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John Moe: A note to listeners: suicide is mentioned in this episode, not in any kind of graphic or descriptive way.

Hi, I'm sitting here at a table, computer open, cup of coffee in front of me. And if this goes well, you will be better able to handle your mental health heading into 2026. So, here's what happened to me.

The holidays came around, and I have been working like really hard for a while now. Nights, weekends. This show, plus *Sleeping with Celebrities* on Maximum Fun—which I host; look that up. And *In This Family*, a show I produce. Look that up too. Then I've been teaching, which I love. And it's a ton of work. Been putting in some time on some other mystery projects. I'm not burned out, but I could see it from here.

And this is kind of a dead zone time of year. You can't book people as guests around the holidays anyway. Nobody's around. Nobody answers their email. Thus, it was a perfect time to take some time off. And we have! We reran a Mike Doughty episode last week, here on *Depresh Mode*. It's awesome. Listen to that episode. So, I intended to take more downtime—chill time, nothing time, read a book time, read the book that my mother-in-law got me for Christmas time. Maybe a jigsaw puzzle!

But I kept thinking. It's the new year, you know? Welcome to 2026. 2026?! Damn! And there actually kind of is something that I really desperately want to talk with you about, that I'm driven to talk with you about. Yes, you. Now you're looking around. “Is John talking to me?” I am. You, there. You, specifically, personally. I'm here to talk about that thing. It's *Depresh Mode*. I'm John Moe. I am glad you are here.

Transition: Spirited acoustic guitar.

John Moe: I'll begin by offering a very unsexy thought—this thought that won't initially hit you as a revelation—and then I'll elaborate, because I think it will help. And all I want to do in this space is help you. So, here's the thought. Two things can be true at the same time. And yeah, I'm building up to something bigger here, but maybe we can start by wrapping our heads around that idea. Just that. That two things could be true at the same time. Your favorite actor can be a great actor, and make a movie that is just so bad, and they're terrible in it. And both are true at once! It's not that they were always secretly terrible at acting and are now exposed; nor is it that this stinker was a secretly brilliant film, and they were secretly brilliant in it. No, it's both. They're great. Movie sucked.

Let's get a little more personal. You can love someone and be furious at an action they took or something they said. You can forgive them if you want. You don't have to. Don't let anyone tell you that you do. And you can still be upset! Maybe that one resonates with you coming out of the holidays with family. I don't know.

You can have significant memories of trauma in your childhood. And you can recall very sweet moments of love, and fun, and care. And both things are true at the same time! Neither negates the other. It's not a binary that you had a good or bad childhood. One side doesn't have to win.

Life is complicated, not simple. I did not come up with this notion of two things being true at the same time myself, mind you. It's been around. It's always been around, of course.

But I came across it while trying to learn more about dialectical behavior therapy or DBT. It's a type of therapy designed for people who feel very intense emotions and need a hand managing that intensity, so that they can manage relationships and interactions in the world, and so they can reduce the risk of self-harm—in all the senses of self-harm. So, DBT teaches you that who you are at present exists at the same time as the idea of change. You accept who you are—what's happened to you, your attributes, your impediments, and talents in your life as it is today—but you're not bound to that. Stay with that a moment here. You are who you are, and all that has happened has happened. And it's not your destiny. It's not all that you will always be.

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It's not the end of the discussion, nor is it going to completely go away. Because at the same time you accept who you are, you accept that change is possible—that it's inevitable, really—and that growth and evolution are possible for you. You, individually. I really wanna make sure that you nail this understanding. I'm probably repeating it a bunch of times, because I'm gonna expand it out in a moment. You aren't stuck being only what happened up to now. And nothing can change it. You also might not want to go under the assumption that something in the future will wipe out all the memories and damage and trauma and joy and experience that you have accumulated to now. You can't be cured of reality. You can't un-ring that bell. Accept who you are and accept the capacity for change—I'd even say the likelihood or certainty that things will change, that you will change. Two things are true at the same time.

Okay. So, all that that I just said? That's all the setup to what I really want to tell you. It's *Depresh Mode*. I'm John Moe. I'm glad—(*cutting himself off*). Okay. I've said that part already. Okay, great.

