



# DRIVER MONITORING

## BODY POSTURE AND PHYSIOLOGICAL INDICATORS FOR DROWSINESS DETECTION IN A PARTIAL AUTOMATED DRIVING

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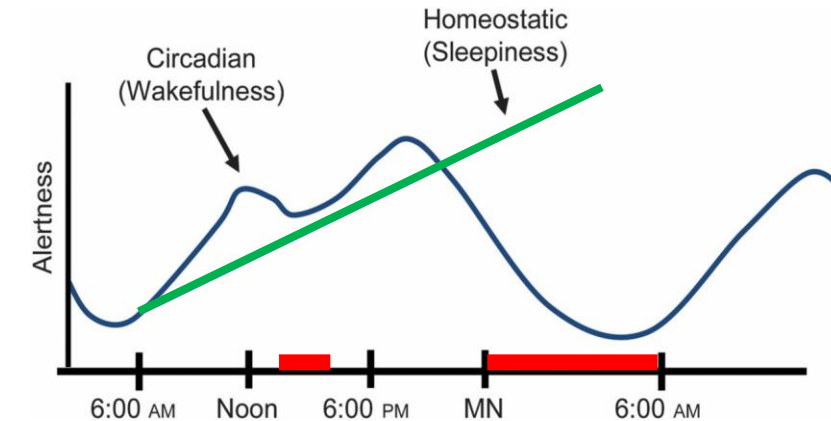
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DES SCIENCES **ETIENNE**  
DU MOUVEMENT **JULES**  
//////////////////// **MAREY**





## INTERNAL FACTORS

- Homeostatic process
  - Time awoken
  - Sleep debt
- Circadian process
  - Time of day



*Molano and Vaughn (2014)*

## EXTERNAL FACTORS

- Monotonous or familiar environment
- Time spent while driving



## MANUAL DRIVING

Driver Monitoring System mostly based on :

### Driver-based data (video)

Blinks, PERCLOS, Head movements ...



- +** Relevant and reliable
- Acquisition quality may vary according to several factors: lighting conditions, glasses, ethnics...

### Vehicle-based data

Lateral deviation, Lane crossing, Speed variability...



- +** Relevant and reliable  
Always available
- Detection of deep stages of drowsiness

## PARTIAL AUTOMATED DRIVING

How to process monitoring ?

### Driver-based data (video)

Drivers engaged in NDRTs  
will no longer facing the  
camera



No more relevant in  
autonomous mode



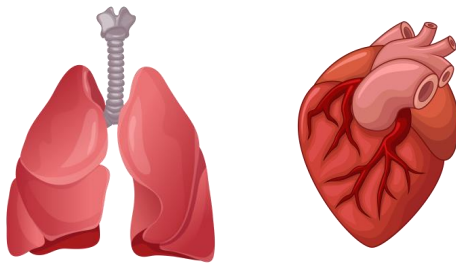
Need to implement new  
DMS with new features



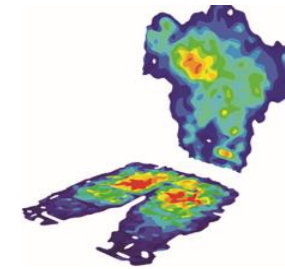
## PARTIAL AUTOMATED DRIVING

### How to process monitoring ?

#### Physiological data



#### Behavioral data



#### IN MANUAL DRIVING

- Change in heart rate (HR) and heart rate variability (HRV)
- Change in respiration rate (RR)
- Alert vs extremely sleepy ?

- Increase of the number of movements
- Shift of the center of pressure on the seat
- Alert vs intermediate stages ?

*Buendia et al., 2019; Jacobé de Naurois et al., 2017 ; Persson et al., 2021*

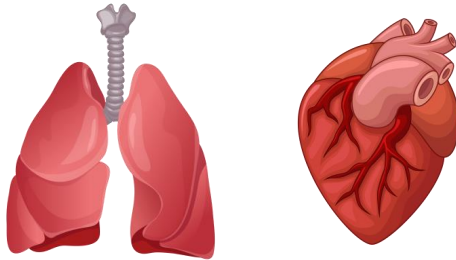
*Itoh et al., 2017; Sunagawa et al., 2020*



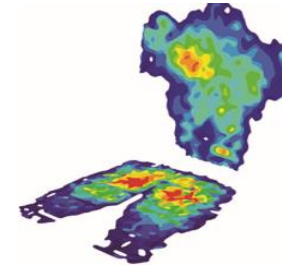
# PARTIAL AUTOMATED DRIVING

How to process monitoring ?

