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Interactions Between Methodological and Interindividual Variability: How Monetary Incentive
Delay (MID) Task Contrast Maps Vary and Impact Associations with Behavior.

Michael I. Demidenko¹, Karthikeyan Ganesan¹, Alexander S. Weigard^{1,2}, Hyesue Jang¹, Andrew
Jahn³, Edward D. Huntley⁴, Daniel P. Keating^{1,4}

1. Department of Psychology, University of Michigan.
2. Addiction Center, Department of Psychiatry, University of Michigan
3. The Functional MRI Laboratory, University of Michigan, Ann Arbor
4. Survey Research Center, Institute for Social Research, University of Michigan

Correspondence concerning this article should be addressed to Michael Demidenko, Department
of Psychology, University of Michigan, 530 Church St. 2036, Ann Arbor, MI 48109. E-mail:
demidenm@umich.edu

25 **Manuscript Info.** The project here was preregistered before any analytic steps were performed
26 (<https://osf.io/xh7bz>). *This pre-print that has not been peer-reviewed*, however, **a revised version**
27 **of this preprint (under the same title) has been peer-reviewed and accepted at the journal of *Brain***
28 **& *Behavior* in January 2021** (per reviews published at the journal). Revisions resulted in
29 modification to the introduction, reporting of results and interpretation in the discussion section.
30 Please reference the supplemental materials for additional information noted in the manuscript,
31 and see publicly shared code (<https://github.com/demidenm/MIDContrasts>) and the NeuroVault
32 collection for group level statistical maps referenced in-text
33 (<https://neurovault.org/collections/6210/>).

34 **Acknowledgments.** This research was supported, in part, by a grant from the *Eunice Kennedy*
35 *Shriver* National Institute of Child Health & Human Development (NICHD; R01HD075806,
36 D.P. Keating, Principal Investigator). M. Demidenko was also supported by the NICHD
37 Developmental Psychology Training Grant (5T32HD007109-34, V.C. McLoyd & C.S. Monk).
38 A. Weigard was supported by NIAAA T32 AA007477 (Dr. Frederic C. Blow). The authors
39 thank Bennet Fauber, Krisanne Litinas, Christine Wagner, Hani Nasr, Peter Batra, Joshua
40 Hatfield, Meredith House, Kyle Kwaiser, Kathleen LaDronka, the U-M Survey Research
41 Operations staff and the U-M MRI Laboratory, for their support in collecting this data. Finally,
42 the authors thank Leili Mortazavi and Dr. Brian Knutson for sharing code to help facilitate and
43 plot the direction observation of BOLD signal locked to cue and phase.

44 **Author's Contribution.** MD conceived the study, MD, KG, AW conducted the statistical
45 analysis, MD wrote the initial draft the manuscript, and KG, AW, HJ, AJ provided support with
46 the analyses, drafts of analyses and results. DK, EH, designed and executed the survey and the

47 neuroimaging protocol. KG, AW, HJ, AJ, EH and DK assisted MD with study writing and
48 revisions. All authors read and approved the manuscript.

49 **Conflict of Interest.** The authors declare that they have no conflicts of interest.

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Abstract

Phenomena related to positive emotional valence and reward responsiveness have been extensively studied in psychology. These constructs have been linked to midbrain dopaminergic pathways central to the literature on psychopathologies and development, and their measurement is a key interest in task-based fMRI. One such task, used for almost twenty years, is the Monetary Incentive Delay (MID) task. By cueing and delivering performance contingent reward, this task has been demonstrated to elicit robust and distinct activation of neural circuits involved in different phases of reward responsiveness (e.g. anticipation and outcome). Despite the broad application of the MID task, systematic evaluations of common task contrasts have been limited to between study comparisons of mean level (or group level) activation maps. In this study, we systematically examine within-task and between-contrast differences in MID task activation maps and how these differences impact inferences about their correlations with psychological characteristics. In a sample of 104 participants (Age Mean = 19.3, SD = 1.3; Female 57%), we evaluate similarities between contrasts in group- and individual-level activation maps, region-of-interest activations and their correlations with psychological characteristics. Our findings demonstrate more similarities than differences between positive and negative cues during the anticipation contrast, dissimilarity between some positive anticipation contrasts, a robust deactivation effect in the outcome phase, and behavioral associations that are less robust than previously thought. This work has practical implications for helping researchers interpret prior MID studies and make more informed *a priori* decisions about contrasts to focus on in future work. Consistent with other recent findings from large neuroimaging samples, it also suggests that researchers using the MID to identify brain-behavior relationships may have to more carefully specify their contrasts in advance in order to reliably detect small, variable effects.

75 *Key words:* Monetary Incentive Delay, Reward Processing, Approach, Avoidance, Prediction

76 Error, fMRI, Measurement

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78 1. Introduction

79 1.1. Purpose

80 Due to the hypothesized role of the midbrain dopaminergic reward system in wanting,
81 liking, and learning about rewarding stimuli, neural measurements of reward processing have
82 become a central focus in the study of various psychopathologies and problem behaviors
83 (Berridge & Robinson, 2003; Ernst & Luciana, 2015). The Monetary Incentive Delay (MID)
84 task, specifically, has been frequently used to measure neural correlates of approach and
85 avoidance mechanisms during reward processing (Knutson et al., 2000). Due to its ability to
86 probe neural circuitry of reward systems, the MID task has proven a valuable indicator of
87 dysfunction in reward related processes and various maladaptive behaviors (Balodis & Potenza,
88 2015; Dugré et al., 2018). More recently, the task has been incorporated into large longitudinal
89 studies to index developmental changes in reward mechanisms and their links with negative
90 outcomes (Casey et al., 2018; Schumann et al., 2010). Despite frequent use of this task, there are
91 relatively few studies that have examined how analytic choices made by investigators may
92 impact the results and interpretations about their findings in mean level activation and
93 associations with behavior. Therefore, this study aims to understand the methodological and
94 interindividual variability in MID task contrast maps and their associations with psychological
95 behavior.

96 1.2. MID task and Central Tenets of Reward Processing

97 The MID task has been used in functional magnetic resonance imaging (fMRI) research
98 for almost 20 years and is considered a robust measurement of incentive motivation (Knutson et
99 al., 2000; Knutson & Greer, 2008). The task was designed to leverage spatial and temporal
100 properties of subcortical structures to localize brain activation in substance use populations

101 (Brian Knutson & Heinz, 2015), demonstrating correlates with individual traits of positive and
102 negative arousal (Wu et al., 2014). A central assumption of the task is that there are brain regions
103 responsible for anticipating and responding to salient stimuli that are positively or negatively
104 valenced, inspired in part by the literature on Pavlovian conditioning and dopamine responses to
105 positive cues (Knutson et al., 2000). Projections from the dopamine (DA) rich ventral tegmental
106 area (VTA) are thought to enhance activation in striatal regions that respond to reward
107 anticipation (e.g., tones or cues that predict incentives) and in mesial prefrontal regions that
108 respond to reward outcomes (Breiter et al., 1996; Knutson et al., 2003; Schultz, 1998). The task
109 allows a comparison of valence (winning, positive valence, or losing, negative valence, big or
110 small rewards) and temporal phase (anticipation or outcome). It is an *instrumental-reward task*
111 that delivers rewards that are contingent on performance involving a timed button response
112 (Richards et al., 2013). Different neural regions are recruited depending on whether the reward is
113 being anticipated (or wanted) or consumed (or liked) (Haber & Knutson, 2010).

114 Activation patterns within these phases would be expected to align with recent theories of
115 reward processing. For instance, the first stage during cue presentation (prior to probe, or
116 response phase), may be modeled as a ‘wanting’ phase, eliciting motivation (or saliency of the
117 reward/cue). This *anticipation phase* should elicit robust activation in striatal regions as DA has
118 been shown to have robust effects on wanting (or incentive salience) in both animals and humans
119 in the ventral striatum (VS) and ventral pallidum (Berridge, 2007, 2019; Berridge &
120 Kringelbach, 2015). Conversely, when modeling the *outcome phase* (or liking), one would
121 expect less activation of VS (as only ~10% of neurons in NAcc facilitate pleasure) in response to
122 the pleasure of reward, as hedonic ‘hot-spots’ are more likely to be represented in the insula and
123 OFC (Berridge & Kringelbach, 2015).

124 The bulk of fMRI analyses using the MID task have focused on specific, unmodulated
125 phases of the task. But, previous work suggests that modulators based on formal models of
126 reinforcement learning may be important to incorporate into the task to account for individual
127 variability not captured by a standard analysis (Bjork et al., 2010; Oldham et al., 2018). Although
128 the utility of prediction error is still debated (Berridge & O’Doherty, 2014), it remains to be seen
129 whether or not, as part of a prediction error model, expected value and prediction error (positive
130 or negative) modulates the signal in the anticipation and outcome phases in the MID task. Such
131 modulators may be critical in accounting for individual level variation that drives performance
132 and learning values that may be represented in subcortical and cortical neural signatures
133 (Balleine & O’Doherty, 2010). Although previous work has recommended the use of modulators
134 in the MID task (Bjork et al., 2010; Oldham et al., 2018), to our knowledge, modulators of
135 prediction error are still underexplored. One recent study (Cao et al., 2019) using prediction error
136 modulators found that prediction error was positively related to activation in the bilateral VS,
137 and another found association with substance use problems in young adults (Cao et al., 2020).

138 1.3. Differential use and Research Degrees of Freedom in MID Task

139 Although the MID task has been used extensively to study dysfunctional reward
140 processing in populations with substance use disorders (Balodis & Potenza, 2015), it has also
141 been incorporated into other studies of neurodevelopment and broader psychopathology. Various
142 versions of the MID task have been used to investigate reward related changes as a function of
143 age (Bjork et al., 2010; Dhingra et al., 2019), social vs non-social rewards (Schwartz et al.,
144 2019), psychosocial characteristics of impulsivity and sensation seeking (Büchel et al., 2017;
145 Cao et al., 2019; Joseph et al., 2016), early adversity (Boecker et al., 2014; Gonzalez et al.,
146 2016), substance use (Aloi et al., 2019; Cope et al., 2019; Nestor et al., 2019; Sauder et al., 2016;

147 Swartz et al., 2019), depression (Chan et al., 2016; Colich et al., 2017; Landes et al., 2018; Mori
148 et al., 2016) and other clinical related problems (Bourque et al., 2017; Lancaster et al., 2016;
149 Maresh et al., 2019; Mikita et al., 2016; Papanastasiou et al., 2018; Stevens et al., 2018; Urošević
150 et al., 2016; Veroude et al., 2016; von Rhein et al., 2015; Xu et al., 2017). Similar to earlier
151 reviews (Balodis & Potenza, 2015; Oldham et al., 2018), the research studies cited above often
152 used different MID versions and incorporated various contrasts to derive activation maps that
153 were used to compare their variables of interest (see Supplementary Table S2). This raises the
154 question: To what extent are similarities and differences between the findings and conclusions
155 from these studies due to variance in analytic methods?