As we begin 2026 in earnest, things are dire and pretty terribly bad and bleakly ominous for mental health in our society. You may already know that. I don't love telling you that. Gotta anyway. And that's thing number one to hold in your hand. Thing number two to hold in your hand is that things are more hopeful about mental health in our society than you might realize. The future looks bright. I say that not with rose-colored glasses, but as someone who spends the vast majority of my professional time reading, thinking, and talking about mental health. My optimism isn't born of naivete. It comes from hard work, and I know my stuff.

I have examples and anecdotes coming up soon. Don't worry. But please establish this: stuff's bad, stuff's good. Accept the reality, accept the capacity for growth. In a little bit, I'm gonna talk about the capacity for change regarding mental health in our shared world. First, I'm gonna talk about some of the things we need to accept. I'll be honest I wanted to get to the hopeful capacity for change stuff first, because I didn't wanna lose you, but I really have to do the acceptance stuff first. Stay with me though. Okay.

Let's talk about things we need to accept. The facts, the reality of our current political and economic climate are dissonant and corrosive to mental health. *Depresh Mode* is not a political show—or an economic show, for that matter. It's a mental health show. It's a life show. And there are realities of what's going on that need to be faced. The truth of them needs to be accepted—not endorsed but accepted—that affect our shared mental health. I'm not telling you what to believe or who to vote for. Still, let's take a look at what's going on.

Here in Minnesota where I live—where I've made a home and raised a family; a place I love—people of color are scared to go to the grocery store. They're afraid to send their kids to school. Kids are missing out on school, and if they're missing out on school, they're hurting their future. If they're hurting their future, they're harming that of our shared society. Somali families, Latinx families, all sorts of people in our community are terrified right now to participate in our community. It might be the same where you live. Because they don't want to be rounded up. They don't want to be separated from each other. They don't wanna be thrown in prison, shipped out to countries they don't even know.

And the government—an institution that is there to protect people—is doing the rounding up. And now people who are fans of that government seem to be coming after the preschools too—trying to bust in with video cameras. And the government is endorsing this and promising to withhold federal childcare funds. I have a friend who's a public school teacher here in the Twin Cities. And the other day she said, “Kids aren't showing up, because their parents are afraid of ICE.”

And at first I thought, “Oh, well yeah. Winter in Minnesota. Driving can be tricky.” And “Oh. No, not that kind of ice. The other kind of ICE.” The meaning of the word “ice” has been changed In Minnesota. Knowing all this is happening can make you feel like you're standing on shaky ground or even shakier ground than before. And that messes with your mind. It is depressing. It is anxiety-inducing. It might make people lean hard on substances. It is doing damage to mental health.

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Now, I used to figure, with mental health problems, the cause was probably genetic half the time and environmental—you know, your experiences—the other half of the time. I don't believe that anymore. I'm certain there is a genetic factor to a lot of mental health conditions, but I tilt waaay more heavily toward the environmental now. The more conversations I have, the more I learn about mental health, the more stories I hear, I lean much, much harder on that side of the ledger—the environmental side. The turbulent childhood home, the assault, the sudden grief, the thing you can't unsee, the car accident you had. And yeah, the reality of what we're living through: government agents snatching people up at churches and at schools and dragging them out of their cars. That's one of the reasons your anxiety is worse if you have human sympathy. And you do.

If you listen to *Depresh Mode* regularly—and gosh, I hope so—you may have noticed how often I ask guests lately whether a mental health condition is a distortion a person is having or just a rational response to a distressing world. Like, are you inordinately depressed because of—you know—some other factor, or are you responding rationally to the thing that's right in front of you? “Rational response,” the guest usually says. I keep asking, because I can't stop thinking about it.

And it's not just ICE that might be tweaking you out these days, especially if you follow the news. It's layoffs. You know, you never hear about some huge corporation announcing that they're planning to hire an extra 10% for their workforce. It's usually the other way around. You never hear about 3,000 people being laid on. No. No, it's Company X slashing 3,000 people from the payrolls. And they always use that verb, slash—that murderous verb. Slash, good lord!

What is that doing to us to hear that kind of news—and that verb—all the time? And maybe it's happened to you, being laid off. Happened to me a while back. I got laid off. It sucked really bad, was awful for my mental health, did damage that I'm still trying to mend. But even if it hasn't happened to you—and I hope it hasn't—it still told you a story that the ground can give way.