Physiological data



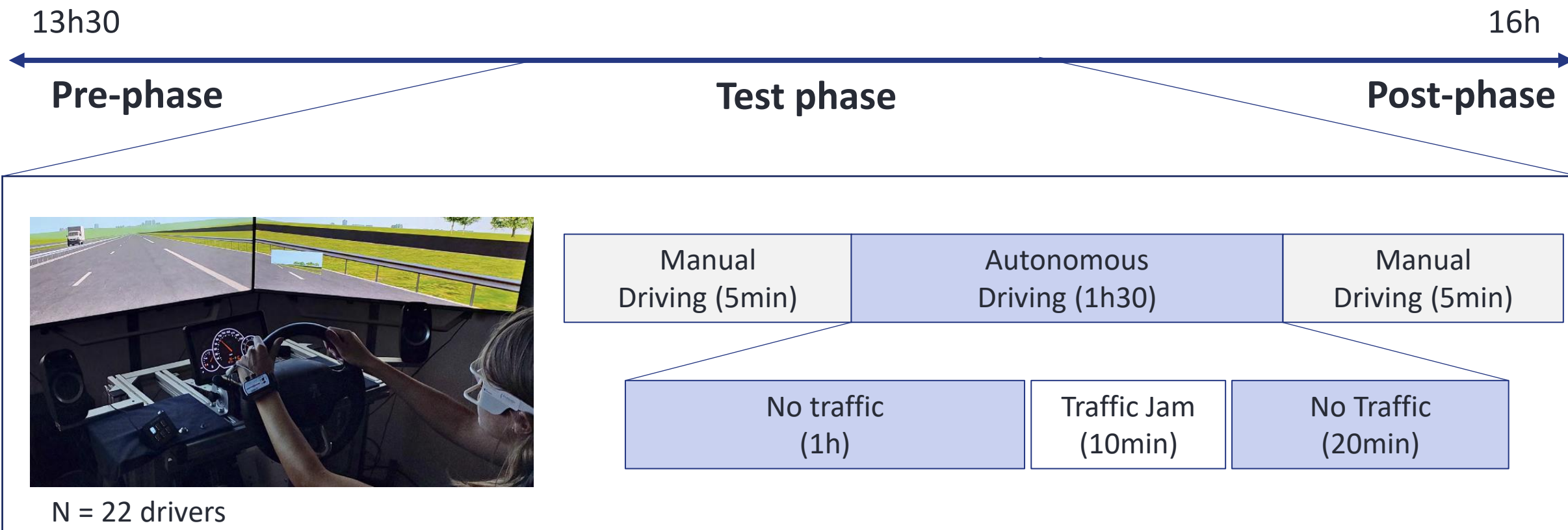
Behavioral data



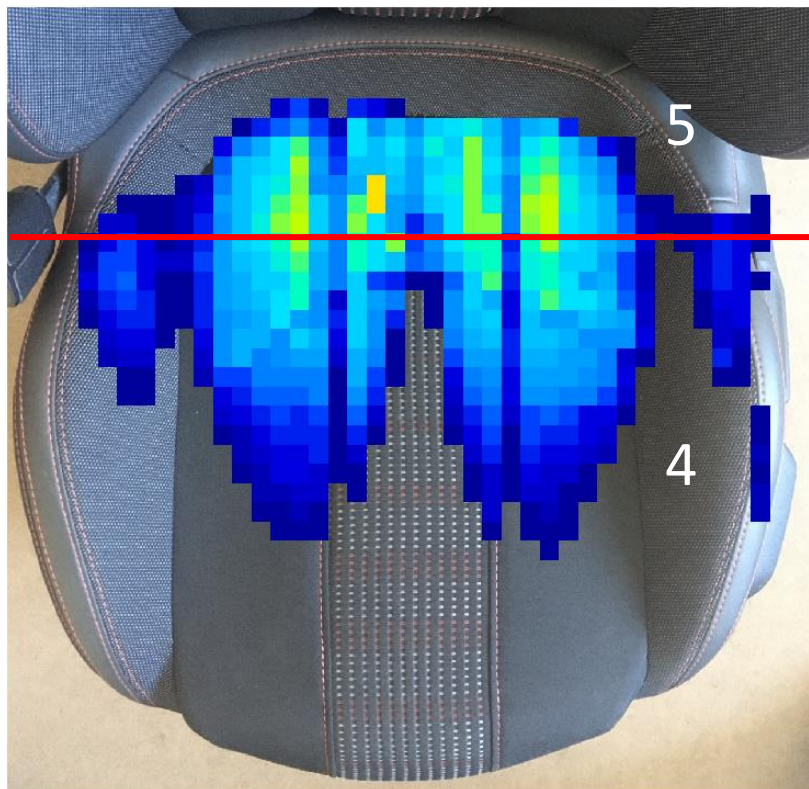
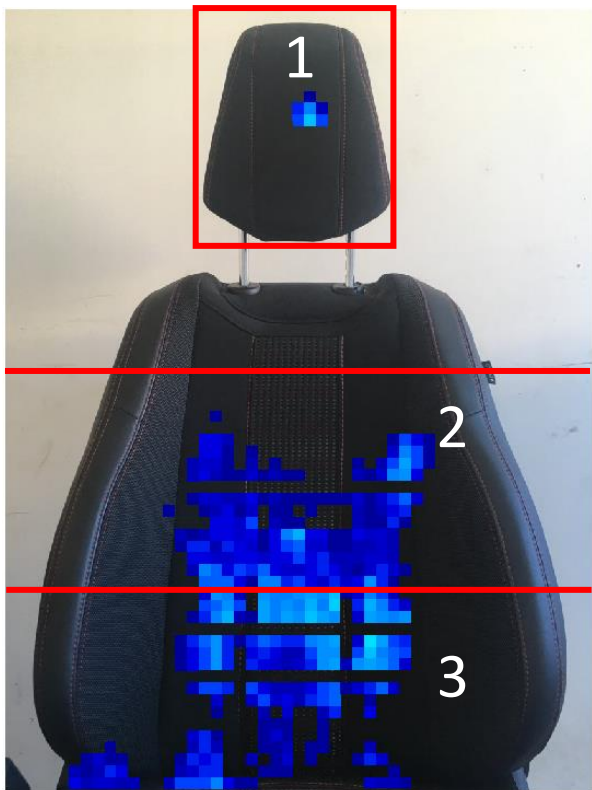
Can posture and physiology be used to detect **the full spectrum of drowsiness** ?

Can seat sensors be the solution to **maintain monitoring in any situation** ?

## SIMULATOR STUDY A L2 level of automation



## POSTURAL INDICES



- 1 : Headrest
- 2 : Upper zone of the backrest
- 3 : Lower zone of the backrest

- 4 : Anterior of the seat
- 5 : Posterior of the seat

### Static features

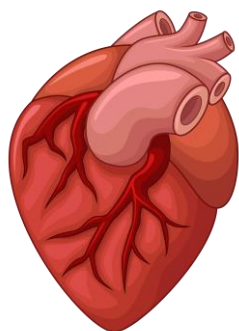
- Center of pressure (**COP**) position
- Contact surface (**CS**) over the zones
- Percentage of use of the headrest

