Data Mining Project

# **Project Results Presentation**

A multi-modal sensor dataset for continuous stress detection in nurses at a hospital

26 March, 2025









# **BACKGROUND OF THE STUDY**

- The data contains multimodal physiological signals gathered from a wearable device attached to the regular working nurses.
- A self-reported survey results completed daily by the nurses after their regular shift.

# **Research Questions**

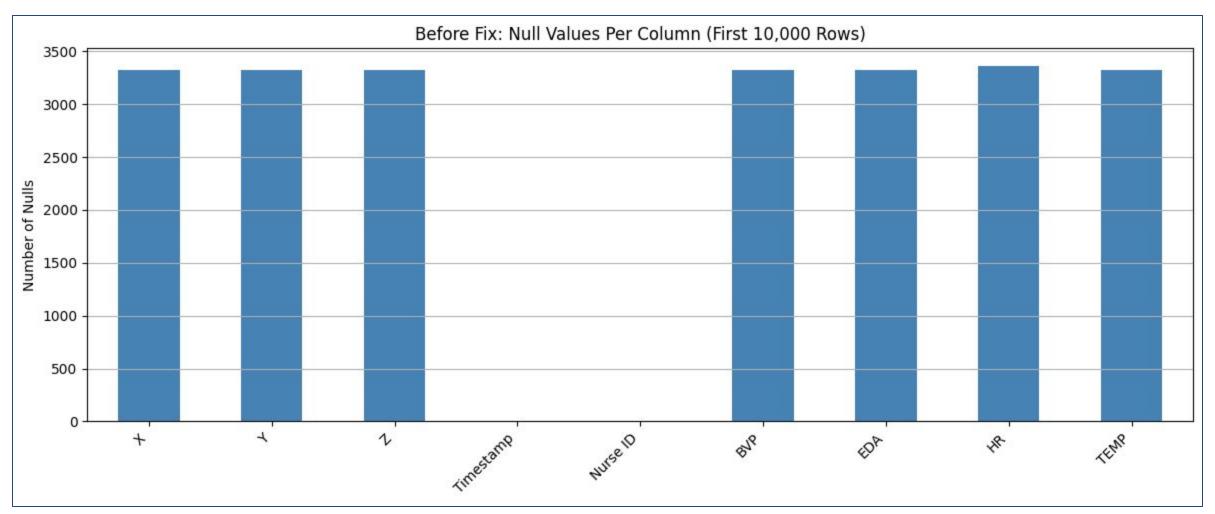
- How do physiological signals correlate with self-reported stress levels among nurses during the COVID-19 pandemic?
- What are the primary contextual factors(e.g., COVID-related challenges, workload, and patient crises) that contribute to stress among nurses, and how are these factors reflected in physiological data?