156 Recent evidence has suggested that analytic methods and decisions may not only alter
157 outcomes, but also result in different interpretations of fMRI analyses. For instance, Hong et al.
158 (2019) found that peak level coordinates from various studies have a high degree of variability,
159 that may often lead to inaccurate conclusions about replication. Although activations may be
160 close in distance between two groups (or studies), such that they appear to be in similar brain
161 regions, these may not be related to a ‘replication’ of a neural process that is hypothesized, due
162 to a lack of neural specificity. In addition, Botvinik-Nezer and colleagues (2020) had 70 different
163 teams analyze identical fMRI data, testing pre-defined hypotheses associated with risky decision-
164 making. As a function of between lab differences, they found that both lab workflows and
165 interpretations by researchers altered findings, even though statistical maps may have been
166 comparable. Thus, such differences in workflow, contrast and parameter selection, and outcomes
167 investigated are important to consider when forming substantive interpretations of fMRI
168 findings. Without a clear understanding of how analytic decisions impact our results and

169 interpretations, the flexibility of fMRI analyses (e.g., “researcher’s degrees of freedom”) may
170 result in an unacceptable number of false positives (Gelman & Loken, 2014).

171 In the MID task, for example, it is not well understood how investigators’ analytic
172 choices, such as choice of contrast (for example, Big Win Cue (\$5) vs Neutral Cue, or Win Cues
173 (\$5 & \$0.20) vs Neutral Cue), may impact their inferences about the relations between neural
174 reward circuitry and behavior. FMRI activation maps differ as a function of reward
175 type/magnitude (Bjork et al., 2010) and recent reviews suggest there is substantial variability
176 across studies in the techniques used to derive such maps (Balodis & Potenza, 2015; Dugré et al.,
177 2018; Oldham et al., 2018). Balodis & Potenza (2015) attempted to reconcile activation
178 differences in addictive behaviors as a function of analytic strategies and individual level effects,
179 but it was unclear whether these differences were related to sample characteristics or true
180 between contrast task differences, some of which may go unreported. Combined with the file
181 drawer problem, the diverse sets of analyses may contribute to underreported contrasts and
182 associations with behavior which may not fit into a latent distribution of results (Gelman &
183 Loken, 2014; Simmons et al., 2011). Therefore, it is important to quantify within-individual
184 variation across activation maps within the same sample and assess the relative utility of these
185 maps for predicting behavioral outcomes. This would demonstrate whether there is a) stability
186 within individuals’ estimates of activation at each phase of the task (anticipation or outcome); b)
187 consistency between contrasts in the level of activation in specific regions of interest (ROI); and
188 c) whether contrast choice alters the utility of these activations for predicting various
189 psychological characteristics.

190 1.4. Current Study

191 Previous reviews of the MID task have evaluated general utilization of the task in studies
192 of reward responsiveness (Lutz & Widmer, 2014), between-study, temporal and phase-related
193 differences in MID activation effects (Oldham et al., 2018), dynamics of reward versus loss
194 (Dugre 2018), and influences of substance use (Balodis & Potenza, 2015) and psychosis (Radua
195 et al., 2015) profiles on activation differences. However, the extent to which contrast choice
196 contributes to within-subject variability in activation maps and alters conclusions about
197 associations between neural responses and behavior is still unclear. The current study leverages a
198 community sample of late adolescents/emerging adults to examine variability across various
199 activation maps in the MID task.

200 In order to delineate variability across contrast types (which is difficult to evaluate between
201 samples/studies), we perform multiple common analyses that focus on the anticipation, outcome,
202 and prediction error parameters, with data from the same individuals. Due the predominant role
203 of motivation (or anticipation of reward) in this task, and difficulty to temporally differentiate the
204 outcome phase (Bjork et al., 2010), we predominantly look at the anticipation phase. These
205 activation maps are thresholded to compare the degree to which statistical maps (from ten
206 contrasts) a) vary within a phase (for example, anticipation Big Win > Neutral contrast) and b)
207 vary between phases of the task (for example, anticipation vs outcome). The degree of variability
208 is assessed at the individual and group level to assess whether contrast activation patterns differ
209 across individual subjects' results and group-level results. Then, mean signal intensity values for
210 key regions from previous reviews, such as the insula, mPFC, OFC, VS, and amygdala (Balodis
211 & Potenza, 2015; Dugré et al., 2018; Oldham et al., 2018) are extracted to evaluate whether
212 activation in these ROIs from different contrasts indexes similar or divergent individual

213 difference dimensions. Due to recent concerns that some multiband sequences may alter the
214 BOLD signal in subcortical regions (Risk et al., 2018), we complement these results with signal-
215 to-noise ratios and plotted time-series from the VS to provide a direct observation of signal for
216 each anticipation condition. Finally, correlations between these ROI activations and self-
217 reported psychological characteristics (aggregate score of multi-wave longitudinal data) are
218 assessed to determine the impact of contrast choice on the prediction of psychological measures
219 including substance use, psychosocial, and socioemotional functioning.

220 Similarities and differences are not intended to be reported within a null hypotheses test
221 framework, but rather presented as a statistical index of overlap (Jaccard's similarity coefficient)
222 and of associations across ROIs and behavior (Pearson's r coefficient; heat maps of r point
223 estimates for inter-ROI relationships and posterior distributions of r values for associations of
224 ROIs with behavioral covariates). Our broad goal is to improve the field's understanding of how
225 and where there is within-task variability as a function of MID task contrast choice, and, in doing
226 so, to inform the interpretation of existing MID studies and better guide researchers' *a priori*
227 decisions about contrasts to focus on in future studies. Due to the exploratory nature of the
228 analyses, the background, methods and analytic plan were preregistered on the Open Science
229 Framework (<https://osf.io/xh7bz>). However, we elected not to preregister specific hypotheses
230 because the intended purpose of the study was to use exploratory analyses to provide a holistic
231 overview of how degrees of freedoms impact interpretation of MID task results (Thompson et
232 al., 2020).

233 2. Methods

234 Participants in this neuroimaging study are from a subsample of the Adolescent Health
235 Risk Behavior (AHRB) study. AHRB consists of a nonprobability sample of 2017 (mean age =

236 16.8, $SD = 1.1$; Female 56%) 10th and 12th grade students recruited from nine public school
237 districts across eight Southeastern Michigan counties, using a quota sampling method to enhance
238 sample diversity. Phase I, described elsewhere (Demidenko et al., 2019), collected demographic,
239 psychosocial, neurocognitive and behavioral information across three waves. From Phase I of the
240 study, a subsample of 115 adolescents was recruited to participate in the neuroimaging phase of
241 the study (elapsed time between Wave 1 and neuroimaging section (Months): $M = 30.9$ months
242 $SD = 5.0$ months). Of the 115 adolescents that participated, 108 completed the magnetic
243 resonance imaging (MRI) portion of the visit. Seven participants were ineligible or unable to
244 participate in the MRI due to not meeting MRI safety eligibility (e.g. claustrophobia [$n = 3$] or no
245 formally documented medical clearance to rule out potential metal in body [$n = 4$]). Of the 108
246 participants that completed the MRI, four participants were excluded from the analyses due to:
247 artifacts in the images that were not recoverable, and one participant that stopped responding
248 during the second run of the task. The final fMRI subsample ($N = 104$; Age Mean = 19.3, $SD =$
249 1.3; Female 57%) was included in the subsequent analyses and did not differ from the full
250 sample in age, gender, or time from the original survey. The bulk of code used in the subsequent
251 analyses are made available online (<https://github.com/demidenm/MIDContrasts>).

252 2.1. Self-Reported Psychological Measures

253 *Substance Use.* Substance use behaviors (marijuana and alcohol) are assessed via the
254 item: “On how many occasions (if any) have you [used marijuana or hashish/had any
255 alcoholic beverage to drink—more than just a few sips] during the last 12 months?”
256 Responses are reported on a seven-point scale ranging from 1 = “0 occasions” to 7 = “40 or
257 more occasions”. Use is further probed for past 30-day use for alcohol and marijuana. For
258 alcohol, last 30-day use assessed binge drinking occasions, “During the last 30-days, how

259 many times (if any) have you had four (for females)/five (for males) or more drinks in a row,
260 that is, within about 2 h?” Response options were, none, once, twice, 3 to 5 times, 6 to 9
261 times, or 10 or more times. For marijuana, use occasions within the last 30-days were assessed
262 using the question, “How many times (if any) have you used marijuana or hashish during the
263 last 30-days?” Response options were reported on a seven-point scale ranging from 1 = ‘0
264 occasions’ to 7 = “40 or more occasions”. Substance use items are identical to those used in
265 the annual, national Monitoring the Future surveys (Johnston et al., 2018). Marijuana and
266 alcohol scores were z-scored, and then a substance use aggregate measure was created by
267 averaging the z-scored items across Wave 1 – Wave 3.

268 *Impulsivity.* The Barratt Impulsiveness Scale-Brief (BIS-B) is an 8-item, unidimensional
269 measure of impulsiveness (Steinberg et al., 2013) based on a reduced item set obtained from
270 the Barratt Impulsiveness Scale (BIS), 11th revision. Items were rated on a 4-point Likert-type
271 scale: rarely/never (1), occasionally (2), often (3), and almost always/always (4). A mean score
272 was computed (range: 1 – 4), higher scores indicated lower self-reported impulsivity ($\alpha = .79$).
273 An aggregate score was created by averaging scores across Wave 1 – Wave 3.

