

Behavioral Economics as An Implementation Strategy to Improve Reach

Wen You

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Road Map

- Behavioral Economic Brief Intro
- Implementation Research + BE = ?
- Selected Concepts & Applications
- BE Informed Implementation Research Protocol Example
- Case Study Illustration





Behavioral Economics

- Interdisciplinary field: psychology + economics + ...
- Differs from psychology: considers the contexts and institutions under which decisions are made
- Differs from economics: uses more realistic and more complicated model for decision making
- Overall: BE studies how the <u>context of decisions</u> interacts with our expanding understanding of <u>human psychology</u>
- It is not based on "irrationality"
- It is not about "controlling" behaviors

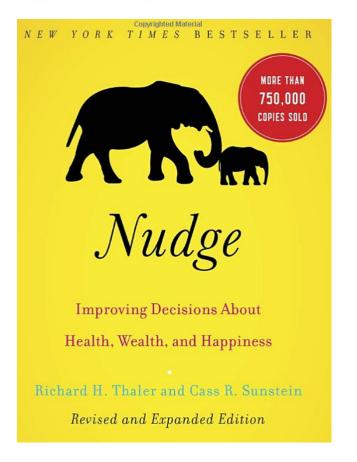


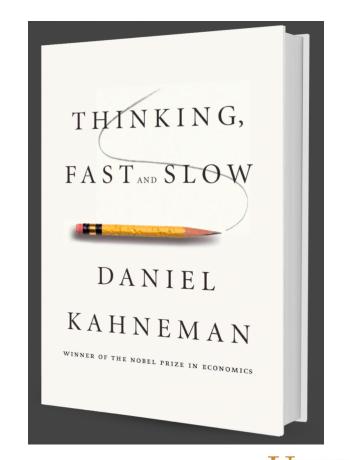


Behavioral vs. Traditional Economics

- Traditional view of economics:
 - have unlimited rationality and stable preferences
 - have absolute self-control
 - can do optimization effectively under all circumstance
- BE challenge those: We are just human
 - have bounded rationality → not accurately processing all info
 - have bounded willpower → not have absolute self-control
 - have bounded selfishness → not max benefit for self_always













Context:

This is the menu of J.J. lunch order for tomorrow's workshop working lunch time together

• What is your choice?









Context:

This is the menu of J.J. lunch order for your lunch break when you will eat alone

• What is your choice?





CHOOSE A SANDWICH

Calories are shown for Original/Glant on French bread

GARGANTUAN

ORIGINAL 🗯 GIANT

SALAMI, CAPICOLA, TURKEY, ROAST BEEF, HAM & PROVOLONE

THE J.J. GARGANTUAN" onion, lettuce, tomato, mayo, oil & vinegar, & oregano-basil 1100/2190 cal

810/1610

800/1590

FAVORITES

ORIGINAL 🌟 GIANT

#2 ROAST BEEF, HAM & PROVOLONE 830/1660

BILLY CLUB" Dijon, lettuce, tomato & mayo

#9 BIG ITALIAN 950/1890

ITALIAN NIGHT CLUS" salami, capicola, ham, provolone, lettuce, tomato, onion, mayo, oil & vinegar, & oregano-basil

#10 DOUBLE ROAST BEEF & PROVOLONE 850/1690

HUNTER'S CLUB' lettuce, tomato & mayo

#9 A ROAST BEEF & TURKEY BREAST 710/1410

#14 ROAST BEEF & TURKEY BREAST
BOOTLEGGER CLUB" lettuce, tomato & mayo

#96 SLICED TURKEY & BACON 710/1410

CLUB LULU' lettoce, tomato & mayo

#17 ULTIMATE HAM BLT 720/1430
ULTIMATE PORKER' lettuce, tomato & mayo

ORIGINAL * GIANT

#7 DOUBLE HAM & PROVOLONE

SMOKED HAM CLUB lettuce, tomato & mayo
#44 TURKEY, HAM & PROVOLONE

COUNTRY CLUB' lettuce, tomate & maye

#12 TURKEY BREAST, PROVOLONE & AVO 860/1720

SEACH CLUS" cucumber, lettuce, temate & mayo (spreet' spines)

