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Background

Impulsivity is associated with unhealthy food choices. • Nudge interventions in the food environment may be particularly helpful for individuals with high impulsivity.

Objective

Examine if trait, choice, and action impulsivity were associated with change in food choices and BMI in a workplace-based nudge intervention.

Method

- Study design: planned secondary analysis of an RCT
- Participants: 487 employees enrolled 2016-18
- Setting: Massachusetts General Hospital, Boston, MA; with traffic light food labeling in all workplace cafeterias
- Intervention: Personalized feedback on healthfulness of workplace food purchases, social norms information, and small financial incentives to increase healthy food choices over 12 months
- Measures: Impulsivity:
- Trait (impulsive personality tendencies): 30-item Barratt Impulsiveness Scale; total score
- Choice (preference for immediate vs. later rewards): delay discounting task; delay discounting rate k
- Action (behavioral disinhibition): gradual-onset continuous performance test (gradCPT), a response inhibition task; commission error rate
- Healthy Purchasing Score (HPS): healthfulness of all workplace purchases, 0-100, higher=healthier, tertiles
- Dietary intake: Healthy Eating Index-2015 (HEI) scores and average daily calories from 24-hour diet recalls
- BMI: measured at baseline visit

ChooseWell 365

• Analysis: multivariable models with interaction terms

The ChooseWell 365 study wa grants HL125486 DK1

pulsivity with effects ention to improve di	s of the Ch et and pre	nooseWell event weig	365 wo ht gain	orkplace	nudge	VE RI TAS S S C	
PH ^{1,2,3} , Joshua W. Buckholt nderson, BA ⁶ , Yuchiao Cha oital (MGH); ² Harvard Medical Scho Ith Policy Research Center, Departm	z, Ph.D. ³ , Ch ang, Ph.D. ^{1,2} , ol; ³ Dept. of Psych nent of Medicine,	ristina Roberte Anne. N. Tho hiatry, MGH; ⁴ Dept MGH; ⁶ Dept. of N	o, Ph.D. ⁴ , rndike, Mi t. of Medical utrition, Harv	Douglas E D, MPH ^{1,2} Ethics and Hea Vard T.H. Chan	. Levy, PhD, alth Policy, Perelma School of Public H	an School of Medicine, ealth	
		Res	Sults				
Table 1. Baseline descriptive statistics for study participants (N = 487) by randomization group.				Table 2. Higher trait and choice impulsivity associated with lower baseline Healthy Purchasing Score (range 0-100).			
	Control (N=239)	Intervention (N=248)		T	rait impulsivit	ty *p = 0.019	
Age, mean (SD) Female, N (%) Black, N (%)	43.3 (12.3) 194 (81.2) 20 (8.4)	43.5 (12.3) 193 (77.8) 23 (9.3)		ertile 1 impulsivity	Tertile 2 68 1 (12 I)	Tertile 3 High impulsivity *65.9 (13.7)	
White, N (%) Hispanic/Latinx ethnicity, N (%) Job category, N (%)	196 (82.0) 13 (5.4)	206 (83.1) 14 (5.6)	Choice impulsivity $M \in O$				
Administrative/service Crafts/technicians Management/professionals Physicians/PhDs	37 (15.5) 26 (10.9) 145 (60.7) 31 (13.0)	31 (12.5) 27 (10.9) 163 (65.7) 27 (10.9)	T Low HPS: 68	ertile 1 impulsivity .7 (13.1)	Tertile 2 68.0 (13.5)	Tertile 3 High impulsivity **66.6 (11.9)	
Figure 1. Higher trait imp with smaller increases in	oulsivity was healthy caf	associated eteria	Figure partic	e 2. BMI ind ipants with	creased less n highest acti	for intervention on impulsivity.	
purchases (HPS) at 12 months; no detectable interaction effect by intervention group.			0.6		p for inte = 0.04	eraction 0.5	
9 8 8 Second Second Sec	7.2	6.3	O.4 0.3 0.2 0.1 0.1	0.3	0.2	0.3	
6 5 4 3 2.2 2 2 2 2.2 2.3	1		-0.1 -0.2	T1 Low impuls	-0.1	T3 → High impulsivity	
	0.3		Conclusions				
0 T1 Low impulsivity	T2 High	T3 impulsivity	 A workplace nudge intervention improved food choices among employees of all impulsivity levels Action impulsivity may play a role in the impact of 				
<i>IS funded by R01</i> 114735. For more information: <u>jlmccurley@mgh.harvard.edu</u> athorndike@mgh.harvard.edu		 Greatery interventions on weight. Findings support prior research indicating that impulsivity is relevant to food choices. 					



