



Decision-making: considering all possible outcomes

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When I was studying coaching one of the things we learned was a decision-making technique, which is one I often get my clients to use. Most of us know how to list the pros and cons of an action to help us make a decision. For example, you are thinking about completing another course of study and you consider the benefits and the negative consequences of doing so. However, there are some additional questions to ask. There are four in fact that I use, and no doubt someone could come up with even more. These are the four outcomes that I learned and get people to use.

Let us say you have to decide to choose whether to go with event A or not. Event A could be choosing a different job. It could be choosing to live in another town. It could even be choosing a course to study. Most people know how to list the pros and cons. Which is

- (i) If I choose event A, how will I benefit. (pros)
- (ii) If I choose event A, what are the negative consequences. (cons)

If you consider all the four options

- (i) If I choose event A what could happen
- (ii) If I choose event A what could not happen
- (iii) If I don't choose event A could happen
- (iv) If I don't choose event A what could not happen.

Asking all four questions gives you more information to consider when making big decisions and thus raises the probability you do eventually make the best decision. Generally speaking, the more we have thought through different outcomes of possible decisions, and the more information we have taken into account, the better our decisions. To illustrate this, I want to use an example from mental health.

Many years ago, while at a social event, I was asked by a woman and her husband for my thoughts on a dilemma they were facing. They had adopted a boy who was five years old and a paediatric psychiatrist had recommended he go onto Risperdal (which is an antipsychotic medication). I admit that initially I was thrown off guard a bit. This is not a question I usually get or ever have to consider. And knowing what Risperdal is and what it is used for, was probably as taken aback as they were when it was first mentioned. They asked me what I thought of this. Now I am not a paediatric psychiatrist

so I cannot really tell them what to do, but we did discuss a lot of options around taking the decision, specifically using the framework mentioned earlier.

Some of the information we considered was the following. Both the boy's biological parents (he was adopted) had had many psychotic episodes and one was a suicide. From my lectures in psychiatry in 1986 our class was told that prevention of a first psychotic episode is extremely important, and forty years later this is still the case, so preventing any psychotic episode is really important. The medication is approved for 5-year-olds having passed all the research and clinical trials required. Then there are the possible negatives which the parents were considering – his brain is still developing and what are the possible negative implications? Does this mean medication for life? What about possible side-effects? How do you maintain compliance as well as fit in all the doctor's appointments possibly for the rest of his life, but certainly as a child.

Then there comes the other questions. What are the consequences of not taking it? If you don't take it what could happen, and if you don't take it, what will not happen? And sometimes people don't consider these. He is already showing signs of requiring help and if he does not take it, aspects of his life could be seriously affected. Going into his primary school years forming peer relationships and developing social skills is very important and these could be disrupted. So is education. If your basic education is compromised then it is hard because all education builds on having a solid basic early education. And if you really think negative consequences, there is even the possibility of a juvenile record. So, the consequences of not taking the medication could also be severe.

Sometimes when a client has a major or life-changing decision to make, we can apply a lot of decision-making frameworks and still the outcome is that they don't have enough information to make a decision. In which case they need to find out more. Which means seeking expert advice, getting second or third opinions, or doing more research, and talking to more of the right people. I know these parents did all that. I don't know what the final decision was so I cannot tell you, however this is not an article about paediatric mental health, it's about making hard decisions.

Sometimes you may find people pressure you to make decisions too quickly. If you can, rather take some time to think your options through. Sometimes you have to make a decision quickly and if you really cannot put it off then still try and use a framework that considers all the possible outcomes and their consequences. There are situations where quick decision-making is necessary and postponement of decisions will have considerable negative consequences. When making decisions I also suggest clients take into account their values and their goals. You want your decisions to support the values you live by and the goals you have in life.

And then as I tell all my clients, if you find you have made the wrong decision, or you think you need to change your decision then please change it. If you are a long way down the road going in the wrong direction don't carry on going in the wrong direction. Change it. No matter how much effort you put into deciding on that direction, carrying on in the wrong direction is just silly. If you know you are moving in the wrong direction, then change it. Don't beat yourself up about your initial decision or worry about wasted time going in the wrong direction. Time will pass and often show you that it usually wasn't wasted time after all because you learned something new and important.