# Assessing the Use of Physiological Signals and Facial Behaviour to Gauge Drivers' Emotions as a UX Metric in Automotive User Studies

Christine Spencer cspencer03@qub.ac.uk Queen's University Belfast Belfast, Antrim

Alexander Lee alex.lee@volvocars.com Volvo Cars USA Sunnyvale, California

Maria Iozzo maria.iozzo@volvocars.com Volvo Cars USA Sunnyvale, California İbrahim Alper Koç iakoc@sensum.co Sensum Belfast, Antrim

Anupama Mahesh Dhareshwar anupama.dhareshwar@volvocars.com Volvo Cars Gothenburg, Västra Götaland

> Gawain Morrison gawain@sensum.co Sensum Belfast, Antrim

Chihiro Suga chihiro.suga@volvocars.com Volvo Cars USA Sunnyvale, California

Elin Franzén elin.franzen@volvocars.com Volvo Cars Gothenburg, Västra Götaland

Gary McKeown g.mckeown@qub.ac.uk Queen's University Belfast Belfast, Antrim

# **ABSTRACT**

Studies have shown that drivers' emotions can be assessed via changes in their physiology and facial behaviour. This study examined this approach as a means of gauging user experience (UX) in an automotive user study. 36 drivers' responses to typical UXstyle questions were compared with computational estimates of their emotional state, based on changes in their cardiac, respiratory, electrodermal and facial signals. The drivers' arousal and valence levels were monitored in real-time as they drove a 23-mile route around Sunnyvale, CA. These estimates corresponded with two independent observers' judgments of the drivers' emotions. The results highlighted a disparity between the self-report and algorithmic scores-the drivers who answered the UX questions more positively experienced higher levels of stress-evidenced by higher arousal and lower valence algorithmic scores. The findings highlight the value of supplementing self-report measures with objective estimates of drivers' emotions in automotive UX research.

# **CCS CONCEPTS**

• Human-centered computing  $\rightarrow$  User studies; • Applied computing  $\rightarrow$  Psychology.

# **KEYWORDS**

Automotive user experience metrics, drivers' emotions, physiological signals, facial behaviour, multimodal data synchronisation

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AutomotiveUI '20 Adjunct, September 21–22, 2020, Virtual Event, USA

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https://doi.org/10.1145/3409251.3411728

### **ACM Reference Format:**

Christine Spencer, İbrahim Alper Koç, Chihiro Suga, Alexander Lee, Anupama Mahesh Dhareshwar, Elin Franzén, Maria Iozzo, Gawain Morrison, and Gary McKeown. 2020. Assessing the Use of Physiological Signals and Facial Behaviour to Gauge Drivers' Emotions as a UX Metric in Automotive User Studies. In 12th International Conference on Automotive User Interfaces and Interactive Vehicular Applications (AutomotiveUI '20 Adjunct), September 21–22, 2020, Virtual Event, USA. ACM, New York, NY, USA, 4 pages. https://doi.org/10.1145/3409251.3411728

# 1 INTRODUCTION

How drivers respond emotionally at the wheel is of critical interest to researchers in the automotive user experience (UX) field [2]. Stress is a state of emotional or mental tension that people experience in response to taxing or adverse environmental demands or events which threaten their well-being [8]. Driver stress is known to impair driving performance [3][5][25][17][6], and can be triggered not only by external events in the road, but also by the design of a vehicle's assisted driving, navigation or HCI systems [29]. Although self-report measures are commonly used to gain insights into drivers' affective states [3][17][24][6], the objectivity of this approach is not clear. Self-report measures can suffer from social desirability bias [15]-people may feel obliged to report favourable feelings or opinions about their experience to avoid causing offence. They also do not allow for continuous measurement, and so may fail to capture important changes in a person's emotional state as they interact with a driving system. Research indicates that it is possible to estimate whether a person is feeling stressed by measuring changes in their physiology [11]-with stress being characterised by heightened physiological arousal-elevated heart rate [13][7], breathing rate [12][26] and skin conductance [19][14]. Facial cues can also offer information about a drivers' emotional state [9][10], although this is context-dependent [1].

According to [18], it is possible to conceptualise any emotion in terms of two dimensions—valence and arousal. Valence refers to

the subjective "positive" or "negative" quality of an emotional experience while arousal refers to a person's level of physiological activation. This on-road study assessed the value of gauging drivers' emotions through objective measures as an automotive UX metric by comparing how well drivers' responses to typical user-experience style questions correlated with computational estimates of their arousal and valence levels, derived from their physiological and facial data.