COURMET VEGGIE CLUB" double provelone, avocado, cucumber, lettuce, tumato & mayo (sprints' oplona)

#15 TUNA SALAD & PROVOLONE 890

CLASSICS

ORIGINAL 🌟 GIAN

#2 ORIGINAL ROAST BEEF
BIG JOHN' lettuce, temate & mayo

#4 TURKEY BREAST 510/1010
TURKEY TOM" lettuce, tomato & mayo (spreats" optional)

#E PERFECT ITALIAN 820/1230

VITO" salami, capicola, provolone, onion, lettuce, tomato, oil & vinegar, & oregano-basil

J.J.B.L.T.*

Bacon, lettuce, tomato & mayo

ORIGINAL * GIANT

HAM & PROVOLONE
THE PEPE" lettuce, tomato & mayo

#3 TUNA SALAD 560/1110
TOTALLY TUNA* cocumber, lettroce & temate (screets artistal)

Sliced provolene, avecade, cocumber, lettuce, temate & mayo (spreets' optional)

PLAIN SLIMS®

(PERFECT FOR KIDS!) ORIGINAL ONLY. NO FREEBIES.

HAM & CHEESE

5 5 TALIAN

6 CHEESE

540/1070

630/1250

Context:



You had a long day at work. You picked up your kid from daycare and stopped by J.J. to order for you and your husband. You are trying to be careful with calories. You had 620 cal for BF and 550 cal for lunch. You try to stay within 2,000 cal.

Now, what is your choice?





Implementation Research + BE = ?

Imp l	lement	tation
R	Resear	ch

Designed to increase knowledge

Encourages stakeholder involvement but needs more efficient operation of how

RCT testing of whether or not IS work but lacks testing of mediation and pathways

Implementation Research + BE

Designed to change the environment/context

Multilevel-incentivized systematic approach recognizing asymmetric information flow

Provide platform for developing statistical approaches that allow multilevel mediation analysis





REASONS

you should add behavioral economics (BE) to your implementation team's toolkit.



New perspectives on the work & the team.

BE insights can prompt the team to explore new approaches, as well as reflect on how its own biases impact the work.



Increased empathy for 'change resistors'.

BE helps us to understand the biases, which most of us have, that make resistance happen. Resistors aren't difficult so much as they are human.



More realistic expectations - change is hard!

Research from BE illustrates why change is inherently hard to implement. Challenges are not a sign a failure; they should be expected and planned for.



It's a complement, not an alternative.

BE insights are not all purpose solutions. BE can best be used in conjunction with other methods, and a strong understanding of context.





- The Power of Social Norms:
 - People tend to behave in accordance with real or perceived social norms
- Example: Pro-environmental behaviors uptake **Injunctive** H. Allcott / Journal of Public Economics 95 (2011) 1082-1095 Last Month Neighborhood Comparison Last month you used 15% LESS electricity than your efficient neighbors. YOUR EFFICIENCY STANDING YOU 504 kWh+ GREAT ©© **EFFICIENT** Descriptive GOOD (C) 596 **NEIGHBORS** BELOW AVERAGE ALL NEIGHBORS 1.092 * kWh: A 100-Watt bulb burning for 10 hours uses 1 kilowatt-hour. Fig. 1. Home energy reports: social comparison module.



- Framing Effect:
 - Present choices in a way that highlights the positive or negative aspects of the same decision, leading to changes in their relative attractiveness
 - ✓ risky choice framing
 - ✓ attribute framing
 - ✓ goal framing

Targeting less stigmatized risk factors/disorders that are associated with main treatment goal

Substance use disorder treatment

Anxiety or mood disorder treatment





- Status Quo Bias / Inertia
 - People tend to prefer for things to remain the same: tendency not to change behavior without strong incentives
 - Classic application: 'opt-in' vs. 'opt-out'

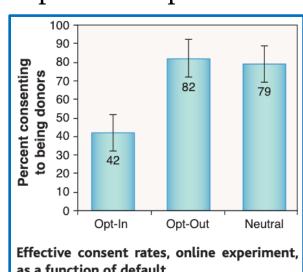
POLICY FORUM MEDICINE

Do Defaults Save Lives?