In America especially, we rely on our employer pretty often to form a huge part of our identity. To form ourself. We introduce ourselves by where we work. And in America also, we rely on our employer for our health insurance. We're pretty unique in the world to do that! We rely on our employer for not going broke and for staving off death. We rely on them a lot for a lot of things. And in a climate of massive layoffs, that's scary! Because it takes things out of your hands, and that is scary for your mental health. When you're always scared, yeah, you can get more depressed; you can get more anxious; you can get angry. You can get impaired mental health.

I know that young people are coming outta college right now, the last few years, looking for the jobs that they were expecting. The ones that, we the older people, implied would be there if they went through the time and expense of college. And those jobs aren't around right now. Those people are not finding those jobs. And these are the same young people who got messed up in their school years from COVID, from an upbringing—again—they were promised that they didn't receive. Experiences they expected, didn't get. We hear about these people these young folks who—Whitney Houston was right—are our future. We hear about them not getting married, not having kids, not buying homes.

And of course not, when you think about it—given all that they're facing. But it can feel like the world isn't working like it should, like we set it up to work. No one is doing well anywhere. Young adults especially—a whole generation of young adults—are reeeally not doing well. This is another takeaway I have from hosting this show and hosting shows about mental health for as many years as I have. This generation in particular is messed up mentally.

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And that's dissonance and a rational response to it. Stuff is happening to us—all of us—and it's negatively affecting our mental health. So, the “this is how things are now” part I want you to accept, it's a bitter pill. We live in challenging times, and that is also being reflected in statistics. I don't wanna give a lot of statistics here, because it can be overwhelming, and it really doesn't work in an audio podcast format. You know, I'd probably need a PowerPoint. And you know, (*chuckling*) I don't wanna make a PowerPoint! You have nowhere to see a PowerPoint. So, let's not do a PowerPoint. But maybe some simple stats here.

Over 1,000,000,000 people in the world are living with mental health disorders right now. That's according to the World Health Organization. And that's terrible that so many people are experiencing that. But in truth, it means that 100% of the world is experiencing that, maybe because those people are somebody you know. But still also, the impact on healthcare everywhere is huge in terms of cost, in terms of getting treatment for anything—for anyone getting treatment for anything. It affects the entire system. Depression and anxiety alone cost the global economy \$1,000,000,000,000 a year. The World Health Organization says countries around the world are not coming close to keeping up with investments in mental health care, even given the worsening state of mental health. It's a crisis. It's a huge crisis. Here in the United States specifically, Johns Hopkins University says 1-in-10 people experienced a mental health

crisis in the past year. And that's not feeling some depression or feeling some anxiety. No, I'm talking about a crisis. That's when a person's thoughts, feelings, or behaviors are too much to handle, and they require prompt professional assistance.

Did you have a crisis in the past year? You are so not alone. You have so much company. You have 34.7 million people in that same boat with you. It's a really big boat.

Hey, John, didn't you say you were optimistic a while back? (*Chuckles.*) Yeah, I did. And I am. And we'll get there. And we'll get there pretty soon. But first, (*sighs*) let's talk about suicide. We gotta. I know! But we gotta. I don't want to talk about suicide, but I need to. It's often a result of severe depression. I don't wanna say always; I don't know everyone's mind. But of course, there's a connection. And like any other mental health phenomenon out there, I believe that saying its name and looking at it in the eye, talking about it, all that demystifies suicide even just a little. And if something can be demystified, it becomes less scary, and I know it becomes more manageable. Again, we're accepting some realities here.

Suicide rates climbed 37% between 2000 and 2018, then dropped sharply for two years, then returned to those same high rates during COVID and after. Someone dies by suicide in the United States every 11 minutes. Rates are higher for Gen Z than other groups—those young adults I mentioned. Rates are higher in Black and Latinx populations. 49,000 die by suicide each year in the United States. James Ransom died on December 19th in Los Angeles. He was 46. I didn't know him personally, but I knew his work. He was an actor. He played Ziggy on *The Wire*—amazing show. Ziggy was a character who was infuriatingly annoying but also vulnerable and kind of a mess, and you really rooted for him. James was not Ziggy, of course, but there was so much humanity in that portrayal.

