The Choice Point 2.0: A brief overview (updated October 2018)

This is my latest version of the original "Choice Point" tool created by Bailey, Ciarrochi, Harris 2013 for our book *The Weight Escape*.

You can use this tool for many purposes, including to: explain the model; take a history; set an agenda for a session; summarise a session; instigate and reinforce all of the core ACT processes; establish a clear rationale for exposure; and much more.

In this doc, I'm just introducing you to a few of its most basic applications. There are many more ways to use it as a tool in therapy in addition to those described here.

By the way, as Choice Point 2.0 is a bit of a mouthful, I'm just going to call it the choice point or CP.

Choice Point: Acknowledging our predecessors

When Ann Bailey, Joe Ciarrochi, and myself created the original Choice Point, we were "standing on the shoulders of giants", inspired and influenced by a range of powerful and creative tools that came before us. Two of our main influences were:

- The ABC model of behaviour analysis (Antecedents => Behaviour => Consequences).
- The "Bull's Eye", created by Tobias Lundgren. (This was the first simple directional tool in ACT, that brought in the concepts of "towards moves" and "away moves": moving towards the bull's eye = moving towards values; moving away from the bull's eye = moving away from values)

We were also influenced by the simplicity, practicality and user-friendliness of:

- The "Matrix", created by Kevin Polk, Jerold Hambright, Mark Webster (The matrix came after the bull's eye and uses the term "away moves" in a different way)
- The "Four Square Tool", created by Kirk Strosahl and Patty Robinson



An important note on "Towards & Away Moves"

In the Choice Point: "Away moves" mean "ineffective, values-incongruent behaviour" –in other words, "moving away from the person you want to be" or "moving away from the life you want to build".

In the Choice Point: "Away moves" are often but *not always* due to experiential avoidance. They may also be due to fusion with reasons, rules, "being right", "looking good", seeking pleasure, or making sense. They may be due to fusion with any combination of positive or negative thoughts, feelings, emotions, urges, memories.

Please note: this is a **significant difference** in meaning from the way the term "away moves" is commonly used with the matrix. In current textbook descriptions of the matrix, the term "away moves" does NOT mean "moving away from values" or "moving away from the life you want to build". Instead, the term means, "moving away from difficult/unwanted thoughts and feelings", or "moving away from inner obstacles". This difference is significant; moving away from painful, difficult, unwanted thoughts and feelings is not the same thing as moving away from values. This doesn't make the choice point right or the matrix wrong; it's just to be noted as an important theoretical difference between the tools.



The next slide

The next slide shows what a choice point looks like in its most basic form.

I think it's better to draw this by hand in a session, rather than print it out – however, at the very end of this doc you'll find several printable black and white versions with various degrees of text on them,

Note that the term "thoughts & feelings" in the diagram is short for all private experiences: thoughts, feelings, emotions, memories, images, urges, sensations, beliefs, cravings, schemas, etc.



If you draw it by hand, it looks a bit like this...



Ideally, we draw the choice point 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'. Towards moves are things you want to start doing or do more of if our work together is successful.

Therapist draws & writes:

Towards

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". Away moves are things you want to stop doing or do less of if our work together is successful.

Therapist draws & writes:

Towards Away

Before we go any further, here are three important facts about the choice point ...

1. The choice point includes both overt and covert behavior.

2."Towards" and "away" always refer to the client's perspective, not the therapist's

3. Any behaviour may be towards or away, depending on the situation.

Let's now explore these, one by one.



1. The choice point includes overt and covert behavior.

In ACT we define behavior as "anything that a whole being does." Yes, you read that correctly: anything that a whole being does is behavior. This includes overt behaviors such as eating, drinking, walking, talking, watching "Game of Thrones," and so on. Overt behavior basically means physical behavior: actions you take with your arms, legs, hands and feet; facial expressions; everything you say, sing, shout, or whisper; how you move, eat, drink, breathe; your body posture; and so on. However, the term "behavior" also refers to covert behavior, which basically means psychological behavior, such as thinking, focusing, visualizing, mindfulness, imagining, and remembering. (This inner psychological behavior can never be directly observed by others, so it's often called "private behavior" rather than "covert behavior.")

Here's a simple way to distinguish overt from covert behavior. Suppose a video camera were to magically appear out of thin air while the behavior is happening. Could that camera record the behavior? If yes, then it's overt behavior. If no, it's covert behavior.

