

Painstaking choices: Distinguishing neural representations of subjective value, conflict, magnitudes, and contextual biases in deterministic decision making with mixed outcomes

Allison D. Shapiro, Neil M. Dundon, Gold N. Okafor, Scott T. Grafton Department of Psychological and Brain Sciences, University of California, Santa Barbara

Contact: shapiro@psych.ucsb.edu

FBACKGROUND

Session Overview

- Decision making entails evaluating contingent costs and benefits of competing choice alternatives
 The overall subjective value (SV) of a given option is determined by combining its positively- and negatively-valued attributes.
- When the SV of a given choice alternative is extremely positive or extremely negative choices are relatively easy and lead to certainty in decision making. In other cases, when SV is close to 0, choices entail more conflict resolution and lead to ambivalence ind decision making.
 Much progress has been made in understanding vmPFC's critical role in representing SV in value-based decision-making (Grabenhorst & Rolls, 2011; Park, Kahnt, Rieskamp, Heekeren, 2011; Hunt et al., 2012; Levy & Glimcher, 2012).
- More recent work is beginning to show that this region may also represent choice certainty (De Martino et al., 2013; Lebreton et al., 2015). However, it is still unclear how mPFC integrates these signals when certainty and value are inversely related (i.e. when we are certain of decisions to reject negative SV choice alternatives)
 We found that vmPFC engages for high-certainty choices, even for decisions about low SV choice alternatives.

vmPFC hypotheses

Pain Thresholding

p50m30

p10m20

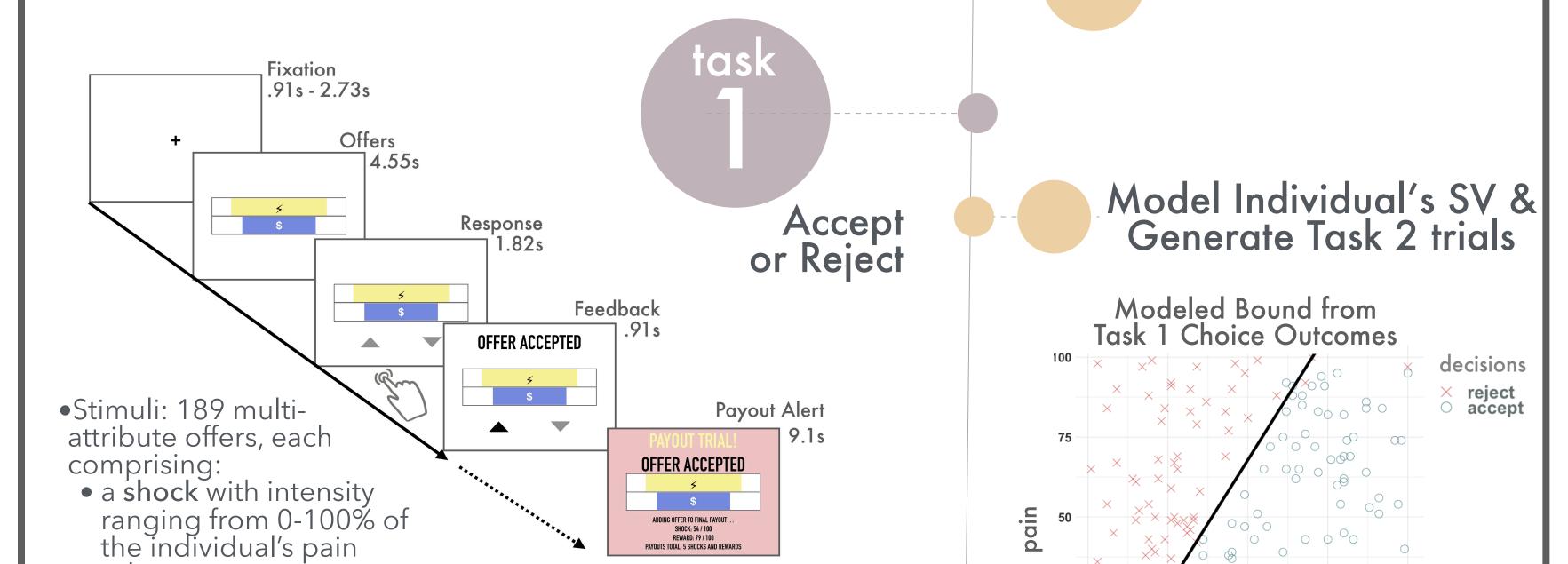
p90m20

p10m80

p90m80

Choice Payouts

-EXPERIMENTAL DESIGN



- A monetary reward of \$0 \$1.50 shocks and rewards vary independently and continuously 0-100%
 Task: choose to accept or reject offer (189 trials)
- 10 payout trials randomly chosen. Payout alerts are given immediately after the participant makes their choice, but shocks

