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## EDITORIAL PREFACE

This is the *Second* Issue of Volume *Five* of International Journal of Ergonomics (IJEG). The Journal is published bi-monthly, with papers being peer reviewed to high international standards. The International Journal of Ergonomics is not limited to a specific aspect of Ergonomics but it is devoted to the publication of high quality papers on all division of engineering in general. IJEG intends to disseminate knowledge in the various disciplines of the Computer Science field from theoretical, practical and analytical research to physical implications and theoretical or quantitative discussion intended for academic and industrial progress. In order to position IJEG as one of the good journal on Computer Sciences, a group of highly valuable scholars are serving on the editorial board. The International Editorial Board ensures that significant developments in Ergonomics from around the world are reflected in the Journal. Some important topics covers by journal are architectures, middleware, tools designs, Experiments, Evaluation, etc.

The initial efforts helped to shape the editorial policy and to sharpen the focus of the journal. Started with Volume 5, 2015, IJEG appears with more focused issues. Besides normal publications, IJEG intend to organized special issues on more focused topics. Each special issue will have a designated editor (editors) – either member of the editorial board or another recognized specialist in the respective field.

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IJEG editors understand that how much it is important for authors and researchers to have their work published with a minimum delay after submission of their papers. They also strongly believe that the direct communication between the editors and authors are important for the welfare, quality and wellbeing of the Journal and its readers. Therefore, all activities from paper submission to paper publication are controlled through electronic systems that include electronic submission, editorial panel and review system that ensures rapid decision with least delays in the publication processes.

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## An Overview Of Driver Seat Comfort: Objective and Subjective Measures and Its Neural Network Modeling

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### Abstract

The purpose of this work is to investigate driver seat comfort and discuss some of the subjective and objective factors that impact it. Comfort describes the nature of the interaction between a human being and a specific environment and is characterized as a feeling of pleasure and satisfaction or discontent and pain. Driver seat design for comfort is complex and challenging because it is somewhat subjective in nature (e.g. mood, culture & car brand). However, there are certain aspects of a seat comfort, which are objective (e.g. anthropometrics, pressure distribution on seat) and can be modeled mathematically. This paper discusses some of the objective and subjective measures which influence seat comfort. In addition, it provides a mathematical model of seat comfort index based on neural networks in terms of some of the objective measures, which influence it. The results of this work show that the objective measures included lead to a correlation of 0.794 to the overall comfort index identified by twelve drivers testing five different types of seats. This implies that our selected objective measures/inputs can capture about 80% of the comfort index identified by test drivers. The remaining 20% variation in comfort index not captured by the model utilized in this work can be attributed to subjective measures and/or additional objective measures which can be added as inputs to the neural network.

A comparison of this study to a previously published work [1] which also utilizes neural networks to model seat comfort index reveals important facts. This previous study uses a very large neural network with a significant number of adjustable parameters to model seat comfort. As a result, their neural network is very prone to memorizing the data associated with seat comfort index without capturing the underlying mathematical behavior. The neural network proposed in this work, however, has an optimal architecture, which captures the mathematical model describing comfort index accurately, and is not prone to memorizing the seat comfort data.

**Keywords:** Seat Comfort Index, Artificial Neural Networks, Seat Comfort Modeling.

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## **1. INTRODUCTION**

### **1.1. Seat Comfort Definition and Modeling**

Comfort is defined as a pleasant state of psychological, physiological and physical harmony between a human being and his/her environment [2]. Another definition used in the literature describes comfort as a pleasant experience while using a product [3]. Discomfort can lead to back, neck, arm and musculoskeletal problems, which cost patients, and insurance companies a lot of money every year. There are studies that suggest a large number of sick leaves are attributed to back and neck pain and musculoskeletal injuries [2]. Everybody pays attention to comfort in the household, at work and while commuting. As a result, manufacturers of cars, airplanes, mattresses and chairs pay particular attention to comfort so that they can attract customers. A product is not judged as being comfortable in itself but is described as comfortable or uncomfortable after it has been tested by an end user. Comfort is a complex theory and emerges from a chain of interrelationships between the driver and several elements of the system. This interaction can lead to a high level of comfort associated with a feeling of pleasure and satisfaction or it can lead to discomfort, pain and stress. Obviously, comfort is not the only factor that plays a role in design of any product but its consideration as a key element is important in good engineering practice [2,4]. The reason comfort plays an important role in our daily activities is that our optimal human performance can only be achieved in an environment which reduces discomfort and physical stress. Given the importance of comfort, its inclusion in design process plays a key role in providing high quality driver seats.

What makes design for comfort challenging is that comfort is a somewhat subjective matter. For instance, for a passenger on a long drive, back problems could be a major issue while other drivers may prefer a reduction in noise or more space. Hence there are no comfort design process nor comfort models available to fully describe it objectively [2]. However, there is some knowledge of comfort that can be generalized and some predictions of comfort level can be made. For instance, passengers on a car seat can be surveyed to measure the seat comfort level and identify which features lead to higher comfort level. As a result, it is now evident that even though a fully quantitative comfort model may not exist, the design process would clearly benefit from the participation of the end users in studies that evaluate the comfort level of the final product. There is no doubt that their expertise in specification of the aspects of comfort that need improvement would be very beneficial in seat comfort studies.

In summary, it is possible to model some aspects of seat comfort. What is required is to consider tangible factors that can impact a driver's experience of comfort thus separating what is observable and unobservable. This allows the field of ergonomics to model some aspects of seat comfort, which are observable and objective. Some elements of seat comfort, which for instance cannot be modeled, include studies that suggest men and women have different perceptions of seat comfort [5]. For instance, men and women weigh differently the discomfort resulting from noise and vibration. Men experience more discomfort from noise while women are more discomforted by vibration.

### **1.2. Seat Comfort Factors**

Studies of seat comfort rely on measurement of pressure on the interface between the seat and human subject [6]. These types of measurements, conducted through tactile sensors, provide valuable data to model seat comfort. For instance, a greater uniformity on the distribution of pressure, a lower peak of pressure and a wider and more symmetric contact surface lead to improved comfort seat. Other studies [7] have shown that lower rates of pressure on the buttocks and higher on the back together with balanced pressure among buttocks, upper part and lower body lead to better seat comfort. Kolich and Tabourn [1] have studied seat comfort in terms of factors including characteristics of pressure on the seat interface, passengers' anthropometrics and demography and perception of seat appearance. Such studies can help identify the degree to which seat comfort can be attributed to subjective and objective factors.

Apart from the actual causes of discomfort discussed here, our perception also plays an important role. We are influenced by our mood, culture, car brand, and age group in judging the

comfort level of a car seat. For instance, our mood could be excited, relaxed or stressed which can influence our perception of comfort. According to Kolich [1], seat comfort has been described in terms of vehicle/package, social, individual and seat factors. The contribution of the vehicle/package factor includes seat height, the field of vision, pedals, space for the knees and type of transmission. The social factors include the vehicle nameplate and purchase price. The individual factor encompasses demography, anthropometrics and culture. For instance, Western Europeans prefer firmer seats compared to North Americans [8]. Finally, the seat factor entails rigidity, geometry, shape, breathability and styling. Rigidity refers to the seat system resistance, geometry defines the seat shape in terms of width, length, and height, and shape defines the profile of the seating surface. Breathability relates to a soft finishing, which can affect driver comfort in extreme weather condition, and style refers to aesthetic quality, which can impact the perception of comfort [9].

Some of the factors influencing comfort can be further broken down to more basic elements. This is an important step to fully understand these factors and their importance in modeling seat comfort mathematically. For instance, the physical and social factors have been described in the literature as follows: Posture [6,9,10,11,12,13], anthropometrics [5,6,9,12,14] demography [1,9,12], fatigue [13,15], distribution of pressure on the seat [6,16], physiological degradation [15], muscle activity [13], body region [5,17], contracture [17], and age [9].

## **2. SEAT COMFORT EVALUATION (TRIAL and ERROR APPROCH)**

The typical approach to improving seat comfort involves the use of a currently available seat as benchmark. Test drivers are asked to ride the car over an extended period of time and fill out a highly structured survey, which requires them to address feeling of discomfort in specific regions of the seat. The subjective nature of such surveys and their evaluations require a large number of test drivers of various backgrounds to extract as much objectivity as possible in describing seat comfort. These surveys must reflect precisely what the design team intends to measure thus requiring special emphasis on the wording of the survey items. The resulting feedback which describes the likes and dislikes attributable to seat comfort lead to future modification of the seat to improve its overall comfort. Normally, the surveys are reduced and mapped to a single digit called Overall Comfort Index (OCI), which tries to minimize biases such as car brand [1,2,4,9]. Based on the feedback received from surveys, prototypes are built and evaluated for comfort. If the prototype seat receives better rating than the benchmark, the study has been successful. Normally up to 15 separate evaluations of prototypes are conducted to improve the seat comfort, which can take three to four years. There is no doubt that improving seat comfort based on trial and error approach is a lengthy process.

In spite of its value, the trial and error approach alone to improve seat comfort is time-consuming, inefficient and costly [1]. As a result, there has been a need to combine the trial and error process with a more efficient approach. An appropriate candidate to be added to the design process is a mathematical modeling of seat comfort, which can capture how objective factors contribute to design for comfort. These mathematical models can reduce the amount of trial and errors required by identifying objective features that contribute significantly to the overall seat comfort. This approach allows the objective factors contributing to seat comfort to be optimized through mathematical models while subjective measures can be addressed through surveys.

### **3. SEAT COMFORT MATHEMATICAL MODELING**

In modeling seat comfort, a subset of seat-interface pressure readings, anthropometric measures, demographic information and perceptions of seat appearance are used as inputs to determine how well they can describe OCI as an output [1]. The OCI is usually described as a single digit score between 0 and a maximum. This type of mathematical modeling sheds light on how much of the overall comfort index is related to objective measures such as pressure on different parts of the body. As a result, one can identify the degree to which overall comfort index is subjective and biased by factors such as gender, mood and culture. If one can find a high correlation between the overall comfort index and objective factors, the results can help improve seat comfort while reducing the amount of necessary and costly trial and error practices.