When we fill in the choice point with a client, we include both overt and covert behavior. For example, covert away moves might include rumination, worrying, disengaging, losing focus, and obsessing, and covert towards moves might include defusing, accepting, refocusing attention, engaging, reflecting on values, compassionate self-talk.

2. Towards and away refer to the client's perspective

The choice point always maps things out from the client's perspective. In other words, it's the client who defines what behavior is "away," not the therapist. Early in therapy, a client may see self-defeating or self-destructive behavior as a towards move. For example, a client with an alcohol or gambling addiction may initially class drinking and gambling as towards moves.

If so, we would not start debating this with the client. We would simply take a moment to clarify: "Can I just check we're using these terms the same way? Away moves are anything you want to stop or do less of if our work here is successful, and towards moves are the things you want to start or do more of, if our work here is successful. So if our work here is successful for you, you'll keep on (gambling, drinking, smoking weed etc.) to the same degree?"

If the client still labels the self-defeating behavior as "towards" after such clarification, then we acknowledge that and write it down alongside the towards arrow. Why? Because this is a snapshot of the client's life as he or she currently sees it, not as the therapist sees it. Our aim is to get a sense of the client's worldview and their level of self-awareness: what they see as problems, and what they don't. So if we challenge the client at this point, try to get him to change his mind and see this destructive behavior as an away move, we're likely to get into a fruitless struggle. For now, we put it down as a towards move, and we make a note to ourselves to address this in later sessions.

Initially we want to find therapy goals that will build the therapeutic alliance, rather than straining it. So we find out what the client *does* see as his current away moves, and we use ACT to work with him on those behaviors. (continues on next page)

Then, later in therapy, once the client has developed a higher level of psychological flexibility, we can return to the behavior and reassess it: "When you first came to see me, you classed gambling as a towards move. Do you still see it that way?"

Usually, as therapy progresses and the client's psychological flexibility develops, she will change her mind and class her self-defeating behavior as away – especially when she realizes it is getting in the way of other important life goals.

Also keep in mind that for one client, "moderate gambling/drinking when appropriate and harmless" might be the towards move, and "excessive gambling/drinking when inappropriate or harmful" might be the away move. See the next point for further elaboration.

3. Any behaviour may be towards or away, depending on the context.

When I watch TV primarily to avoid going to the gym or to procrastinate on some other important task, or when I eat a block of chocolate mindlessly to escape boredom or anxiety, I class those as away moves. But when I watch TV as a conscious, values-guided choice that enriches my life (e.g. catching the latest episode of The Walking Dead or Game of Thrones) – or when I eat chocolate mindfully, savoring it as part of a celebration with friends, I class those as towards moves. So it's not about the activity we're doing; it's about the effects that activity is having.

In contexts where an activity takes us towards the life we want, behaving like the person we want to be, it's a towards move; and in contexts where that activity takes us away from the life we want, behaving unlike the person we want to be, it's an away move. If writing examples such as these on a choice point, we'd include information to specify when it's towards and when it's away. For example, on my away arrow I'd write "watching TV to avoid doing important tasks" and "watching TV late at night when I should be sleeping". Whereas on my towards arrow, I'd have: "watching TV wisely as part of a balanced lifestyle choice".

Now when life is easy, giving us what we want, it's usually fairly easy for us to choose towards moves; to act effectively, treat ourselves and others the way we want to deep in our heart, do the things that make life better in the long term, rather than worse.

But unfortunately, life just isn't that easy most of the time, and it doesn't give us what we want for very long. So as we go about our day, all sorts of challenging situations and difficult thoughts and feelings arise.

Therapist draws & writes: 'Situation(s), Thoughts & Feelings'



Sítuatíon(s), Thoughts & Feelíngs

And unfortunately, we tend to easily get 'hooked' by those difficult thoughts and feelings; they hook us, and they reel us in, and jerk us around, and they pull us off track –and once we're hooked, we start doing all those 'away moves'.

Almost every psychological disorder, from stress and anxiety to depression and addiction, boils down to this basic process: we get hooked by difficult thoughts and feelings and we do 'away moves'.

Therapist writes: 'Hooked'

Away Towards Hooked

Sítuatíon(s), Thoughts & Feelings

However, there are times when most of us are able to unhook ourselves from those difficult thoughts and feelings, and do 'towards moves' instead –doing things move us towards the life we want to live -acting effectively, behaving like the sort of person we want to be. And the better we get at doing this, the better life gets.

Therapist writes: 'Unhooked'



Sítuatíon(s), Thoughts & Feelíngs

Drawing & Explaining ... Continued

Next we'd say something like: "So when we're in these challenging situations, experiencing difficult thoughts and feelings, there's a choice for us to make: how are we going to respond? Do we unhook and do towards moves? Or do we get hooked and do away moves?"