274 *Sensation Seeking.* The Brief Sensation Seeking Scale (BSSS) is an 8-item self-report
275 measure of sensation seeking (Hoyle et al., 2002) based on reduced item set of the Zuckerman
276 Sensation Seeking Scale (SSS). The items measure dimensions of sensation seeking:
277 experience seeking, boredom susceptibility, thrill and adventure seeking, and disinhibition.
278 Responses were on a 5-point Likert-scale: strongly disagree (1), disagree (2), neither disagree
279 nor agree (3), agree (4), and strongly agree (5). A mean score was computed (range: 1–5), with
280 higher scores indicated higher self-reported sensation seeking ($\alpha = .78$). An aggregate score
281 was created by averaging scores across Wave 1 – Wave 3.

282 *Socioemotional problems.* Socioemotional problems were assessed using the Youth Self-
283 Report (YSR; (Achenbach & Rescorla, 2001) to characterize externalizing and internalizing
284 problems. The YSR is a widely utilized, 112-item self-report measure assessing emotional and
285 behavioral difficulties in 11-18-year-olds. The YSR includes two broadband scales: internalizing
286 problems (e.g. withdrawn/depressed) and externalizing problems (e.g. attentional deficit/hyper
287 activity problems, oppositional defiant problems). Raw scores are normalized to provide a
288 common metric with higher scores indicating greater psychopathology. Validity and reliability of
289 the YSR broadband, syndrome, and DSM-oriented scales are well documented (Achenbach,
290 2013; Achenbach & Rescorla, 2001) with adequate internal consistency ($\alpha = .70 - .86$) and test-
291 retest reliability ($\alpha = .67 - .88$). An aggregate score was created from population-standardized t-
292 scores for internalizing and externalizing by averaging scores across Wave 1 – Wave 3. In the
293 present study, Cronbach's alphas of .91 and .88 were obtained for the internalizing and
294 externalizing scales, respectively.

295 2.2. fMRI Task

296 A modified version of MID task (Knutson et al., 2000) was used to model neural
297 signatures of the anticipation and outcome of monetary rewards (Bjork et al., 2010; Büchel et al.,
298 2017; Cao et al., 2019). The MID (Knutson & Greer, 2008) is an established task for assessing
299 reward processing, and the modified version in this study (a modification from the Michigan
300 Longitudinal Study, Martz et al., 2016) is currently being employed in the national Adolescent
301 Brain Cognitive Development (ABCD) study to measure the development of adolescent reward
302 processing (Casey et al., 2018). Identical to the task described in Casey et al. (2018), the task in
303 this study consists of three phases: anticipation, probe and outcome (that is, feedback). Each trial
304 starts with a cue type (Win \$0.20, Win \$5, Lose \$5, Lose \$0.20, or No Money At Stake). There

305 are twelve trial orders of the task, consisting of 50 contiguous trials and 10 trial types per run
306 (5:42 minutes long). Participants completed two runs of the MID task during the scan (100 trials
307 and 20 trial types). The task is individualized to reach around 60% accuracy rate by adjusting the
308 difficulty (that is, probe duration). **See Section 1.1 in Supplementary Materials** for more
309 information on task paradigm and administration. A key difference between the current version
310 of the MID and that used in the IMAGEN sample (Cao et al., 2019), is the latter only includes
311 Win and neutral trials, excluding Loss trials.

312 2.3. fMRI Data Acquisition and Preprocessing

313 Data were acquired using a GE Discovery MR750 3.0 Tesla scanner with a standard
314 adult-sized coil (Milwaukee, WI). A full-brain high-resolution T1 SPGR PROMO scan was
315 acquired that is used in preprocessing (TR = 7000ms, TE = 2900ms, flip angle = 8°, FOV = 25.6
316 cm, slice thickness = 1 mm, 208 sagittal slices; matrix = 256 x 256). Before the MID task, a
317 fieldmap was acquired using spin-echo EPI (TR = 7400ms, TE = 80 ms, FOV = 21.6 cm, 90x90
318 matrix) with opposite phase encoding polarity (A→P, P→A). Two functional T2*-weighted
319 BOLD MID runs were acquired in the axial plane following structural and a faces task using a
320 multiband EPI sequence (MB factor=6) of 60 contiguous axial 2.4 mm slices (TR = 800ms, TE =
321 30 ms, flip angle = 52°, FOV = 21.6 cm, 90x90 matrix, volumes = 407).

322 fMRI Data Analyses

323 FMRI data were reconstructed and realigned using SPM12, physiological noise was
324 removed using RETROICOR, and a fieldmap correction was applied in SPM12 to each T2* run
325 to recover inhomogeneity of signal in the B0 field. Preprocessing steps were completed using
326 FSL (FMRIB's Software Library, www.fmrib.ox.ac.uk/fsl) FEAT (FMRI Expert Analysis Tool)
327 Version 6.00. After volumes were (1) reconstructed, (2) realigned, (3) physiological noise was

328 removed and (4) field map correction was applied, the following preprocessing steps were
 329 performed: (6) registration to high resolution structural and standard space MNI 152 image using
 330 FLIRT using a Full search 12 DOF (Jenkinson & Smith, 2001; Jenkinson, Bannister, Brady, &
 331 Smith, 2002), (6) motion correction using MCFLIRT (Jenkinson et al., 2002), (7) non-brain
 332 removal using BET (Smith, 2002), (8) spatial smoothing using a Gaussian kernel of FWHM
 333 5mm, (9) grand-mean intensity normalisation of the entire 4D dataset by a single multiplicative
 334 factor and (10) highpass temporal filtering (Gaussian-weighted least-squares straight line fitting,
 335 with $\sigma=50.0s$).

336 3. fMRI Analyses

337 Subjects were excluded from analyses if a subject's mean framewise displacement (FD)
 338 values exceeded $> .9$ within any given run (Mean FD Pre- & Post-preprocessing included in
 339 **Supplementary Section 1.2**), all subjects mean post FD were $< .9$. We focused on commonly
 340 used contrasts (Table 1) from a recent review (Oldham et al., 2018) and those from our review of
 341 studies using the MID (PubMed 2015 – 2019; **Supplementary Table S2**), such as reward
 342 anticipation (such as Big Win or Lose (\$5), Small Win or Lose (\$0.20) versus neutral

Table 1: Contrast Modeled in the Monetary Incentive Delay Task

Contrasts	Phases of MID Modeled
Contrast 1 (A1) - Ant	Win (W; \$5 & \$0.20) > Neutral (N) (W>N)
Contrast 2 (A2) - Ant	Big Win (BW; \$5) > Neutral (N) (BW>N)
Contrast 3 (A3) - Ant	Big Win (BW; \$5) Small Win (SW; (\$0.20) (BW>SW)
Contrast 4 (A4) - Ant	Big Win (BW; \$5) > Implicit Baseline (BW>IB)
Contrast 5 (A5) - Ant	Big Loss (BL; \$5) > Neutral (N) (BL>N)
Contrast 6 (F6) – Out	Big Win (BW; \$5) Hit > Neutral (N) Hit (BWH>NH)
Contrast 7 (F7) – Out	Big Loss (BL; \$5) Hit > Neutral (N) Hit (BWH>NH)
Contrast 8 (P8) - PE	Expected Value – BW & SM Modulated (EV)
Contrast 9 (P9) - PE	Positive Prediction Error (PE) - BW & SM Modulated (PPE)
Contrast 10 (P10) - PE	Negative Prediction Error (PE) - BL & SL Modulated (NPE)

Ant = Anticipation; Out = Outcome; Individual contrasts modeled in FSL, see section 1.4 in Supplementary for list of Events Modeled in GLM. A = Anticipation; F = Feedback; P = Prediction Error

343 anticipation, win outcome (such as \$5 or \$0.20) versus neutral outcome, loss conditions (such as
344 \$5 or \$0.20) and alternative contrasts that may be comparable to test for similarities within a
345 group, for example, gain or big gain conditions. It should be noted that using anticipation vs
346 outcome phase yields in estimates that are often powered differently, as a function of the target
347 accuracy of the task (60%) leading to individual variation in hit/miss trials. Furthermore, since
348 the outcome phase is often difficult to deconvolve in the task, and modeled in various ways (see
349 **Supplementary Table S2**), we include one type of outcome contrast focusing on gain and loss,
350 as it is not a central focus of these analyses and often not the focus in contrasts in the literature.

351 First-level analyses were performed by using FEAT. Time-series statistical analysis was
352 carried out using FILM with local autocorrelation correction (Woolrich et al., 2001). Similar to
353 other studies (Cao et al., 2019; Hagler et al., 2019; Lamm et al., 2014), both Anticipation and
354 Outcome events were modeled (15 explanatory variables) and modulated prediction error signal
355 of EV, PPE and NPE (see Table 1), in addition to six motion parameters (translations and
356 rotations in x, y, z directions) and the derivatives of the motion parameters. The modeled
357 contrasts and design matrix are described in greater detail in **Supplementary Section 1.3**. We
358 included prediction error explanatory variables based on a recent review suggesting the MID is
359 considered to be an implicit reinforcement learning (RL) paradigm (Balodis & Potenza, 2015),
360 and others recommending use of modulators (Bjork et al., 2010; Oldham et al., 2018). To
361 incorporate these recommendations, the RL modulators included: Expected Value (EV) and
362 Prediction Error (PE). To derive estimates of EV and PE for this task, the behavioral data were
363 modeled for each participant (100 trials – trial-by-trial) to calculate parametric modulators (EV
364 for anticipation; PE for Received Reward (RR); $pGain$ = probability gain, η = learning rate

365 (0.7)). Similar to Cao et al. (2019), we used a RL model trained by reward cues and outcomes
 366 (Rescorla & Wagner, 1972):

$$367 \quad EV_t = pGain_t \times Cue_t$$

$$368 \quad PE_t = RR_t \times EV_t$$

$$369 \quad pGain_{t+1} = pGain_t + \left(\eta \times \frac{PE_t}{Cue_t} \right)$$

370 To average across the two runs that are used in subsequent stages, a second-level model
 371 was defined for each participant for each of the ten contrasts (**see Supplementary Section 1.3**)
 372 using fixed effect analysis in FEAT. A group-level analyses was performed using FMRIB's
 373 Local Analysis of Mixed Effects (FLAME 1) to generate a mean level activation across subjects
 374 for a given contrast. Considering the large array of contrasts that are modeled, abbreviations
 375 from the first column of Table 1 are referred to when referencing contrasts henceforth.

