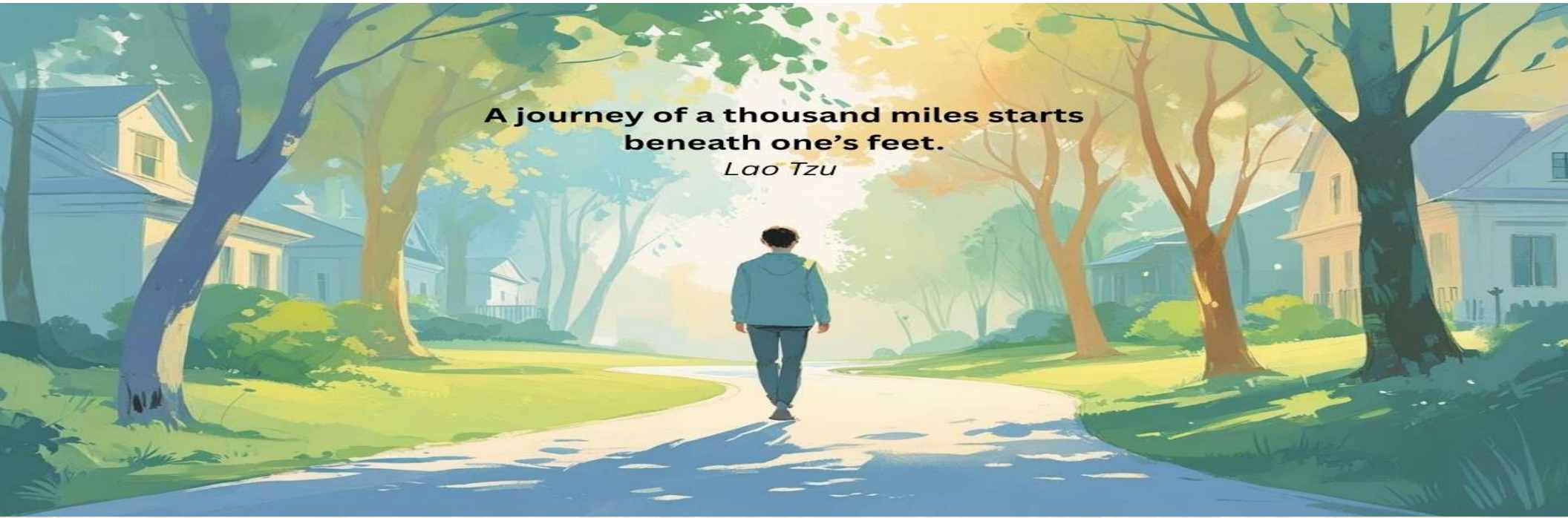




**A journey of a thousand miles starts
beneath one's feet.**

Lao Tzu

Facilitated by Kirk Wulf

10/22/2026

Community Well-being Forum Welcome!

Objectives

- **Conversational but participate in the way that fits your learning style.**
- **Awareness of everyday well-being**
- **Building our resilience toolbox**

This is not a substitute for professional care.



Artwork by Sue Davies

Introductions



NAME



FAVORITE BOOK,
MOVIE, OR TV SHOW?



IS SUNDAY THE START
OR END OF THE WEEK?

Just for fun

This quote from around 1508 is in reference to what invention?

"To what corner of the earth do they not fly, these swarms of new books? It may be that one or two provide useful knowledge, but the rest are a burden to the mind."

The problem with “wellness”

4

US Wellness Economy Surges to \$2.1 Trillion, Cementing Global Leadership

New Global Wellness Institute data, made possible through a partnership with Fountain Life, reveals rapid growth, rising per capita spending, and continued dominance across nearly all wellness sectors



USA WELLNESS ECONOMY DATA



Wellness: The quality or state of being in good health especially as an actively sought goal.

Merriam-Webster



Mental Health & Well-being

Mental health is a state of well-being where an individual:

- can realize their abilities,
- can cope with normal stresses of life, and
- is able to contribute to their community.

The World Health Organization-Five Well-Being Index (WHO-5)

		All of the time	Most of the time	More than half of the time	Less than half of the time	Some of the time	At no time
1	I have felt cheerful and in good spirits	5	4	3	2	1	0
2	I have felt calm and relaxed	5	4	3	2	1	0
3	I have felt active and vigorous	5	4	3	2	1	0
4	I woke up feeling fresh and rested	5	4	3	2	1	0
5	My daily life has been filled with things that interest me	5	4	3	2	1	0

Index is mainly used as a patient-reported well-being screener in clinical settings, in the United States.

Activity

Get into groups of 3 or 4 and write a definition of well-being.