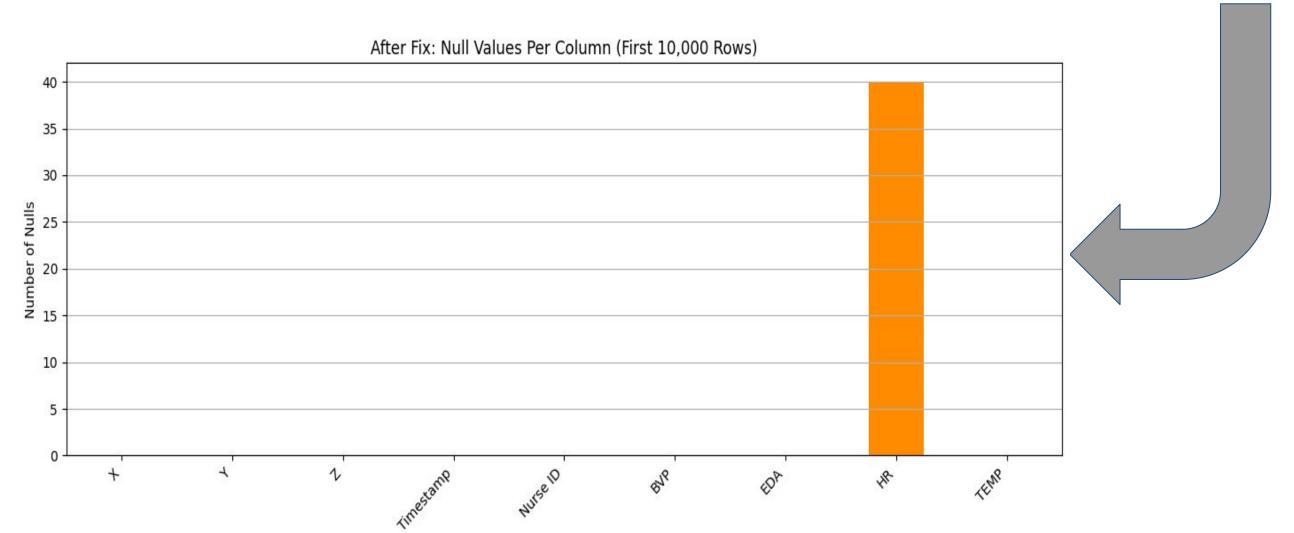


#### 1. Checked the Final Unified File for inconsistencies:

- $\rightarrow$  Found duplicate rows caused by slight differences in timestamp precision (e.g., 1586788323.75 vs 1586788323.7500002)
- → One row had only HR, the other had missing HR but other values
- Solution: Rounded timestamps to 2 decimal places to normalize and fix merging issues

 $\blacksquare$  The visual comparison of the data before and after fixing the issue  $\blacksquare$  (Next slides)







#### 2. Align Physiological Data with Stress Events (Data Reduction):

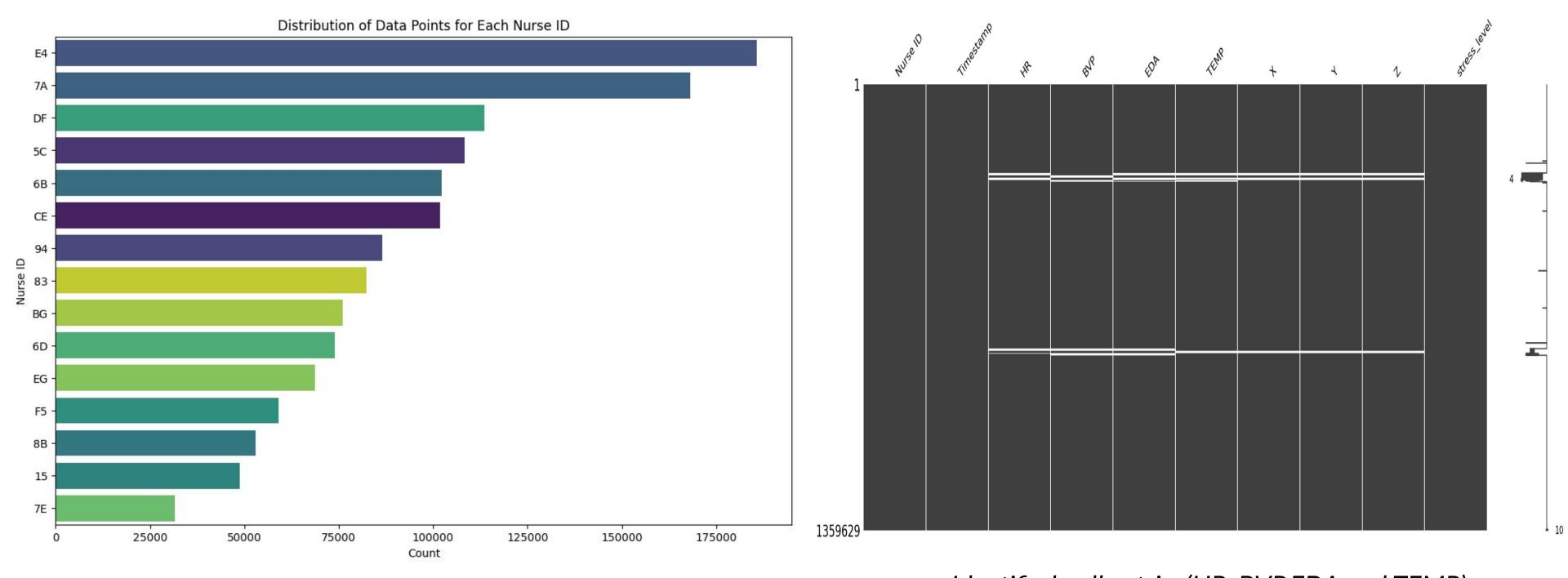
- Merging the preprocessed survey results with the resampled physiological signal dataset 🧪 📈



- Condition: Filter signals within the Start  $\rightarrow$  End time window of each reported stress event  $\bigcirc$ 



id	stress_level	covid_related	patient_in_crisis	description	start_timestamp	end_timestamp
6B	0	0.000	0.000	NaN	1592927160.000	1592928720.000
6B	2	0.000	1.000	NaN	1592929500.000	1592930940.000
7A	0	0.000	0.000	Walking across the street to get to important	1592933760.000	1592934600.000
5C	1	0.000	0.000	NaN	1592934720.000	1592935740.000
5C	0	0.000	0.000	Employee having personal crisis.	1592936520.000	1592946180.000
7A	1	0.000	0.000	Storming outside and needing to go to meeting	1592937600.000	1592938620.000
7A	1	0.000	0.000	Meeting	1592937600.000	1592938620.000
94	1	0.000	0.000	NaN	1592938200.000	1592939760.000
7A	2	0.000	0.000	In a meeting working on processes to streamlin	1592942880.000	1592943300.000
6B	2	0.000	0.000	NaN	1592999520.000	1593000240.000