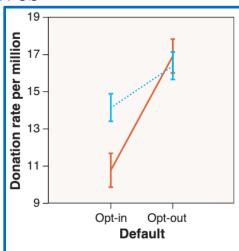
Eric J. Johnson*, Daniel Goldstein

+ See all authors and affiliations

Science 21 Nov 2003: Vol. 302, Issue 5649, pp. 1338-1339 DOI: 10.1126/science.1091721



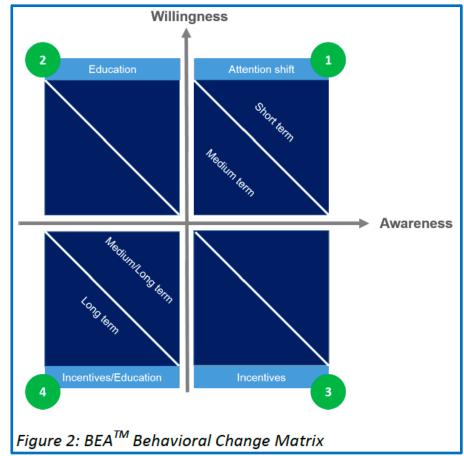
as a function of default.



Estimated donation rate, opt-in versus opt-out, as a function of default, 1991–2001. Means ± SEM; this paper, blue; Gimbel *et al*. (*5*), red.



- Incentives:
 - Something that motivates an individual to perform an action
 - They can help to create desirable and break undesirable habits
 - Upfront incentives can address present bias (i.e., focusing on immediate gratification)





How to Design Better IS Through BE?

JMIR RESEARCH PROTOCOLS

Beidas et al

Protocol

Transforming Mental Health Delivery Through Behavioral Economics and Implementation Science: Protocol for Three Exploratory Projects

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LCSW; Emily M Becker-Haimes¹, PhD; Molly Candon^{1,3}, PhD; Zuleyha Cidav^{1,3}, PhD; Jessica Fishman^{1,13}, PhD;

Adina Lieberman¹, MPH; Kelly Zentgraf¹, BA; David Mandell¹, ScD



Protocol Example

- Project: motivating outpatient therapists to implement: valuing a team effort (organizational-level)
 - Participatory design approach:
 - ✓ 1st: innovation tournament among clinicians (end users) → best ways for organizations to use incentives
 - ✓ $2^{\rm nd}$: behavioral diagnosis process to refine ideas from $1^{\rm st}$ → identify specific barriers impeding the use of EBP → IS
 - ✓ 3rd: discrete choice experiment to systematically elicit and quantify stakeholder's preferences on how IS are designed and structured → quantify the extent to which specific design features are desired



Case Study Illustration



DESIGNING FINANCIAL INCENTIVES TO ENHANCE PARTICIPATION OF TARGET POPULATIONS

in Weight Loss Programs

Research Team:

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- Barbara Kanninen (BK Econometrics, LLP)
- Christopher Parmeter (ECON, U of Miami)



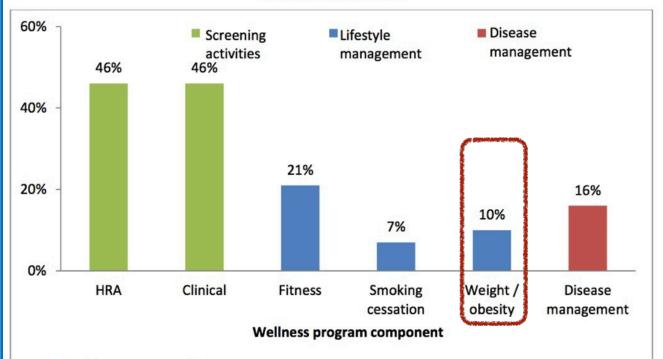




Puzzle: Is Help Not Needed?