Well-being

Well-being

DIMENSIONS OF WELL-BEING



Cultural



Spiritual



Environmental



Cognitive



Community



Social



Emotional



Physical



Occupational



Financial

DEFINITION

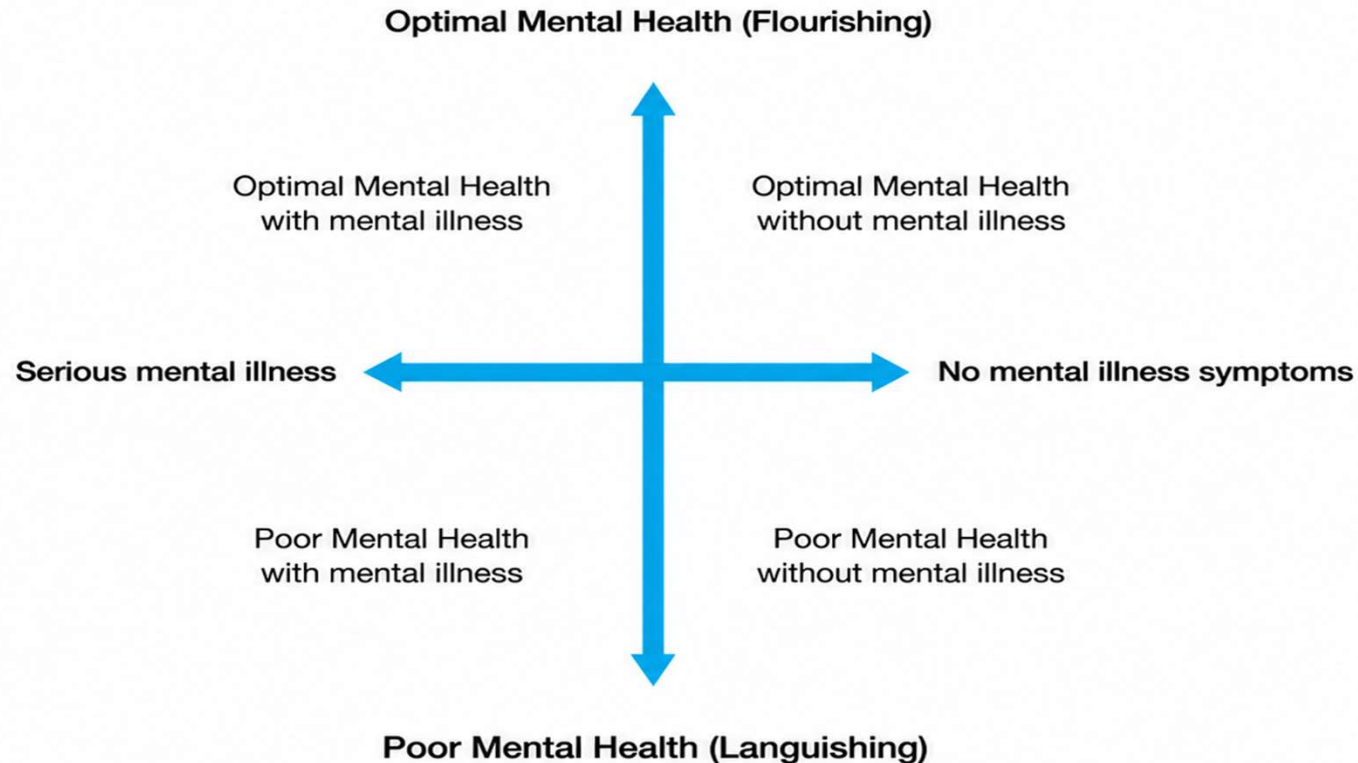
The perceived satisfaction of one's life that is influenced by culture, circumstances, experiences, and a sense of dignity.

"To be yourself in a world that is constantly trying to make you something else is the greatest accomplishment." — Ralph Waldo Emerson

Mental Health Challenges

Common emotional, psychological, or behavioral difficulties—such as stress, grief, sadness, worry, or mild anxiety—that may arise in response to life circumstances.

Mental health is more than the absence of mental illness.



Dual-continuum model developed by Dr. Corey L. M. Keyes. Adapted from Westerhof & Keyes (2010).

Mental Health Challenges

When to call 988 Minnesota Lifeline



Call 988 for Immediate Emotional Support
No Cost, No Insurance Needed



You can contact 988 for:

- Tough days & Stress
- Feeling overwhelmed
- Job or money concerns
- Relationship issues
- Grieving a loss
- Identity struggles
- Anxiety & Anger
- Thoughts of suicide
- Drug or alcohol concerns
- Emotional impact of illness
- Just needing someone to talk to



988

No judgment, Just Help
Text, Call, Chat



Mental Health Crisis

A period of intense emotional or psychological distress that overwhelms a person's usual ability to cope, substantially disrupts daily functioning, or puts their safety at risk, creating a need for prompt support.

CALL OR TEXT 988

Mental health crisis support

- Suicidal thoughts without an attempt underway or immediate intent to act
- Intense emotional distress or difficulty coping
- Mental health or substance use concerns without a medical emergency
- Concern about someone who needs crisis support

Free, confidential support, 24/7. You do not need to be suicidal.

CALL 911

Immediate danger or medical emergency

- Acts of violence to others or self
- Verbal threats of violence to others
- Suicide risk with access to the means
- A suspected overdose
- Signs of a medical emergency or serious injury (e.g., heart attack, panic attack, bleeding,

Do not delay emergency care to contact 988.

Naloxone (Narcan®) for Opioid Overdose

Naloxone is a medicine that can reverse an opioid overdose in minutes. It is a nasal spray and it works by temporarily blocking an opioid's harmful effects so the person can breathe again.



Signs of an Overdose

- Will not wake up or respond
- Breathing is very slow, irregular, or has stopped
- Choking, gurgling, or snoring sounds
- Blue or gray lips and fingertips
- Pale face and very limp body
- Slow, erratic, or no pulse

How to Respond

1. Call 911 right away and stay with the person.
2. Give naloxone every time you suspect an overdose.
3. Give rescue breaths until help arrives.
4. No better after 2–5 minutes? Give another dose.
5. Stay with them. Naloxone wears off in 30–45 minutes.

Know the Facts

- It only works on opioids, including fentanyl, but it is harmless if the person did not take opioids.
- The goal is to restore breathing, not to fully wake the person.
- You cannot give it to yourself, so carry it for others.
- It is legal to carry and give. Steve's Law protects people who call 911 in good faith.

Minnesota pass Steve's Law in 2014 which covered laypeople using Naloxone under the Good Samaritan law

Be cautious as the person may experience withdrawal symptoms upon regaining consciousness.

Minnesota • Source: [MDH Naloxone](#), [MDH Naloxone Training](#), [MDH Naloxone Medication \(School Toolkit\)](#), [MDH Harm Reduction & Overdose Prevention](#)

Recognize warning signs of suicide

Listen to what a person says. Notice changes in behavior and emotional distress.

TALK

- Talking about ending their life
- “I have no reason to live.”
- “No one will miss me.”