In order to develop a mathematical model for seat comfort, one needs to identify the inputs and output. The work by Kolich [1] shows that pressure measurements at the occupant – seat interface are effective measures that have significant contribution to seat comfort. This implies that perception of comfort is objectively related to pressure distribution characteristics exhibited in such measurements. As indicated before, the output of interest in such models is the overall comfort index, which is a single digit, obtained from a survey of test drivers.

To model seat comfort index in terms of inputs, one can use linear or non-linear regressions. Among these two approaches, non-linear regression is the most popular [1]. Even though a neural network approach to model overall seat comfort index is a non-linear regression technique, many studies [1] consider it to be a separate approach. The main idea behind these approaches is to capture how much of the overall comfort index can be described by pressure measurements at the occupant-seat interface. This is accomplished by calculating the correlation coefficient between the output of the mathematical model predicting the overall comfort index and the actual values obtained from the surveys of test drivers. A correlation coefficient of 1 implies that the seat comfort index can be fully described by the pressure measurements while a correlation coefficient of 0 implies that these measurements have no influence on the overall comfort index obtained from test drivers. In the latter case, the implication is that the overall comfort index is mostly a random, subjective number expressed by test drivers with no attention to the pressure they feel on different part of their bodies. In practice, one expects the correlation coefficient to be between 0 and 1 with numbers closer to 1 proving that these pressure measurements are of significance in the comfort level of test drivers.

Our approach in this paper is to model overall comfort index in terms of neural networks and develop a non-linear model capturing the relationship between objective factors as inputs and OCI as output. The rest of this paper is organized as follows. In the next section, we describe the inputs and output used for modeling seat comfort in this study. Next, we provide a brief description of data normalization used to generate an optimal set of inputs for our mathematical modeling problem. Finally, we provide a brief introduction to neural networks used in this paper to model the overall comfort index in terms of the 9 input variables discussed later in this work.

### **4. INPUTS AND OUTPUT DESCRIPTION OF THE SEAT COMFORT MODEL**

The data describing the relationship between pressure measurements at the occupant-seat interface and the overall comfort index is generally proprietary and hard to obtain. In this work, we have used the data published by M. Kolich et al. [1]. In their study, five different driver seats ranging from bad to good (based on seat comfort ratings provided by J.D. Power & Associates (1997)) were tested leading to a broad range of overall comfort index. Only seats from compact car category were selected. Making sure all seats came from the same type of car (compact car in this case) is important to make sure seat size and leg rooms for different categories of car do not bias the data. All cars were white, 1997 model from different manufacturers with gray interior to minimize the effect of color preferences. Demographics and anthropometry were held constant by using the same 12 drivers to test all five seats.

Pressure measurements at the occupant-seat interface were conducted using thin, flexible sensor arrays manufactured by Tekscan. The occupant-seat interface was divided to 48 columns and 44

rows for a total of 2112 grids. At the center of each grid, a sensor was placed. Scanning the grids and measuring the electrical resistance at the center of each grid can calculate the pressure distribution on the sensors' surface. A system software then calculated the following objectives measures, which served as inputs to any mathematical model.

- Cushion contact area ( $cm^2$ ) – CCA
- Cushion total force (N) – CTF
- Cushion load at the center of force ( $N/cm^2$ ) – CCF
- Cushion peak pressure ( $n/cm^2$ ) – CPP
- Seatback contact area ( $cm^2$ ) – BCA
- Seatback total force (N) – BTF
- Seatback load at the center of force ( $N/cm^2$ ) – BCF
- Seatback peak pressure ( $N/cm^2$ ) – BPP

In addition to these inputs, each driver was asked to rate the appearance of each seat (AR) as well on a scale from 0 to 5 with 5 being the best. All drivers were asked to remove their wallet and belts to avoid false pressure readings at the seat interface. The twelve drivers were chosen to be half male and half female to remove gender bias. Each driver was allowed to adjust the track position and the seatback angle to his/her preferred setting. Given that the same twelve drivers and five car seats were used in the study, it was expected that the preferred seating position would be similar for all drivers among seats. This would not have been the case if the test cars were chosen from different categories such as compact and sport cars.

To obtain the overall index comfort for each seat, the twelve test drivers were asked to rate the following factors on a scale from -3 to +3.

Seatback:

- Amount of lumbar support
- Lumbar comfort
- Amount of mid-back support
- Mid-back comfort
- Amount of back lateral support
- Back lateral support
- Seat back feel/firmness

Cushion:

- Ischial/buttocks comfort
- Thigh comfort
- Cushion lateral comfort

A score of -3 corresponded to too little support and a score of +3 represented too much support. A score of 0 corresponded to a support, which is just right. Since both positive and negative deviations from a score of 0 were undesirable, the absolute value of all deviations from 0 for the ten rubrics stated above were added to obtain a single digit value for overall comfort index. As a result, the overall comfort index took a value between 0 and 30 with a score of 0 representing the most comfortable seat. The worst-case score of 30 corresponded to a very uncomfortable seat. With twelve drivers and five car seats, sixty data points were generated to relate the inputs indicated above (AR, CCA, CTF, CCF, CPP, BCA, BTF, BCF and BPP) to the overall comfort index (OCI). Table 1 shows the mean, standard deviation, minimum and maximum values for each of the nine inputs and output for five seat types. Please note that the 5 seats tested in this study have been labeled as A, B, C, D, and E.

## 5. DATA NORMALIZATION FOR INPUT PROCESSING

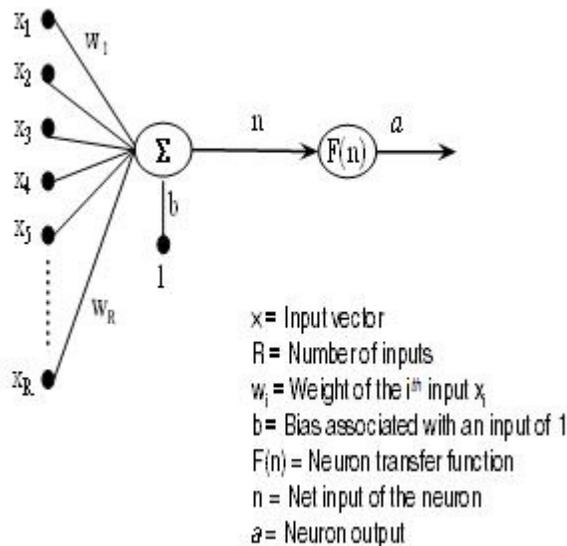
The first stage in our neural network modeling is data normalization for the purpose of enhancing the features in our data set. Data normalization is a scaling of the input features to avoid large

dynamic ranges in one or more dimensions [18]. There are many applications in which two or more input features may differ by several orders of magnitude. These large variations in feature sizes can dominate more important but smaller trends in the data and should be removed through normalization. In this study, all nine inputs generated from table I have been normalized to have a norm of 1. For instance, after 500 samples from the normal distribution of AR are generated according to the specifications in table I, the resulting column vector of size 500 has been normalized to have a length of 1.

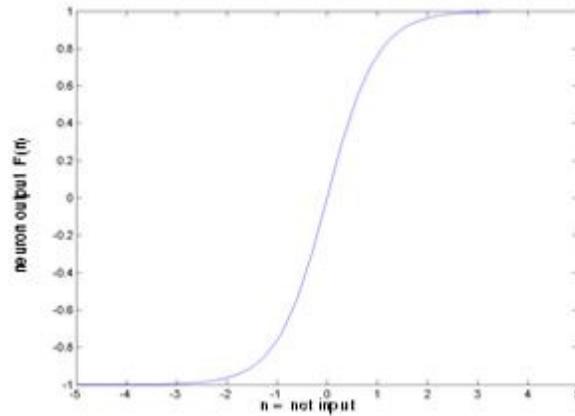
## 6. AN OVERVIEW OF NEURAL NETWORKS

Neural networks are discussed in detail in Bishop [18] and Hagan [19]. In this section, we briefly discuss neural networks and their characteristics relevant to our study. The mathematical model of a single neuron used in neural networks is shown in Fig. 1. The input-output mapping function associated with this neuron is given by  $\tilde{y}(\mathbf{x}, \mathbf{r}) = a = F(n)$ . As discussed later in this section, the vector  $\mathbf{x}$  represents the inputs to the neuron and the vector  $\mathbf{r}$  represents the adjustable parameters. If  $a = F(n) = n$ , the single neuron behaves linearly while  $a = F(n) \neq n$  represents a nonlinear neuron. The common choice for the transfer function  $a = F(n)$  is the hyperbolic

tangent sigmoid (*tan sig*) given by  $a = F(n) = \frac{e^n - e^{-n}}{e^n + e^{-n}} = \tan sig(n)$  and shown in Fig. 2.



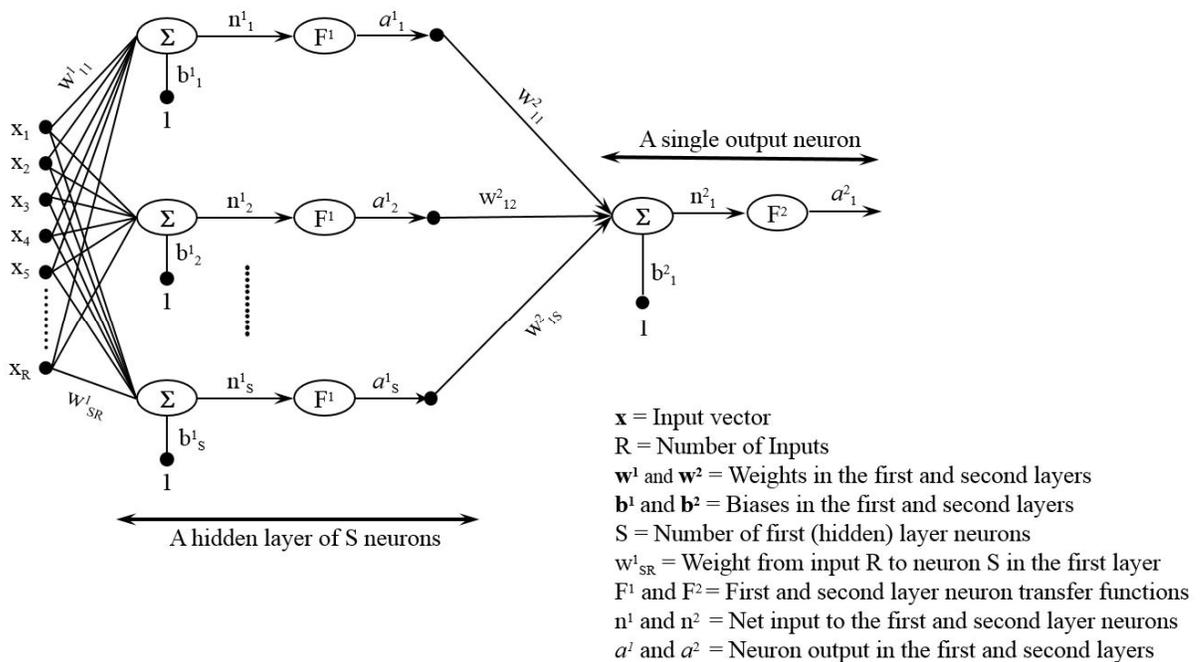
**FIGURE 1:** A Neural Network Architecture Containing One Neuron with Transfer function  $a = F(n)$ . When  $a = F(n) = n$  this model represents a linear architecture.



