A multidisciplinary team of Psychologists, Psychiatrists and Service Users.

**CHOICE – Short form**

This questionnaire has been developed by asking the opinions of people who have used therapy services for distressing difficulties. It looks at the sorts of things that you may want to work on in therapy. It is made up of 11 statements and 1 personal goal. You can fill it in on your own or with your therapist. For each statement, please begin by reading it carefully and then put a cross on the line to show how you have felt about it over the last week.

1. **The ability to approach problems in a variety of ways**
   - How would you rate yourself for this?
   - 0 1 2 3 4 5 6 7 8 9 10
   - worst best

2. **Self-confidence**
   - How would you rate yourself for this?
   - 0 1 2 3 4 5 6 7 8 9 10
   - worst best

3. **Positive ways of relating to people**
   - How would you rate yourself for this?
   - 0 1 2 3 4 5 6 7 8 9 10
   - worst best

4. **The ability to question the way I look at things**
   - How would you rate yourself for this?
   - 0 1 2 3 4 5 6 7 8 9 10
   - worst best

5. **Ways of dealing with everyday life stresses**
   - How would you rate yourself for this?
   - 0 1 2 3 4 5 6 7 8 9 10
   - worst best

6. **Ways of dealing with a crisis**
   - How would you rate yourself for this?
   - 0 1 2 3 4 5 6 7 8 9 10
   - worst best

7. **Facing my own upsetting thoughts and feelings**
   - How would you rate yourself for this?
   - 0 1 2 3 4 5 6 7 8 9 10
   - worst best

8. **Peace of Mind**
   - How would you rate yourself for this?
   - 0 1 2 3 4 5 6 7 8 9 10
   - worst best

9. **Understanding myself and my past**
   - How would you rate yourself for this?
   - 0 1 2 3 4 5 6 7 8 9 10
   - worst best

10. **Understanding my experiences (e.g. beliefs, thoughts, voices, and related feelings)**
    - How would you rate yourself for this?
    - 0 1 2 3 4 5 6 7 8 9 10
    - worst best

11. **Positive ways of thinking**
    - How would you rate yourself for this?
    - 0 1 2 3 4 5 6 7 8 9 10
    - worst best

12. **This is space to write a personal goal that you would like to achieve in therapy.**
    - Personal Goal
    - 0 1 2 3 4 5 6 7 8 9 10
    - worst best