376 To provide a direct observation of the BOLD signal and signal-to-noise information of
 377 subcortical regions, we include complementary post-hoc analyses evaluating raw BOLD signal
 378 (see Section 2.6 in Supplemental Materials). We extract the mean signal for VS and mPFC in the
 379 timeseries for VS and plot it for 15 TRs. Likewise, for cortical mPFC and subcortical VS we
 380 extract and present the distribution of the signal-to-noise ratios (SNR) for each individual and
 381 run to confirm that SNR is within an acceptable range (see Section 2.6 in Supplemental
 382 Materials).

383 3.1. Individual Level and Group Estimates

384 In order to compare overlap between thresholded activation maps for each contrast at the
 385 individual and group level, we thresholded activation maps produced by the second level and
 386 group level analyses. For the individual level, subjects second level maps (zstat) for each contrast
 387 are thresholded at $p < .01$ ($z = 2.3$) and group level contrasts are thresholded at $p < .001$ ($z = 3.1$).

388 We selected a lower threshold for individual maps due to more variability in estimates within an
389 individual map, that may substantially alter the Jaccard's Similarity Indices. These thresholded
390 maps are binarized (using *fsl* -bin) and compared to derive Jaccard's Similarity Indices
391 (described below).

392 3.2. Calculating Similarity

393 One of the aims for this study is to compare similarity between different activation maps
394 of the MID task within individuals and at the group level. This requires calculating similarity
395 matrices between our ten contrasts (described above). FMRI task activation maps have been
396 utilized in similar studies before (Maitra, 2010), but there is no consensus on how to measure
397 percent overlap between thresholded activation maps (McGonigle et al., 2000). While measures
398 such as Dice coefficient (Dice, 1945) have been widely used to calculate percent overlap (Taha
399 & Hanbury, 2015), it possesses undesirable properties (Tulloss, 1997).

400 This led us to choose Jaccard similarity index (JSI) to calculate percent overlap. One of
401 the major advantages of using the Jaccard similarity index is that the percent overlap results
402 obtained from this technique are intuitive and physically interpretable (Maitra, 2010). The
403 percent overlap between any two activation maps is defined from a set theoretical point of view,
404 where the overlap $J(A, B)$ is defined by the well-known relation as:

$$405 \quad J(A, B) = \frac{A \cap B}{A + B - A \cap B}$$

406 The relation calculates the ratio of common pixels that are activated across two activation maps
407 to the total number of pixels present in the two maps. Experimental results that utilized this
408 metric in previous fMRI reproducibility studies can be found in Maitra (2010).

409 With the JSI as our point estimates in evaluating replicable results across different
410 contrasts, we propose a bootstrapping based confidence interval calculation for identifying the

411 95% confidence intervals of the overlap measures across all subjects in our sample. Bootstrap-
412 based approaches have been popular in calculating robust approximate confidence intervals
413 (DiCiccio & Efron, 1996). We propose this approach for identifying the bounds of percent
414 overlap between activation maps across subjects for two reasons: 1) It would provide reliable
415 estimates of the range and shape of the distribution of percent overlap, 2) It would provide a
416 physical interpretation of the JSI obtained across all of the subjects.

417 3.3. Region of Interest and Behavioral Associations

418 Voxel coordinates, from Neurosynth.org, for a priori ROI's, bilateral insula, OFC, VS,
419 and mPFC and ACC (see supplemental Table S1 and Figure S1), were used with *fslmaths* to
420 create 10mm-diameter spheres. For each ROI, the voxels from each contrast mask (using *z*-
421 statistics produced by Feat Second Level) are averaged to create a mean signal intensity value
422 and were extracted using *fslmeants*. Correlations (point estimates of Pearson's *r*) across ROIs
423 were analyzed in R version 3.6.1 (R Core Team, 2019) and were visualized using a heatmap.

424 ROI mean level signal intensity values across ten contrast types (described above), were
425 used to assess associations between neural activity and self-reported aggregate scores of a)
426 substance use, b) sensation seeking, c) impulsivity, d) externalizing, and e) internalizing
427 problems. Bayesian correlation analyses implemented in JASP (JASP Team, 2019; Ly et al.,
428 2018) were used to estimate posterior distributions for the Pearson's *r* value of each predictive
429 association. Default, non-informative priors (uniform distributions spanning the values from -1
430 to 1) were used for all correlation analyses. Median values of the posterior distribution, which
431 indicate the most likely *r* value, and 95% credible intervals, which represent the lower and upper
432 bounds of the range which has a .95 probability of containing the *r* value, are reported below to
433 quantify the strength of, and uncertainty about, these predictive associations. As analyses are not

434 intended to be formal tests of hypotheses, we will refrain from reporting either Bayes factors or
435 frequentist p -values.

436 4. Results

437 4.1. Demographics, Task Behavior and General Overview

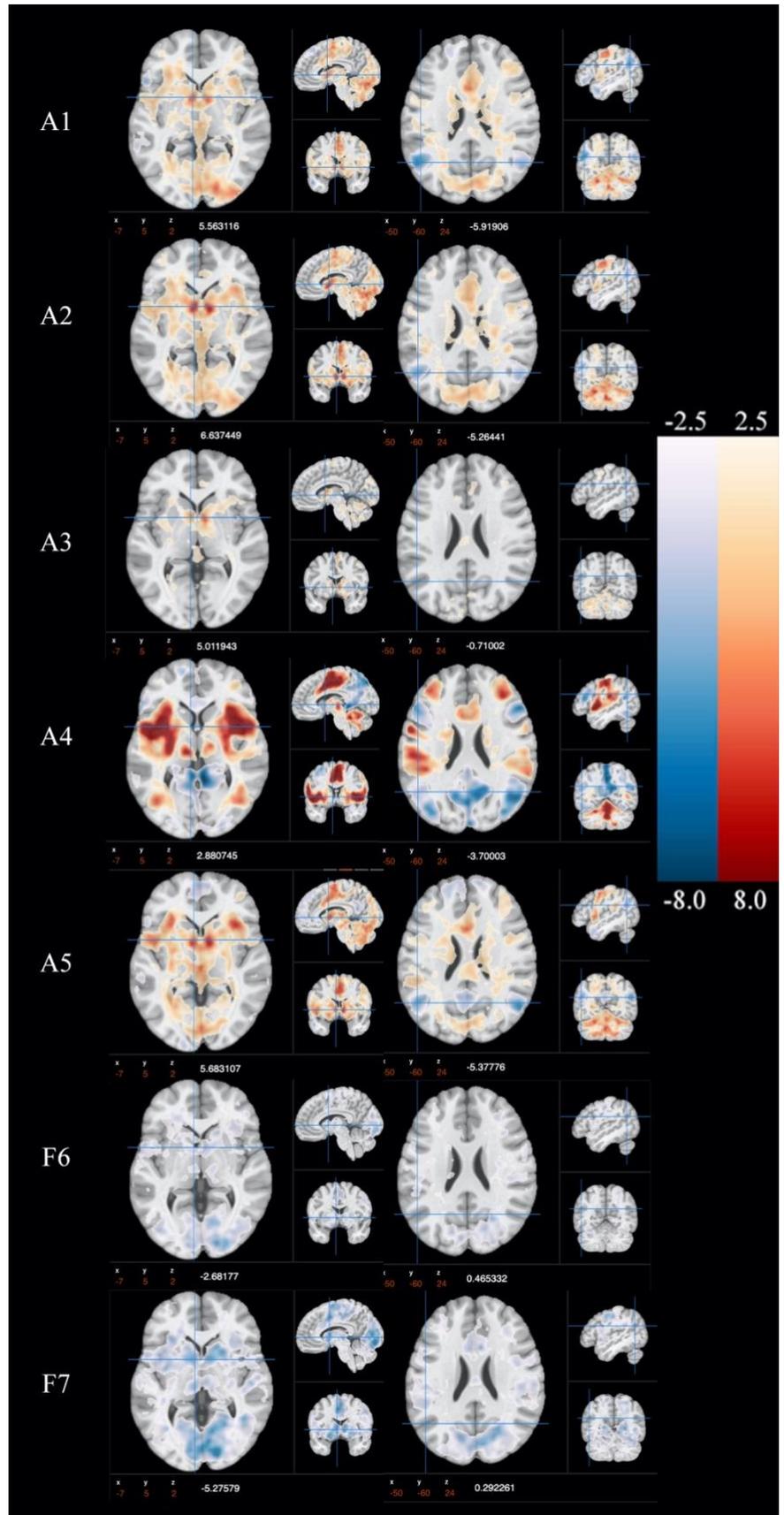
438 The demographic characteristics for the full sample ($n = 104$) are provided in
439 Supplementary Section 2.2, Table S3. For the anticipation phase (A1-A5) and prediction error
440 models (P8-P10), all 104 individuals were included, however, for the feedback phase (F6 & F7)
441 four subjects were excluded due to underpowered conditions resulting in anomalies in the
442 estimated [First & Second Level] statistical maps, resulting in only $N = 100$ for those contrasts.
443 The behavioral performance statistics from the MID task are included in Supplementary Section
444 2.3, Table S4 and Figure S2. Although the average accuracy for the task, 57%, was below the
445 targeted 60%, the Big Win (\$5) and Big Loss (\$5) conditions were at or above the target, 62%
446 and 60% accuracy, respectively. As expected, accuracy was lower (48%) and more variable
447 during the neutral condition. Mean response times are not reported, as the E-Prime data wasn't
448 collected for incorrect ('miss') trials during the MID task.

449 Similarity matrices and activation maps are displayed in supplementary Figure S4 and
450 Figure 1, respectively. Associations between individual differences in ROI activation estimates
451 from each contrast are reported at <https://osf.io/a5wem/>, and are selectively reported below for
452 clarity (Figure 2). Correlations between ROI activation estimates and behavioral criterion
453 measures are reported in Figure 3. There were three notable patterns present in these results
454 (Note: we remind the reader to refer to Table 1 for contrast descriptions): 1) during the
455 anticipation phase, **A2: BW>N** and **A5: BL>N** demonstrate comparable striatal/insula activation
456 and task-negative deactivation; 2) during the outcome phase, **F6: BWH>NH** and **F7: BLH>NH**

Figure 1. Mean level activation and deactivation maps for A1-A5 & F6-F7, One-Sample T-test

See Table 1 for details and online collection for unthresholded statistical maps of tens contrasts <http://neurovault.org/collections/JVXLTPHC>

457 demonstrate comparable deactivation
 458 of striatal regions; 3) **F7**: BWH>NH
 459 appears less meaningful, with
 460 reduced salience response and
 461 negligible task-negative activation
 462 and less association with other
 463 contrasts of anticipation phase; and
 464 4) individual differences in ROI
 465 activation, across different contrasts,
 466 demonstrate relatively weak
 467 associations with behavior. The
 468 aforementioned are expanded in
 469 greater detail below. Notably, the
 470 activation maps of the prediction
 471 error models **P8**: EV, **P9**: PPE, and
 472 **P10**: NPE, were extremely variable
 473 in activation and relatively weak in
 474 their associations with mean ROI
 475 activation from other contrasts, they



476 are not discussed below. The contrast maps are available online.