**FIGURE 2:** Transfer Function of A Nonlinear Neuron using the Hyperbolic.

tangent sigmoid (tansig) represented by 
$$F(n) = \frac{e^n - e^{-n}}{e^n + e^{-n}}$$

Neurons are the building blocks for generating neural networks, which can model complex systems. A neural network may consist of several layers of neurons interconnected with other neurons in the same or different layers through adjustable weights. A neuron's connection topology to other neurons, number of layers, number of neurons in each layer and the choice of each neuron's transfer function collectively define the neural network's architecture. Figure 3 shows typical neural network architecture.



**FIGURE 3:** The architecture of a two-layer neural network widely used in modeling data sets.

Neural networks have emerged as an important tool to study complex problems in science and engineering. One problem of interest is data modeling and forecasting in which a data set of size

$N$  denoted by  $(\mathbf{x}_1, y_1), (\mathbf{x}_2, y_2) \dots (\mathbf{x}_N, y_N)$  is available, but the underlying mapping function from the inputs  $\mathbf{x}_i$  to the outputs  $y_i$  ( $i = 1, N$ ) is unknown. In general,  $\mathbf{x}$  can be a vector of size  $R$  ( $\mathbf{x} = x_1, x_2, \dots, x_R$ ) to represent cases where the output  $y$  depends on several inputs. A neural network tries to find an approximate model  $\tilde{y}(\mathbf{x}, \mathbf{r})$  to actual  $y(\mathbf{x})$  by adjusting its free parameters  $\mathbf{r} = (\mathbf{w}, \mathbf{b})$  to learn the desired input-output relationship described by the data set. In this notation,  $\mathbf{w}$  and  $\mathbf{b}$  represent the set of weights and biases in the network, respectively. To achieve this goal, a neural network minimizes the mean square error (*mse*) or performance function given by

$$mse = E(\mathbf{r}) = \frac{1}{N} \sum_{i=1}^N \{y(\mathbf{x}_i) - \tilde{y}(\mathbf{x}_i, \mathbf{r})\}^2. \quad (1)$$

The values of  $r_1, r_2, \dots, r_M$  that minimize  $E(\mathbf{r})$  represent the optimum parameter values associated with the neural network model. The input-output mapping function defined by a neural network can be modified by changing either the number of neurons in any layer or their transfer functions.

The process of employing a neural network to model a dataset is as follows. The available data is first divided into training and testing sets. The input-output pairs associated with the training set are then presented to the network, which adjusts its weights and biases to minimize the error function expressed in eq. 1. This is called the training phase of the neural network. Once the error goal is minimized (i.e. the neural network weights and biases are determined), the neural network's ability to generalize is evaluated. During this testing or generalization phase, the network is presented with inputs from the testing set, which it has not seen before, and its predicted outputs are compared to the target outputs. The purpose of this phase is to assess the knowledge acquired during the training phase and determine if the underlying mapping function describing the behavior of the dataset has been captured by the neural network.

## 7. ANALYSIS OF RESULTS

The goal of our mathematical model is to obtain the relationship between the nine inputs presented in Table I and the output (overall comfort index). In this study, we use a neural network to obtain a model. Once the neural network model is developed, we can compare its actual output to the target OCI output values obtained from test drivers. This allows us to calculate the correlation between the actual OCI obtained from test drivers and calculated values obtained from the neural network model. This correlation coefficient can then determine the degree to which the specified inputs impact the overall comfort index. Any discrepancy between the calculated and actual OCI values can be attributed to the subjectivity of the OCI described by test drivers. In addition, we will compare our results to previously published work to model OCI using neural networks [1] and discuss our important contributions.

To train and test the neural network, we start by generating input data for each seat type A, B, C, D, and E as specified in Table I. For each seat type, the 9 inputs, which characterize it, are generated from a normal distribution with the specified mean and standard deviation shown in this table. For instance, for seat type A, we generate 100 input data points from the normal distributions for AR, CCA, CTF, CCF, CPP, BCA, BTF, BCF, and BPP. These input data points of size 100x9 are paired with 100 appropriate OCI output values, which are also generated from a normal distribution as specified in Table I. This process is repeated for seat types B, C, D and E. The neural network model would then find the best fit to describe the relationship between the output OCI and the inputs as shown below:

$$OCI = F(AR, CCA, CTF, CCF, CPP, BCA, BTF, BCF, BPP).$$

The mapping function  $F$  selected by the neural network is optimized to capture the input-output behavior depicted by the sampled data generated above. For each seat type, 85 data points are set aside for training and the remaining 15 points are used to test the neural network. As discussed before, the neural network has adjustable parameters, which are optimized to describe the training data accurately.

Figure 4 summarizes the results of our neural network model for the seat comfort index. The neural network is trained to minimize the error between its predicted and target OCI values over the training data. The complete training data has a size of 425 by 9 over all five seat types. At the end of the training phase, neural network determines the optimal values of its adjustable parameters. After the neural network is trained, its predicted output on test data (i.e. data it has not seen before) is calculated. The mean of the resulting 15 outputs for each seat type is calculated and plotted against the target mean provided by the 12 test drivers and shown in Table I under OCI column. The overall correlation coefficient between these two outputs (i.e. neural network output and actual OCI obtained from test drivers) is 0.794. This shows that our neural network model can capture about 80% of the variation in OCI expressed by test drivers. The remaining 20% variation in OCI described by test drivers is due to subjective matters discussed earlier. It is also possible to identify additional objective inputs, which may lead to higher correlation coefficient between the neural network and target OCI values.

Examination of Figure 4 reveals interesting facts. For the seat types with the best and worst comfort indices, neural network model had the worst performance in forecasting them. However, the neural network output for seats in the middle of the OCI range is very accurate. This is an indication of the fact that for the best and worst seats, subjective measures and biases play the most important role. It is also important to note that the test drivers found a significant correlation between seat comfort index and its appearance. The three most comfortable seats (i.e., seats C, A, D) also have the highest appearance rating.

<b>A</b>	Mean	3.	1717	598	0.3	1.1	1318	273	0.3	0.7	6.0
	STD	8	113	160	0.2	0.3	191	74	0.2	0.3	2.2
	Min	0.	1585	377	0.0	0.7	1086	192	0.0	0.5	2
	Max	7	1967	1010	0.7	1.6	1653	422	0.5	1.3	11
		2. 5 4. 5									
<b>B</b>	Mean	2.	1699	588	0.3	1.2	1338	240	0.2	0.7	10.3
	STD	8	122	194	0.1	0.5	248	74	0.1	0.2	1.9
	Min	0.	1494	367	0.0	0.6	990	137	0.0	0.4	7
	Max	6	1964	1066	0.4	2.4	1896	363	0.4	1.0	13
		2. 0 4. 0									
<b>C</b>	Mean	4.	1746	697	0.2	1.5	1342	277	0.2	1.1	2.3
	STD	4	112	172	0.2	0.7	281	108	0.1	0.9	1.1
	Min	0.	1623	537	0.0	0.6	850	140	0.0	0.4	1
	Max	6	2002	1186	0.5	3.4	1908	518	0.4	2.9	4
		3. 0 5. 0									
<b>D</b>	Mean	3.	1630	564	0.3	1.1	1219	250	0.3	0.7	8.6
	STD	8	119	155	0.2	0.3	183	88	0.1	0.2	1.3
	Min	1	1494	359	0.1	0.6	1005	126	0.1	0.5	6

Max	2.	1917	958	0.5	1.7	1711	451	0.5	1.0	10
	5									
	5.									
	0									
<b>E</b>										
Mean	3.	1725	579	0.2	0.9	1358	322	0.4	0.7	12.8
STD	2	117	149	0.1	0.3	254	116	0.1	0.2	1.4
Min	0.	1494	424	0.0	0.5	953	154	0.1	0.5	10
Max	7	1948	970	0.4	1.6	1978	557	0.6	1.1	15
	2.									
	0									
	4.									
	5									

**TABLE 1:** mean, standard deviation, minimum and maximum values of the nine inputs and the output overall comfort index) for five seat types (A, B, C, D, E) used in this paper. All the values shown here are calculated from a sample of twelve drivers.