James Ransom's death hit me harder than I expected. Same with Kurt Cobain, same with Anthony Bourdain, same with Heather Armstrong—who I interviewed on my old show, *The Hilarious World of Depression*. Heather died by suicide just a couple years ago in 2023. She had major depressive disorder for a long time, talked about it openly over and over again, helped a lot of people by doing that. And she died from her illness.

Okay. Yes, John. But why are you telling this?

I'm telling you this because we name it. And by doing so, we acknowledge our feelings about it. We look it in the eye.

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We accept that suicide exists in this world that we're sharing together—the only world that we have, where we all live together. I'm sharing it, because it's a truth. Knowing about it won't make you more likely to do it, but accepting that it's out there—not endorsing it, but accepting that reality—will help.

Okay. Is there a causal relationship we can look to for why suicide rates are still very high? For suicide to still be one of the leading causes of death worldwide, and in America in particular? I don't know for sure. I'm no sociologist or statistician or even a mental health expert. I'm a talk show host. But as such, a lot of what I do is ask questions and notice things. I notice that suicide

rates are high among Gen Z, and they're the generation that is entering adulthood and having a hard time finding work and actively laughing at the idea of ever owning a home. I notice that.

I notice that rates are higher among people of color, and I notice that racism is alive and well in America—and actively promoted and encouraged by very powerful people right now—and that people of color are being rounded up and sent to camps. Again, I can't prove anything about the link between that and suicide. But I can sure as hell notice stuff. You can too. I am not trying to crush your spirit, I promise. You and I are both people interested in mental health. Otherwise, neither of us would be here right now. And yet here we are. Hello!

I think you should know—I think it'll help you to know and accept that we live in a difficult place in a difficult time. You can hold that in your hand. I further want you to know that if you have mental health issues during this difficult time and place, it is not your fault. It could very well be the fault of this difficult time and place. Or at the very least, the difficult time and place could be a contributing factor—as could your own history, your childhood, genetics, other factors. But it's not your fault! You didn't choose mental health problems. Whoever would?! Tell 'em, Robin Williams in *Good Will Hunting*.

Clip:

Sean (*Good Will Hunting*): (*Soft and compassionately.*) It's not your fault. Alright? It's not your fault. It's not your fault.

John Moe: A lot of people are having a rough time with mental health. Lots of factors in current events and national and international politics and economics are— Well, they're not making things better. You're not alone. It's not your fault. And we can know this. We can hold it in our hands. And. Yes, and. There is something else I want to put in your other hand: a tremendous and exciting amount of hope. Yeah, we're gonna get to the hope right after a very short break.

Transition: Spirited acoustic guitar.

(*ADVERTISEMENT*)

Transition: Gentle acoustic guitar.

John Moe: Every week on this program, I toss out a reference to our free *Depresh Mode* newsletter. It's free. You should subscribe! I mention it in the closing credits, so you may have bailed out of the show prior to that point. Maybe you don't even know about our newsletter, because you just—you hit stop after the interview. I understand that. I listen to podcasts too. But I really hope you give this thing a read. The newsletter is a bit older than the podcast, actually.

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I wanted a way to keep up on mental health stories to inform the work that I do, and I wanted to find a way to keep my writing in shape. I hope people read the newsletter. I do. But it has reached a point where I get so much out of the practice of writing the thing that it's actually not as crucial to me how many people read it. (*Chuckles.*) You know, anybody who writes something wants people to read it. But I get so much out of it just by the act of creating it. 'Cause here's what I do.

I write about that week's episode. I write about who's on *Sleeping with Celebrities*. Then I hunt through the news about what's happening in mental health. I'm here to tell you that there is so much happening in the world of mental health. A lot of it, dispiriting. Some of it kind of ominous, some of it nebulous, and then a ton—several tons!—of hope. I mean, face it. Take any topic, search for it in the news. Chances are darn good that it's primarily bad news. Not with mental health. There's so much good news.

So, I find the stories that I think are especially interesting, that I think have the most applicability, that are the most valid to the lives of people who might be reading the newsletter or listening to the podcast. Then I read through the story, and then I write about it. I try to take the approach of having read something that caught my eye, and then I'm explaining it to like my wife or a friend or one of my kids. I grab a quote from the story. I put that in there. And that process of digging for hope—because in this world, my dear friends, you gotta dig sometimes—that process of digging for hope, identifying the story, comprehending it, then retelling it in my own words? It's been tremendous. It makes me love making this show even more. It makes me even more enthused to talk to you about mental health. You know, mental health! The topic that no one wants to talk about. I love talking about it. I think you love hearing about it. We're changing the world.