BEHAVIOR

- Withdrawing from others
- Looking for ways to die
- Saying goodbye or giving away valued possessions

EMOTIONS

- Severe mood changes
- Hopelessness or worthlessness
- Overwhelming emotional pain

Ask directly: “Are you thinking about suicide?” Listen and help connect to care.

If danger is immediate, call 911

Source: WHO, Suicide: Questions and answers • [who.int/news-room/questions-and-answers/item/suicide](https://www.who.int/news-room/questions-and-answers/item/suicide)

U.S. support: Call or text 988 | Immediate physical danger or medical emergency: Call 911

Social factors that can increase suicide risk

Suicide is complex with no single cause. Relationships, living conditions, and access to support matter.

DISCONNECTION & LOSS

Social isolation, loneliness, bereavement, or relationship breakdown

HARM & EXCLUSION

Violence, abuse, bullying, discrimination, or marginalization

ECONOMIC & SOCIAL STRAIN

Job loss, financial problems, conflict, or humanitarian emergencies

BARRIERS TO HELP

Stigma about seeking help and limited access to quality health care

Social factors are statistical risk only and are not the same as immediate warning signs.

Sources: WHO, Suicide prevention ([who.int/health-topics/suicide](https://www.who.int/health-topics/suicide)); CDC, Risk and Protective Factors for Suicide

U.S. support: Call or text 988 | Immediate physical danger or medical emergency: Call 911

Columbia Suicide Severity Rating Scale (C-SSRS)

Ask all questions in order — always begin with Questions 1 and 2

Always ask Questions 1 and 2		Past Month	
1	Have you wished you were dead or wished you could go to sleep and not wake up?		
2	Have you actually had any thoughts about killing yourself?		
If YES to 2, ask Questions 3, 4, 5 and 6. If NO to 2, skip to Question 6.			
3	Have you been thinking about how you might do this?		
4	Have you had these thoughts and had some intention of acting on them?	High Risk	
5	Have you started to work out or worked out the details of how to kill yourself? Did you intend to carry out this plan?	High Risk	
Always Ask Question 6		Lifetime	Past 3 Mo.
6	Have you done anything, started to do anything, or prepared to do anything to end your life?		High Risk
<i>Examples: took pills; tried to shoot, hang, or cut yourself; took out pills but didn't swallow; held a gun but changed your mind; went to the roof but didn't jump; collected pills or obtained a gun; gave away valuables; wrote a will or suicide note.</i>			

If YES to 2 or 3: seek behavioral healthcare evaluation. **If YES to 4, 5, or 6: get immediate help — call/text 988, call 911, or go to the ER. Stay with them.**