## 8. COMPARISON TO PREVIOUS WORK AND NEW CONTRIBUTIONS

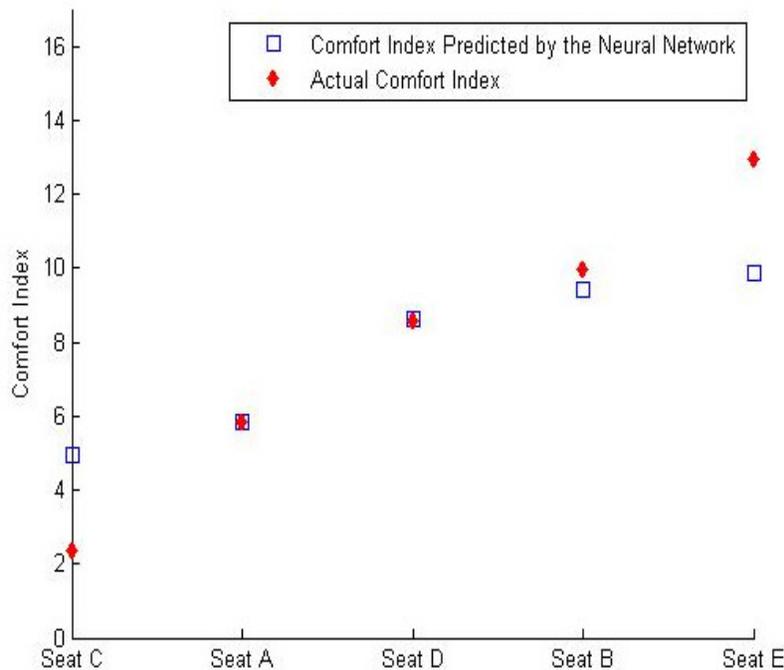
Kolich (2004) has also conducted a mathematical modeling of overall seat comfort based on neural networks. Their model uses the same inputs shown in Table I and three additional inputs, which are drivers' height, weight and gender. They report a correlation coefficient of 0.832, which is close to our value of 0.794. Their neural network contains 31 hidden neurons compared to 1 hidden neurons used in this study. It is very difficult to access any data, which includes gender, weight and height information to include in mathematical models because such data are considered to be proprietary. However, the close correlation coefficients between the two studies indicate that these three additional inputs do not play a significant role in determining the overall comfort index. What is alarming about their study is the large number of hidden neurons used in their mathematical modeling. The use of 31 hidden neurons implies that they are using between 300 to 400 adjustable parameters in their model compared to 10 used in this study.

According to their paper, they have used 60 data points (12 occupants times 5 seats), divided to 45 training and 15 testing data, to develop and test their neural network model. There are significant problems with their neural network, which this work addresses effectively as discussed next. Their small size of training data does not allow for such a large number of adjustable parameters in the neural network model to be optimized accurately. In fact, their neural network is prone to overfit (i.e., memorize) the training data without developing a valid model that describes the relationship between comfort index and the inputs. It is common practice to keep the number of neural network's adjustable parameters well below the size of the training data [18]. This ensures that the neural network doesn't merely memorize the training data without capturing the underlying mapping function from inputs to output. This requirement has not been met in their study.

The result of this work clearly shows that a small neural network architecture with 10 adjustable parameters can model the seat comfort index. The work of Kolich, et.al, on the other hand, uses

an extremely large architecture with a significant number of adjustable parameters and a small set of training data to model this problem. The results reported in their work rely on a neural network which is unnecessarily too large to learn the mathematical model of seat comfort and opts for memorizing the training data.

The simulation of a neural network with similar architecture to their work (i.e., 31 hidden neurons) to model seat comfort index is quite informative and is conducted in this study. Even with 425 training data, the correlation coefficient achieved on 75 test data is around 0.55. On the training data, which the large neural network tends to memorize, the correlation coefficient obtained is about 0.8. This shows that their reported correlation coefficient of 0.832 was most likely associated with the training data. The neural network model utilized in this study leads to a correlation coefficient of 0.794 and is obtained by using the test data only.



**FIGURE 4:** A comparison of overall comfort index described by test drivers and calculated from neural network model.

## 9. CONCLUSION

In this paper, we have studied the objective and subjective factors, which contribute to driver seat comfort. Comfort generally describes the state of physiological, psychological, and physical harmony between a driver and a car seat. Modeling seat comfort is challenging and complex due to subjective matters, which cannot be formulated and captured, in a mathematical model. It is common practice to distinguish between a driver's experience of observable and unobservable factors contributing to seat comfort. For instance, objective factors such as anthropometrics and pressure distribution on car seat can be modeled mathematically. However, mood, culture, car brand and demographic information are subjective in nature and do not lead to a collective pattern over a large and diverse number of drivers which can be captured by a mathematical model. In this paper, we have developed a neural network model for some of the objective measures which influence seat comfort. This model has a correlation of 0.798 with the overall comfort index provided by twelve test drivers for five different types of car seats. As a result, the model utilized in this work can capture about 80% of the behavior of the comfort index expressed by test drivers. Since the resulting correlation is less than 1.0, the conclusion is that there are subjective factors which impact seat comfort. It is possible that through introduction of additional

inputs, one can increase the correlation between the neural network output and the actual comfort index. However, this correlation will always be less than 1.0, as unobservable factors are not captured in mathematical models.

The work presented here demonstrates that the previous work by Kolich (2004) suffers from an extremely large neural network architecture trained and tested on a very small dataset. As a result, their neural network is very prone to memorizing the training data and fails to capture an accurate mathematical model describing seat comfort index. Based on the results presented here, it is evident that a very small neuron network with 10 adjustable parameters can be trained and tested effectively to model seat comfort with respect to desired inputs.

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## Mental Strain while Driving on a Driving-Simulator: Potential Effect on Central and Autonomic Responses

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### Abstract

We recorded magnetoencephalographic (MEG), autonomic nervous system (ANS) activities and behavioral data during normal driving conditions (ND) and during driving under time constraint (TCD) while drivers had to respect traffic lights in a simulated driving task. Electrodermal activity and heart rate were the dependent variables from the ANS. Cerebral regions of interest, reaction time (RT) and rate of traffic light violations were those from MEG and behavior, respectively. Under TCD conditions, scenarios were likely to elicit high strain. In these conditions, response selection was more complex when drivers should respect traffic law, thus eliciting longer RT with increased activation in the left dorso-lateral prefrontal cortex. Heart rate decrease preceding light change perception was larger under TCD suggesting that drivers focused their attention toward potential light changes before decision-making (i.e. respecting the traffic law or the requested scenario). We finally observed a negative correlation between ANS and left-brain activities. Consequences upon safety are then discussed.

**Keywords:** Mental Strain, Time Constraint, Cerebral, Electrodermal and Cardiac Activities, Driving Simulator, Safety, Traffic Behavior.

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### 1. INTRODUCTION

Driving requires more or less complex information processing, and thus a series of decisions. Much information should be hierarchically processed resulting in a mental load depending on both task features (eliciting various constraints) and the perception of these constraints (the cognitive cost the individual underwent during task performance). The objective perception of task difficulty, i.e. task complexity, time pressure, or dual-task situations refers to stress, while its subjective perception, related to both the level of experience and anxiety state, refers to strain [1] and [2]. Luczak and Göbel [2] described the strain-stress concept as the specific reactions of the

individuals (strain) resulting from task demands and task conditions (stress). Accordingly, the stress induced by the task may interact with intrinsic factors of the individuals, which may cause overload conditions. Thus, the individual's information processing capacity may be too low for adequate task completion [3] and [4]. Overload may thus have detrimental effects on task performance, particularly on reaction time (RT), response accuracy or both [5]. Where holding a conversation with a passenger while driving may elicit distraction, conversation content, however, constitutes an aggravating factor especially when it is emotionally loaded [6] and [7]. Indeed, complex conversations eliciting emotional load may have a detrimental effect on road safety [8] and [9]. Emotion and cognition may thus interact with deleterious effect of emotion upon cognition. The role of emotion in decision-making has been studied in the field of neuroscience [10], [11], [12], [13], [14], [15] and [16]. Negative emotions may reduce information-processing efficiency, information being missed or processed less favorably due to excessive strain [17].

Physiological variables of both central and autonomic nervous system (ANS) provide reliable correlates about changes in mental and affective states. It may vary as a function of strain the participants undergo. Electrodermal activity (EDA) and cardiac measures are reliable indices of physiological arousal changes. While Zhang et al. [18] reported that sympathetic activity obviously increased during task performance, EDA is also known to be sensitive to emotion-related information [19]. As there is no parasympathetic innervation of sweat glands, changes in EDA can only be attributable to changes in sympathetic ends in effectors. Skin Conductance (or resistance) Responses (SCRs) are recorded almost simultaneously with stimulus onset. Electrodermal response is larger and longer when the task demands, the perceived difficulty or both increase [20]. Strain may also be assessed by processing heart rate (HR – [3] and [4]). HR increases during tasks requiring high cognitive demands [21], [22] and [23] and during negative, stressful or adverse events. HR is regulated by both ortho- and parasympathetic systems and might be more sensitive to vigilance, alertness, and probably less sensitive to physiological arousal due to its metabolic function [24]. HR decreased drastically few seconds prior to imperative stimulus, during the preparation phase, when attention is focused on task cues of high interest [25], [26], [27], [28] and [29]. Thus, there is a link between HR decrease and preparation for action or stimulus processing. However, decrement in HR varies as a function of task requirement, difficult trials being associated with larger fore period of HR deceleration [30], [31], [32] and [33]. These results are consistent with Lacey's intake-rejection hypothesis [21] and [22]: a decrease in HR is reported when attention is focused on the environment (individuals are thus more sensitive to new information) while, HR increase might favor the processing of internal cues with simultaneous rejection of external stimuli. ANS activity could be easily recorded through ambulatory and non-intrusive device [34] and [35].

Neuroimaging methods which examine the different stages of information processing also aim at better highlighting the impact of attentional deficit on driving performance [36]. For this purpose, electroencephalography (EEG) and magnetoencephalography (MEG) may be suitable and reliable methods. Event related potentials (ERP) or evoked magnetic fields might be measured in order to assess the dynamics as well as the spatial distribution of cortical activities elicited by both perception and processing of a specific event with good temporal resolution [37]. Regarding cortical activities, many studies reported that the prefrontal cortex (PFC) is a key-cerebral structure in decision-making processes, in particular the ventro-median (VM) and the dorso-lateral parts (DLPFC). Broche-Pérez et al. [38] reported that cortical structures involved in decision-making include the orbitofrontal cortex (OFC), anterior cingulate cortex (ACC), and dorsolateral prefrontal cortex (DLPFC). This process is assisted by subcortical structures including the amygdala, thalamus, and cerebellum. These cortical areas are also involved in secondary emotional processing [10]. As shown by Bechara [14], decision-making depends on neural substrates that regulate emotion and feeling. Many papers reported that a lesion of the VM cortex interfered with the normal processing of somatic or emotional signals and impaired the quality of decisions in daily life [10], [12], [13], [14] and [15]. The amygdala, the somatosensory insular and the anterior cingulate cortices (ACC – [10] and [12]) are also involved in neural networks integrating emotion and have crucial functions in decision-making processes. The neurofunctional correlates of emotional significance of various stimuli could be assessed by

isolating the  $\gamma$ -band on different brain areas [39], e.g. in the amygdala, the visual, prefrontal, parietal and cingulate cortices [40]. Emotional stimuli elicit greater increase of the  $\gamma$ -band event related synchronization as compared with neutral stimuli [40]. Balconi and Lucchiari [39] also showed that the  $\gamma$ -band activity provided more reliable insight during high (i.e. anger, fear) than during low arousal (i.e. happiness, sadness) emotions.