Figure S.3: Average Participation Rates of Employees Identified for Inclusion in Select Wellness

Program Components



SOURCE: RAND Employer Survey, 2012.

NOTES: The graph represents information from employers with at least 50 employees that offer the specific component as part of a wellness program.





Literature Summary

- Four decades ago (Jeffery, 1978)
- Mostly focused on Effectiveness and "Stick"
- Short-term effectiveness that cannot be sustained
- Few reported Representativeness and Reach
- Arbitrarily set incentive arms with limited variations

Kane et al. 2004a,b; Paul-Ebhohimhen and Avenell, 2008; Wall et al., 2006 Finkelstein et al., 2007 Volpp et al., 2008, 2012 Jeffery 2012



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Preventive Medicine

ournal homepage: www.elsevier.com/locate/ypmed



Financial incentives and weight control

Robert W. Jeffery *

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"... many important questions about the use of incentives have not yet been clearly answered..."

"...Major obstacles to sustained applications of incentive in weight control are funding sources and acceptance by those who might benefit."

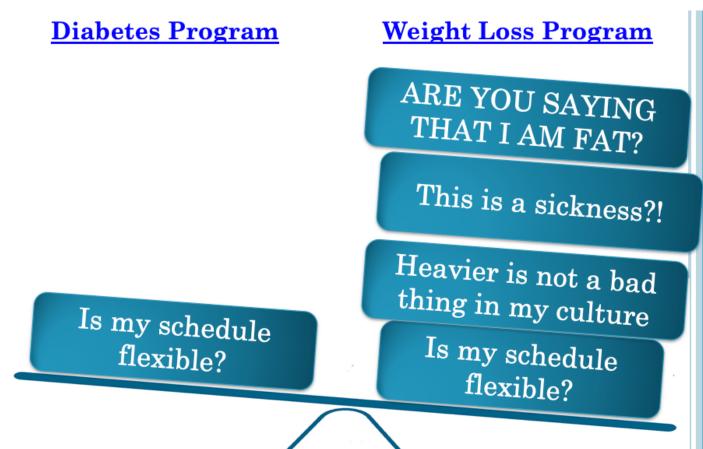
"Another important issue that has received almost no attention is whether financial incentives for weight control are useful at all in people who are not interested in losing weight."

"...little or no research has been published to evaluate population reach..."





Why Reach is Unique Here?





Importance of Reach

Econometrica, Vol. 77, No. 3 (May, 2009), 909-931

INCENTIVES TO EXERCISE

By Gary Charness and Uri Gneezy¹

Can incentives be effective in encouraging the development of good habits? We investigate the post-intervention effects of paying people to attend a gym a number of times during one month. In two studies we find marked attendance increases after the intervention relative to attendance changes for the respective control groups. This is entirely driven by people who did not previously attend the gym on a regular basis. In our second study, we find improvements on health indicators such as weight, waist size, and pulse rate, suggesting the intervention led to a net increase in total physical activity rather than to a substitution away from nonincentivized ones. We argue that there is scope for financial intervention in habit formation, particularly in the area of health.

KEYWORDS: Exercise, field experiment, habit formation, incentives.

- Incentivize people into doing exercise first
- The habits can be maintained after incentives are withdrawn
- Crowding-Out (i.e., backfire)?





Study Objectives

- Answer: how can we get people into the program at the first place?
- Examine: whether program acceptance differ across subgroups:
 - ✓ Obesity-vulnerable group: Black, low-income females
 - ✓ Intervention trials under-studied group: males
- Investigate: how to better construct incentive arms for weight loss programs to achieve better population reach





Methods

- Participatory Approach:
 - 1st: Focused group meetings to identify attributes and levels of incentive design
 - 2nd: Discrete choice experiment (DCE) to elicit and quantify individual preference towards incentive constructions
- Policy-friendly ways to translate DCE results
 - Partial log-likelihoods and probability analysis
 - Form a synthetic population via cross-tabulation of NHANES





1st: Involving the End-Users

- A two-hr listening sessions with 22 EFNEP program assistance and nutrition outreach instructors (Richmond, VA)
- Four focus group meetings were held with DCE eligible participants (overweight/obese adults) recruited from Virginia Cooperative Extension and Carilion Clinic





Weight control program

This section is about a weight control program to start people on the path to losing weight. It is 6 months long, which is 24 weeks. People who followed this program closely lost about

> 1-2 lbs per week

results in

24-48 lbs over 24 weeks

Each picture below represents one part of the program.