477 4.2. Big Win and Loss Anticipation Engage Similar Neural Systems

478 The thresholded masks ($p < .001$) of **A2:BW>N** and **A5:LB>N** group maps had a Jaccard's
479 similarity Coefficient of .16 (supplemental Figure S4). This similarity is also apparent in the
480 group level activation maps (Figure 1), demonstrated by shared patterns of activation. Bjork et
481 al. (2010) reported the greatest striatal activation in the largest magnitude of reward, e.g. \$5
482 (**A2:BW>N**). Although the peak left striatal activation in the **A2:BW>N** is greater than in the
483 **A5:BL>N** (based on magnitude of z-statistic in activation maps), in their direct comparison
484 (<https://neurovault.org/collections/JVXLTPHC/images/359857/>), the difference is relatively
485 small. The greatest difference between these two contrasts was increased activation in the mPFC
486 in **A2:BW>N** as compared to **A5:LB>N**. Furthermore, contrasts **A2:BW>N** & **A5:BL>N** show
487 similar activation of supplementary motor area (SMA), the insular cortex, thalamus and
488 cerebellar regions. Similar to the shared positive activation of these contrasts, they, too, share
489 comparable deactivation in the task-negative, angular gyrus, an effect that is not seen in the
490 **A3:BW>SM** (Figure 1). This activation in the striatal regions and deactivation in task negative
491 regions is comparable to a recent meta-analysis (open source activation maps:
492 <https://neurovault.org/collections/4258/>) showing similar robust patterns of activation and
493 deactivation in both win and loss anticipation (Wilson et al., 2018).

494 Consistent with these similarity analyses in group level activation, correlations of mean
495 signal intensity values from ROIs across **A2:BW>N** and **A5:BL>N** (Figure 2, full matrix
496 available at <https://osf.io/a5wem/>) also suggested that neural responses from these contrasts
497 index similar individual difference dimensions. Positive correlations in neural responses between
498 the contrasts were identified (Figure 2) in the anterior cingulate cortex (ACC; $r = .58$), medial

499 prefrontal cortex (mPFC; $r = .26$), bilateral Insula (Right: $r = .58$; Left: $r = .24$), bilateral
500 orbitofrontal cortex (OFC; Right: $r = .43$, Left: $r = .27$), and bilateral ventral striatum (VS; Right:
501 $r = .57$, Left: $r = .42$). The similarity between **A2:BW>N** and **A5:BL>N** is great than the past
502 literature has eluded to.

503 4.3. Reward and Loss Outcome is Paradoxically Linked to Striatal Deactivation

504 Contrary to past work focused on striatal activation during win conditions, our contrasts
505 during outcome phase, **F6:BWH>NH** & **F7:BLH>NH**, demonstrated a *deactivation* of the
506 striatal regions. Based on the Jaccard's similarity Coefficient, .34, the regions that were
507 deactivated were comparable in **F6:BWH>NH** and **F7:BLH>NH** (Figure 1, and supplemental
508 Figure S4). Although the mean level deactivation of the striatal region in the **F6:BWH>NH**
509 contrast was relatively weak ($t = -2.68$), in the **F7:BLH>NH** condition the deactivation was
510 relatively robust ($t = -5.8$). As a control comparison in change of activation, we reference the
511 angular gyrus, which has a relatively weak mean level activation in both **F6:BWH>NH** and
512 **F7:BLH>NH**, demonstrating that there is a more profound change in activation in the striatal
513 region between the anticipation and outcome phase (see Figure 1). In a direct comparison of
514 **F6:BWH>NH** & **F7:BLH>NH** (<https://neurovault.org/collections/JVXLTPHC/images/359858/>),
515 **F6:BWH>NH** demonstrates greater activation in the left parahippocampal ($z = 4.3$) and right
516 nucleus accumbens ($z = 3.4$). These two outcome contrasts demonstrated some associations
517 (Figure 2) in individual differences analyses of mean signal intensity in the ACC ($r = .33$),
518 mPFC ($r = .55$), and bilateral VS ($r = .45 - .46$) (full matrix available at <https://osf.io/a5wem/>)
519 However, this effect may relate to the fact that Big Win/Lose Hit versus Neutral Hit rather than
520 an alternative contrast that is used in the literature, such as Big Win/Lose Hit versus Big
521 Win/Lose Hit versus Big Win/Lose Miss. For this latter contrast, we plot the underlying BOLD

522 signal in the latter contrast, and find no differentiation in striatal regions (Figure S7). Overall,
523 there a consistent deactivation in these regions after the peak rise during the anticipation phase.

524 4.4 Anticipation Big Win versus Small Win Contrast Is Distinct from other Anticipation 525 Contrasts

526 Despite its variable use in the literature, **A3:BW>SM** was unique when compared to
527 other contrasts in anticipation phase (Figure 1). The **A3:BW>SM** had lowest Jaccard
528 Coefficient's with other contrasts modeling the anticipation phase, $<.02$ (Figure S4). Further, in
529 the group mean-level activation, compared to **A1:W>N**, **A2:BW>N**, and **A5:BL>N** anticipation
530 phases, the **A3:BW>SM** had the weakest mean-level striatal and insular activation, and no task-
531 negative activation. The task-negative activation difference is unique, as all of the other contrasts
532 demonstrate this profile of task-negative activation in the anticipation phase.

533 However, with respect to individual differences in ROI mean-level activation, depending
534 on the contrast, there are similarities between **A3:BW>SM** and other contrasts (Full correlation
535 matrix available at <https://osf.io/a5wem/>). For example, the mean-level activation between
536 **A1:W>N** and **A3:BW>SM** is negligible: ACC ($r = .15$), mPFC ($r = -.04$), bilateral insula ($r = .07$
537 $- .12$), bilateral OFC ($r = -.14 - .04$) and bilateral VS ($r = .05 - .11$). Yet, there is a strong
538 association between **A2:BW>N** and **A3:BW>SM** in the ACC ($r = .63$), mPFC ($r = .65$), bilateral
539 insula ($r = .42 - .64$), Right OFC ($r = .62$), and bilateral VS ($r = .43 - .65$). Despite the similarity
540 discussed between **A2:BW>N** and **A5:BL>N** above, there is a negligible association between
541 ROI's in **A3:BW>SM** and **A5:BL>N** ($r = -.11 - .19$). Which suggests that the similarities
542 between **A2:BW>N** and **A3:BW>SM** may arise from the shared Big Win cue in the subtraction.

543 4.5 Across Contrasts, Activations Show Only Weak to Negligible Correlational 544 Relationships with Behavioral Criterion Measures

545 The aggregated scores for psychological characteristics in this sample were associated in
546 the direction expected (Supplementary Section 2.4, Table S5). More specifically, there was a
547 strong positive association between internalizing and externalizing problems ($r = .51$), sensation
548 seeking and impulsivity ($r = .44$), externalizing and substance use ($r = .51$), and substance use
549 and sensation seeking ($r = .38$) and impulsivity ($r = .24$).

550 Posterior medians and 95% credible intervals (CIs) of Pearson's r values, which represent
551 the most likely r value and range in which there is a .95 probability that the r value falls,
552 respectively, are displayed in Figure 3 for all relationships between ROI activation estimates and
553 behavioral criterion measures (complete values available at <https://osf.io/d9k3v/>, bootstrapped
554 values also provided which are comparable at <https://osf.io/dr5y2/>). Although the interpretation
555 of individual associations is complicated by the large number of tests reported, several general
556 patterns are apparent.

557 First, the most likely r values for the majority of associations fell at or well below the
558 threshold for what is typically considered a "small-sized" effect ($|r| = .10$). Similarly, the bulk of
559 most CIs also fell in this general range. In fact, there was not a single association for which the
560 most likely r value indicated a "moderately-sized" effect ($|r| \geq .30$), and few CIs overlapped
561 with this "moderate" criterion. It is also notable that only a handful of CIs (less than 5%) did not
562 overlap with 0, suggesting that even these cases, which might be interpreted as showing
563 promising evidence for a non-negligible effect, are likely due to multiple testing rather than
564 reflecting true relationships. Indeed, as typical Bayesian CIs do not take into account the
565 probability that the null ($r = 0$) is true (van den Bergh et al., 2019), the effect size estimates we
566 report are, if anything, likely to be overly optimistic. Hence, consistent with other emerging
567 findings from large, diverse neuroimaging data sets (Nees et al., 2012; Paulus et al., 2019; Paulus

568 & Thompson, 2019), these patterns of results suggest that direct associations of MID task
569 activations with relevant behavioral criterion measures are less robust than what has been
570 previously thought, and that even if these associations exist, effect sizes are likely to be small.

571 4.6 Post-Hoc Analyses

572 In light of prior meta-analytical comparisons of base contrasts within individuals, such as
573 gain versus outcome phases (Knutson & Greer, 2008; Wilson et al., 2018), we compared these
574 differences in the anticipation phase, **A2:BW>N** versus **A5:BL>N**; outcome phase,
575 **F6:BWH>NH** versus **F7:BLH>NH**; win anticipation versus win outcome, **A2:BW>N** versus
576 **F6:BWH>NH**; and loss anticipation versus loss gain outcome, **A5:BL>N** versus **F7:BLH>NH**.
577 We provide these for reference online <https://neurovault.org/collections/JVXLTPHC/>. Notably,
578 in a direct comparison of the **A2: BW>N** versus **A5: BL>N** signal we find no differences in VS
579 or Insula as a function of valence.