This preliminary experiment aims at studying the influence of emotional strain on both the neural processes involved in the processing of relevant visual cues during driving and on peripheral autonomic activity. We hypothesized that longer RTs would be better related to high time constraint conditions than with control conditions when drivers should stop at traffic-lights [36]. We also expected larger electrodermal and cardiac responses during conditions with time constraint than during control. Changes in affective state may be accompanied by specific physiological responses [3], [4], [41] and [42]. During pre-stimulation, we expected larger decrease in HR under high time constraint conditions than during control conditions [30], [31], [32] and [33]. We finally hypothesized that traffic-light change may elicit greater prefrontal cortical activations under high time constraint conditions, especially in the ventromedial part and in the ACC [10] and [40]. Likewise, increased emotional load may be correlated with a modulation of activity in cortical areas controlling attention (dorsolateral prefrontal cortex, DLPFC – [10], [43], [44] and [45]) and in visual areas [36]. Due to close relationships between cortical areas and peripheral activity, increased activity in the right ACC may activate the sympathetic system thus eliciting stronger responses from the autonomic nervous system [46], [47] and [48]. Conversely, the left hemisphere is involved in ANS inhibition. Therefore, higher activity from the left brain might result in lower autonomic responses [46], [49] and [50].

## 2. METHODS

Participants were confronted with driving sessions using a driving-simulator fitted to a MEG setting. The normal driving condition (ND) was considered the reference. Participants had to follow directions indicated by signs on the roadside. In the normal driving condition, drivers had to abide by the traffic law, and to particularly respect traffic lights. The conditions eliciting time constraint also included a scenario, e.g. driving a friend to the train station when there is little chance to catch the train due to both insufficient time and heavy traffic, or delivering a fragile package while being late. Under these conditions, traffic lights went frequently from green to orange, normally requiring the driver to stop.

### 2.1 Participants

Six healthy men, aged from 20 to 30 years (mean=27.33, SD=2.09) took part voluntarily in this experiment after giving their informed consent. The local ethic committee gave its approval to the experimental design. All participants were naive to the purposes and expected results of the experiment. None were under medications or had cardiac diseases that may influence physiological activity. None of them reported any mental pathology. They had a driving license for at least 3 years with normal or corrected to normal vision.

Deviant behaviors were assumed as exclusion criteria. The experimenters checked in real-time whether the participants showed deviant driving behaviors: we especially checked if they followed the lane and drove on the right side. We never observed deviant driving behavior.

### 2.2 Experimental Design: Procedure and Instructions

We recorded both magnetoencephalographic and autonomic activities with the aim of assessing how drivers managed high strain conditions, i.e. managing changes in traffic lights while being under time pressure.

Participants drove either on a single or 2-lane road in an urban environment and were confronted with 18 different randomly-controlled driving scenarios of about 5 minutes each. When necessary, participants could take short breaks (1-3min) between blocks in order to reduce blinking. At the experiment's midpoint, a longer break (10-15min) was imposed. Participants underwent one or

two 5 min-training sessions before starting the experiment. During each experimental session, traffic lights randomly turned from green to orange between 107 and 115 times (i.e. ~30% of all traffic lights, mean=111.17, SD=2.86). All traffic lights were on the right side of the road and could turn from green to orange when the vehicle approached them at about 30m, otherwise the lights remained green and the driver was free to move forward. Signal switching was controlled by the speed of the vehicle in order to standardize the conditions for all participants. In rare cases, the signal was already red when perceived by the driver. While the main aim of the experiment was to study decision making when the traffic light changed from green to orange, several other experimental conditions were completed to prevent drowsiness and habituation across time. Several lights remained green when the drivers' car was approaching. Light changes were organized in a way that could not be predictable by the drivers. Thus, they always were faced an unexpected situation. For 9 of the scenarios, drivers were subject to normal driving (ND). In the 9 other scenarios, participants were confronted with conditions inducing time constraint (TCD). The order of the ND and TCD conditions was counterbalanced among participants. In the ND, drivers only had to respect the traffic law: they were especially required to stop when the signal changed from green to orange. No additional instructions were given. Thus, ND was the control condition. Under TCD, drivers had to respect both the traffic law and a scenario inducing high load, particularly time pressure, encouraging them to drive faster than they normally would.

### **2.3 Behavioral Analysis**

#### **2.3.1 Reaction Time (RT) Data Recordings and Analysis**

RT was the time duration between signal change and the first action on the pedals, i.e. the moment the participants remove their foot from the accelerator pedal. Distribution of RT is usually not Gaussian and is more consistent with Poisson's law. There is thus higher probability that the inverse of RT (1/RT) would follow a Gaussian law. We thus tested this hypothesis using the Shapiro-Wilk test. We also compared 1/RT between ND and TCD using t-test. In this analysis, we did not include data associated with traffic lights violation (drivers who did not stop when the signal changed from green to orange, with or without associated braking).

#### **2.3.2 Traffic Lights Violation**

The rate of traffic lights violation in both ND and TCD was also considered a behavioral dependent variable. We performed simple regressions to assess the impact of lights violation on both central and autonomic activities (under the condition in which some traffic lights were not respected, i.e. under TCD).

### **2.4 MEG Acquisition and Analysis**

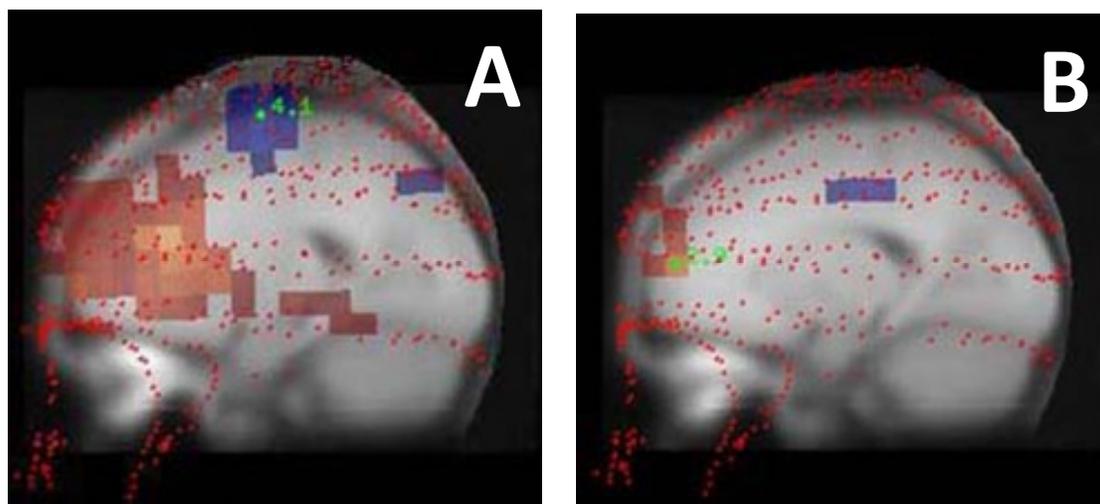
To record cortical activities during driving sessions, participants were required to drive a virtual car using a driving simulator fitted with MEG environmental constraints, i.e. adapted to a nonmagnetic environment. This simulator was equipped with a steering wheel, a turning indicator, an accelerator and a brake pedal. The experiment was conducted at the MEG Centre (CERMEP, Bron, France). At first, and prior to scanning, head coils were placed on the nasion and on both left and right pre-auricular points, thus enabling continuous head localization recording. Then, the location of these coils and the head-shape of each participant were digitized with Polhemus (Polhemus Inc., Vermont, USA).

MEG recordings were performed using a whole-head MEG system (Omega 275, CTF, VSM MedTech Ltd.) with 275 radial gradiometers over the scalp and 33 reference channels for ambient field correction. Signals were digitized at a sampling rate of 300Hz and were recorded continuously applying band-pass filtering from 0 to 75Hz. Vertical and horizontal eye movements (electro-oculogram, EOG) were also recorded for artifact control. A marker was automatically triggered as early as traffic lights turned from green to orange to help along data analysis. Before starting data processing, we removed trials with excessive eye blinks, muscular or electromagnetic artifacts and head movements from further analysis. We initially selected few blinks manually to create a template. Then, we used the template to mark blinks automatically with a feedback to control whether the template worked adequately. We then checked that no blink occurred within both the [-5s/-4s] window (before light change) and the [0s/1s] window (just

after light change), i.e. in the time window of interest used for Synthetic Aperture Magnetometry analyzes. Muscle activity rejection was carried out manually. Epochs of MEG signal for which head movements exceeded 1cm on the 3 coils were consistently suppressed. After rejection, we preserved a mean of 42 (SD=10.26) and 30 (SD=12.37) responses to traffic lights changes per participant for ND and TCD conditions, respectively.

The regions of interest (ROI) were the prefrontal cortex and particularly the dorsolateral prefrontal cortex (DLPFC), the anterior cingulate cortex (ACC) and the ventro-median (VM) cortex (including the orbitofrontal part). We also focused on the occipital and motor cortices activities. We investigated the right and left side of the brain separately, with the exception of the motor cortex where the region of interest was on the left side. We investigated PFC and occipital cortex activities in the  $\gamma$ -band (30-50Hz - [40]) while we focused in the  $\beta$ -band to study motor cortex activity (13-35Hz - [51]). Depending on whether we consider the  $\gamma$ -band (e.g., on the PFC and occipital cortex) or the  $\beta$ -band (e.g. on motor cortex), activation could either be related to ERS (event related synchronization) or ERD (event related desynchronization). Indeed, this depends on both the number of neurons still available for synchronization, which might be activated by experimental conditions, and the level of excitability of neurons at rest. In brain areas where we studied the  $\gamma$ -band, the cortical excitability level at rest is low, many neurons being thus still available for synchronization. Accordingly, activation corresponded to ERS and increase of power corresponded to cortical activation. However, in brain regions where we examined the  $\beta$ -band, the cortical excitability level at rest is high, few neurons being available for synchronization. Thus, in this frequency band, ERD and therefore a decrease of power is induced by cortical activation [51].