Okay, let's get to some good examples. I went through a few recent additions of the newsletter.

If you've ever dealt with depression, you know that it's a lot of trial and error. Right? What works for someone else might not work for you. What works for you now might not work later, and you'll need to try something else. We're used to that. We accept that. The news that you might not realize is that the menu of options of things that you can try or will be able to try is getting bigger. More treatments. More prescription drugs, but also more options that don't involve drugs. And they're getting way better at targeting the treatment to the patient.

Baseball metaphor here: you still might strike out sometimes, but generally we can all expect better batting averages going forward. Okay, no more sports metaphors after that. One of the options for treatment, it turns out: laughing gas. Right?! I know! A big, recent study out of the University of Birmingham in the UK found that nitrous oxide, laughing gas, was an effective treatment for depression. And not just for making you feel silly a few minutes while a dentist goes to work on you. A single dose of nitrous oxide at 50% concentration led to significant reductions in depression symptoms within 24 hours in this group of people that they tested. It faded over the course of a week, but regular treatments over the course of several weeks could be effective as a maintenance kind of thing and might have way fewer side effects and be a lot cheaper than pills. The scientists believe the nitrous oxide works on the glutamate receptors, which is the same part of the brain that ketamine works on.

Okay, listen, you don't need to remember the term glutamate receptors. It's not on the test, and there is no test. But please know that there are a lot of people working on depression treatments,

trying stuff, doing hard scientific research. And not “I do my own research” kind of research, real research!

Okay. Then there's magnets. Magnets! Right, Insane Clown Posse?

Music: “Miracles” from the album *Bang! Pow! Boom!* by Insane Clown Posse.

Water, fire, air, and dirt

Fucking magnets, how do they work?

(Music cuts out.)

John Moe: They work pretty effectively, Shaggy 2 Dope! Or at least, they can when used as a part of transcranial magnetic stimulation—or TMS treatment. That's where you put on this headpiece—we've talked about on the show—and get magnetic stimulation to your skull, and it loosens up part of your brain, and you feel better. This has been available for many years, starting to get a lot more popular recently, because it works. About 1/3rd of people have no change to their mental health.

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1/3rd have temporary relief, and 1/3rd are pretty much cured. Wow! The thing is, TMS generally requires weeks of treatment: five days a week, and you have to drive somewhere every day, which can mess with your schedule and work and time. And then you need an insurance company that is cool with all this. It's a lot. Well, the FDA has just approved the FL-100. It's the very first at-home device for depression approved in the United States. Ever. This just happened. And it works a lot like TMS, but you do it yourself, at home, on your schedule. The company that makes it reports really good results in extensive testing. 77% reported symptom improvement within three weeks.

Alright, next one. Let's talk about psychedelics. I will grant you that there is nothing more annoying than someone pushing psychedelics on you, especially if there's a drum circle and tie-dye involved. Like, how did I even get to Eugene, Oregon? What's going on? I am not here to push psychedelics on you. But there is so much good news happening on that front, in terms of carefully measured, highly controlled—scientifically and medically controlled amounts of psychedelics—to address chronic mental health issues. I get so much joy and hope reading about this stuff. I'll caution that I read about it in medical journals that are pretty hard to follow for me, who barely escaped high school biology class and steered clear of the science building altogether in college.

But I know that study after study is finding that psychedelics are showing tremendous promise for addressing treatment-resistant depression. That's depression that has persisted despite several

efforts of drugs and other approaches. I read about an experiment out of the University of Kentucky where they stimulated the colostrum—that's part of the brain; it's filled with neurons—the colostrum in rats. And when they stimulated the colostrum, it weakened the connections between neurons, making the rats really depressed. Right? It had a bad effect. But then they added in DOI, a psychedelic drug. And it had the opposite effect. Neurons got stronger; neuroplasticity improved. Rats felt a lot better; rats weren't depressed anymore. Our brains are very similar to those of rats!

Here's a simpler one. Ohio State University. Humans this time, given controlled amounts of psilocybin. Five years later, 67% reported full remission from depression, anxiety, and poor global functioning. Another study, an anxiety study out of San Diego, took 198 human test subjects, gave some of them a small amount of LSD. Some got a bigger dose, and some got a placebo. They found that the small amount group and the placebo group both had some small improvement, but the group with a bigger dose had a huuuuge bounce that was also durable over an extended period of time.