В

Dietitian meeting

Have a one-time meeting with a dietitian to develop personal diet and exercise plans.



Coaching calls

Receive weekly calls to help you follow your diet and exercise plans.



Diet plan

Use a personal workbook with recipes and more to plan healthy meals.



Diet tracking

Record meals and snacks online or on paper. Find out how many calories you ate.



Exercise plan

Use a personal workbook to plan exercise that's just right for you.



Exercise tracking

Record physical activity online or on paper. Find out how many calories you used.



Program weigh-ins

Weekly weight checks at program location. Only program staff will see your weight.

2nd: DCE -**Program Description**



Weight Control Survey



brought to you by **CARILION CLINIC**



C Program Incentives

The weight control program described in Section B can include incentives for participation. The information on this page is about different incentives that can be added to the program.



Weigh in weekly

Program location

This is where you go for the weekly weight checks and meet with the dietitian. It is *not* where you have to exercise.

Examples

- Clinic
- Workplace
- · Community center
- Church



may not meet the goal. In those weeks

Achieve weight you will not earn the reward.

Examples

- Losing 2 lbs
- Turning in complete records of diet and exercise
- · Attending weekly weigh-ins



Earn weekly reward

Weekly reward available

This is the dollar value of the weekly reward. You have an opportunity each week to earn this reward by achieving your weekly weight control goal.

Examples

- \$5 per week
- \$24 per week
- \$36 per week

Payment frequency Ex

- This is how often you get paid the rewards you have earned. Remember that you earn rewards by achieving the weekly weight control goal.
- Examples
- Weekly
- Monthly
- Quarterly
- Once at program end



Get paid periodically



Receive payment

Payment form

This is how you are paid. Each type will have the same dollar value as if you were paid in cash.

Examples

- Cash or debit card
- Pre-paid gym pass
- Health debit card for doctor's vists, prescriptions, and other medical expenses

2nd: DCE – Incentive Description



Weight Control Survey





Attribute	Attribute levels		
Reward amount	\$0, \$48, \$96, \$216, \$384, \$576		2 nd : DCE -
Payment form	Cash Pre-paid gym pass (gym) Health debit card for doctor's visit and other medical expenses (medical card (debit)		Incentive Attributes
Payment frequency	Once at end of program (once) Quarterly Monthly Weekly	would n	ctorial Design eed: 6 x 4^4 = que combination
Program location	Clinic Workplace Community center Church		cy Design 9 96 pairs!
Reward condition	Losing 2 lbs (weight) Attending weekly weight checks (a Turning in records of diet and a (compliance) Attending weekly weight check in records of diet and exercise (exercise ks and turning	Weight Control Survey brought to you by CARILION CLINIC



4 Please consider the following two weight control programs.

Program B

3 I would not choose either program.

	Program A	Program B
Program location	Workplace	Church
Weekly weight control goal	Turning in records of diet and exercise	Losing 2 lbs
Weekly reward available	\$24	\$16
Payment frequency	Weekly	Monthly
Payment form	Pre-paid gym pass	Debit card
Total reward available in program	\$24 × 24 wks = \$576	\$16 × 24 wks = \$384
Which weight control progra Please check one box.	am would you choose?	
☐ 1 Program A		

2nd: DCE – Example Choice Question



Weight Control Survey

brought to you by CARILION CLINIC



2nd: DCE – Survey Implementation

Initial Letter 7,554 overweight/obese and Medicaid eligible adults (identified via Carilion electronic patient database through 3 rounds of data draw)