Minnesota 988 Lifeline

988 has been an important resource

July 2022 – 2025 | Statewide Crisis Support Data

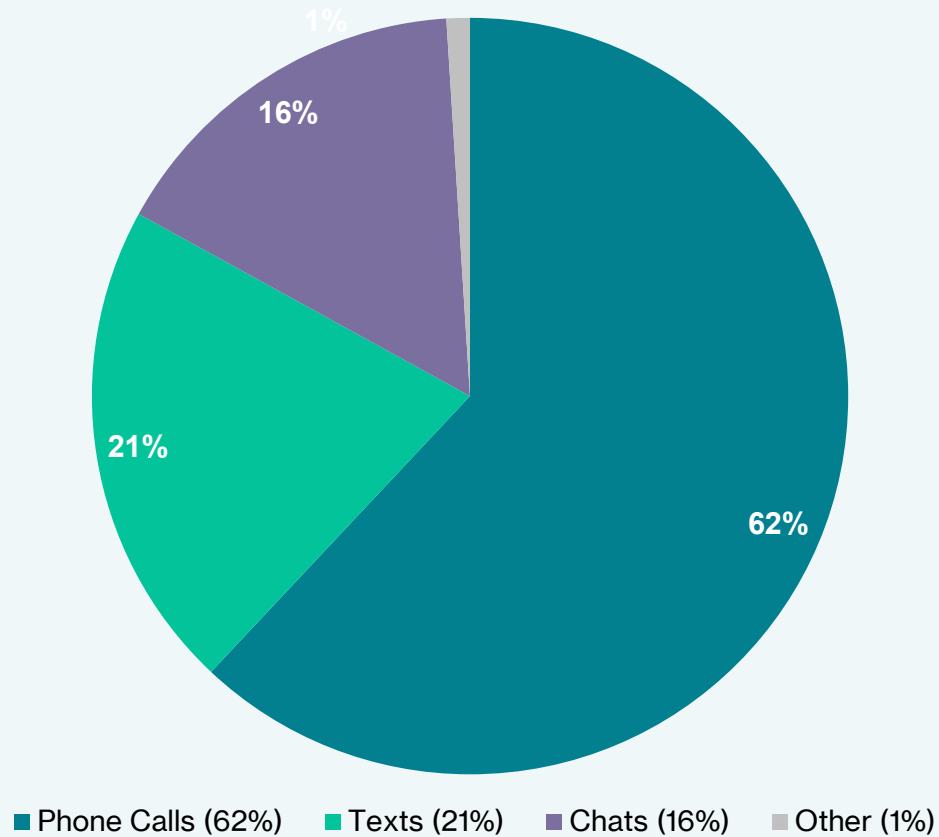
290,000+

total contacts answered since inception

130,000+

contacts answered in 2025 alone

How Minnesotans Reach Out



62%

Phone Calls

21%

Text Messages

16%

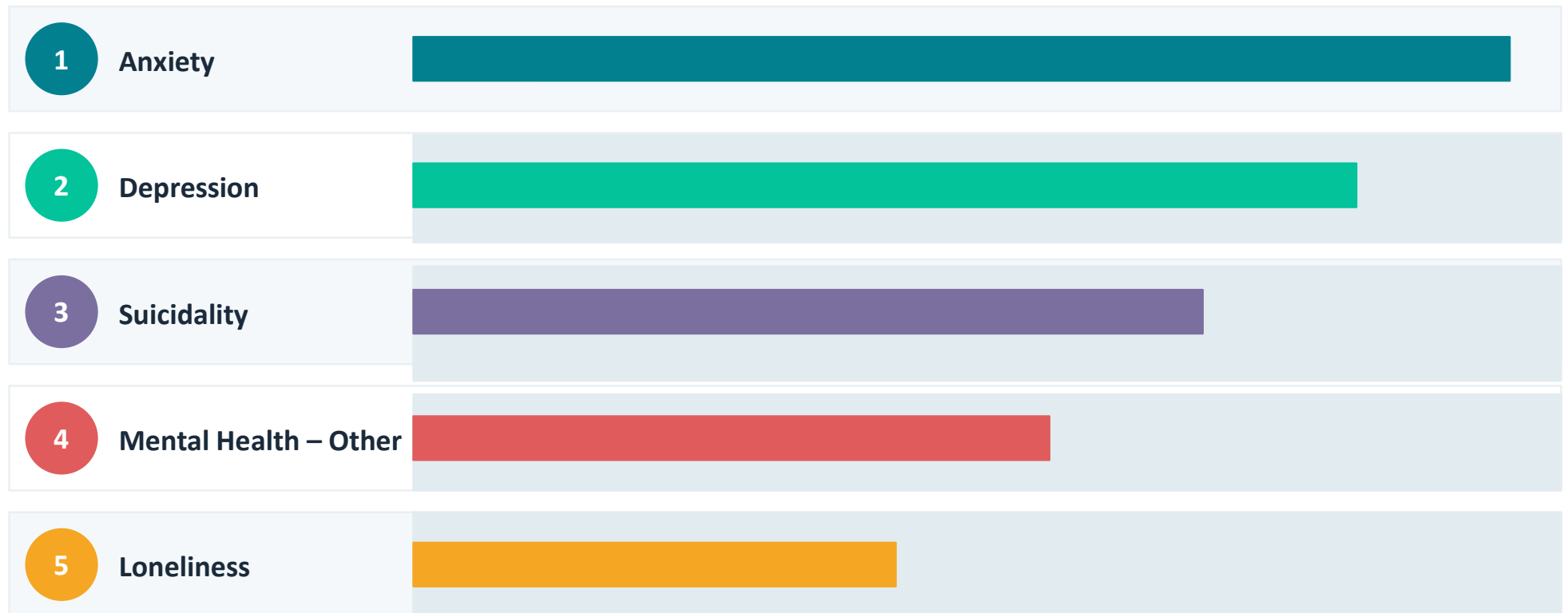
Chat / Online



48% increase in 2025 vs prior year

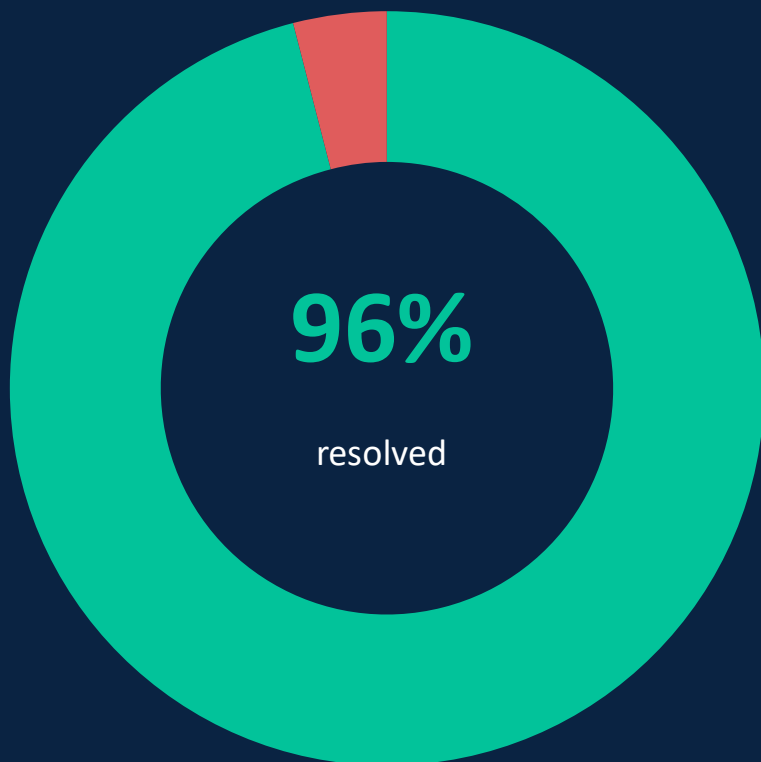
Top Reasons Minnesotans Called 988

Based on data from February – December 2025 (multiple support needs per contact allowed)



Outcomes & Resolution

What happens after someone calls 988?



96%

Resolved In-Call

Contacts were de-escalated and resolved during the conversation — no further services needed.

4%

Higher-Level Intervention

Required mobile crisis teams, emergency services (911), warmlines, or 211 referrals.

Protective factors & building resilience

Strengthen support around people—not just their ability to cope on their own.