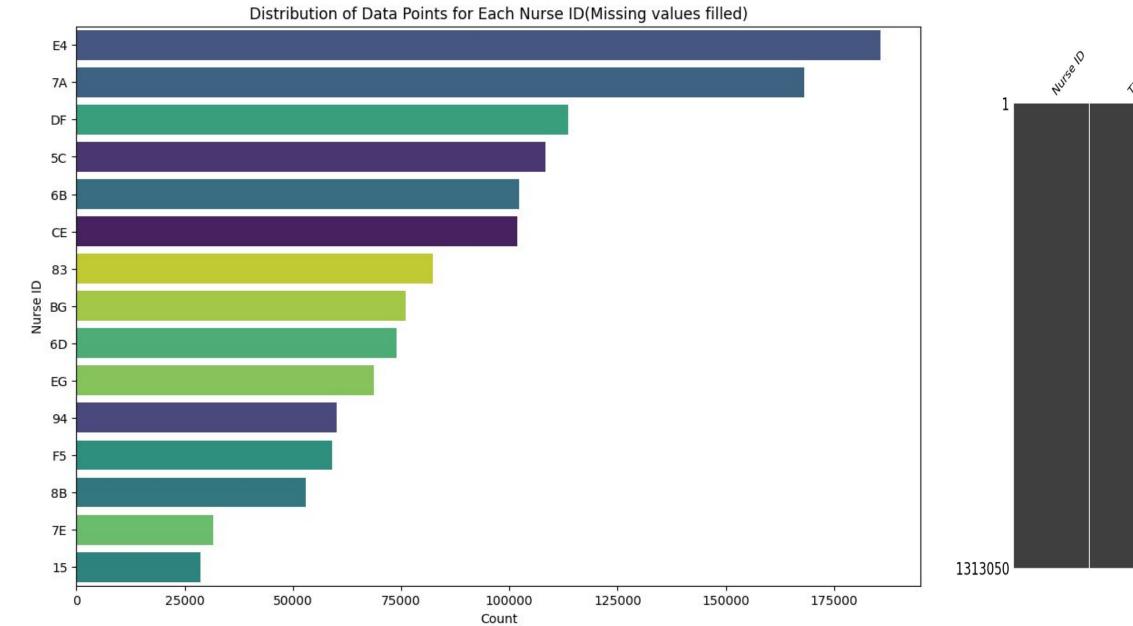
Without removing nulls

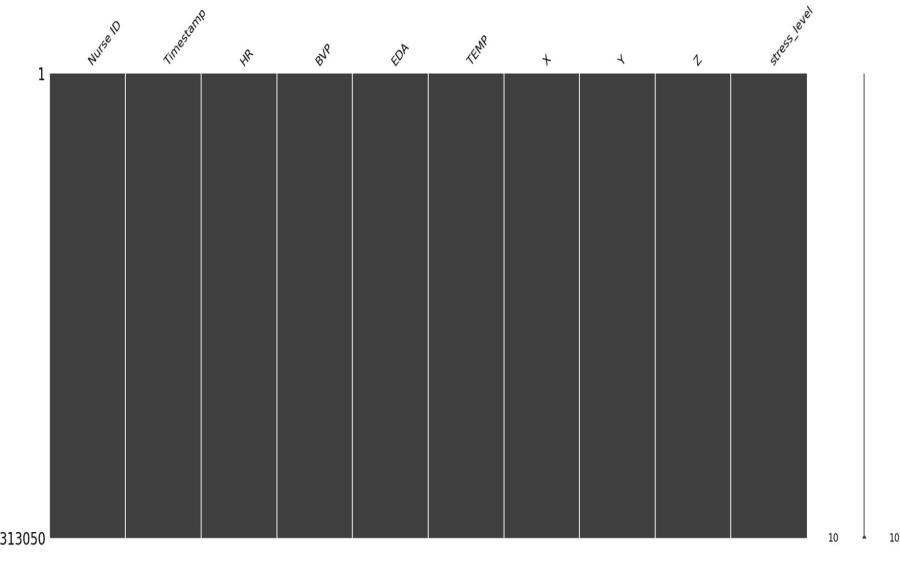
Identified null entries(HR, BVP,EDA and TEMP)

