. I really enjoyed it. Is there a song on the album that's a little more special for you than the others?

**Zac Carper:** Um yeah, there's—like, the second song is called “LOW”. And it was like after—I remember writing down the lyrics after doing EMDR. Have you ever done EMDR?

**John Moe:** Oh, I have! It's amazing.

**Zac Carper:** Bro! That tripped me out sooo much! That was crazy. And I just remember writing down some lyrics after that. And I was like, wow. And I just used those lyrics for that. And it was just such a fun song to make.

**John Moe:** Yeah. Okay. Well, we'll play a little snippet of that as we go out here. But Zac Carper, thank you for sharing your story with us. And thanks for making the music and putting on the shows that you do. I think you help a lot of people.

**Zac Carper:** Oh, dude. Thank you, John, for having me.

*(Music fades in.)*

**John Moe:** Zac Carper's band FIDLAR, all caps, is on tour now. Their latest album is *Surviving the Dream*. This song is called "LOW", all caps.

**Music:** "LOW" from the album *Surviving the Dream* by FIDLAR.

*I don't know what I'm feeling*

*I'm a mess*

*I don't know what I'm feeling*

*I digress*

*But I don't think I need this*

*(Inaudible) just can't believe it*

*I'm fucked up every other weekend*

*I'll take drugs, but only when I'm drinking*

*I saw God, but nothing to believe in*

*(Inaudible) I don't wanna leave it*

*No*

*(Music fades out.)*

**John Moe:** Zac mentioned going through EMDR therapy there a minute ago. And you might be confused about what that is. Even if you've heard about it, you might be confused, because it is some kind of wild stuff.

**Music:** Spirited acoustic guitar.

**John Moe:** We'll unpack it. You can see if you ever want to give it a shot. A User's Guide to EMDR, after the break.

**Transition:** Gentle acoustic guitar.

**John Moe:** Hello, welcome back. A little story for you. I've written and spoken a lot about the death of my brother, Rick. He died by suicide in 2007. In the aftermath of that death, a whole lot of things happened. One was that I decided to push for awareness and openness about mental health—drag it out of the darkness and shame into the healing sunlight. And that's why a lot of my work exists. That's why this podcast exists.

Another thing that happened as a result of Rick's death was trauma—the trauma of losing him when I didn't even know he was sick. But there was a particular trauma too, a specific one: the sight of Rick in an emergency room hospital bed, alive but barely, and fading fast after it was already too late. He didn't look like himself. It was the last time I saw him.

And it was like that image, unfortunately, burned itself onto the back of my eyelids. I couldn't shake it. I started to think about it more and more, see it in my mind more and more in the months and years to come. It was messing with me, this post traumatic stress. Finally, and it had been a few years by this point—

[00:35:00]

I looked for help. And my therapist at the time asked if I'd heard of EMDR, eye movement desensitization and reprocessing. No, I hadn't. And as she described it to me, it sounded like the silliest, most pointless, most woo-woo, pseudoscience ball of crap I'd ever heard of. And I agreed to give it a try. Because at worst, it would be hilarious. And at best, maybe it would work. And maybe I would have some improvement. Dear listener, I was fully expecting the first outcome. The hilarious one. That's not what happened.

Let's back up. EMDR was developed by the American psychologist Francine Shapiro in 1987. The first clinical trials were in '89. Originally intended for post traumatic stress disorder, but it has been increasingly used in other situations as well. Here's how it works. First, you meet with your therapist or other healthcare provider and talk about your history—including identifying intense, upsetting memories that you may be struggling with. You'll zero in on a particular specific memory. Then there's plenty of time given to talk through that memory—what it felt like, looked like, all the details.

Holding that memory in mind, you engage with what's called bilateral stimulation. Originally, and still a lot of the time, that means eye movements. You're guided to focus on one point, and then another point. One point, then the other. One point, then the other. It can also be done with tapping. When I did EMDR, they used these two little paddles. I held one in each hand, and they would alternately give a little buzzing, tapping sensation. One then the other, one then the other. EMDR can also be done with sounds. But it's not just eye movement or tappers or sounds. It's therapy. It's talk therapy.

As this bilateral stimulation happens, you and the therapist are exploring alternate meanings to associate with the traumatic memory. You are desensitized to the meaning you've been carrying—the D in EMDR—and then you can process the memory again—reprocess it, the R in EMDR. Then you and the therapist do a body scan. Are there any somatic distress responses? The body having any disturbances? If so, it's back to the bilateral stimulation to address that.