BUILD CONNECTION

- Nurture trusted relationships
- Strengthen belonging in community
- Support cultural identity and reasons for living

DEVELOP SKILLS

- Practice coping and problem-solving
- Build social and emotional skills
- Encourage talking about distress and seeking help

MAKE SUPPORT ACCESSIBLE

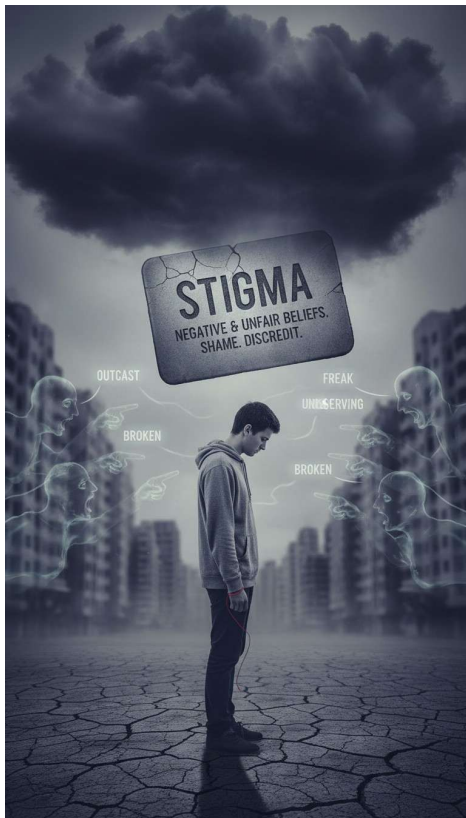
- Connect to quality health care
- Offer timely emotional support and follow-up
- Reduce access to lethal means during a crisis

Protective factors can reduce risk; they do not replace assessment and care when someone is in crisis.

Sources: CDC, Risk and Protective Factors for Suicide; WHO, Suicide: Q&A; WHO, Mental health

U.S. support: Call or text 988 | Immediate physical danger or medical emergency: Call 911

Mindful Communication



1. How stigmatized is mental illness compared to 10-years ago? More, less, or the same?
2. How can we talk about mental health & mental illness in a non-stigmatizing way?
3. What else is stigmatized that is a barrier to good mental health & well-being?

Everyday Communication

Elements of communication: Words, Tone, and Body

Communication is 55% body language, 38% tone of voice, and only 7% the words you choose.

The Assertive Stance

Upright posture, lean slightly forward, arms and legs uncrossed. This signals openness and confidence.

The Delivery

Maintain regular eye contact. Keep a neutral or positive facial expression. Avoid staring — it can be perceived as aggressive.

Listen to Your Own Tone

Make a conscious effort to hear yourself. A steady stream of snappy responses puts others immediately on the defensive.

The 5 Universals Assumptions

People are more cooperative when they:

- 1 Feel heard
- 2 Are treated with respect
- 3 Feel their concerns matter
- 4 Are given options
- 5 Don't feel threatened

People like to feel seen,
heard, and valued.

 In de-escalation, your tone often matters more than your words.

Mindful Communication

*When pressure is high, communication style becomes critical.
Anchor yourself to three core principles.*

1

Speak calmly

Neutral language and body
language

2

Listen Non-judgmentally

Be curious and listen fully

3

Respond empathetically

Pause, ask, reassure, support, or
connect with resources

The Four Communication Styles

Aggressive

Ignoring others' needs
Bullying, embarrassing, or intimidating

Assertive ✓

Direct and respectful
Stands up for interests while resolving conflict diplomatically

Passive

Avoiding conflict
Signals your needs are less important than others'

Passive-Aggressive

Indirect hostility
Says 'yes' but means 'no'; complains behind backs

The "I" Statement Advantage

"I" statements share your perspective without sounding accusatory. Keep requests simple, specific, and clear.

✗ Instead of:

"You're wrong."

✓ Say:

"I disagree."

✗ Instead of:

"You need to do this."

✓ Say:

"I would like you to help with this."

The LEAPS Model

A foundational listening tool

L

Listen

— Without interrupting

E

Empathize

— *"I can see this is frustrating."*

A

Ask

— Clarifying questions

P

Paraphrase

— *"So what I'm hearing is..."*

S

Summarize

— Clarify next steps

Regulating Emotion in the Moment

Stress and frustration can be part of conflict and emotionally charged conversation

1 Pause

If you feel too emotional going in, wait if possible. Give yourself time to return to baseline.

2 Breathe

Slow, deliberate breathing activates the parasympathetic nervous system — it physiologically calms you.

3 Anchor

Keep your voice even and firm. Focus on the present moment rather than what might happen.

4 Silence

Use intentional silence when tired or stressed to prevent yourself from saying things you'll regret.

Try These Questions

Simple prompts that invite reflection (not defense). Each one helps you stay curious, respectful, and patient in real conversations.

“What’s been going on?”

Opens the door to context and narrative—letting the other person set the scene in their own words.

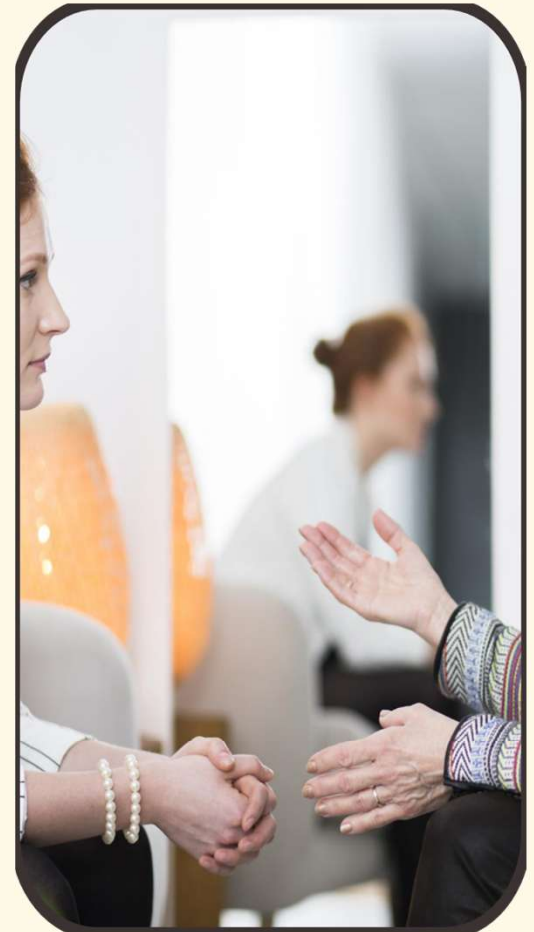
“How has that been for you?”