after merge



- 3. Integrate Physiological Signals with self-reported Stress Levels to form a Complete Dataset:
- Handling Missing Signals & Null Entries:
  - $\rightarrow$  If all physiological signals are NaN, the record is removed without imputation  $\times$ 
    - Example: About 15–20% of data from Nurse ID 15 and 94 had continuous missing values across multiple fields
      - $\rightarrow$  Dropping them was necessary since imputing with the mean could lead to unreliable or misleading outcomes  $\hat{L}$
- $\rightarrow$  The HR (Heart Rate) column had some missing values due to sampling frequency change (from 1Hz  $\rightarrow$  4Hz).
  - These were filled using the average of adjacent values.
  - Around 240 records (out of 100,000) were imputed this way.





With removing nulls

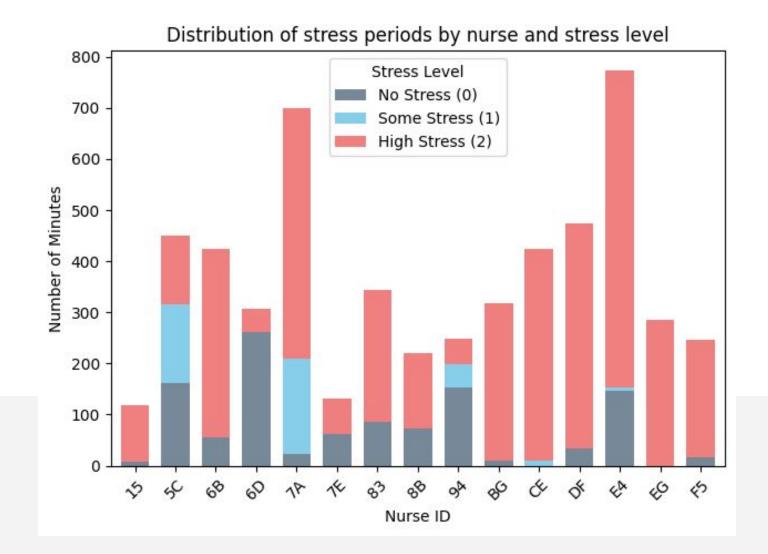
All NaN removed from all fields



#### 4. Structure Physiological Data into Time-Based Windows:

- Windowing Method:
  - → Created 1-minute windows from the 4Hz sampling data
  - → Grouped by NurseID and stress\_level
  - → Applied aggregation functions: mean and standard deviation (std)
  - → Filtered out windows with only 240 samples to ensure full 250ms intervals are included per window
  - $\rightarrow$  Final shape of windowed data: (5672, 18)

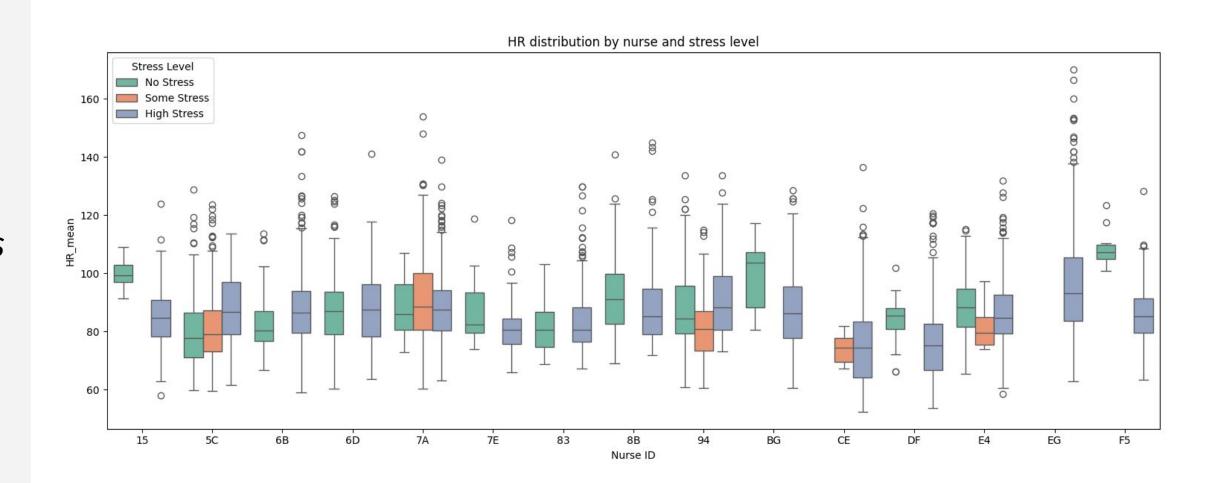




## • Boxplots for mean values of windowed physiological signals by NurselD:

[From research paper]:

"The box plots show four individual physiological signals recorded by the wearable device—namely HR, EDA, skin temperature, BVP—and the reported stress levels from the survey.