Phone Call 3,371 individuals were reached over the phone to ask for their willingness to participate in the mail survey

Mail Survey • 2,737 mail surveys were sent out to individuals who agreed over the phone (82%) to the survey

Final Data • 1,297 completed surveys were returned (47%)



Weight Control Survey

brought to you by CARILION CLINIC



DCE Results – Summary Statistics

	Sample	Virginia
Age		
65 years and over	15.0%	12.5%
Female	43.1%	50.9%
Race		
White	49.0%	71.3%
Black	41.1%	19.8%
Native American	0.48%	0.1%
Asian	4.0%	5.8%
Ethnicity		
Hispanic or Latino origin	7.1%	8.2%
Education		
High school graduate or higher, percent age 25+	87.0%	86.6%
Bachelor's degree or higher, percent age 25+	27.1%	34.4%
Persons per household	2.8	2.6





	Means	Standard deviations
ASC.SQ	0.050	1.378***
	(0.113)	(0.077)
Reward amount		
log(Mag + 1)	0.362***	0.453***
	(0.042)	(0.026)
Mag.0	0.184	0.862***
	(0.131)	(0.130)
Program location		
Workplace/Clinic	-0.244***	-0.433***
•	(0.048)	(0.099)
Community center/Clinic	0.174***	0.120
•	(0.048)	(0.116)
Church/Clinic	-0.180***	0.361***
	(0.048)	(0.104)
Payment form	,	,
gym/cash	-0.129*	0.497***
	(0.052)	(0.115)
medical/cash	-0.182***	0.312**
	(0.049)	(0.113)
debit/cash	0.167***	$-0.064^{'}$
	(0.049)	(0.135)
Reward condition	,	,
weight/attendance	0.098	0.295*
0	(0.053)	(0.120)
compliance/attendance	-0.064	-0.183
1	(0.050)	(0.123)
att.comp/attendance	-0.131**	0.203
•	(0.048)	(0.114)
Payment frequency	,	, ,
weekly/once	0.136*	0.215
	(0.054)	(0.128)
monthly/once	$-0.020^{'}$	0.097
	(0.048)	(0.124)
quarterly/once	0.048	0.289*
1 ,	(0.049)	(0.114)
Log-likelihood		-4372.206
N		4994

DCE Results -Random **Parameter** Logit

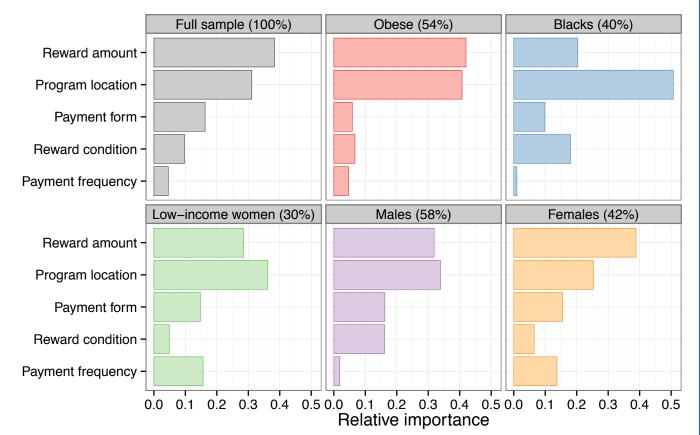


Weight Control Survey

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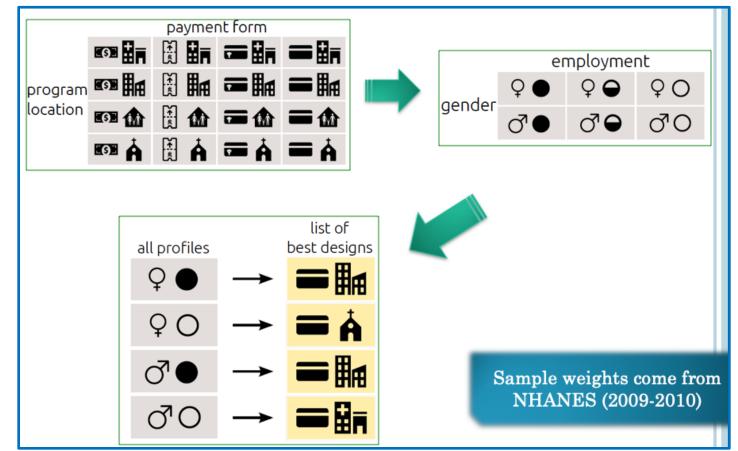
DCE Results – Average Preference Ranking