Centers the personal and emotional impact, signaling that their experience matters—not just the facts.

“What have you tried so far?”

Acknowledges effort and encourages problem-solving—without rushing to fix, advise, or take over.

These work best when asked slowly, with genuine interest, and without rushing to respond.



Alfred Adler's Perspective

EMPATHY

The ability to understand and feel with someone else – an idea that comes from the German word *Einfühlung*, meaning “feeling into.”

GEMEINSCHAFTSGEFUHL

In Adlerian psychology, an inner sense of belonging to the human community and of interconnection with others, expressed through empathy, cooperation, social responsibility, and contribution to the common good.

Well-being in the Digital Environment

Understanding the information around us helps us make healthier choices — online and off.



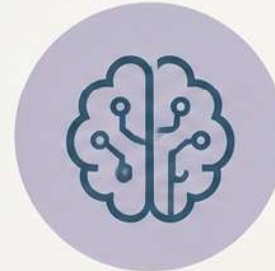
News Media

The use of crisis in news coverage.



Social Media Algorithms

How platforms decide what we see.



Generative AI

How it works, and what it means for our information.



UP NEXT

Media and Information Literacy

Information from politicians, businesses, sports, and many other sources reaches us through the media.



TV news



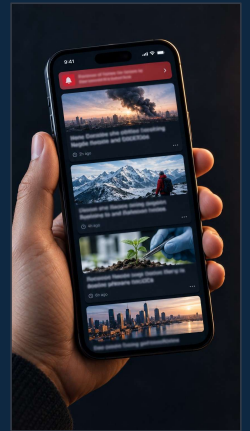
Newspaper



Magazine



Radio



Mobile device

Information from

passes through

to reach

Politicians

Business

Sports

Science & Health

Entertainment



The Media

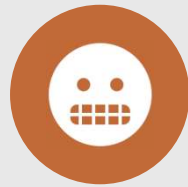


You

Which three emotions increased sharing news articles?



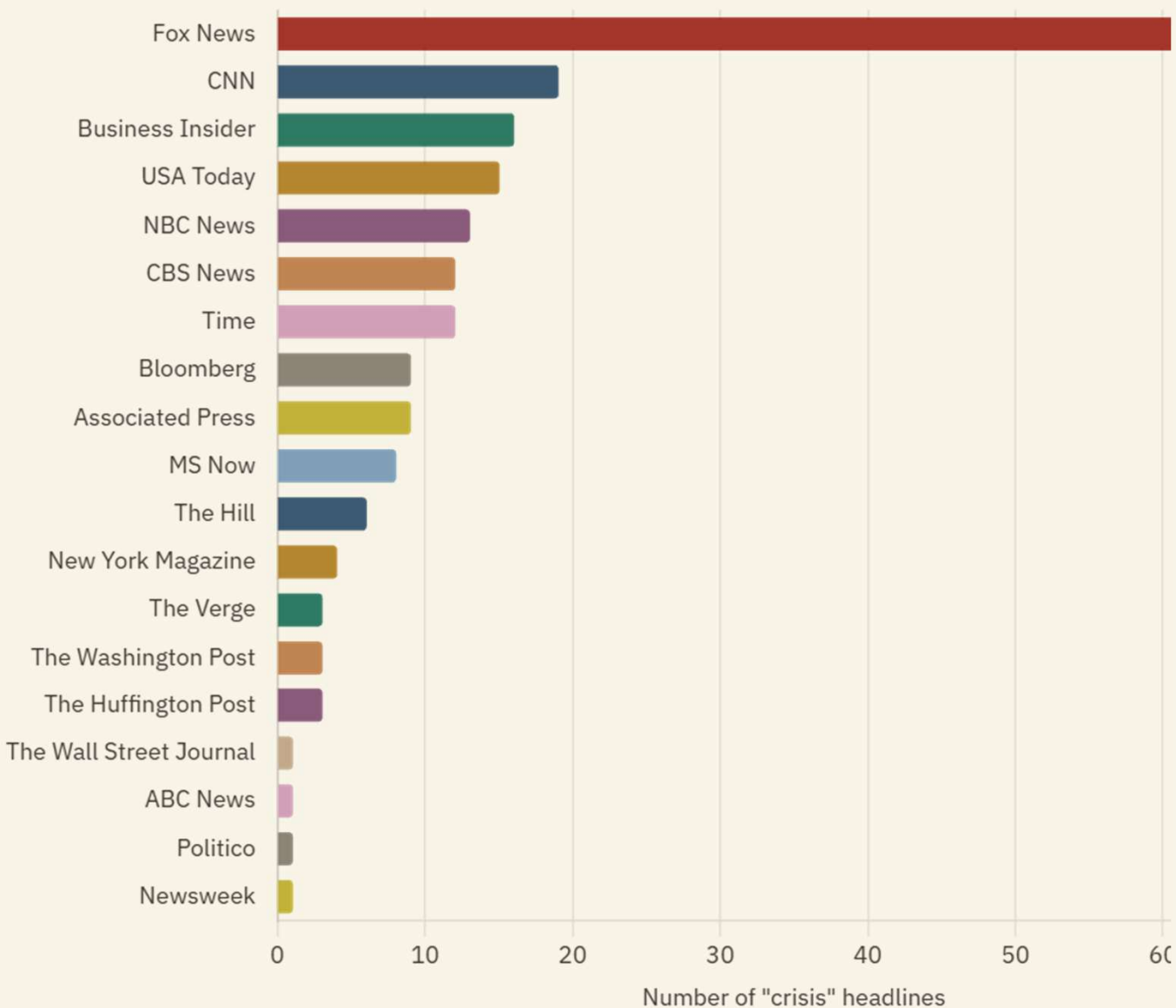
Anger



**Fear or
Anxiety**



Awe



Use of crisis in news media

Social Media:

How your feed decides what you see

Most feeds are ranked by a program that predicts what will keep you looking, and learns from everything you do.