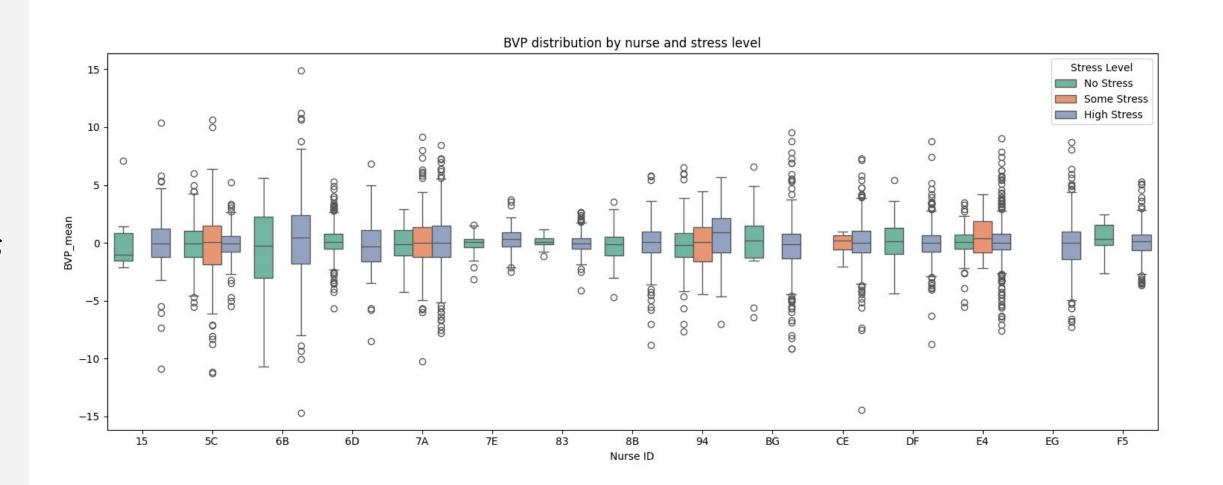


HR distribution by nurse and stress level

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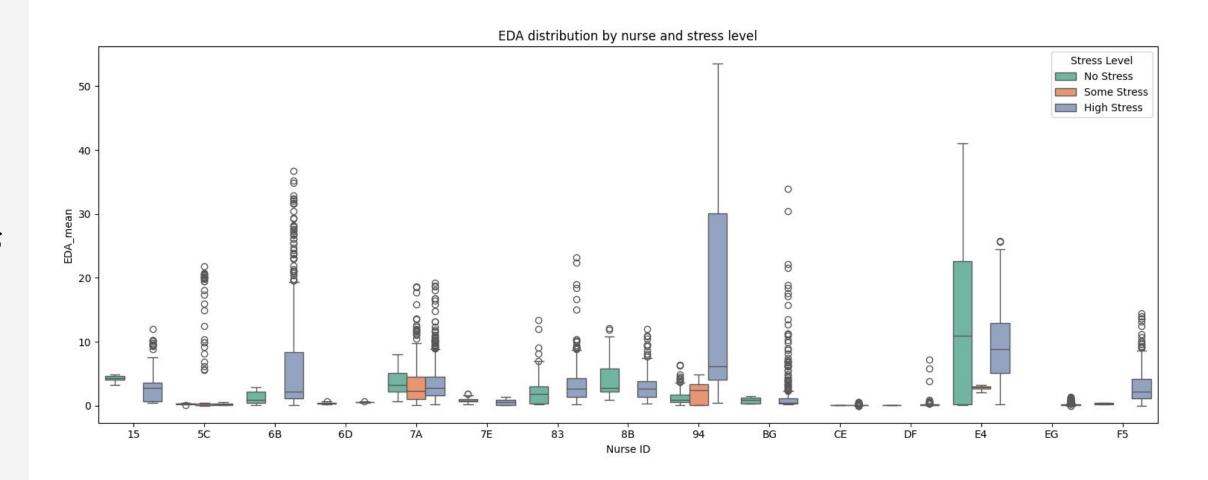