580 With respect to the direct observation of the BOLD signal, we find appropriate separation
 581 in anticipation of Big Win and Neutral cues (Figure 4) and signal-to-noise ratio in the VS region

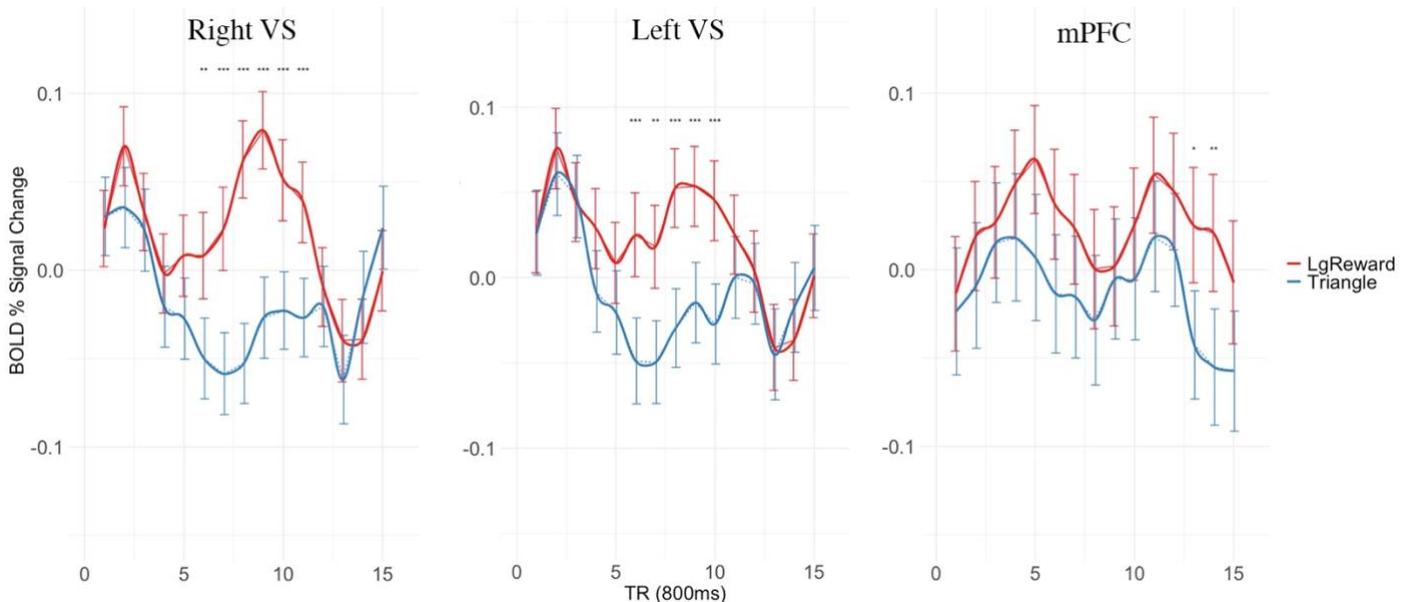


Figure 4: Direct Observation of BOLD signal locked to Cue Onset for Big Win (LgReward) and Neutral (Triangle) for 15 TRs (12 seconds) after Cue Onset
 mPFC = medial prefrontal cortex; VS = Ventral Striatum.
 Error bars = bootstrapped 90% Confidence Interval; $p < .05^*$; $p < .01^{**}$; $p < .001^{***}$

582 (Supplementary Figure S3). With respect to the anticipation phase, we see the expected peak in
 583 BOLD separation between Big Win and Neutral cues around 7-8seconds after cue onset (Figure
 584 4). Such that, this separation is significant from TR 6 ($p < .01$) to TR 11 ($p < .001$) in the Right
 585 VS, and TR 6 ($p < .001$) to TR 10 ($p < .001$) in the Left VS, before the undershoot at TR 14. This
 586 separation, as expected, does not occur in the mPFC. The nature of the anticipation signal
 587 bleeding into the feedback phase is apparent in the bilateral VS when the anticipation cues are
 588 locked to the feedback phase (Supplementary Figure S8). Specifically, there is significant
 589 separation for the first 4-5 TRs (or 3-4 sec) in the feedback phase in the Big Win as compared to
 590 the Neutral phase, until they reverse by TR 10. Since the signal is not appropriately deconvolved
 591 in the feedback phase, one approach is to model based on combinations of Hit/Miss trials. In our
 592 main feedback contrasts, F6 and F7, we modeled the Big Win versus Neutral Hit, which still

593 demonstrates poor deconvolution in the VS regions (see Supplementary Figure S6). One
594 alternative approach, which we did not model in the whole brain contrasts, is the contrast of Big
595 Win/Loss Hit versus Big Win/Loss Miss. However, direct observation of the BOLD signal
596 (supplementary Figure S7) demonstrates that for Big Win Hit and Big Win Miss, these are nearly
597 identical in the VS BOLD signal. However, whereas the mPFC demonstrates peak separation at
598 TR 14 (~11 sec), this is occurring well into the subsequent trial, it is unclear what this change
599 represents. Overall, we find appropriate peak in direct BOLD signal after anticipation cue onset,
600 but a complicated picture forms in the outcome phase with respect to bilateral VS and mPFC.
601

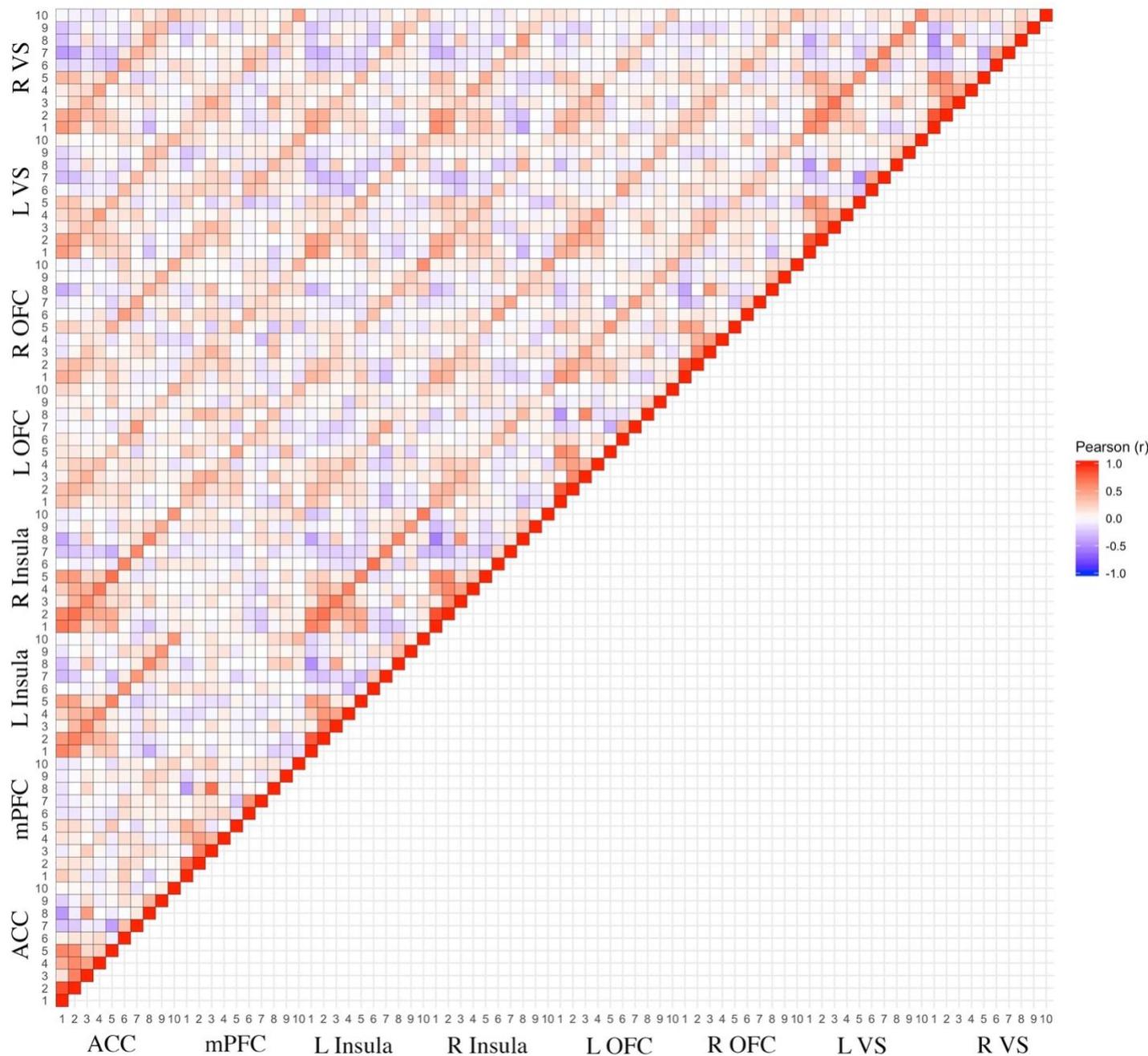
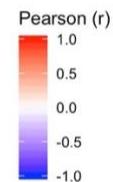


Figure 2: Pearson correlation matrix of 10 contrasts by 8 ROI's. Color bar represents associated Pearson r value between the 10mm ROI of across 10 contrasts. See Table 1 for associated contrast information. R = Right; L = Left; VS = Ventral Striatum; OFC = Orbitofrontal Cortex; mPFC = medial Prefrontal Cortex; ACC = Anterior Cingulate Cortex