We used a beamforming technique and virtual sensors for data processing. We assessed the spatio-temporal dynamics of cerebral processing, i.e. where and when brain activity changes occurred. Indeed, we performed Synthetic Aperture Magnetometry (SAM) analysis and applied paired t-tests to compare the [0s/1s] active time-window after light change to the [-5s/-4s] control time-window. ND and TCD conditions were processed separately. Each condition and each side of each ROI were associated with the most significant selected voxels (Figure 1).



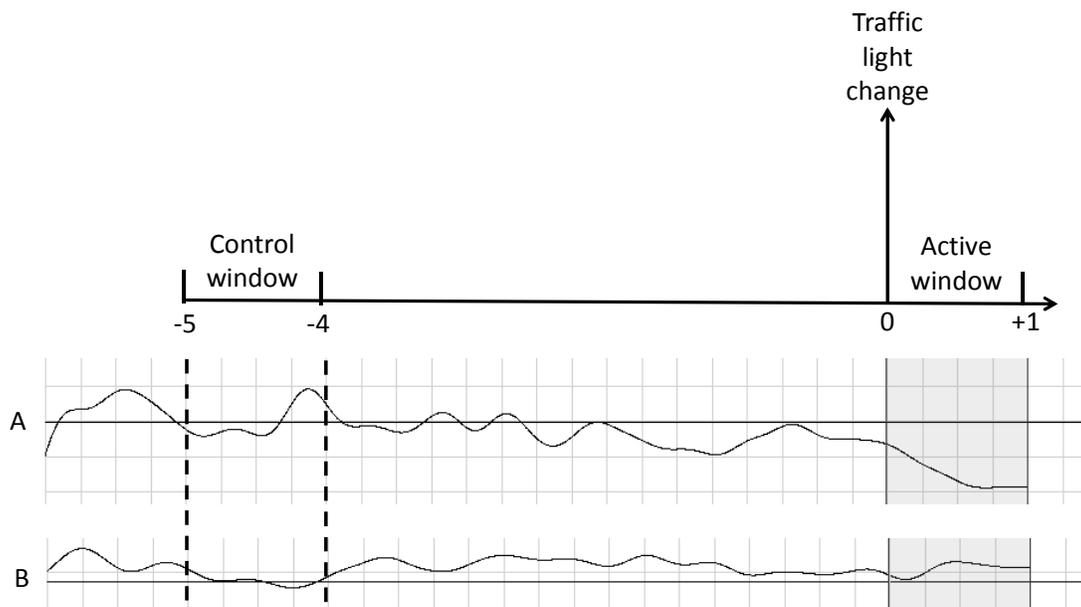
• Marker points fitting the head shape

Power variations:

- Mean power in active window < control window
- Mean power in active window > control window

**FIGURE 1:** Two examples of maximal activations: for the motor cortex (A) and the VM cortex (B). A blue volume (A) is associated with a mean power in the active window lower than that in the control window. A red volume (B) is related to a mean power in the active window greater than that in the control window.

Then, we determined virtual sensors to process power variations (nanoAmpère-meter/T) for the selected voxels between [0s/1s] and [-5s/-4s] time-windows (Figure 2). We then based data analysis on this power variation measure using a single value per condition and ROI.

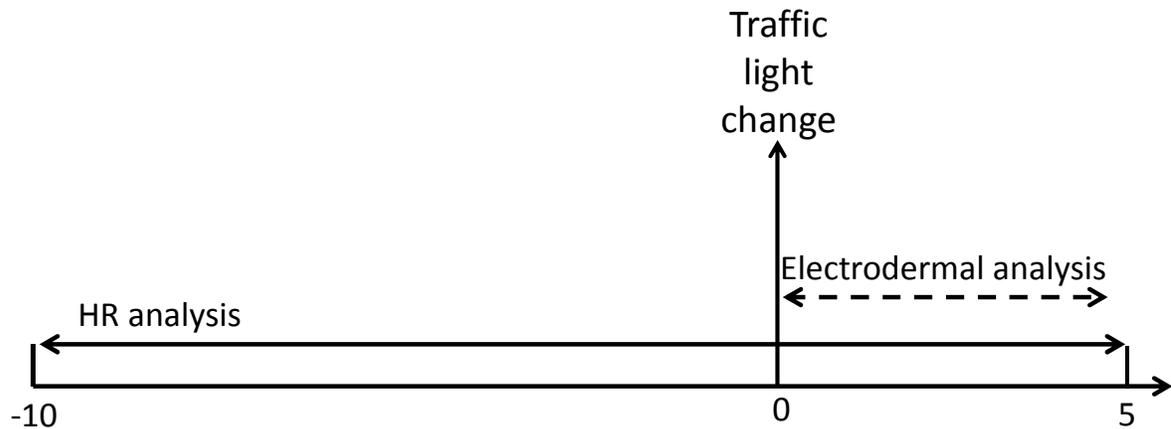


**FIGURE 2:** MEG analysis. 0 indicates the exact time of light change from green to orange. We determined virtual sensors for each maximum to study the mean power in the [0s/1s] active window (following the light change) in relation with the mean power in the [-5s/-4s] control window (before the light change). Virtual sensor A shows that the mean power is lower in the active than in the control window. Conversely, virtual sensor B indicates that the mean power is greater in the active as compared with the control window.

We performed t-tests to assess the difference between ND and TCD regarding the power variation values obtained for each ROI, i.e. left and right (L/R) DLPFC, L/R VM cortex, L/R anterior cingulate cortex, L/R motor cortex, and L/R occipital cortex. We finally performed simple regressions to study the effect of lights violation on brain activity under the TCD condition (i.e., on the power variation value for each ROI). We normalized TCD power variations as compared with those from ND by computing the difference between both conditions, for each side of each ROI.

## 2.5 ANS Data Recording and Analysis

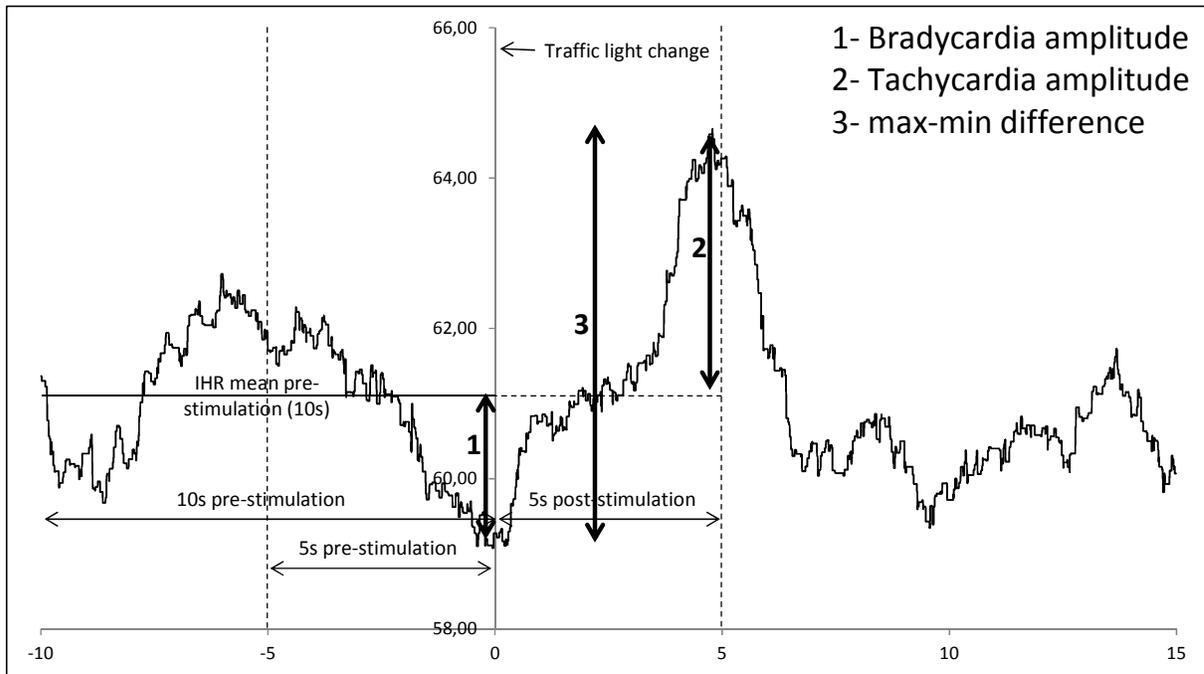
We used a system designed by the team “Microsensors and Biomedical Micro-Systems” of the National Institute of Applied Sciences of Lyon (INSA, Lyon) to record ANS activity ([35], e-motion device). This is an integrated device for simultaneous and real-time recordings of both electrodermal and cardiac activities. Electrodermal activity (EDA) and instantaneous heart rate (IHR) were continuously recorded and were the two dependent variables. ANS variables give a close estimation of participants’ physiological arousal especially through the sympathetic branch. We selected larger time-windows for ANS responses analysis than for MEG responses as ANS responses occurred within longer periods of time. We thus extended the time-window to [-10s/5s]. Due to its sensitivity to motor preparation, we observed HR responses from 10 s before stimulus onset until 5s after. Electrodermal responses would probably occur after the traffic light changed and were thus studied in the post-stimulus period: the electrodermal responses which began in the 5s time-window after stimulus onset were considered and quantified by their amplitudes and durations (see Figure 3). We aimed at processing, as much as possible, the same trials for ANS and CNS analysis with the exception of those including artefacts, which were removed from the dataset.



**FIGURE 3:** ANS analysis. 0 indicates the exact time of light change from green to orange. We processed ANS activities (HR and electrodermal activities) by using a [-10s/5s] window of interest. We processed cardiac activity within a [-10s/5s] window of interest (both pre- and post-stimulation cardiac responses were studied) and EDA within a [0s/5s] window of interest (we only considered electrodermal responses after stimulation).