Stakes: distance along decision boundary corresponding to

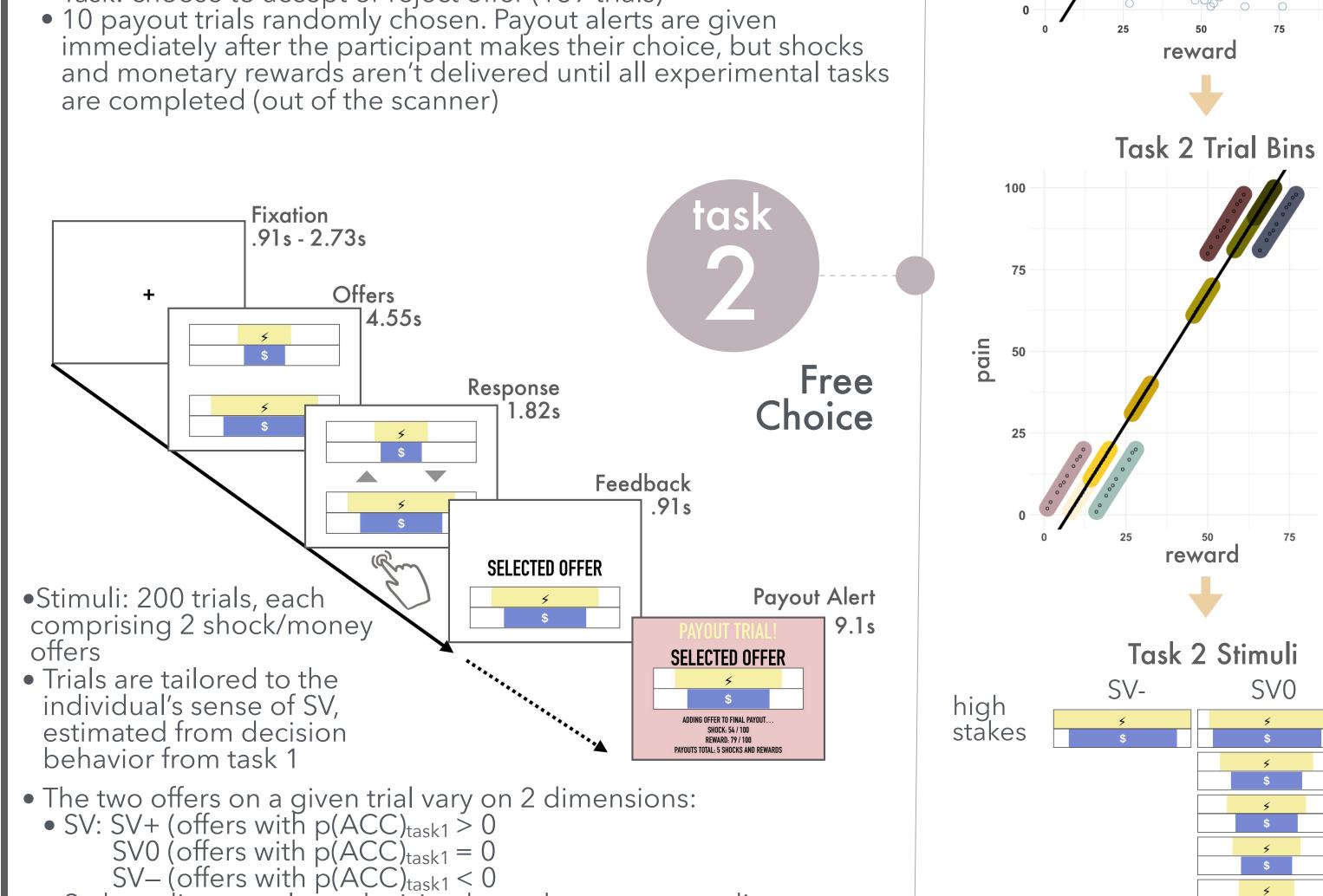
• In the stakes-only condition, both offers are equal in value but