If you want to, you can draw a little circle under the bit where the arrows converge and write in the words "choice point" or the initial CP – as below. This *isn't necessary* though; you can leave it out if you prefer.



Drawing & Explaining ... Last Part

The therapist continues:

"For most of us, our default setting is we get hooked, we do away moves. But as we develop our unhooking skills, and we get clear about what matters to us, we find we have a lot more choice about how we respond. It gets easier for us to choose this way *(points to towards arrow)* over that way (*points to away arrow)*. So that's what this approach is all about. Basically, it's about helping you to get a lot better at doing this stuff - *(pointing to 'towards section')* – if and when that's what you want to do

So one of our aims is to help you identify your values – in other words, to get clear on what matters to you and who you care about and what sort of person you want to be – and use those values to guide and inspire and motivate you to do more of these towards moves.

And another aim is to develop 'unhooking skills', so you can get much better at unhooking from all those difficult thoughts and feelings. (*Points to 'unhooked section'*).

These towards moves also include taking action to solve your problems, and overcome challenges, and change those difficult situations for the better, if and when they can be changed. (*Pointing to 'situations'*).

So the greater our ability to unhook from difficult thoughts and feelings, and choose towards moves, the greater our quality of life, the greater our health, happiness and wellbeing."

INFORMED CONSENT and MODEL OVERVIEW

The preceding set up of the choice point can become a part of informed consent for ACT, and/or provide a quick overview of the model.

A technical note on 'Hooked'

'Hooked' = layman's term for any combination of 'cognitive fusion' and 'experiential avoidance'

All emotions and feelings (as these terms are commonly used in therapy) involve cognition. (Neuroanatomically speaking, the cerebral cortex is involved in the "formation" of all emotions.) So I like to talk to therapists about 'fusion with thoughts **and feelings'** - and to clients about 'getting hooked by thoughts **and feelings'**.

The term 'fusion' implies that thoughts & feelings are having a negative influence on behaviour – such that behaviour becomes *inflexible* or *rigid* to such an extent that it is self-defeating, problematic, detrimental to wellbeing. (I.e. the behaviour takes you AWAY from the sort of person you want to be, AWAY from the sort of life you want to build).

One of the most common ways we get "hooked" is by fusion with the agenda of emotional control: "I must avoid/get rid of my unpleasant thoughts & feelings". When hooked by the emotional control agenda, our behaviour becomes focused on trying to avoid or get rid of unwanted thoughts & feelings; this is known in ACT as 'experiential avoidance'.

Experiential avoidance is thus a subset of the many problems fusion creates. Fusion is the overarching problem in ACT. Experiential avoidance is normal, and only reaches problematic levels when there is fusion with the emotional control agenda.



Additional hooks

In addition to getting hooked by the emotional control agenda, we can also get hooked by:

- reason-giving, rules, judgments, the past, the future, our self-concept.
- looking good & being right.
- perfectionism.
- seeking pleasure, power, wealth, fame, status, and other coveted goals
- a sense of entitlement or righteousness.
- any emotion: anxiety, fear, sadness, anger, shame, guilt, greed, envy, jealousy, lust, etc.
- urges, cravings, desires
- and much more!

Loosely speaking, when we talk about fusion with our thoughts and feelings (getting hooked by them), we mean they "dominate" our behaviour in self-defeating ways; in their presence, our behaviour becomes rigid and inflexible.

So when we are fused with the emotional control agenda ("I must control how I feel – I must get rid of the unwanted feelings"), then experiential avoidance tends to dominate our behaviour.

However, there are many other types of fusion. Experiential avoidance is a common problem in ACT, but it's not always a problem, and it's rarely if ever the only one.



Additional hooks: A Theoretical Point

A technical note on "aversive" and "appetitive" control

The main problem we treat in ACT is narrow, rigid, inflexible behaviour.

Inflexible behaviour is often under "aversive control" (motivated by trying to avoid/escape something you *don't* want: an "aversive stimulus") – e.g. drug-taking motivated predominantly by trying to escape/avoid unwanted feelings of anxiety or traumatic memories.

Inflexible behaviour is also often under appetitive control (motivated by trying to get something you *do* want: an "appetitive stimulus") – e.g. drug-taking motivated primarily by trying to have fun, have a good time, party on with friends, fit in with a social scene, rebel against parents, feel like you're "living on the edge" and so on.