603

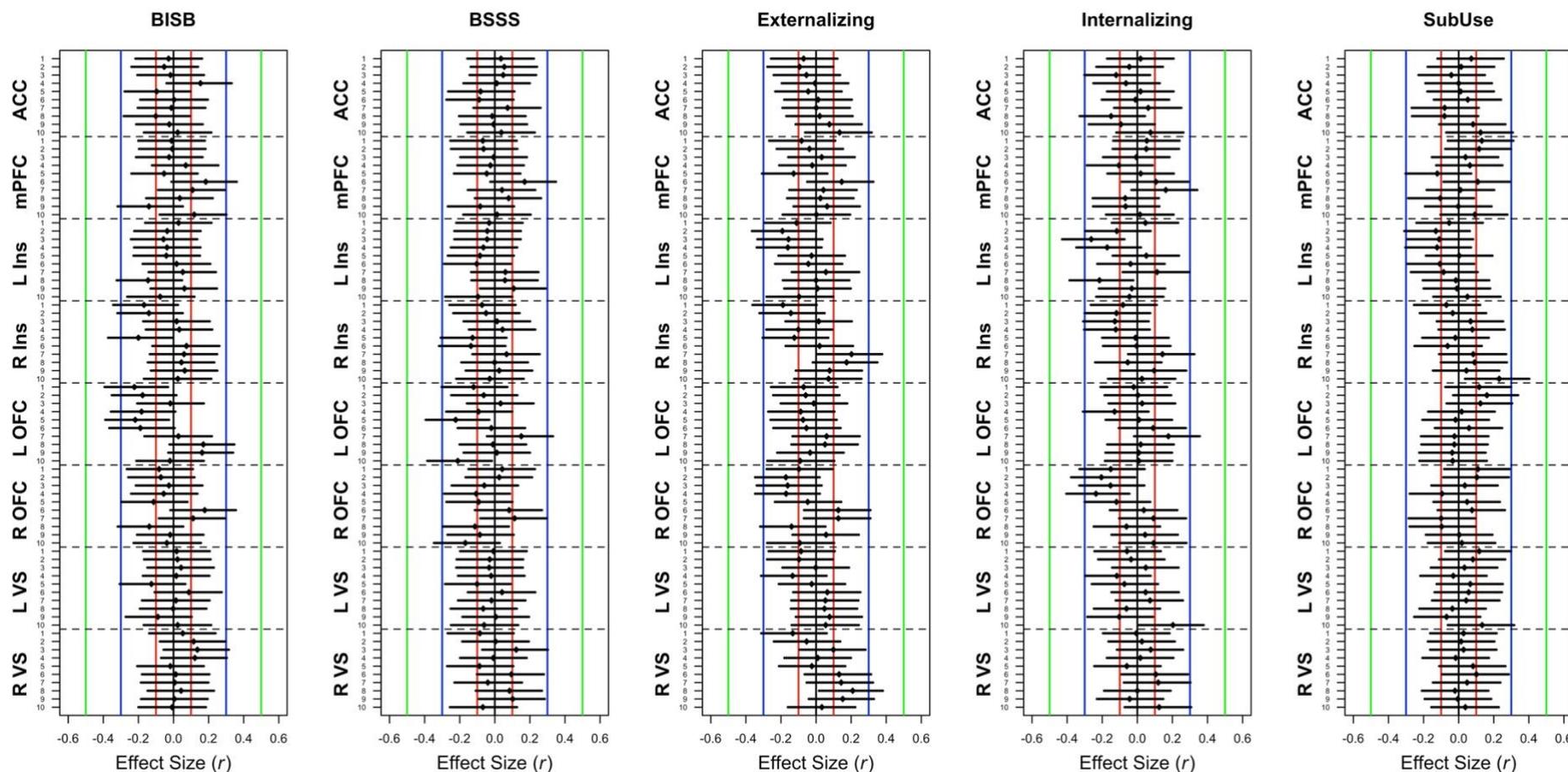


Figure 3. Forest plots displaying the most likely Pearson’s r value (black diamonds) and 95% Bayesian credible interval (black lines) for correlational relationships between ROI activation estimates from each contrast and behavioral criterion measures. Red, blue and green lines denote “small” ($r=.10$), “moderate” ($r=.30$) and “large” ($r=.50$) effect sizes.

1-10 = Ten contrasts listed in Table 1; ACC = anterior cingulate cortex; mPFC = medial prefrontal cortex; Ins = insula; OFC = orbitofrontal cortex; VS = ventral striatum; L = left; R = right; SubUse = substance use composite measure; BISB = Barratt Impulsiveness Scale-Brief; BSSS = Brief Sensation Seeking Scale

604 5 Discussion

605 In this study of the MID task, we performed a comprehensive evaluation of between-
606 contrast similarities and differences in activation maps, mean ROI signal intensity and
607 correlations between ROI activations and behavioral criterion measures. After identifying ten
608 candidate contrasts that have precedent in the previous literature, our within study comparison
609 provides the first look at the comparative differences between these common MID task contrasts.
610 The findings demonstrate similarity between positively and negatively arousing anticipation
611 cues, distinct deactivation of striatal regions during the outcome phase, dissimilarity between Big
612 Win > Small Win anticipation and other anticipation effects, and a relatively weak associations
613 between MID task activations and real-world behaviors. These findings are consistent with
614 previously reported MID task-specific conceptual findings (Bjork et al., 2010) and also have
615 implications for task-general theoretical problems (Hedge et al., 2018; Poldrack & Yarkoni,
616 2016)

617 A relatively similar pattern of activation was observed during the Big Win anticipation
618 and the Big Loss anticipation phase. A direct comparison of Big Win and Big Loss anticipation
619 phases revealed negligible differences between the activation in the NAcc and insula in the group
620 level activation maps, and only a small Win-related increase in activation in the mPFC. This
621 similarity in activation profiles during anticipation of both positive and negative stimuli is
622 consistent with a recent meta-analysis demonstrating that approach and avoidance behavior have
623 considerable overlap in activation (Oldham et al., 2018), and prior studies reporting similar
624 activation patterns in young adults (Joseph et al., 2015; Joseph et al., 2016) and substance use
625 populations (Bjork et al., 2008). Although prior models suggested that levels of uncertainty,
626 depending on positive or negative arousal, would elicit activation in the NAcc or insula (Knutson

627 & Greer, 2008), these difference were not apparent during the anticipation phase. In the direct
628 comparison of BOLD in cue onset of Big Win and Big Loss, although there are subtle
629 differences in our larger sample, these differences are relatively small. This may suggest
630 alternative cognitive processes (such as attention or motivation) that may be involved during the
631 anticipation phase (Abler et al., 2006; Breckel et al., 2011; Krebs et al., 2012; Schouppe et al.,
632 2014), as the NAcc may facilitate detection and attention to cues (Peters et al., 2011), as it serves
633 as a limbic-motor interface that converts signals into action (Floresco, 2015). Thus, the proactive
634 nature of the anticipation phase in the task may permit the individual to strategically prepare via
635 the confounded relationship between attention and reward (Pessoa, 2015).

636 Our within-task analysis revealed some dissimilarity within contrasts in the anticipation
637 and distinct patterns of activation in the outcome phase compared to the anticipation phase.
638 Although the Big Win versus Small Win contrast activated striatal regions, the contrast was
639 distinct from all others, demonstrating a limited association with other contrasts in the
640 anticipation phase and not apparent improvement in estimates of behavior. Since the contrast is
641 used in the literature (Büchel et al., 2017), more theoretical support is needed to contextualize
642 this modeling approach. Conversely, our comparison of positively and negatively valenced
643 reward outcomes revealed widespread *deactivation* throughout the brain during the outcome
644 phase. These patterns were counter to a recent meta-analysis, using activation likelihood
645 estimation (based on nine studies), that reported no activation in the contrasts of Big Win hit
646 versus Neutral hit conditions in the MID task (Oldham et al., 2018). However, the pattern of
647 deactivation may have been overlooked in a meta-analytic strategy, especially since the
648 technique focuses on reported points of positive activation. Although the pattern of deactivation
649 is consistent in both positively and negatively valenced outcomes, there appears to be a greater

650 deactivation in the negatively valenced cues as compared to positively valenced cues. This
651 pattern of deactivation is consistent when comparing contrasts modeling the anticipation and
652 outcome phase, whereby there is a consistent negative association between correlations of ROI
653 activation estimates. This suggests a unique pattern of deactivation in the outcome phase that is
654 anti-correlated with the anticipation phase, which is important to consider as the direction of
655 activation may differ as a function of the anticipation and outcome phase, and so should be
656 considered when interpreting an increase or decrease in the MID task. However, since the
657 outcome phase is not temporally-separated from the anticipation phase in most versions of the
658 MID task (Bjork et al., 2010), it is still unclear whether the negative activation in this version is
659 related to some overlap in the BOLD response occurring during the anticipation, probe and
660 outcome phase.

661 Alternative contrasts may have been examined in the outcome phase, such as Big Win
662 Hit versus Big Win Miss or more complicated contrasts (Bjork et al., 2011; Veroude et al.,
663 2016), but these contrasts would likely still suffer from a signal that is not temporally separated
664 between the outcome and anticipation phase or offer an inadequately powered number of trials.
665 In the direct observation of Big Win Hit versus Big Win Miss cues, we observe that they are
666 nearly identical in during the feedback phase in the VS regions. Although the mPFC
667 demonstrates some separation in these cues, it occurs well into the subsequent trials, which
668 would make it difficult to conclude on the effect. In a version of the MID task that used a filler
669 between the probe and outcome phase, some increases in activation were reported to winning
670 rewards but not loss avoidance (Bjork et al., 2010). Since deactivation was not reported, it is still
671 unclear whether deactivation found here is confounded by contrast type in the outcome phase
672 and/or overlap in BOLD signal. Although it is difficult to do for the current MID design, future

673 designs would benefit from deconvolving the BOLD signal between the anticipation and
674 outcome phase to disentangle the complexity of the design and subsequent conclusions.

675 In addition to understanding the variability across different contrasts of the MID task, it is
676 also critical to consider how patterns of activation across task phases/conditions relate to
677 behaviors, since the task is used in a broad clinical and behavioral literature. In our analysis
678 using psychosocial and clinical criterion measures, we found limited evidence for associations
679 with activations across different phases and conditions. Specifically, the majority of associations
680 between neural activation during the MID task and behavior were likely to be relatively small or
681 negligible effects. As the original design focused on clinical populations (Brian Knutson &
682 Heinz, 2015) and reviews have suggest a robust role of limbic regions in substance use (Balodis
683 & Potenza, 2015) and psychosis (Radua et al., 2015), this may contribute to the weak effects
684 found in our young adult community sample. Although we cannot rule out that this lack of
685 robust associations with behavior may have been due to features of our sample or measures, it
686 stands in stark contrast to the large array of previous studies reporting associations of MID task
687 activations with various real-world outcomes (Büchel et al., 2017; Boecker et al., 2014).
688 However, our findings are broadly consistent with recent work that has reported a distinct
689 contrast between the effects found in studies with (median $r = .16$) and without preregistration
690 (median $r = .36$) respectively) (Schäfer & Schwarz, 2019) and with findings in large, diverse data
691 sets which indicate that neuroimaging markers often explain only very small portions of the
692 variance in behavioral outcomes of interest (Nees et al., 2012; Paulus et al., 2019; Paulus &
693 Thompson, 2019). This has led some (Paulus and Thompson, 2019) to suggest that small effects
694 are the “new normal” in clinical neuroscience research.