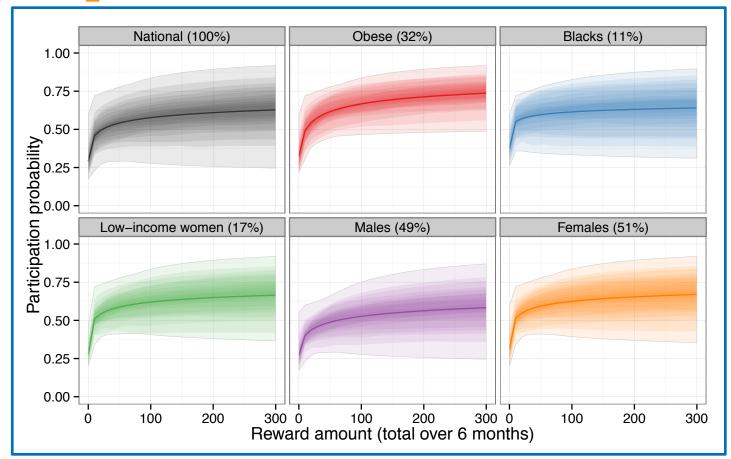


Policy-Implication: Synthetic Subgroups



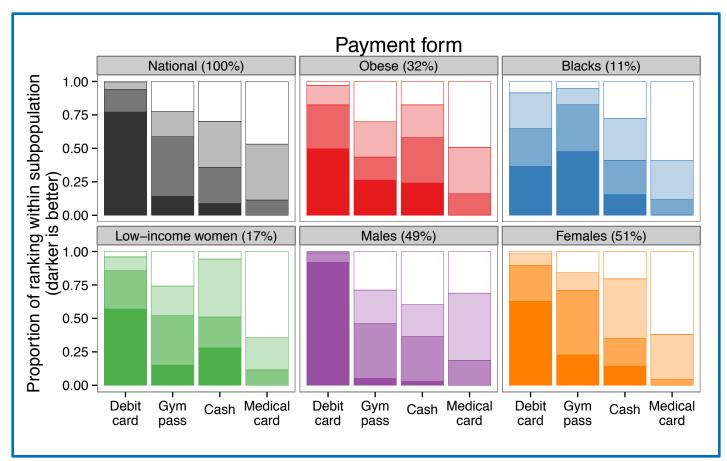


Policy-Implication: Is \$ More Better?





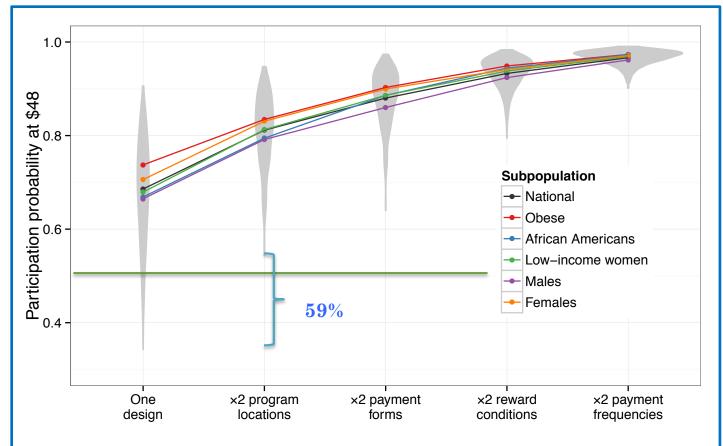
Policy-Implication: Form of Payment?