One of our main aims in ACT is to help people develop broader, more flexible repertoires of behaviour in the presence of *both appetitive stimuli and aversive stimuli* that normally tend to cue rigid, self-defeating behaviours. In other words, the core problem we target in ACT is not "behaviour under aversive control". The core problem we target is "behavioural repertoires that are narrow and inflexible, under aversive or appetitive control".

Unhooking skills

In ACT, the term **'Unhooking'** often refers to **'defusion'**, but you can use it in a much broader sense, to include any or all of the main 4 ACT mindfulness skills:

- Defusion
- Acceptance/self-compassion
- Contacting the present moment
- Self-as-context

These are all 'unhooking' skills in the sense they can help us to notice our thoughts and feelings and reduce their 'dominance' over our behaviour; they help us respond more flexibly to thoughts and feelings that typically trigger rigid, selfdefeating behavioural repertoires.

Taking a history & case formulation

We can use the choice point for taking a history, case formulation, or both, as the next slide illustrates.

Note: we can use the CP to map out a broad overview of life as it is today – writing in a wide range of situations, thoughts, feelings, away moves & towards moves across a number of life domains – or we can use it to narrow the focus on to one specific situation.

The example in the next slide shows a narrow-focus choice point, zooming in on a specific situation: a teenage boy who is avoiding math homework.





Situation: Maths home work

Thoughts & Feelings: I can't do it, why should I have to? I'm a loser/not good enough/stupid, I'll get it wrong, anger, frustration, anxiety

Taking a history & case formulation

Having highlighted the fusion, avoidance, unworkable action, we can go on to fill in the right side of the diagram. This is a dynamic process, which involves an ongoing dance between goals, actions, and values. Often it's easier to identify goals and actions initially, and tease out values later.

For example, suppose we ask the client what he wants to be doing instead of his 'away moves'; what he'd like to have happen with his maths lessons, and what he'd like to have happen in his relationship with Mum and Dad. He answers that he doesn't want to argue with mum and dad and he doesn't want to keep doing badly at maths. Those are "dead person's" goals, so we reframe them as "live person's goals", (get on well with Mum and Dad, do well at maths) and we write them in as helpers, about half way down on the right side, as shown on the next diagram.





Situation: Maths home work

Thoughts & Feelings: I can't do it, why should I have to? I'm a loser/not good enough/stupid, I'll get it wrong, anger, frustration, anxiety.

Taking a history & case formulation continued

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 larger goals or breaking goals down into actions. We can do this in any order we like; there's no fixed sequence.

Remember as you do this: *towards and away moves are always from the client's perspective.* So if the parents and/or therapist see doing math homework or getting a math tutor as a towards move, but the teenager *does not*, then it does *not* go down as a towards move!

In this specific case, we move from goals to actions and values: the client identifies towards moves that will take him towards the goals specified, and the values that underpin this, as the next slide shows.





Situation: Maths home work

Thoughts & Feelings: I can't do it, why should I have to? I'm a loser/not good enough/stupid, I'll get it wrong, anger, frustration, anxiety.

'Helpers'

We don't have to use the term "helpers" but it's a convenient term for all the stuff we can write down on the right side of the diagram to facilitate towards moves:

- Values & goals: what matters to you? Who do you care about? What sort of person do you want to be? How do you want to treat yourself, others, the world around you? What do you want to do more of, less of, or differently? What do you want to stop or start doing?
- "Unhooking" skills: defusion, acceptance, contacting the present moment, self-ascontext, self-compassion.
- Additional life skills: problem-solving, goal-setting, action-planning and others as needed (e.g. assertiveness, communication, empathy). We can also bring in strengths here.

We don't have to, but we can, if we wish, write '**Helpers**' in on the right side of the diagram as therapy progresses. The next slide illustrates this.



AWAY

- Avoiding doing maths home work: instead, playing video games, watching youtube videos.

- Arguing with Mum and Dad when they ask about homework or suggest a tutor.



Thoughts & Feelings: I can't do it, why should I have to? I'm a loser/not good enough/stupid, I'll get it wrong, anger, frustration, anxiety.

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TOWARDS

- Doing the homework, accepting Mum & Dad's offer for a tutor.

HELPERS:

Goals: to do well at school & get on with Mum & Dad.

Values: courage, grit, determination, facing my fears.

Unhooking skills: naming the "I'm stupid" story, dropping anchor, expansion.

Other skills: newstudy habits (e.g. scheduling, taking breaks).

