### The Choice Point 2.0 For Values & Goals

The right side of the CP2 lends itself really well to clarifying values, setting goals and creating action plans. We flesh out the right side by dancing between values, goals and actions. Dance moves can include:

clarifying values, setting goals, creating action plans, exploring the values implicit in any goal or action, using values to set goals and guide actions, building actions up into goals or breaking goals down into actions.

We can do this in any order we like; there's no fixed sequence. It is rarely a linear process.

Note: This document assumes you have thoroughly read "Choice point 2.0: A Brief Overview". The next 5 pages will recap the first part of that document – but only a small part! So if you haven't read it, or you can't recall much, best to read it again now before continuing.

Also note: Modify and adapt everything to suit your clients and your way of working. This document has been written with adults in mind. Almost everything in it can be applied to adolescents, but the language will need tweaking





Ideally, we draw the choice point 2.0 as we explain it, like this...

Can I draw you something? It's a kind of map, to help us keep track of what we do here.

All day long, humans do things-cooking dinner, drinking coffee, playing with the kids, watching movies,-we're always doing something, even if it's just sleeping in bed.

Now some things we do move us towards the life we want to live -acting effectively, behaving like the sort of person we want to be –and we can call these 'towards moves'.

Therapist draws & writes:



Drawing the choice point 2.0 as we explain it... continued

And some things we do move us away from the life we want to live –acting ineffectively, behaving unlike the sort of person we want to be –and we can call these 'away moves'.



#### Therapist draws & writes:

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#### A Very Important Note On Towards & Away Moves

"Towards moves" and "Away moves" are always from the client's perspective, not the therapist's.

For example, if the client sees his behaviour of going out and getting completely drunk with his mates as lifeenhancing, acting effectively, behaving like the person he wants to be, then it would be a 'towards move' (even if the therapist sees it as destructive or self-defeating).

At the start of therapy, some clients will class certain behaviours as 'towards moves' even though to the therapist's eyes, they are very obviously self-defeating. The therapist **should not argue** with this if it happens. At this point in therapy, we just want the client to get used to the idea of looking functionally at his behaviour.

As therapy progresses, and values-clarification happens in depth, such behaviours can be revisited and compassionately & respectfully explored to see if they truly are values-congruent and effective for the client in terms of being the person he wants to be and building the life he wants in the long term; at this later point, clients will often reclass these 'towards moves' as 'away moves'. For example, I've had clients that initially placed "getting drunk" as a towards move – but later in therapy, after recognising the destructive impact of this behaviour on health, work, education or important relationships, they reclassed it as an 'away move'.

Also note: a behaviour may be towards or away depending on the situation. E.g. when I eat cake mindfully, truly savouring it, as part of a special occasion like a birthday celebration, I class it as a towards move. When I eat cake mindlessly, e.g. wolfing down a second and third slice when I'm hooked by greed and sugar cravings, I class that as an away move. A client may see 'getting drunk' to celebrate a special occasion as a towards move, but 'getting drunk' because he's upset over an argument, as an away move.

### Current & Future Towards Moves

Having explained what 'towards moves' are, useful questions to tease current values-congruent actions and activities can include:

What towards moves are you already doing? Is there anything you're doing in your life/ doing in response to these problems - that tends to make life better in the long term? What kinds of things are you doing that you want to continue doing or do more of?

Is there anything you'd hate to have to stop doing?

We can also ask about desired towards moves for the future:

What kinds of towards moves would you like to start doing or do more of? What kinds of towards moves were you doing in the past that you'd like to start again?

Is there anything you'd like to start doing in your life/ doing in response to these problems - that you think might make life better in the long term?

And if the answers to all these questions are 'nothing' and 'I don't know', then we leave the top blank, and we move on to explore ...

"Helpers"

Helpers can be written lower down on the right hand side of the arrow. They can include anything that can help the client do towards moves: values, goals, desires, skills, strengths, unhooking skills, important relationships, activities, beliefs and life domains.

Often it's good to begin with identifying important life domains, important relationships, important activities, goals and desires. These things aren't values of course - but values will be implicit within them, so at a later stage, we can start teasing them out.

We can of course also ask questions deliberately designed to make values explicit, such as "What do you want to stand for in the face of this?" or "What kind of friend do you want to be?"