BVP distribution by nurse and stress level

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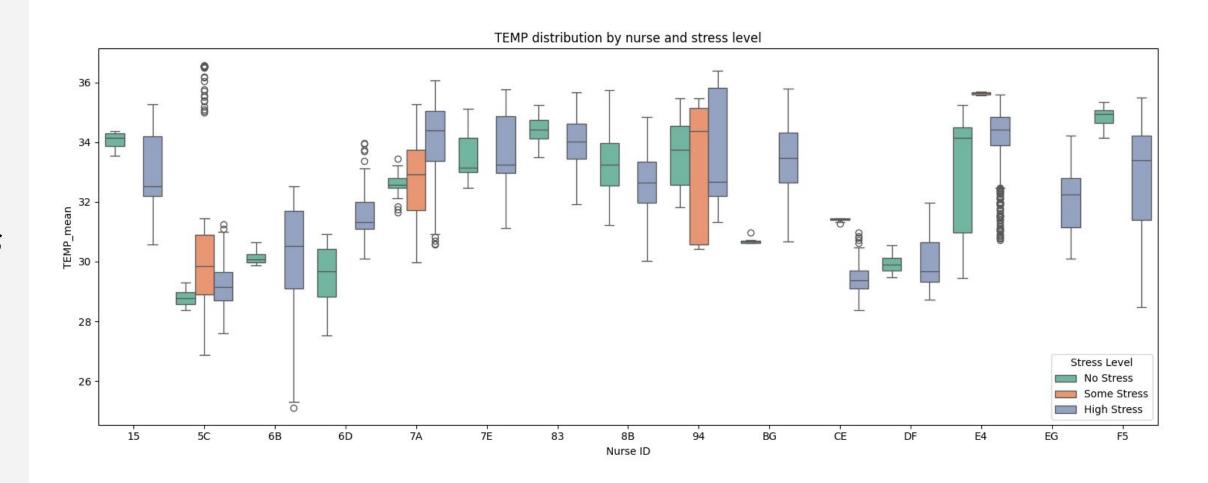


EDA distribution by nurse and stress level

## Boxplots for mean values of windowed physiological signals by NurselD:

#### [From research paper]:

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TEMP distribution by nurse and stress level

#### Outcomes and Observations:

[From research paper]:

Based on the visual inspection of the plot, stress does not appear to have a strong correlation with Heart Rate. Heart Rate is generally associated with high-stress situations, but a high Heart Rate should not imply high stress, as it is more commonly influenced by non-stressful physical activity.

[From research paper]:

Distribution of EDA and associated stress levels for all the subjects. Based on visual inspection of the plot, stress has a positive correlation with EDA. The average EDA is higher in stressful situations for some participants. However, for some participants, EDA is not a good indicator of stress because it does not vary or is not positively correlated. There is high variability in EDA signals among various subjects in stressful events.

Same pattern observed in our EDA boxplot.

Skin Temperature (TEMP) and Blood Volume Pulse (BVP):

 $\rightarrow$  Do not show a clear difference in stress levels across individual nurses.

[From research paper]:

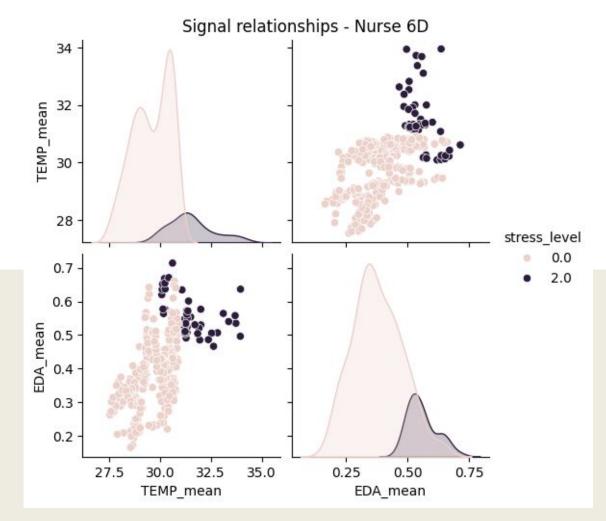
TEMP, this can vary quite widely based on the type and length of activity, as well as room temperature.

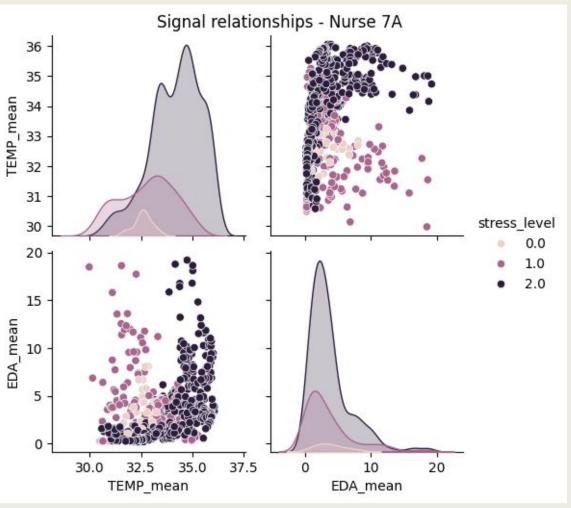


Same trend seen in our HR boxplot.