Please, I'm begging you—I am ordering you: do not go out and get a bunch of LSD from like a guy in a van with a hacky sack. No. Wait for the regulatory channels and the reputable professionals. They're on the way. And the thing is, they might be here pretty soon. There are two new studies that are going to announce findings in 2026. And if they go well—and strong indications are that they will go well—it should clear the way for a lot more approval of psychedelics to be administered for mental health conditions in a clinical setting by professionals. No drum circles necessary. Maybe. Unless that's your thing. Maybe some doctor wants to run a drum circle. I don't know. Maybe in Eugene, Oregon! Alright?

Anyway. Okay, moving on. Then there are brain cells. Just last week in the newsletter, I included a story out of the University of Utah where scientists there have discovered some groups of immune cells in the brains of mice that act as on/off switches—like accelerators and breaks—that influence anxiety levels. The thinking up to now is that it's neurons affecting anxiety. This research says it's maybe immune cells! And that might be a big change in how we treat anxiety. We might have zeroed in on something a lot more effective for treating anxiety. There are so many stories out there, you guys! This one guy I read about started an AI-based app for mental health, and then a year later he shut it down.

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Because he realized that it had the potential to do enormous amounts of harm. So, he switched it off! And granted, there are a lot of other stories—very distressing ones—including ones about people, especially young people, using AI as a substitute for therapy. And it ends up disastrous. But that one guy who shut his down gave me some hope. Hope for humanity.

Now, none of these stories are the cavalry riding in on horses to deliver the 100% cure for depression or anxiety or OCD or anything. It doesn't work that way. We all know this. And you might not, again, retain all these stories that I'm telling you—especially with the mice and the rats and cells. I get it. But I want you to listen to my voice as I tell you about this better future that I think is coming. I have hope! Because the trend over history, as we learn more about science and psychology and people, is from something broader to something more precise. And that means a future is in sight where people might not feel so terrible.

It wasn't that long ago that there wasn't much of any treatment for mental health issues. There was like bloodletting or drilling holes in your skull or exorcism. Antidepressants only came around in the last—what?—60 years or so. And we've come so far. The pace has been increasing too, and we're standing at the precipice of a much better future. Hold the hard reality of a world bent on hurting your mental health in one hand. Hold the hope in the other. They're both true. Let's put it all together after one more short break.

Transition: Spirited acoustic guitar.

Promo:

Music: Fun, upbeat guitar.

Jordan Crucchiola: I am Jordan Crucchiola, host of *Feeling Seen*, where every week I have a different actor director or writer as my co-host. And whoever that co-host may be, it is a sure bet that we are digging deep and having a great time doing it.

Speaker 1: I love that you just said that.

Speaker 2: Yeah. I mean if I were gonna join a cult, I think this might be it.

Jordan: A fresh look at your favorite film and a peek behind the curtain at how movies get made.

Speaker 3: Oh, okay. I'm gonna tell you this full story. Okay? I almost got fired from that movie.

Jordan: You should be listening to *Feeling Seen*.

Speaker 4: I had so much fun. I love what you're doing.

Speaker 5: I hope I did okay.

Jordan: New episodes every week on Maximum Fun.

(Music fades out.)

Promo:

Music: Exciting, playful sax.

Jesse Thorn: On *Judge John Hodgman*, the courtroom is fake, but the disputes are real.

(Gavel bang.)

Gumby Disputer: Brian would say, “I’m the Gumby of this family.” He’s just not!

Jesse Thorn: Claiming to be Gumby is an un-Gumby-like claim.

Brian: No, it’s just Gumby and I being our authentic selves.

(Gavel bang.)

John Hodgman: So, what’s your complaint? Too many sauces?

Sauce Litigant: There are no foods on which to put the sauces.

John Hodgman: Have we named all the sauces on the top shelf yet?

Sauce Enthusiast: *(Laughing.)* Not—not even close.

(Gavel bang.)

John Hodgman: You economize when it comes to pants.

Pants Plaintiff: Truly, it’s not about the cleanliness of the pants.

John Hodgman: Well, why isn’t it?! This is what I want to know!