Now the way EMDR is conducted some places, it's one big session, and then it's over. One and done. Other times it might mean several sessions. 6, 10, 12 sessions, each about an hour/hour-and-a-half. It is intense therapy. One might consider not scheduling anything else the rest of the day.

Francine Shapiro, who developed EMDR, said it works because the brain can't completely process traumatic memories, that it stores them messily instead. There are other theories that by associating the memories with something safer—like a therapist's office and a kind therapist—that the danger of the trauma is reduced. Another theory says that the eye movements trigger a sense of reorienting yourself, and you're more capable of seeing both threats and opportunities.

There isn't a great deal of hard, proven science behind any of this. Studies have shown it was significantly more effective than a placebo. However, there have also been studies where EMDR was conducted but without the eye movement or bilateral stimulation, and the results were just as effective. The criticism here is that this is just good old fashioned cognitive behavioral therapy with a splash of pseudoscience thrown in.

So. What's the success rate? How often does it work for people? Well, I see the figure “90% effective” come up an awful lot online, although it's good to be aware that some of those figures are from people who provide EMDR sessions and services. When I did EMDR, I decided to buy in wholeheartedly. Whether it worked for me or not, I would commit to the bit. And I'm happy to say that for me, this thing worked like a champ—or something worked like a champ.

I took this trauma, I took the meaning I had associated with it, and I reprogrammed it to something that would let me get on with my life in as healthy a way as I could. Never before, and never since, has something worked so dramatically. And while I still remember the horrible experience and horrifying thing that I saw, I can now move on and function in the world. Did I want it to work? Yes! Did I perhaps will it to work, because I bought in so much?

[00:40:00]

Very possible. Did the tappers fix my mind? I don't know. Was it a placebo all along? I don't know that either.

But it worked. Or my therapist worked. Or I worked. I got out of hell and got to a better place. My advice to you? Look into it. Be skeptical. But if you try, give it a real shot.

**Music:** “Building Wings” by Rhett Miller, an up-tempo acoustic guitar song. The music continues quietly under the dialogue.

**John Moe:** Our program exists because people donate to it. That's the only reason that we can make these shows that can go out into the world and hopefully help people, inform them, make them feel less alone. If you've already given to the show, thank you. If you haven't, it's easy to do. Just go to [MaximumFun.org/join](https://MaximumFun.org/join), find a level of giving that works for you. Maybe



that's 5 bucks a month, maybe it's 10 or 20. I don't know, your call. And then select *Depresh Mode* from the list of shows. Be sure to hit subscribe, give us five stars, write rave reviews. That gets the show out into the world where, again, it can help people.

The 988 Suicide and Crisis Lifeline can be reached in the United States and Canada by calling or texting 988. It's free. It's available 24/7.

Our Instagram is [@DepreshPod](#). Our Twitter is also [@DepreshPod](#). Our newsletter is available on Substack. Search up *Depresh Mode* on that. I'm on Twitter and Instagram, [@JohnMoe](#). Our Presbies group is on Facebook. You can look that up. A lot of good conversation happening there. People talking about the show, people talking about their lives, people supporting each other. Our electric mail address is [DepreshMode@MaximumFun.org](mailto:DepreshMode@MaximumFun.org).

Hi, credits listeners. Thank you for listening to the credits. I'm honored. Sincerely, there's no joke here. Just thanks. *Depresh Mode* is made possible by your contributions. Our production team includes Raghu Manavalan, Kevin Ferguson, and me. We get booking help from Mara Davis. Rhett Miller wrote and performed our theme song, "Building Wings".

*Depresh Mode* is a production of Maximum Fun and Poputchik. I'm John Moe. Bye now.

**Music:** "Building Wings" by Rhett Miller.

*I'm always falling off of cliffs, now*

*Building wings on the way down*

*I am figuring things out*

*Building wings, building wings, building wings*

*No one knows the reason*

*Maybe there's no reason*

*I just keep believing*

*No one knows the answer*

*Maybe there's no answer*

*I just keep on dancing*

**Ruthie:** This is Ruthie in Baltimore, Maryland. And other people's feelings are not your responsibility.

*(Music fades out.)*

**Transition:** Cheerful ukulele chord.

**Speaker 1:** Maximum Fun.

**Speaker 2:** A worker-owned network.

**Speaker 3:** Of artist owned shows.

**Speaker 4:** Supported—

**Speaker 5:** —directly—

**Speaker 6:** —by you!