Gather

Posts from people you follow, plus suggestions

Predict

Guess what you will watch, like, or share

Rank

Put the likeliest to hold attention first

Learn

Every tap and pause adjusts the next guess

Common Rhetorical Techniques to Recognize

Communicators across the political spectrum rely on a recurring set of techniques. Recognizing them is the first step to evaluating them fairly.

1

Us vs. them framing

Dividing the world into heroes and villains, patriots and enemies, us and them.

2

Loaded language

Words chosen to trigger emotional reactions rather than convey neutral facts.

3

False urgency

Creating a sense of crisis that demands action now, without time to think or verify.

4

Straw man

Misrepresenting an opponent's position to make it easier to attack.

5

Ad hominem

Attacking the person making a claim rather than addressing the claim itself.

6

False dichotomy

Presenting only two extreme options when many alternatives exist.

7

Repetition

Repeating a claim so often it begins to feel like an established fact.

8

Appeal to fear or outrage

Using alarming predictions or provocative images to bypass critical thinking.

9

Vague attribution

Phrases like "people are saying" or "many believe" without naming sources.

10

Scapegoating

Blaming a group for complex problems to simplify and deflect responsibility.

11

Dehumanizing

Portraying people as less than human, such as animals or vermin, to reduce empathy.

Key takeaway

Spotting a technique is not the same as dismissing a message. Pause, then check the evidence.

Social Media:

How algorithms impact well-being

What the feed notices

- Likes, comments, and shares
- How long you pause or rewatch
- What you search for and follow

What can follow

- Strong emotions like outrage or envy tend to hold attention
- Heavy, passive scrolling is linked to comparison, poor sleep, and low mood for some people
- Two people can see very different "realities"

Research shows associations, and effects vary by person.

Social Media: Take back some control

Teach the feed

- Follow, mute, or unfollow based on how posts make you feel
- Use "Not interested" or "Show less"
- Search for topics you value

Watch your habits

- Lingering and angry replies still count as interest
- Try a "Following" or chronological view
- Reset suggestions and set time limits

Settings differ by platform and change often. Check yours every few months.

Four Questions to Ask Yourself

Before believing or sharing a claim, pause and work through these questions.

1

What is the claim?

State it in plain language, stripped of emotional framing.

2

What is the evidence?

Look for named sources, data, and verifiable facts, not just strong assertions.

3

Who benefits if I believe this?

Consider the speaker's interests, incentives, and audience.

4

Can I verify this from more than one credible source?

Independent confirmation is the strongest signal of reliability.

How Large Language Models (LLMs) Work

Not magic. Just math, data and pattern recognition.

LLMs don't think, feel, or know in the human sense. They predict the next best word based on patterns in data.

1. Trained on Massive Text



LLMs are trained on huge amounts of text from books, websites, articles, and more. This helps them learn patterns in language, not facts or truth.

2. Turn Text into Numbers

"Better information leads to better decisions."



412	905	233
667	120	448
776	302	189
...		

Words and phrases are broken into smaller pieces (tokens) and converted into numbers so the model can process them.

3. Find Patterns



The model uses a neural network — like a highly complex pattern finder — to learn how words and tokens relate to each other based on the training data.

4. Predict the Next Word

Better → information → leads → to → better

When you ask a question or give a prompt, the model looks at the context and predicts the next most likely token, one at a time, until it builds a response.

5. Refine with Safety Rules



LLMs also use guardrails, including safety filters and human feedback, to reduce harmful, biased, or unsafe content. Still, they can make mistakes or reflect bias in their data.

What LLMs Are — and Aren't

✓ LLMs are:

- Good at finding patterns
- Useful for brainstorming, learning and research
- Helpful for summarizing and creating content
- A tool to support your thinking

✗ LLMs aren't:

- Human (they don't have feelings or lived experience)
- Always correct
- A source of truth
- A replacement for critical thinking



The best results come from a human + AI partnership.

Use LLMs as a tool for learning, exploring different perspectives and improving your media literacy — not as a shortcut or a replacement for your own judgment.