# 2 METHOD

# 2.1 Participants

36 employees within a leading international automotive brand were recruited for an internal study to test user reactions to an assisted driving system. Participants were all at least 18 years old, possessed a full driving licence, drove a minimum of three to five days a week on average and had previously used the brand's assisted "Pilot Assist" driving functionality. The recruited sample was 75% male, with a mean age of 38.73 years.

# 2.2 Procedure

Each participants' session consisted of a 23-mile route around Sunnyvale, CA, which involved industrial and pedestrianised downtown areas, as well as a highway section where participants used an assisted driving system. Each session took between 40 and 45 minutes on average. Data-recording difficulties resulted in incomplete data for 3 participants' sessions—these were excluded from the analyses.

2.2.1 Physiological and face data. Participants' heart and breathing rates were recorded by an upper body Equivital EQ02+ LifeMonitor sensor belt, while their skin conductance level was measured via electrodes placed on the underside of two fingers on their left hand, as shown in Figure 1. Participants' facial expressions were captured by a dash-mounted ELP Webcam USB 1080P camera and were analysed by the SHORE [21] facial classification library. Drivers' speech was recorded with a RØDE lapel microphone, and their view of the road was recorded with an outward-facing, dash-mounted Logitech RGB webcam camera. The placement of the data capture devices is illustrated in Figure 2.

All of the devices were connected to a Sensum Synsis™Empathic AI Developer Kit [20]—which predicted the drivers' arousal and valence levels in real-time. These algorithms were developed using a decision-tree machine learning approach, using data which was obtained in previous studies (e.g. [23]) where people were required to complete stressful and calming activities in a simulated driving context, and where the participants' behaviour was then coded for arousal, valence and stress on a visual analogue scale by multiple annotators. Decision-tree models were then trained to recognise changes in physiological activation and "positivity" or "negativity" based on these annotated labels. The validity of these estimates was corroborated by the judgments of independent observers who reviewed sample session footage after the study—see [22] for greater details of this validation.

2.2.2 **Self-Reported Emotion**. At regular intervals during the drive, the participants also verbally rated how they were feeling on a scale of 1 ("not at all positive") to 10 ("highly positive")—these

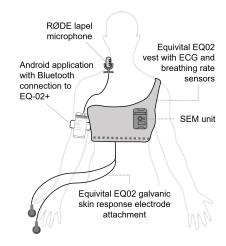


Figure 1: Placement of physiological sensors

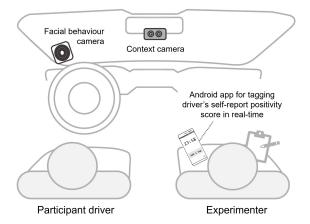


Figure 2: Placement of cameras

scores were shown to have little correlation with their observed behaviour and so were not considered to offer an objective measure of emotion—an interested reader should refer to [22] for further details.

2.2.3 Self-Report UX Evaluation Scores. After the drive, participants completed a comprehensive 60-item questionnaire. 17 items were user experience style questions—participants were asked to rate the degree to which the driving system worked accurately, was reliable and easy to understand, as well as the degree to which they felt comfortable using it. They also indicated whether they understood how to interact with the user interface, and whether the interface provided them with appropriate and useful feedback. They also rated the degree to which the system seemed intelligent, perceptive, responsive and intuitive, as well as the degree to which it helped them to relax. All questions were answered on a 6-point Likert scale ranging from "Strongly disagree" to "Strongly agree". Participants' responses were totaled to derive a "Self-report UX Evaluation" score. Participants who scored above the median were presumed to have enjoyed a more positive user experience with the

system. These individuals formed the "Highly Positive Self-report UX Evaluation" group, while those scoring less than the median formed the "Less Positive" group.

# 3 RESULTS

Analysis and data visualisation was performed using R's [16] mgcv [28], ggplot2 [27] and tidymv [4] packages. The scatter diagrams in Figure 3 show that both groups' arousal and valence predictions were most densely populated in the lower-right quadrant of the valence-arousal space, which is theoretically characterised by feelings of calmness [18]. However, the "Positive" group had a greater number of predictions in the upper-left quadrant, which is theoretically characterised by negative emotions such as stress or frustration [18].