(Gavel bang.)

John Hogman: *Judge John Hodgman*. Fake court, weird cases, real justice. On MaximumFun.org, YouTube, and everywhere you get podcasts.

(Music fades out.)

Transition: Gentle acoustic guitar.

John Moe: We are back. Okay. So, my advice— And first of all, thank god for podcasting. I used to work in radio, when a five-minute story or commentary was considered decadently lengthy. Thank you for listening to this, because this is kind of a big idea. And I hope you’re sharing my energy for it. A clip here. Substitute the word “podcasting” for the word “musical” in this next clip. And take it away, MCA.

Music: “Pass the Mic” from the album *Check Your Head* by the Beastie Boys.

If you can feel what I'm feeling

Then it's a musical masterpiece

Hear what I'm dealing with

Then that's cool, at least

(Music cuts out.)

John Moe: Yeah. “If you can feel what I'm feeling, then it's a podcasting masterpiece. Hear what I'm dealing with, then that's cool at least.” Those great stories about the brain cells and the mice and the rats and the LSD and the other psychedelics and the machine that pecks magnets at your head? Those do not eradicate the crushing, depressing, anxiety-inducing factors that exist in our society in the year—what are they calling it now? 2026? Just because there's a future where a doctor gives you psychedelics in their office—hopefully in a comfy chair—doesn't mean that the capitalism game isn't rigged! That discrimination and bigotry don't exist, or that people aren't suffering in their minds and won't continue to do so for a very long time.

Also, though— But. And. The opposite isn't true either.

[00:40:00]

Just because the news on climate change is bleak, just because we are apparently not leaving a better world for our children's children—in terms of natural disasters and ability to get a mortgage, and all the rest—all those things that absolutely weigh on us and make it sooo much harder to keep a clear and clean mental health disposition? All that doesn't mean that the hope isn't there. That the progress made and the progress yet to come isn't real.

And look, all those stories that I mentioned? Those aren't the only mental health stories out there. We've done shows about other stuff going on that might not make you feel as good. Severe cuts to mental health programs created to serve veterans, leading to veterans not getting the help they need. Huge cuts that have severely damaged or shut down other mental health programs like crisis lines, all over America. Unemployment and all the appended mental health impact of that. AI messing up people's mental health to the point that people have died. Check our archive. We've talked about all of this. But again, you probably have two hands. In one, you hold acceptance. In the other, you hold hope. In one, you hold the world as it really is—as you see it clear-eyed, and your past and present, as you see those clear-eyed. And it's not a good or bad; it just is. You accept that. In the other, you see the capacity for change in yourself and the world around you. You see evolution and improvement. Thank you for holding both. As always, I'm glad you're here. Have a wonderful 2026.

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

John Moe: Our show exists. I keep talking! I keep talking to people. I keep coming up with things that might help you. All this happens because people give to the show. They give at the \$5 a month level, \$10 a month, whatever, \$20—whatever they can afford, whatever makes sense for them, whatever makes sense for you. But it's important that we get those donations. If those dry up, I gotta shut this down. I'm sorry, but it's true. So, please. We need to hear from you right now.

Head into 2026 on a good foot. Just go to MaximumFun.org/join. Join the show, and you'll listen different. You'll know that you're part of the solution. Be sure to hit subscribe. Give us five-star ratings. Write rate reviews. That helps people as well; that gets the word out so that people can navigate with their interesting brains through this world that we share.

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

We're on BlueSky at [@DepreshMode](https://bsky.app/profile/DepreshMode). Our Instagram is [@DepreshPod](https://www.instagram.com/DepreshPod). Our newsletter's on Substack, as I mentioned. Search that up. Search *Depresh Mode*; search John Moe. You'll find it. I'm on BlueSky and Instagram at [@JohnMoe](https://www.instagram.com/JohnMoe). Join our Preshies group on Facebook. A lot of good conversation happening over there. I'm over there too. We're just talking about supporting each other and mental health and a surprising amount about dogs and cats. Our electric mail address is DepreshMode@MaximumFun.org.

Hi, credits listeners! I accept how many times the Seattle Seahawks have crushed my spirit in the past, but I have hope that they won't this year. See? Here we are again!

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:

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

Hannah: Hey. This is Hannah from Minneapolis, and I promise you're not the only one who feels this way.

(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!