## Useful questions to identify helpers ...

Who do you care about? Who matters to you? What role do you play in the life/lives of that person/those people? How do you like them to treat you? How do you like to treat them? Who do you like to hang out with? What do you like to do when hanging out? What matters to you? What gets you fired up? What inspires you? What infuriates you? What makes you sad? Happy? Angry? Scared? What do you enjoy? What "floats your boat"? What would you hate to lose, miss out on, give up, or have to stop doing? When do you feel grateful or appreciative? For what? When do you feel like you're living life your way? Doing what? What gives you a sense of pride, achievement, doing it well, doing it the way you want to? Do you ever like the way you do things/treat the people you care about? When, where, doing what?

Do you ever like the way you are? When, where, doing what, with whom?

#### Modify, Adapt, Innovate!

Modify and adapt all the questions mentioned in this document, and in any other ACT text. Change the wording to suit yourself and your clients. And innovate - come up with your own questions; there are so many possibilities.

For example, one of my favourite lines of questioning is: "If our work here could make a positive difference in just one important relationship you have – who would you pick? How would your relationship improve? What will you do differently in this relationship if our work here is successful?"

You could ask similar useful questions by replacing the word 'relationship' with 'area of life' or 'activity'. E.g. "If our work here today could make a positive difference in just one important area of life – which would you pick: work, education, relationships, health, leisure, or something else? How would this area of life improve? What will you be doing differently in this area of life if our work here is successful?"

#### Starting Points

Answers to these questions often give us a range of useful starting points for the work of values, goals, and action-planning. We commonly elicit quite a mixture of:

- Important relationships
- Important domains of life
- Important activities
- Goals
- Desires
- Values-congruent actions ('towards moves')
- And usually, at least some values!

All of this information can be written down on the right side of the diagram under the heading HELPERS. This is a useful heading, because all these starting points are helpful: with some open exploration, they can all lead towards values, valuescongruent goals, and values-congruent actions. Strengths and skills can also be added here, as therapy progresses



#### **TOWARDS**

**Towards Moves** 

What you do or want to start doing that's acting effectively, behaving like the sort of person you want to be

#### Helpers

Important relationships, Important domains of life, Important activities, Values, Goals, Desires, Strengths, Unhooking Skills, **Other Skills** 

#### The Resource Pool

We can think of this assortment of helpers as a pool of resources to draw on for inspiration and motivation, to help clients clarify values, set valuescongruent goals, and take values-congruent actions.

The completed form can remain in the therapist's notes for future use (e.g. to flesh out on further sessions) or the client can take it away as a reminder of the session, or as a tool for further reflection, record keeping, values clarification, goal-setting or action planning.

Ideally, both client and therapist can keep a copy.

#### You Don't HAVE TO Know Values Up Front

You don't have to know up front exactly what the client's values are. You can work with goals initially, and tease out values later.

Remember, the client's therapy goals will usually (but not always) have important values implicit within them.

Indeed, with the CP2, this is often how it plays out: we often elicit values-congruent goals and values-congruent actions first, and then tease out the implicit values later.

If The Client Just Wants To Feel Better Or Stop Feeling Bad or Get Rid of These Memories, etc.

We acknowledge: "Of course you do. So a big part of our work here is learning how to deal more effectively with all those difficult thoughts and feelings and emotions and memories that you're struggling with. Can I just get clear about what they are?" We then write these down on the HOOKED side.

Once the left (hooked, away) side and bottom of the CP2 is filled in, we can now look at the right side and say: "So we've got half of the information we need here, for you to build a better life. And it's enough to start working with. But to get the bets results, we also need to fill in this side: get a sense of what's important to you, who you care about, what matters to you, what you'd like to do differently in life etc. Can we spend a bit of time on that?"

#### If The Right Side Remains Blank

Suppose the client can't answer any of our questions regarding the right side of CP2 – towards moves or helpers. Suppose he just shrugs, says 'I don't know', or 'nothing matters' to every question.

If so, this is golden information. It tells us this client is very remote from values, and that will need to be a major focus for therapy.

Now suppose she keeps returning to 'I just want to feel better' or 'I want to get rid of my anxiety' etc. This suggests she's probably fused with the emotional control agenda and will probably need a creative hopelessness intervention.

In either case, we can simply acknowledge: "Okay, right now it seems that it's too hard to fill in this side of the diagram. That's okay. We can leave it for now. We can begin working with the left side, come back to this later." We can add, "For now, I'd just like to write a few words here, if that's okay with you. Because, you see, the fact that you've come here to therapy shows there are at least three things you care about: yourself, your health and your life. So I just want to write them down there for now, and we can explore them." Therapist writes in 'myself', 'my life', 'my health' in the helpers section.