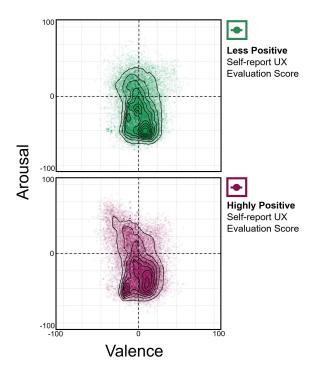


Figure 3: A Comparison of Each Group's Arousal and Valence Scores

Note. The contour lines demarcate zones in the VA space where the valence-arousal predictions are populated to the same degree. The innermost contour line represents the emotional zone most experienced by participants in each group.

Generalised additive models (GAMs) with restricted maximum likelihood estimation were also used to examine how each groups' arousal and valence levels varied over time. Each model took the generalised form:

$$y = \alpha + f(time, \beta) + \epsilon \sim N(0, \sigma^2)$$

where y represents either arousal or valence,  $\alpha$  represents the intercept,  $f(time, \beta)$  represents the smooth factor interaction, and  $\epsilon$  represents normally distributed errors. The pointwise 95% confidence intervals are shown as grey bands around each smooth in Figure 4. Where the confidence intervals of the two group's

GAM smooths do not overlap with each other, there is a significant difference between the groups.

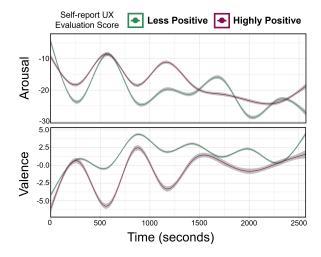


Figure 4: Changes in Each Group's Arousal and Valence Scores Over Time

Note. The grey variability bands around each smooth represent pointwise 95% confidence intervals.

As shown in Figure 4, both groups' arousal levels were similar at around 600-800 seconds into the session, at which time participants were driving on the highway and using the assisted driving system. However, there were interesting differences between the groups for the rest of the session. In the case of arousal, the smooth factor interaction term was significant (edf = 17.86, F = 88.75, p < .001)—the participants who answered more positively tended to have significantly higher arousal levels across the session compared to the "less positive" group. In the case of valence, the "highly positive" participants had significantly lower valence levels across the session compared to the "less positive" participants who had almost entirely positive valence values across the session. The smooth factor interaction term in this case was significant (edf = 18.73, F = 55.41, p < .001).

# 4 DISCUSSION

This study evaluated the practice of using algorithmic estimates of drivers' emotions—derived from their physiology and facial expressions—to gauge user experience in automotive studies. The findings highlighted a disparity between drivers' responses to typical UX-style questions and the algorithmic estimates. It would be expected that the drivers who provided more favourable responses about their experience would have enjoyed lower levels of stress during their drives. However, the algorithmic emotion predictions revealed the opposite to be the case. The participants who reported highly positive opinions consistently experienced higher levels of arousal and lower levels of valence across the session, entering the "stress" quadrant of [18]'s valence-arousal space more often than those who provided less positive responses.

It should be noted that the "Self-Report UX Evaluation Score" was rather broad, covering a wide range of user-experience elements, such as the system's ease of use and understanding, and its level of comfort, intelligence, intuitiveness and comfort, as examples. It was presumed that if participants rated these elements favourably, this meant that they enjoyed a positive emotional experience when using the system. Perhaps a future study could delineate these elements more clearly.

It should be noted that the drivers' self-report responses were skewed in this study—although the totalled "Self-Report UX Evaluation Score" responses had a potential range of 17-102, the median value was 93. Participants tended to provide favourable responses to most of the questions, which suggests that they may have experienced social desirability concerns. This supports the practice of supplementing self-report UX measures with objective measures of drivers' emotions. Even though the "less positive" group did not provide highly negative responses, notable differences were still observed between the groups' arousal and valence levels.

In conclusion, the present findings highlight the value of recording drivers' physiological and facial signals to derive a more objective metric of their experience in automotive user studies. Future work will apply this approach in expanded user study scenarios. We believe that examining drivers' emotions at a fine-grained, objective level can provide valuable insights into the individual differences that may exist in the psychological perception of UX elements—such as human-machine interface design, or vehicle dynamics with onroad events—and can contribute to the automotive UX research community.

# 5 ACKNOWLEDGMENTS

Thank you to all of the participants who gave their time to this study.

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