In the stakes*value condition, offers vary in both SV and stakes

• 10 payout trials randomly chosen. Payout alerts are given immediately after the decision but delivered after the task.

overall magnitude of the offer

vary in stakes (0-100%)



-METHODS

- 24 healthy participants (18-25 years old, 15 women)
- PowerLab 26T, intensities depended on individual's measured pain threshold with maxima ranging 5mv-31mv

 • Anatomical ROI selection: Harvard-Oxford Atlas
- anterior/posterior insula ROIs were formed by masking the Harvard-Oxford atlas with anterior and posterior insula divisions from the Brainnetome atlas
- •Imaging: Siemens 3T Magnetom Prisma Fit (64channel phased-array head coil).
 •Structural: high-res. 0.94 mm isotropic T1 and
- Functional: multiband T2*-weighted echo planar gradient-echo imaging sequence (TR=910 ms, multiband factor 8, coronal slices, 2 mm thick; 2x2 mm in-plane resolution).

-RESULTS: DECISION BEHAVIOR -

Choice Outcomes • Logistic regression fit individuals' choice outcomes and predicted 100 75 50 25

- For some, pain costs may not be
- costly enough.Additive SV model and interactive SV model fit choice outcomes equally well

Modeled Certainty



- outcome on each trial = choice
- Accept Certain = upper 50th

Reject Certain = lower 50th percentile SV of all rejected offers (SV-, high certainty) Reject Conflict = upper 50th percentile of all rejected offers (SV-, low certainty) Individual differences in choice x certainty bin for identical stimuli

Task 2: Stakes Preferences

Boundary Offers: on each trial both offers taken from decision boundary but vary in

- Systematic preferences for values with same estimated SV from task 1 Large individual
- differences in preference structure Most individuals shaped preference structure with a peakpreference (most frequently selected magnitude), with similar similar choice
- frequencies. • The group preferred 60% magnitude offers, however large individual differences in most preferred magnitude

SVO: Stakes Preferences

1 10 30 60 80 90 1 10 30 60 80 90

1.00 0.75 0.25 1.00 © 0.75 © 0.50 0.25 0.00 1.00 0.75 0.50 0.05

Stakes*SV

Preferences

• When SV of the 2 offers is equal (0, -.4, .4), the group tended to prefer the high-stakes option.When the two offers differ in SV, the group prefers the higher SV