- Pairplots for Random NurselD's:
- → Observations from pair plots:
- Skewed distributions
- Non-linear data patterns
- Higher stress levels are associated with higher body temperature (TEMP) and greater electrodermal activity (EDA) (positive correlation).

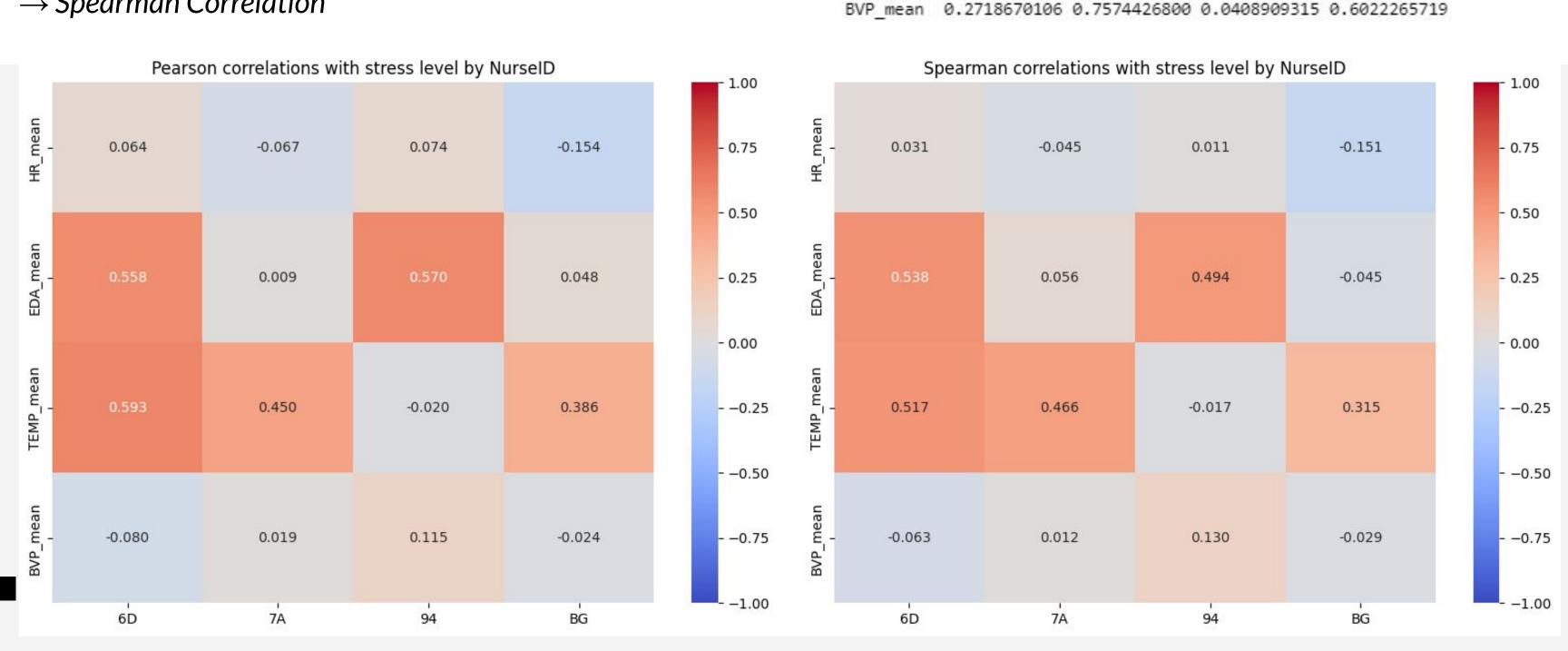






#### 5. Correlation Analysis:

- → Pearson Correlation
- → Spearman Correlation



Pearson Correlation P-Values:

Spearman Correlation P-Values:

7A

0.2664137068 0.0784311527 0.2442524341 0.0058606782

0.5824047549 0.2346371189 0.8586305579 0.0069088346

94

EDA mean 0.0000000000 0.8209544365 0.0000000000 0.3899706516

TEMP mean 0.0000000000 0.0000000000 0.7545586160 0.00000000000 BVP mean 0.1606684511 0.6222456485 0.0710523405 0.6695527977