# Establishing Behavioural Goals For Therapy

Many therapists get stuck in ACT because they don't clearly establish *behavioural* goals for therapy.

- Emotional goals: what I want to *feel*
- Behavioural goals: what I want to do
- Sometimes therapy will initially focus on this behavioural goal: "Learning new skills to handle your difficult thoughts & feelings more effectively, so they have much less impact & influence." or "Learning to unhook from these difficult thoughts and feelings
- Yes, this is a behavioural goal. To learn any new skill is a *behavioural* goal; a skill is something you *do*. To 'feel happy' is an *emotional* goal: it describes what you want to *feel*. To 'learn new skills to unhook from your painful feelings' is a *behavioural* goal: it describes what you want to *do*.
- So if despite your best efforts, the right side of the choice point remains blank, then this is what you focus on initially: learning to unhook from what's on the left side. And on the right side, you'd write in the helpers' section "Unhooking skills"

#### Behavioural Goals For Therapy – cont.

Once we've filled in the left side of the CP2, we start on the right side, as described earlier. We can flesh out the right side by asking questions such as:

"Suppose I have a magic wand, and I wave it, so that all these difficult thoughts/feelings/emotions/memories are no longer an issue for you ... they lose their impact – they lose their power over you – they no longer jerk you around, hold you back, bring you down, get in the way – in other words, you are instantly and completely unhooked from them ....

- What would you stop doing or start doing, do more of or less of?
- How would you treat yourself, others, life, the world, differently?
- What goals would you pursue?
- What activities would you start or resume?

- What people, places, évents, activities, challenges, would you approach, start, resume or contact - rather than avoid or withdraw?"

The answers to these would all be written down as towards moves.

### Explicitly Confirming Behavioural Goals

The therapist then explicitly confirms with the client:

"So can I just check in with you that we have the same aim here? One aim is to get you doing more of this (*therapist points to and reads out aloud the towards moves*) so you can live life your way, be the sort of person you want to be. And another aim is to learn some unhooking skills to unhook from these thoughts and feelings, so ... they lose their impact – they lose their power over you – they no longer jerk you around, hold you back, bring you down, get in the way of you doing all this stuff (*therapist points to towards moves*). Does that sound right to you?"

- In the event that the client hasn't identified towards moves at all, just keeps coming back to 'I don't know' or 'I just want to feel good', this confirmation is modified: "Our main aim to begin with is to learn some unhooking skills - how to unhook from these thoughts and feelings, so they lose their impact – they lose their power over you – they no longer jerk you around, hold you back, bring you down, get in the way."

#### But What if the client says ....

"I don't want to unhook from them! I want to get rid of them, I hate them!"

This indicates high experiential avoidance and fusion with the agenda of emotional control. So creative hopelessness is warranted.

If you don't have time to segue into creative hopelessness (and I'd recommend you have at least a good 20 mins spare) a good response is simply: "Of course you do. And we'll certainly have a look at that possibility."

And then, "So van I ask you between now and next session to make a list of everything you've tried so far to do that?" or "Can I ask you between now and next session to a) notice everything you do to get rid of them, and if that succeeds, to notice how long they go away for before they come back again?" (There are a variety of ACT worksheets to facilitate this)

On the next session, you'd then want to kick off with creative hopelessness.

#### Why Are Behavioural Therapy Goals so Important?

- a) ACT is a behaviour therapy. We're looking for an outcome of behavioural change we want to see people guided by and acting on their values to actively create better lives
- b) Establishing behavioural goals up front often provides motivation and inspiration. For many clients, it's the first time they've started to create any kind of plan for the future.
- c) It gives therapy a direction, and makes it easy to assess if therapy is working or not
- d) It provides motivation for the hard yakka of learning mindfulness skills (especially acceptance skills): If learning this skill could help you to do X, Y and Z (behavioural goals), would you be willing to try it, apply it, practice it?
- e) It paves the way for values work right from the start of therapy. Even if values aren't made explicit at this point, they will be implicit in the behavioural goals, helpers, and towards moves
- f) It makes it possible to use the concept of 'workability' "If you do action A when feeling B or thought C or memory D or sensation E shows up ... will that take you into towards moves or away moves? Towards or away from the bull's eye? Towards or away from the life you want to build? More like the person you want to be, or less? Closer to achieving your life goals, or further way?)
- g) One of the most common reasons for therapists feeling lost, stuck, confused or directionless in session is because they have not taken the time to clarify behavioural goals.