*More curiosity.
Better questions.
A healthier information diet.*

WHO Stress Management Resource

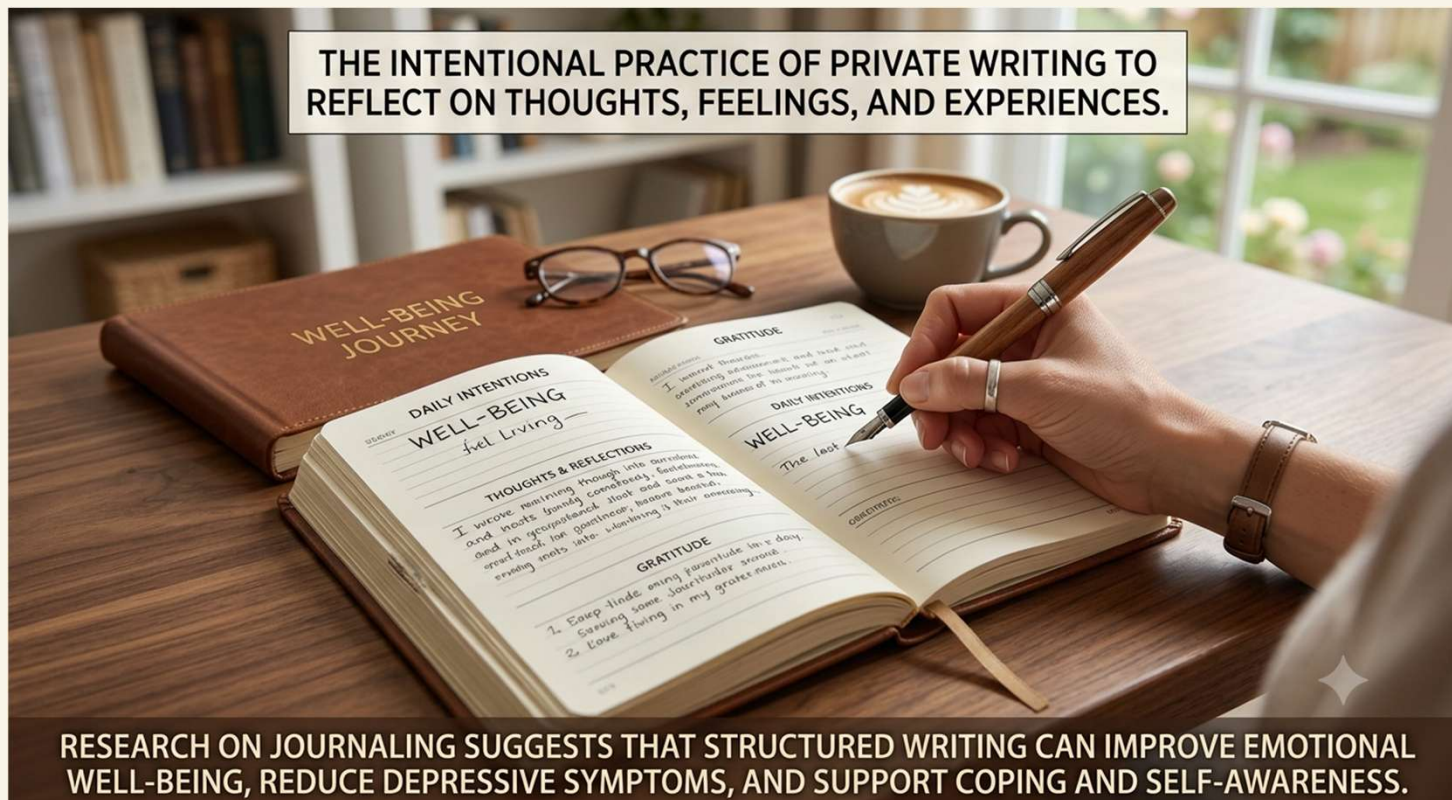
Doing What Matters



Gemini Notebook

Doing what matters in times of stress: an illustrated guide. Geneva: World Health Organization; 2020. Licence: CC BY-NC-SA 3.0 IGO.

What are your thoughts on journaling?



What's in your resilience toolkit?

Eight dimensions that shape a balanced life



Spiritual

Being



Cognitive

Thinking



Emotional

Feeling



Health

Homeostasis



Social

Connection



Environmental

Surroundings



Financial

Resilience



Occupational

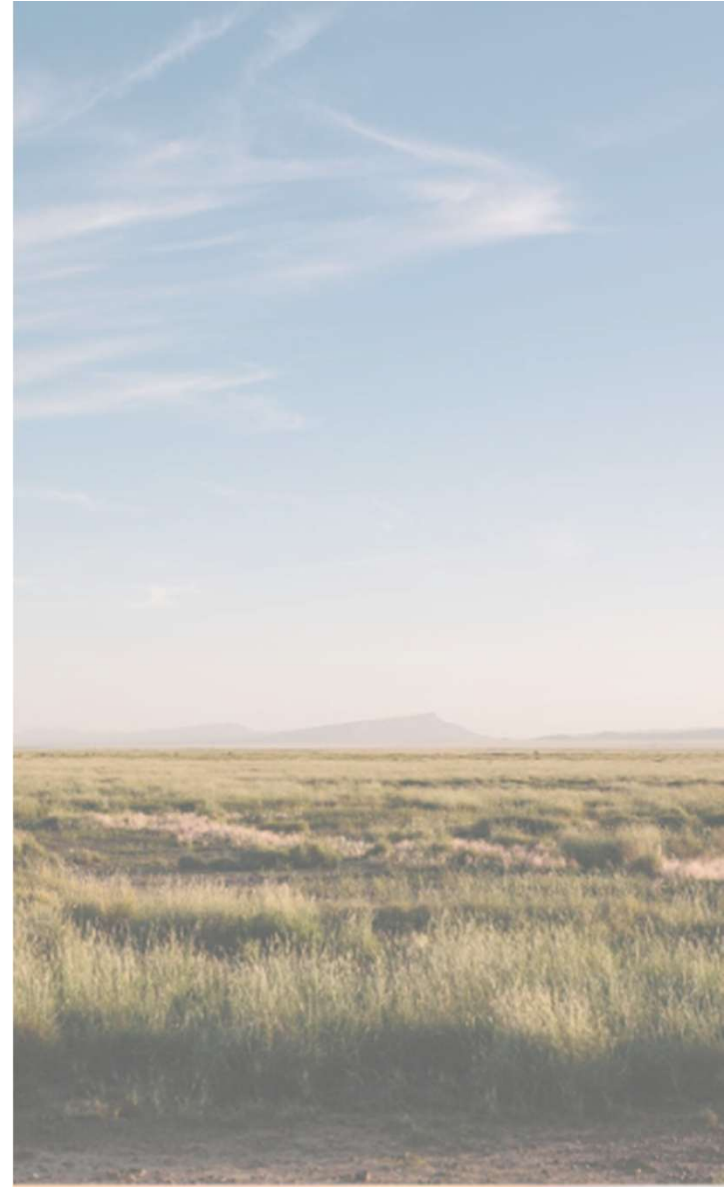
Doing

Thank you and be well!

kwulf@nextlevelsafety.org

My “digital sandbox” website:

www.ourwellbeingjourney.org



Wright Model of Applied Well-being

OUR WELLBEING JOURNEY · www.ourwellbeingjourney.org