EDA mean 0.0000000000 0.1372057593 0.0000000000 0.4244411368

TEMP mean 0.0000000000 0.0000000000 0.7887241352 0.0000000097

BG

BG



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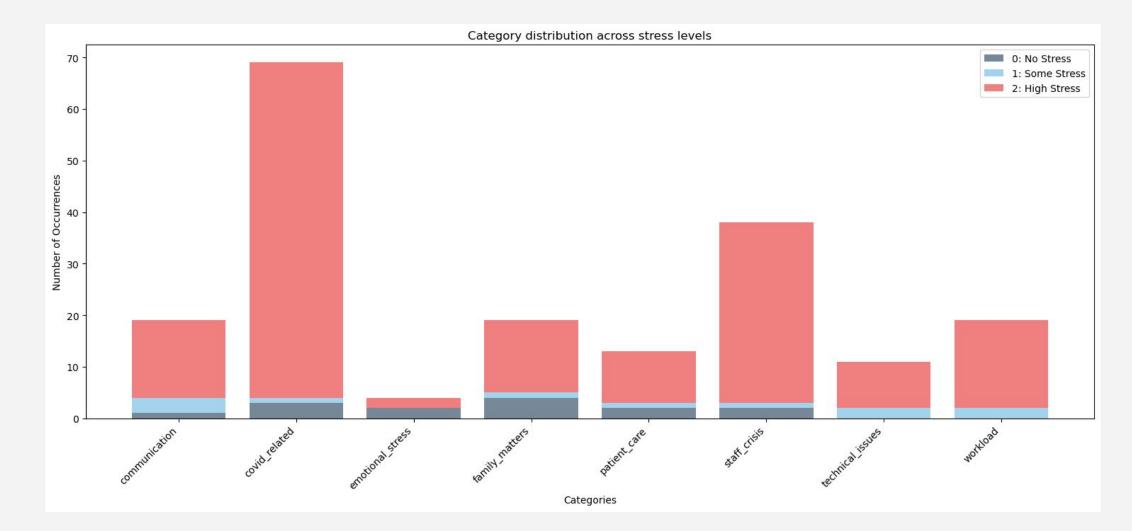
#### Observations from Correlation Analysis

- → HR shows weak correlation with stress levels
- → EDA for NurseID 6D and 94 shows positive correlation (weaker for others)
- → TEMP has moderate correlation for some subjects
- → BVP shows weak or no meaningful correlation with stress levels



#### 6. Survey Response Analysis with Word Clouds:

- Processing Survey Responses & Incident Descriptions:
- → Processed survey response categories related to recorded incidents 📝
- → Created subcategories for related stress events to improve visualization 🎯
- $\rightarrow$  Generated word clouds for each stress category to identify key stress-triggering factors  $\bigcirc$





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```
Emotional Stress

team Cps Patient Care

Covid Related
Staff Crisis error
length Communication bed

Family Matters
get class walking discussing teaching
```

```
medicationStaff Crisis
Family Matters void
giving Patient Care of loved meetingentered Staff Crisis
Family Matters void
giving Patient Care of loved meetingentered Staff Crisis
Void
giving Patient Care of loved meetingentered Staff Crisis
Loved Meeting Patient Care of loved meetingentered Staff Crisis
loved meeting Patient Care of lov
```

```
2: High Stress

declining room

floor

floor

Communication
regarding
Technical Issues
another
nurse

new

meeting
Family Matters

Covid Related
facetime

Staff Crisis
```

## **Findings:**



- → High variability in physiological signal ranges across participants
- $\rightarrow$  Significant differences in individual responses no uniform pattern detected
- → Personalized assessment is essential for accurate stress monitoring
- → Correlations between signals can indicate positive/negative trends toward stress levels
- → Empatica E4 readings may be affected by environmental conditions
- → Contextual factors (e.g., workload, incidents) play a role in stress levels
- → Survey word clouds help visualize the major stress triggers

# **Conclusion:**



- → Personalized assessments are crucial for meaningful stress analysis
- → Physiological correlations provide valuable insights into stress trends
- $\rightarrow$  External conditions can distort signal accuracy and must be accounted for  $\Lambda$

# **Future Directions / Next Steps:**

- → Multimodal analysis: combine physiological + contextual data for prediction
- → Implement personalized models to adapt to individual variability
- → Use cross-validation with diverse data sources for improved accuracy

# TEAM MEMBERS

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# Who Did What?

- Checking final signals csv file inconsistencies: Fatemeh
- Data Reduction (Align & Window Physiological Signals): Hans
- Windowing R&D: Ata
- Integrating: Hans
- Preparing Presentation: Hans & Fatemeh
- Preprocessing and Analysing Survey Results: Chau
- Correlation Analysis: All members

# THANKYOU

26 March, 2025