As specific as you like

You can make a choice point diagram as specific/narrow/focused as you like. For example, for this client you might do a very broad one on his relationships in general, a more focused one on his relationship with one or both of his parents, or a very specific one where the situation is his parents asking him about homework.

Hexaflex & triflex interventions

The choice point easily maps onto hexaflex or triflex processes. The next two pages illustrate this:



Intervention: Hexaflex processes



Intervention: Triflex processes



'Helpers'

The hexaflex or triflex processes, as mapped out in the previous two slides, can be written down as "helpers" as they are introduced.

DSM & ICD => ACT formulation

Almost any DSM or ICD disorder can quickly and simply be summarised and reformulated in terms of ACT, via the bottom and left side of the choice point.

For example, in the next slide, we meet a client with depression.

Note how the diagram reformulates depression in terms of ACT processes: fusion with and/or experiential avoidance of thoughts and feelings (HOOKED), values-incongruent ineffective behaviour (AWAY MOVES) and challenging life situations that require problem-solving and committed action (SITUATIONS).

You can easily map this out as you take a history of the client's presenting complaint(s).





Situation: tension in marriage, 'job sucks', overweight and unfit, 'boring life'.

Thoughts & Feelings: anxiety, sadness, guilt, shame, I'm dull/stupid/boring, I'm fat, I can't change, life sucks, I hate myself and my job, my husband will leave me.

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- Avoiding exercise.

- Staying away from friends.

- Snapping at my husband.

- Spending evenings playing Candy crush and watching crappy TV.

with friends, family and husband.

As therapy progresses, we can fill in the right side from session to session – identifying current towards moves & desired towards moves, and writing down 'helpers' as they are introduced.



- Exercising & eating well.
- Engaging at work.
- Connecting & engaging with my husband, friends, family.
- Spending evenings reading orstudying for new gualifications to get a better job or having fun with husband & friends.

HELPERS:

Values: loving, caring, self-care, courage.

Goals: better job, better marriage, get fit, good social life.

Unhooking skills: naming the story, thanking my mind, kind hand, dropping anchor, physicalising.

Situation: tension in marriage, 'job sucks', overweight and unfit, 'boring life'.

Thoughts & Feelings: anxiety, sadness, guilt, shame, I'm dull/stupid/boring, I'm fat, I can't change, life sucks, I hate myself and my job, my husband will leave me.

So, there are 4 broad areas to explore when using the choice point for taking a history & case formulation:



1. What is (are) the challenging situation(s), thoughts & feelings in your life today?

Can Thoughts and Feelings Go As Towards or Away Moves?

Feelings and emotions always go at the bottom of the choice point; i.e. they should never be classed as towards or away moves. Towards and away moves are what you do in response to the feelings and emotions that "show up".

Active cognitive processes such as ruminating, worrying, reflecting on values, action planning, problem solving, compassionate self-talking, can and often do go down as away or towards moves.

However individual thoughts/beliefs/attitudes/assumptions/rules/schemas that "show up", always go at the bottom of the choice point. Towards and away moves are what you do in response to those cognitions that "show up".

Note also that any behaviour you plot in the away or towards move sections will itself be an antecedent to further behaviours. So you could, for example, take a covert behaviour that's in the away section, such as worrying, and use it at the bottom of a brand new choice point diagram to map out towards and away moves in response to worrying.



Using the Choice Point

Hopefully you can see how this lends itself easily to:

- Informed consent.
- ACT case formulation.
- Setting an agenda ("Which part of this shall we focus on today?").
- Summarising a session ("Here's what we covered today".)
- Clarifying values, setting goals, planning actions.
- Identifying difficult thoughts & feelings that require defusion, acceptance, selfcompassion, etc.
- Identifying difficult situations that require problem-solving & committed action.

We can also use it in many other ways, but that's beyond the scope of this basic overview. The final pages in this doc are printable versions of the choice point with varying degrees of text. However, as I said earlier, I think it's much better if you draw it by hand as you explain it.









2. When you get hooked by your thoughts & feelings, what kind of "away moves" do you do: acting ineffectively, behaving unlike the person you want to be?

AWAY

1. What is (are) the challenging situation(s), thoughts & feelings in your life today?

Situation(s) Thoughts & Feelings

HOOKED

UNHOOKED

towards moves do you already make or would you like to start making – acting effectively, behaving like the person you want to be?

3. What kind of

TOWARDS

4. So is it okay if we take some time to explore what matters to you & who you care about – to help figure out your towards moves? And can we also work on developing some unhooking skills, so these thoughts and feelings no longer hold you back or pull you off track?