Policy-Implication: More Choices

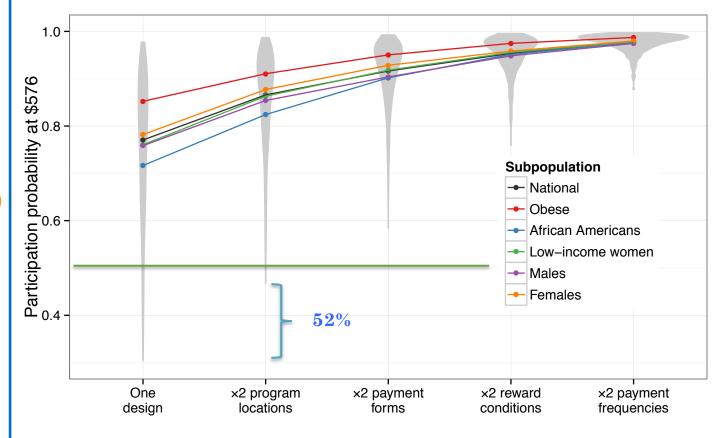






Policy-Implication: More Choices

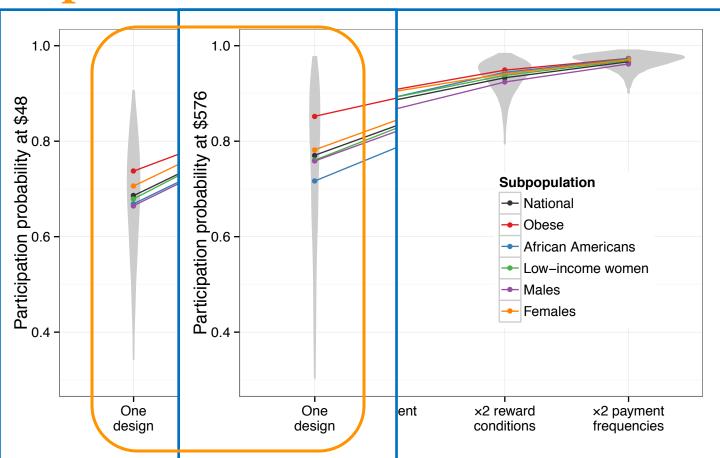






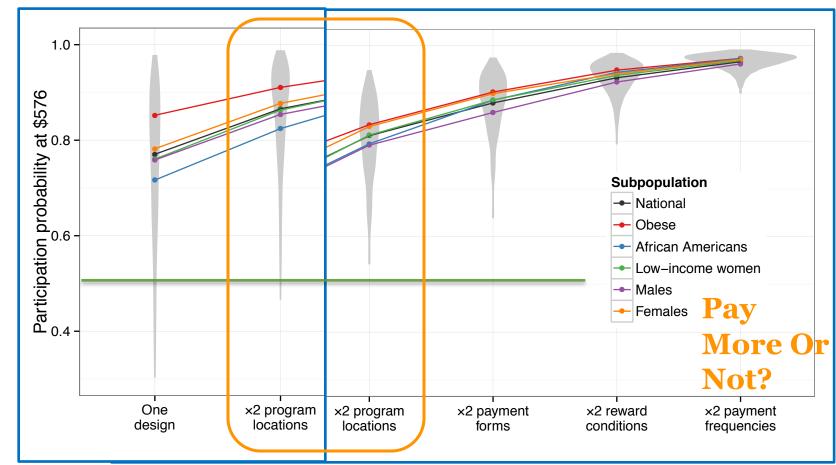
Policy-Implication: One Choice

Pay More Or Not?





Policy-Implication: Two Choices





Conclusion

- Population reach is important for closing disparity gap and improving cost-effectiveness
- Preference heterogeneity towards incentives is significant across subgroups
- Offering more than one incentive option will not only increase population reach but also reach more vulnerable subgroups
- Two carefully subgroup-targeted options can achieve the largest gain in reach
- Offering more options is better than paying more





THANK YOU! wenyou@virginia.edu