option except low stakes SV+ is

paired with high stakes SV0

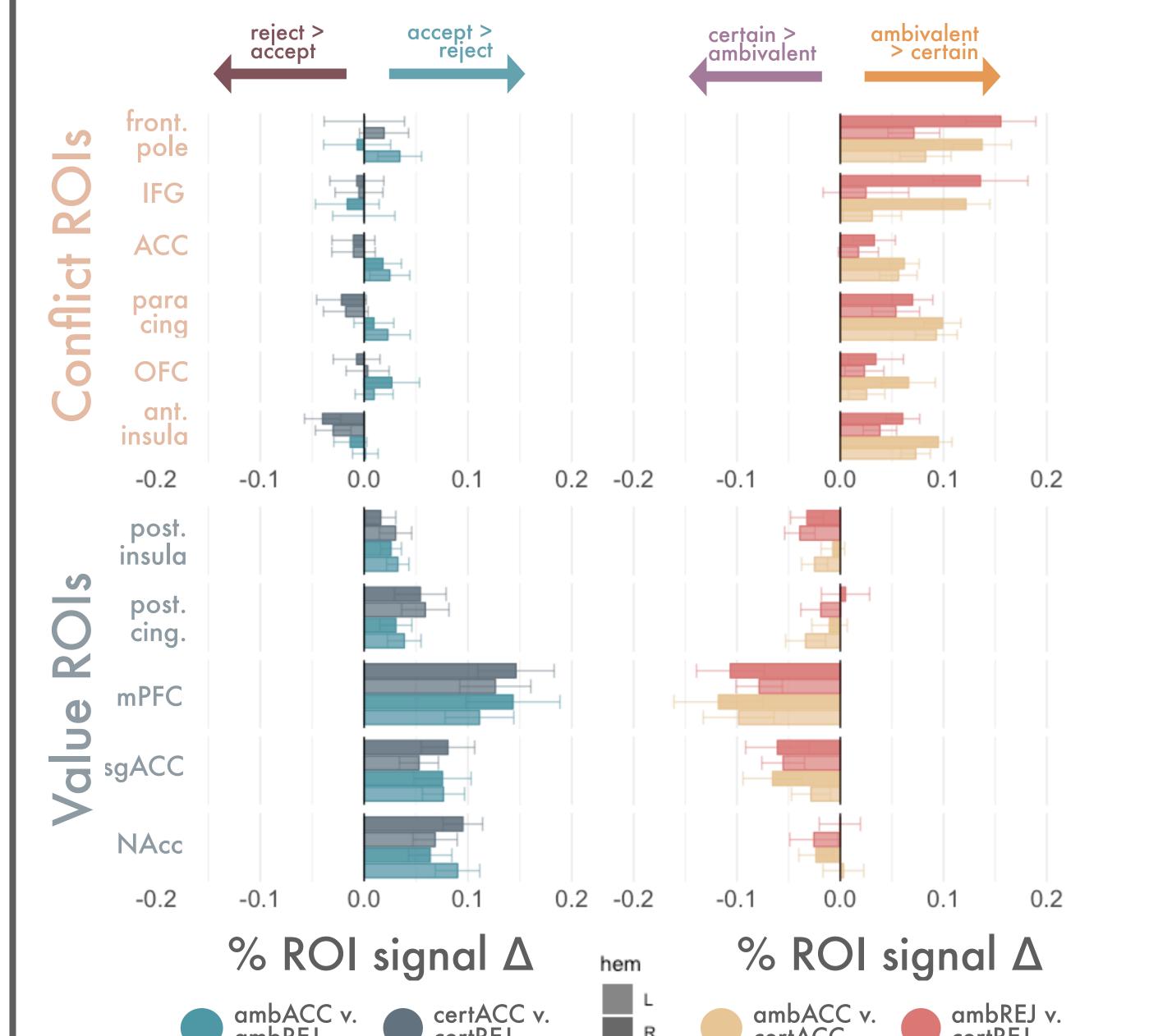
RESULTS: fMRI

Value & Conflict ROIs

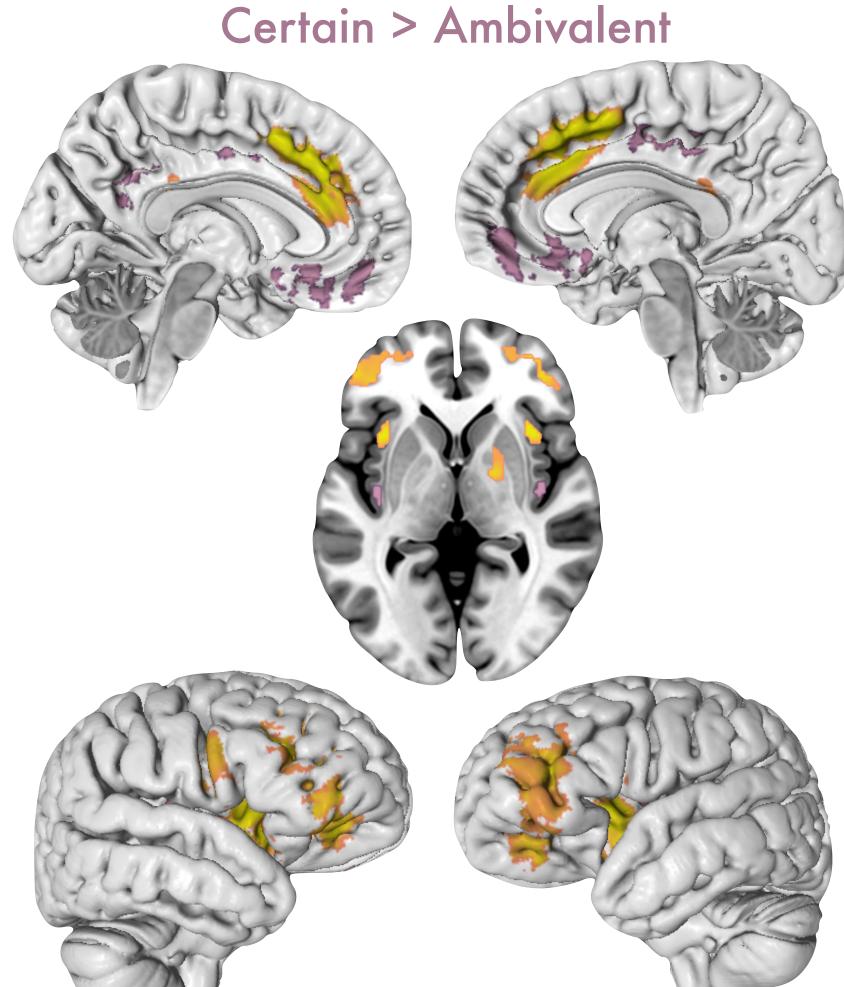
- Lateral PFC, ACC, OFC, and anterior insula engage when there is choice conflict (ambivalence). Activity in these regions does not correspond to
- choice outcome (except anterior insula).