695 One reason for discrepancy between our results and prior reports of more robust MID
696 task associations with behavior is that effect sizes may have been overestimated in previous
697 studies with smaller samples. Until recently, neuroimaging studies of individual differences have
698 frequently been underpowered (Cremers et al., 2017; Yarkoni, 2009), which tends to cause the
699 size and replicability of effects to be dramatically overestimated due to a combination of noise in
700 small samples and the “statistical significance filter” (Gelman & Loken, 2014; Vasishth et al.,
701 2018). Hence, when viewed in the broader context of current challenges faced by neuroimaging
702 studies of individual differences, our findings suggest that researchers should be prepared for
703 relationships between MID task activations and clinical or real-world outcomes of interest to be
704 of small size, and design their studies accordingly. For example, the use of large data sets from
705 collaborative efforts (e.g., ABCD: Casey et al., 2018) may be preferable to smaller samples
706 collected by individual labs (Beltz & Weigard, 2019; Paulus & Thompson, 2019).

707 Beyond the possibility that effect sizes in previous MID studies may have simply been
708 inflated, the lack of relationships may also be attributed to problematic validity of fMRI-based
709 tasks and the underlying assumptions in the cognitive processes and their related phenomena,
710 such as positive or negative valence. A large proportion of tasks in fMRI are experiment based,
711 whereby conditions are manipulated to evoke excitation of a specific cognitive processes.
712 Although the MID task evokes distinct neural processes that are consistent with current
713 conceptualizations of the mesolimbic system (Knutson & Greer, 2008) – which we find distinct
714 separation in VS to valence – the classic metric of validity, that a test measures what it claims to
715 measure (Cronbach & Meehl, 1955; Kelley, 1927), is underexplored. In fMRI studies of
716 individual variation, such as behavioral differences that may be associated with neural measures
717 of reward, requires the combination of experimental and correlation work which has been

718 considered to be two distinct traditions in psychology (Cronbach, 1957). Correlation work
719 attempts to increase between individual variation, whereas experimental work attempts to limit
720 the between-individual variation; the latter methodological practice has been argued to contribute
721 to the poor predictive effect of cognitive measures in correlational research (Dang et al., 2020;
722 Hedge et al., 2018). Together, the weak predictive effect of cognitive tasks and poor test re-test
723 of fMRI (Elliott et al., 2020) can contribute to the unreliable estimates of different task contrasts.

724 Moreover, the inferential processes in task-based fMRI pose conceptual challenges. It has
725 been argued that the standard approaches in task-based fMRI, that utilize the technique of
726 subtracting conditions, are fundamentally flawed in achieving the isolated mental functions in
727 neural substrates, making it difficult to map brain to behavior (Poldrack & Yarkoni, 2016).
728 Poldrack & Yarkoni (2016) recommended that there are basic conceptual difficulties in task-
729 based fMRI ‘that remain widely underappreciated within the neuroimaging community’ (pg.
730 589). This is observed in the MID task, as *conceptually* the subtraction intends to measure
731 approach and avoidance of positive and negative conditions (Knutson & Greer, 2008), but, this is
732 not consistent in the activation patterns of valence (insula) and approach (NAcc) structures that,
733 here, are activated similarly in both. Although using monetary value illustrates control of
734 magnitude, probability and timing (Knutson & Greer, 2008), adding a discrete step with positive
735 or negative monetary cues may not be sophisticated enough to identify valence and approach
736 over and above processes of attention and/or motivation within an individual. This poor one-to-
737 one mapping makes it especially difficult to predict socioemotional vulnerabilities due to the
738 heterogeneity of populations that do not uniquely fit into one-to-one neural mappings (Paulus &
739 Thompson, 2019). While the MID task poses to measure distinct positive and negative valenced
740 systems in two distinct phases (Balodis & Potenza, 2015; Knutson et al., 2000; Knutson & Greer,

741 2008; Oldham et al., 2018), the nature to which these phenomena vary or are consistent have not
742 been validated. And in fact, our work in a community sample of young adults suggests that they
743 may not significantly differ in terms of the structures that are involved.

744 Therefore, as has long been acknowledged in behavioral research (Cronbach & Meehl,
745 1955), it is crucial to test whether activations from fMRI contrasts cluster in the same manner in
746 which they are proposed to by theorists and task designers. Likewise, if reviewers are to contrast
747 between studies and tasks at the results level, implying a construct of a cognitive process, it
748 would be valuable to the field to know whether within- and between-task conditions converge on
749 a hypothesized phenomenon (Campbell & Fiske, 1959). Until assumptions are considered in
750 cognitive processes of fMRI tasks, simple manipulations that are laden with theoretical claims of
751 reward processes will provide overconfidence in the robustness of findings (Poldrack & Yarkoni,
752 2016; Vasishth et al., 2018). Due to the variability in our findings, the current state of practices
753 used in the MID task (and potentially others) will inevitably result in playing ‘20 questions with
754 nature’ (Newell, 1973), which will result in some winners and some losers (Button et al., 2013).
755 By modeling multiple versions of an unvalidated phenomena in contrasts, the incorrect measure
756 of error will invariability result in significance 5-percent of the time (Fisher, 1926), and in small
757 samples, this may be lauded as a significant finding between neural substrates of reward and
758 behavior, which can alter designs and conclusions of subsequent studies (Button et al., 2013).

759 Although our findings suggest a high level of variability between contrast choices and
760 behavioral associations, several measures can be taken to improve the reproducibility of results
761 in the MID task literature. A first and immediate step that can be taken by researchers is
762 increasing sample sizes of samples using fMRI. Currently, a large proportion of fMRI studies are
763 substantially underpowered for finding the effect they are testing (Szucs & Ioannidis, 2017). In

764 addition to improving power, researchers would benefit from assessing how the MID contrast
765 values fit in a larger nomological network of neural and behavioral constructs, beyond an
766 abstract subtraction processes that presumes a process of motivation or consumption of reward
767 (Poldrack & Yarkoni, 2016). One approach may be to use parametric modulators, which has
768 been used in prior analyses, but is largely underutilized (Aloi et al., 2019; Joseph et al., 2016). In
769 addition to improving estimates of functional parcels (Nikolaidis et al., 2020), multivariate
770 pattern analyses may help with the reproducibility of theorized cognitive processes (Hong et al.,
771 2019). Multivariate, cross-validated, pattern analyses can provide *a priori* activation patterns and
772 locations that can be confirmed out of sample, reducing the possibility of exploring multiple
773 hypotheses. Furthermore, in order to characterize individual variability in neural models,
774 researchers should implement functional organization techniques to explain changes in behavior
775 and cognitive processes (Beltz et al., 2016; Greene et al., 2018; Yip et al., 2019; Zhang et al.,
776 2019). For example, Zhang and colleagues (2019) used a network modeling approach to identify
777 a developmentally stable architecture of emotion related findings, providing some reliable
778 estimates. Further, the network models of task-based fMRI may aid researchers in uncovering
779 the neural architecture of cognitive processes (Medaglia et al., 2015), such that connectivity
780 metrics may provide predictive effects of individual traits (Greene et al., 2018). By using
781 individual and group level estimates of connectivity patterns (Beltz et al., 2016), task-based
782 analyses may improve the identification and replication of neural signatures that will aid
783 researchers studying developmental and clinical differences (Yip et al., 2019; Zhang et al.,
784 2019).

785 5.1 Limitations

786 Although the findings here pose significant implications, there are multiple limitations.
787 First, the nature of our findings are specific only a modified version of MID task that was
788 administered in a young adult sample, so the implications should be considered and confirmed in
789 a separate sample(s) to determine which effects are converge between samples and which are
790 limited to a sample. Second, the correlates between ROI activation and self-reported behavior
791 may be underestimated, such that behavior that is collected contemporaneously with the scan
792 acquisition or in the nature that brain predicts behavior may produce different effects. Third, only
793 a subset of common *a priori* contrasts were selected from the literature. Alternative contrasts,
794 such as the linear combination of winning or alternative contrasts during the outcome phase,
795 should be considered in future work. Further, since the anticipation and outcome phase in this
796 task were not jittered, we could not directly contrast these phases at the individual level (only
797 group level), due to risk of collinearity. Finally, due to the outcome phase containing variable
798 number of trials as a function of 60% accuracy rate, the activation patterns may be influenced by
799 the surprise of the event(s) (Vassena et al., 2020), which should be considered in future work.

800 It is worth noting, that some of differences between positive and negative cues in our and
801 previous studies may depend on age-related factors and sample characteristics. For instance,
802 while our results did not demonstrate a meaningful difference in the activation of the VS or
803 insula between big win and big lose anticipation phases, age related differences have been
804 previously reported using this task (Bjork et al., 2010; Cope et al., 2019), such that increases in
805 activation during big win anticipation trials were greater in older adults (Bjork et al., 2010), and
806 reduced activation in reponse to lose big anticipation in 9-12 year old's (Cope et al., 2019). This
807 suggests patterns of activation during the MID task within and between sample comparisons has
808 be considered when age-related effects are present, as qualitative differences between some

809 contrasts may not be easily apparent. Furthermore, whereas these analyses focus on a
810 community-recruited young adult sample, previous reviews focused on clinical population
811 (Balodis & Potenza, 2015; Radua et al., 2015), and these results should be considered in the
812 future within a clinical population to assess how associations would change in light of clinical
813 factors.

814 Finally, in this analysis we were not able to explore at what degree individual intrinsic
815 motivation differentiated across cue types (win/loss/neutral). Although the accuracy in the task
816 was used as a marker, it is difficult to determine how interested a participant was in the task
817 conditions. Future work should consider how relationships can be accounted for by self-reported
818 metrics, and whether the degree of task-negative activation in the default mode network may be a
819 useful indicator of vigor (or attention) during the MID task.

820 5.2 Conclusion

821 Although the MID task has been used to measure neural substrates of reward processing,
822 modeling techniques have varied substantially between studies. While the structure of the task
823 has been proposed to measure varying levels of arousal and valence, it is still unclear whether
824 findings from different within task comparisons can be easily generalized between studies. Our
825 comparison of within-sample MID task contrasts during multiband fMRI revealed more
826 similarities than differences between positive and negative cues during the anticipation contrast,
827 dissimilarity of a distinct contrasts during the anticipation phase, a robust deactivation effect in
828 the outcome phase, and behavioral associations that are less robust than previously thought.
829 These findings point to the need for caution in future work that make attempts at generalization,
830 and encourage researchers to power their studies for effects that may be smaller than previously
831 hypothesized.

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