EDA was measured with 5  $\mu\text{A}$  DC current and recorded using 50  $\text{mm}^2$  unpolarizable Ag/AgCl electrodes (Clark Electromedical Instruments, Edenbridge, UK). Thus, the current density was 10  $\mu\text{A}/\text{cm}^2$ , as recommended by the international standards. The EDA sampling rate was 20 Hz. We used a low-pass analog filter during the acquisition and no high-pass filter. The cut-off frequency was 1 Hz. We detected ANS responses manually with reference to event markers positioning [52]. We then computed skin resistance response amplitude during the post stimulation period using the tools provided by the software. As skin resistance amplitude is likely to be sensitive to strong variations in basal values, we simultaneously processed response duration through the Ohmic Perturbation Duration (OPD). The OPD is measured from the sudden drop after the stimulus was triggered until the exact point where the slope started recovering its initial level again without any fluctuation [53] and [54]. OPD is thus defined as the time-period during which the individual remains under the influence of the stimulus. In sum, only electrodermal responses occurring within the 5s-period time window after stimulus onset were considered [55]. We processed response amplitude and duration.

HR was recorded from three silver electrodes placed in the precordial position thus recording ECG. The time of occurrence of the R-waves could thus be determined. The time-interval between two consecutive R-waves of the ECG (the D2 derivation signal) was processed electronically and delivered in the form of IHR. The smallest appreciable variation was 0.5 of a bpm and the calibrated scale ranged from 0 to 200 bpm. The IHR signal was directly extracted from the ECG at the level of sensors. Therefore, the IHR was an analog signal and data acquisition was then carried out at 20 Hz. By this method, HR increase or decrease could easily be detected and quantified as a reliable indicator of strain [2] and [19]. IHR enabled the observation of HR variation across time, especially decrease in HR usually occurring during the preparation phase of motor response. IHR is also likely to increase in response to decision making [21]. We thus computed the difference between the lowest IHR value during the 5s preceding the light change and the mean IHR pre-stimulation values, averaged during the 10s-period preceding stimulus onset, as shown by Figure 4. A 5s-delay prior to stimulus was taken by Stern [26] as an index of attention (i.e. readiness to act). We processed increase in HR by measuring the difference between the highest IHR value within the 5s following stimulus onset (light change) and HR baseline value (averaged within the 10s pre-stimulation time-window). We finally computed the difference between the highest IHR value within the 5s post-stimulation time window and the lowest IHR value in the 5s pre-stimulation time window as an index of mental effort and physiological arousal. All indicators related to IHR are summarized in Figure 4.



**FIGURE 4:** Description of HR indices through an example from the dataset. Decrease in IHR (1), increase in IHR (2) and max-min difference (3).

We used t-tests to compare electrodermal and cardiac indices under ND and TCD. We finally carried out simple regression analysis to test the effect of the rate of lights violation on the ANS indices.

## 2.6 MEG and ANS Relationships

Statistical analysis aimed at testing the effect of brain activities on ANS responses, as a function of both ND and TCD conditions. We thus used simple regressions to test the effect of power variation values in specific left and right brain regions of interest on ANS activity changes.

## 3. RESULTS

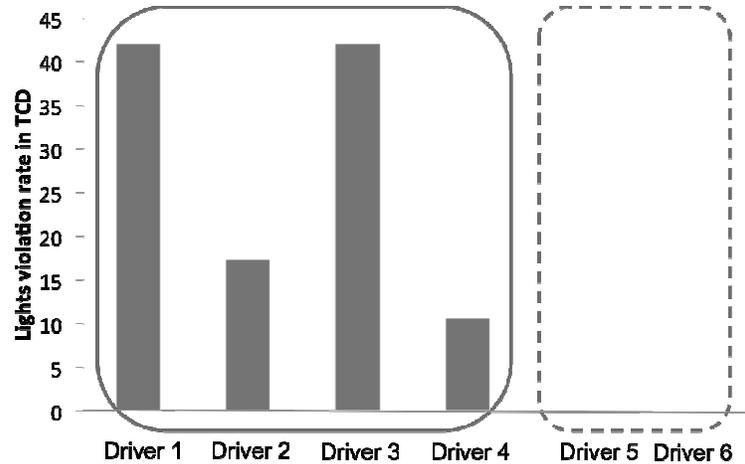
### 3.1 Behavioral Results

#### 3.1.1 RT

The Shapiro-Wilk test confirmed that the distribution of  $1/RT$  data was Gaussian in both ND ( $W=0.89$ ,  $p=.32$ ) and TCD conditions ( $W=0.98$ ,  $p=.93$ ). Then, t-test revealed significant difference in RT when comparing ND to TCD (mean difference=0.75,  $t=3.46$ ,  $p<.02$ ). Mean (SD) RT were 390ms (170) and 480ms (240) during ND and TCD, respectively.

#### 3.1.2 Percentage of Traffic Lights Violation

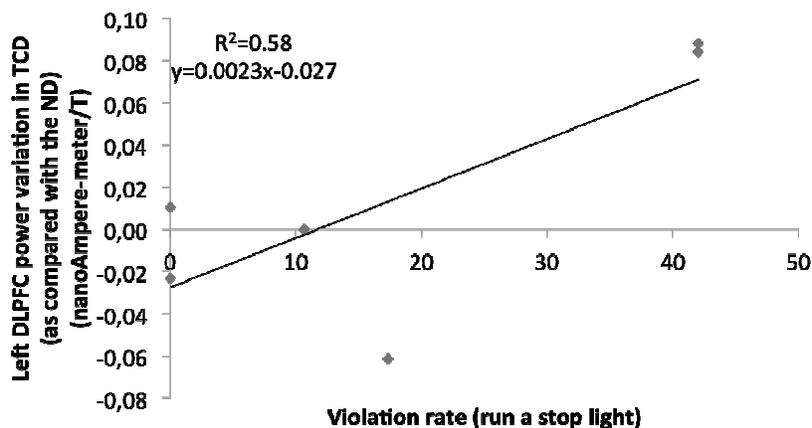
Drivers respected all traffic lights changes under ND while 18% of traffic lights were violated under TCD. Figure 5 summarizes the rate of lights violation for each driver.



**FIGURE 5:** Proportion of lights violation rate in TCD. Under the ND condition, all traffic lights were respected.

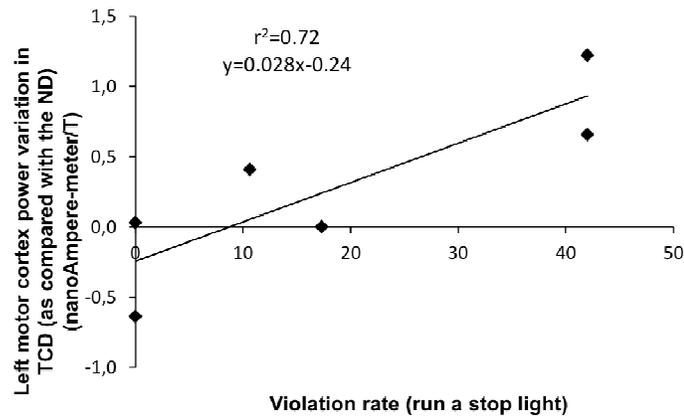
### 3.2 MEG Results

We did not observe differences between ND and TCD conditions regarding the power variation values recorded for each ROI, i.e. L/R DLPFC, L/R VM cortex, L/R anterior cingulate cortex, L/R motor cortex and L/R occipital cortex. Regression analysis showed significant results only for the TCD condition. Under TCD, simple regressions revealed that the power variation in the left DLPFC marginally increased simultaneously with the rate of lights violation ( $F(1,4)=5.46$ ,  $p=.08$  - see Figure 6). The weak number of participants did not allow reaching statistical significance. Nevertheless, power calculation with alpha set at 0.05 and power at 0.80 gave a sample size of 9 participants to reach the significance.



**FIGURE 6:** Left DLPFC power variation in TCD (as compared with ND) as a function of the lights violation rate.

Under the same condition, the power variation in the left motor cortex increased simultaneously with the rate of lights violation ( $F(1,4)=10.17$ ,  $p=.03$  - see Figure 7).



**FIGURE 7:** Left motor cortex power variation in TCD (as compared with ND) as a function of the lights violation rate.

### 3.3 ANS Results

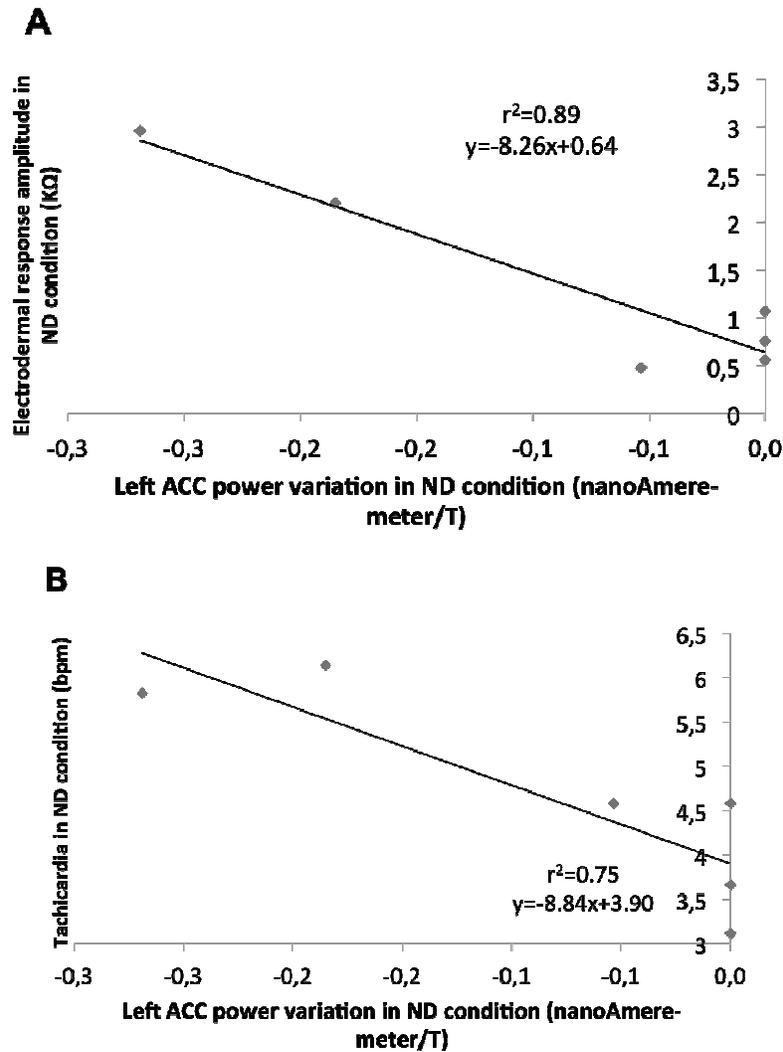
Under TCD, simple regressions revealed that OPD decreased along with an increase of lights violation, however with a marginally significant p value ( $F(1,4)=6.25$ ,  $p=.07$ ). Power calculation with alpha set at 0.05 and power at 0.80 gave a sample size of 9 participants to reach significance.