 •vmPFC, NAcc, posterior cingulate, and posterior insula engage when offers are accepted. NAcc and posterior cingulate signals are insensitive to choice conflict, whereas activity in vmPFC and posterior insula correlates with both choice outcome and choice certainty.

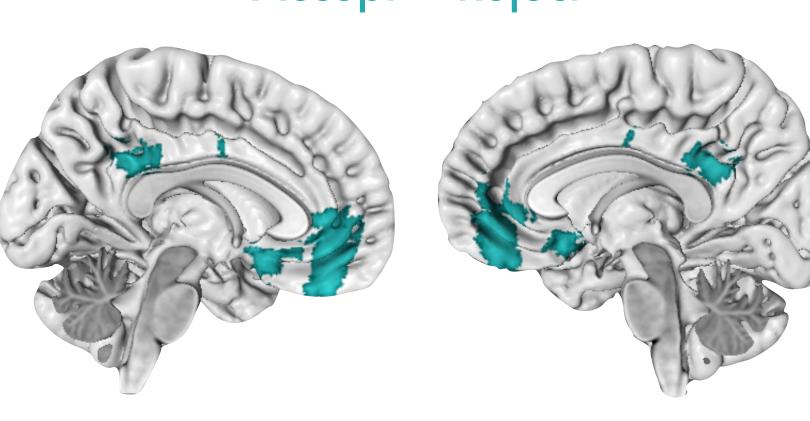
Certain v. Ambivalent Reject v. Accept



Ambivalent > Certain



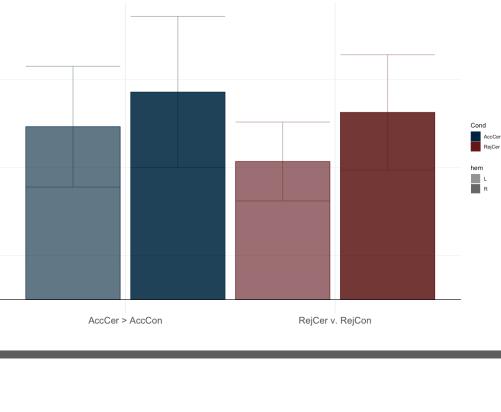
Accept > Reject

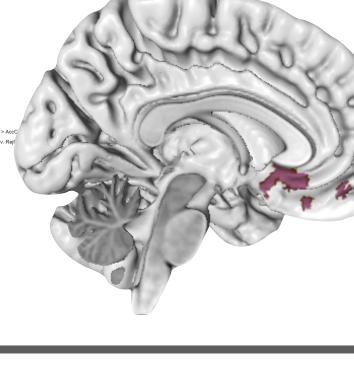


cerRei > ambRei

vmPFC ROI

- Small-volume FDR correction in anatomical vmPFC ROI (comprising sgACC and mPFC) reveals choice certainty significantly predicts activity.
- This is the case for certain accept > ambivalent accept, when high certainty also indicates high value. Notably, this is also the case for certain rejects > ambivalent rejects, when high certainty indicates low value.







CONCLUSIONS

- SV in deterministic choices with mixed outcomes of money and pain best predicted by additive model, however there are large individual differences in SV attributed to offers of identical objective value.
- Choice certainty can be estimated as distance from decision boundary with near-boundary offers = low certainty.
 Brain regions associated with conflict resolution and response competition are active during low-certainty choices, but
- their activity does not seem to correlate with the outcome of the choice. Brain regions associated with value, pain, and emotion are more active for accept choices (SV+) than reject choices (SV-)
 vmPFC response is *not* value-specific, but rather depends on both value and certainty, with stronger responses during
- high-certainty choices than low-certainty choices

 In the context of free choice between 2 available offers with equal SV_{task1}, participants are not equally likely to choose either offer, but rather form new systematic biases in choice behavior based on the relative magnitudes (stakes) of their options.