We recorded larger HR decrease under TCD than under ND condition (mean difference=0.63,  $t=2.73$ ,  $p=.04$ ), during the 5s pre-stimulation period. Mean (SD) IHR values were -4.33 bpm (0.83) and -3.70 bpm (0.38) during TCD and ND, respectively.

### 3.4 Relationship between MEG Activities and Autonomic Activities

The ND is the only condition, which showed significant relationships between MEG and ANS data. Under this condition, we highlighted a negative relationship between electrodermal response amplitude and power variation in the left ACC, i.e. a decrease of response amplitude along with an increase of power variation in this brain area ( $F(1,4)=31.3$ ,  $p=.005$  - Figure 8A).

Under the same condition, we also observed a negative relationship between increase in HR and power variation in the left ACC ( $F(1,4)=11.9$ ,  $p=.03$  - Figure 8B).



**FIGURE 8:** Electrodermal response amplitude (A) and HR increase (B) as a function of left ACC power variation. ANS activity is negatively correlated with central activity at the level of the left ACC.

#### 4. DISCUSSION

As expected, we detected longer RTs when drivers stopped at traffic lights under high time constraint (TCD) than during normal driving (ND). Driving was more complex as the time allocated to process the same information, i.e. the traffic light switching from green to orange, was reduced under TCD condition [5]. While time pressure may accelerate information processing this could simultaneously be detrimental to response accuracy. Under TCD, respecting traffic law and scenario instructions contributed to making the decision-taking process a more difficult task and thus resulted in increased RTs. In the speed-accuracy trade-off, TCD resulted in taking more time to process the information although TCD simultaneously led four drivers out of six exhibiting higher rates of traffic-light violation while the 2 others respected all traffic lights. TCD would thus result in both increasing RT and sometimes disregard the traffic law, with the consequence of potentially impacting safety. Finally, TCD may have required an increase of top-down attention to select the relevant information and action, i.e. braking to stop at the red light or not [56]. Indeed, we observed a large rate for non-compliance with traffic-lights, i.e. from 0 to 42%. The expectancy theory [57] assumes that behavior results from conscious choices among alternatives whose purpose is to maximize utility and pleasure, on the one hand, and minimize pain and constraint, on the other. The majority of drivers, i.e. four out of six, did not wish

to waste time by stopping at traffic lights and preferred to be on time. We may wonder whether this behavior is due to the fact that the experience was simulated. This would have encouraged the participants to less respect the Highway Code since no compliance with the traffic light has any consequences in terms of safety when driving a driving simulator. However, we do think that drivers' behavior would probably have been comparable under actual driving conditions. Indeed, two drivers respected the traffic law, even if they were involved in simulated conditions: they might intend to reach safely their destination despite time pressure. Driving behavior has also been shown as depending upon other parameters than driving itself. It might be thus explained by traffic culture and personality traits. Indeed, previous studies reported that people who show risky behavior in everyday life would be prone to take more risks while driving. For instance, they would tend to phone or send a text message while driving, thus believing that they have the ability to process two tasks simultaneously [58] and [59]. Other comparable behaviors have already been described, e.g. drivers who exhibit risky behaviors in daily life were also those who drive without wearing their seatbelt or after consuming alcohol, who were likely to drive faster, change lanes more frequently, spend more time in the left lane, and engage in more instances of hard braking and high acceleration events. Despite our experiment was simulated, drivers nevertheless kept in mind that risky behavior may impact safety. According to Megias et al. [60], emotional cues under high time constraints slow down participants' decision-making and make them less able to discriminate risky from not risky situations. Thus, task features are important factors in understanding risk behavior under high constraint conditions. Conversely, drivers respected all traffic-lights under ND condition and were thus more likely to stop at the traffic-light when they were not under high strain due to time pressure.

The major finding of the present experiment is that both conditions selectively impacted brain activation. During TCD, the activity increased in the  $\gamma$ -band, in the left DLPFC simultaneously with the rate of lights violation. The DLPC is known as being involved in complex cognitive processes, e.g. attention, working memory, anticipation and motor response selection [10], [43], [44] and [45]. The DLPFC activation under TCD confirms that this condition was more demanding. We also reported an increase of power variation in the  $\beta$ -band on the left motor cortex along with an increase of the rate of traffic lights violation. This is coherent with drivers' action when violating traffic light, as they probably did not brake. In similar driving conditions, Fort et al. [36] reported increased activation in the supplementary motor area. As in our study, drivers should stop at the traffic lights but no violations were reported, probably because drivers had no time constraint and were only instructed to drive at their own pace. We may thus conclude that the supplementary strain elicited by time pressure may have affected both drivers' behavior and the processing of relevant information.

We also observed that decrease in HR preceding traffic light perception was larger under TCD than under ND condition. Previous experiments reported that HR changes correlated with attention. HR decreases when attention is diverted towards the environment, i.e. when the attention is focused on cues of particular interest [21], [22], [25], [26], [27], [28] and [29]. Other data also showed that difficult task requiring the allocation of high attentional resources elicited larger HR deceleration during the fore-period [30], [31], [32] and [33]. In our study, drivers better focused their attention toward changes in the environment under TCD than under ND condition. This is well attested by HR responses. During TCD, they drove at higher speed than during ND and had to pay attention to both traffic light changes simultaneously with other environmental changes (i.e. other vehicles, pedestrians...). Avoiding risky situations, especially in the case of traffic light violation, thus required the allocation of more attention resources and resulted in larger HR decrease.

The aim of this experiment was finally to highlight the relationship between central and peripheral autonomic activities. High correlation between both would allow considering ANS activity as reflecting central processing and therefore that mental and emotional states of the driver could be monitored in real-time through peripheral variables of the ANS. Both EDR and HR response amplitude decreased while the power variation of the left ACC increased in the  $\gamma$ -band. Thus, both ANS indices decreased along with increasing activity in the left ACC [51]. We therefore

observed a negative relationship between ANS and left-brain activities, especially in the left ACC. This is in accordance with previous studies reporting that the left hemisphere is involved in ANS responses inhibition. Indeed, several studies showed that damages in the left hemisphere increased ANS responses [46], [49] and [50]. Conversely, right hemisphere damages resulted in opposite effects [46], [49] and [47]. Likewise, Wittling et al. [61] revealed that parasympathetic activity is under the main control of the left hemisphere while sympathetic activity is mainly controlled by the right hemisphere. Critchley et al. [48] later confirmed the right hemisphere dominance over sympathetic activity, especially at the level of the right ACC, right insular and right OFC. Our results are hence consistent with previous papers highlighting the control of left ACC upon ANS responses inhibition. Therefore, ANS activity might be considered highly correlated with CNS activity. It may thus give reliable information regarding drivers' functional state while driving. ANS activity recordings in real-time (e.g. EDA or HR through non-intrusive sensors) might give relevant information to drivers if these could be used as feedback information. In the near future, this information could be interpreted by drivers as information linked with their own strain if they were directly available from an intelligent traffic system integrated to the vehicle through non-intrusive sensors. This information could help the drivers in deciding whether to stop or continue driving on the basis of the feedback provided [62], [63] and [64].

Behavioral and physiological variables actually showed that conditions inducing time constraint might have a detrimental impact on road safety. The strain added by time pressure was likely to influence drivers' behavior by increasing RT (in response to traffic light changes) and/or by increasing traffic lights violation (due to time-pressure). Additional strain elicited by time pressure showed that the cerebral processing of relevant information could be altered and that emotional state may interfere with decision-making. Respecting the traffic law as it should be, strongly interfered with the rate of traffic lights violation when the aim was to meet time constraints. We could transfer these results with caution to actual driving conditions as they were obtained under simulated driving conditions and therefore drivers' safety was not at stake. Other important features that should be considered are from drivers' personality traits, and their ability to handle driving conditions with time constraints. While improving road safety has made significant progress in terms of vehicles, equipment and infrastructure, the next step is to work on individual behavior, emotional characteristics of drivers and their implications in traffic safety. As expected, the comparison of the two driving conditions revealed the detrimental effects of TCD situations on driving safety. However, certain lines will have to be deepened. Future researches may differentiate autonomic and central activities depending on drivers' behavior (respecting or not of the Highway Code) or on personality traits (anxious, impulsive, calm). It will thus allow testing factors inducing the mental and/or emotional load while driving, i.e. either external (time pressure, environment requiring to be careful), internal (ruminations, negative thoughts) or both. From the results already obtained, along with future researches, we may expect to propose some recommendations in terms of driving safety to provide effective tools addressing attentional deficits (e.g. avoiding driving when the traffic is busy or by night; reducing speed thus allowing much time to select and process all relevant information from the road scene...). To be valid these recommendations will have to consider driver's psychological features, e.g., driving experience and age. The present study also showed that the autonomic nervous system activity might be a reliable, although indirect, indicator of the central nervous system activity. It is thus worth considering to use physiological signals embedded to intelligent traffic systems to assess drivers' mental and/or emotional states in real time. The ultimate goal would be to make these systems capable of advising the drivers according to their physiological and functional state (e.g. take a break as soon as possible). These may thus contribute to the reduction of critical driving situations due to attentional deficits and therefore to better prevent car crashes.

## **5. ACKNOWLEDGMENT**

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