### Dynamic features

- Number of movements on seat and backrest

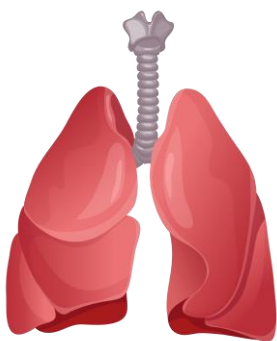


## PHYSIOLOGICAL INDICES



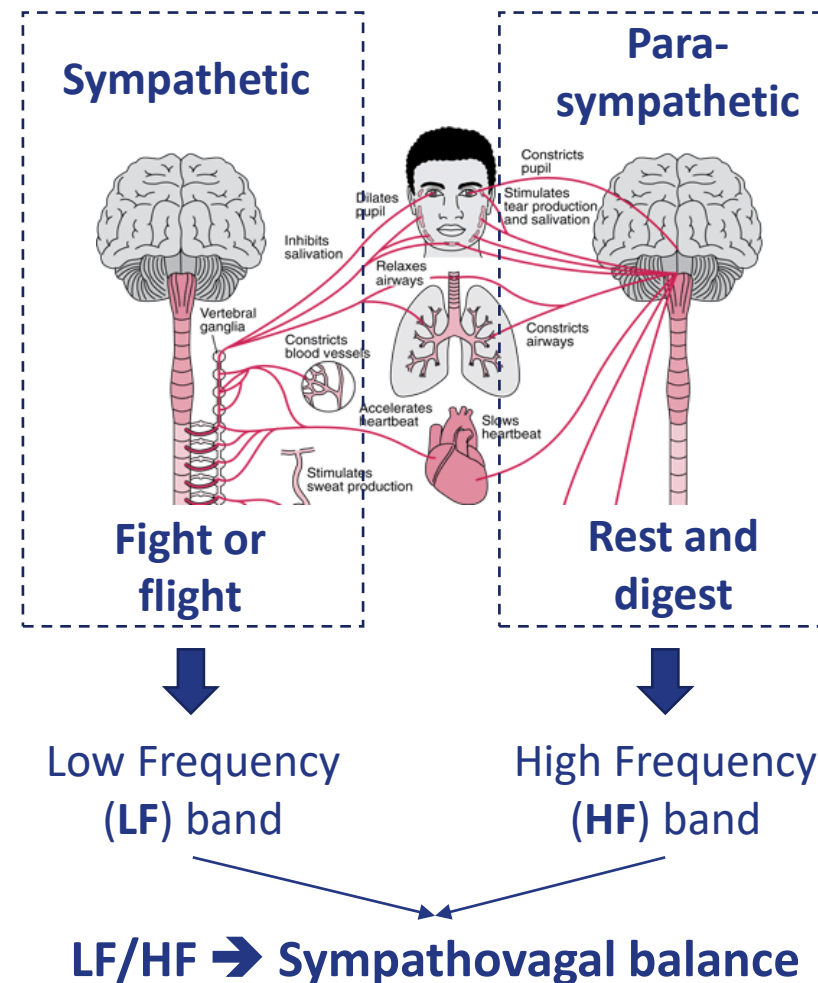
### Cardiac features

- Heart rate (HR)
- Heart Rate Variability
  - Time domain
  - **Frequency domain**

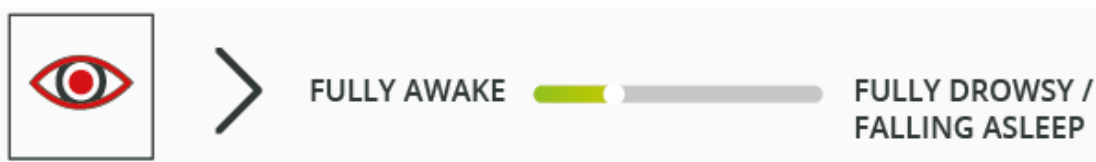


### Respiratory features

- Respiratory rate (RR) and amplitude



## DRIVERS' STATE CLASSIFICATION

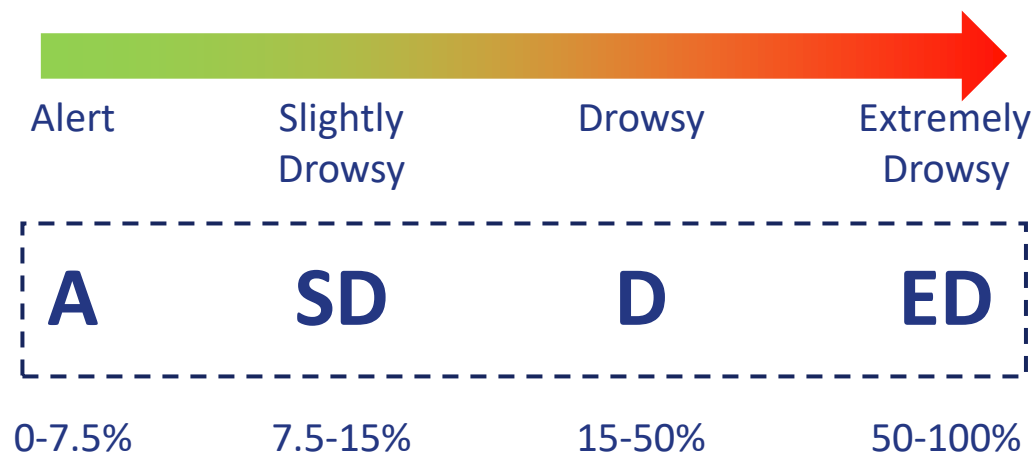


François et al. 2016

phas<sup>ya</sup>

Acquired by

tobii

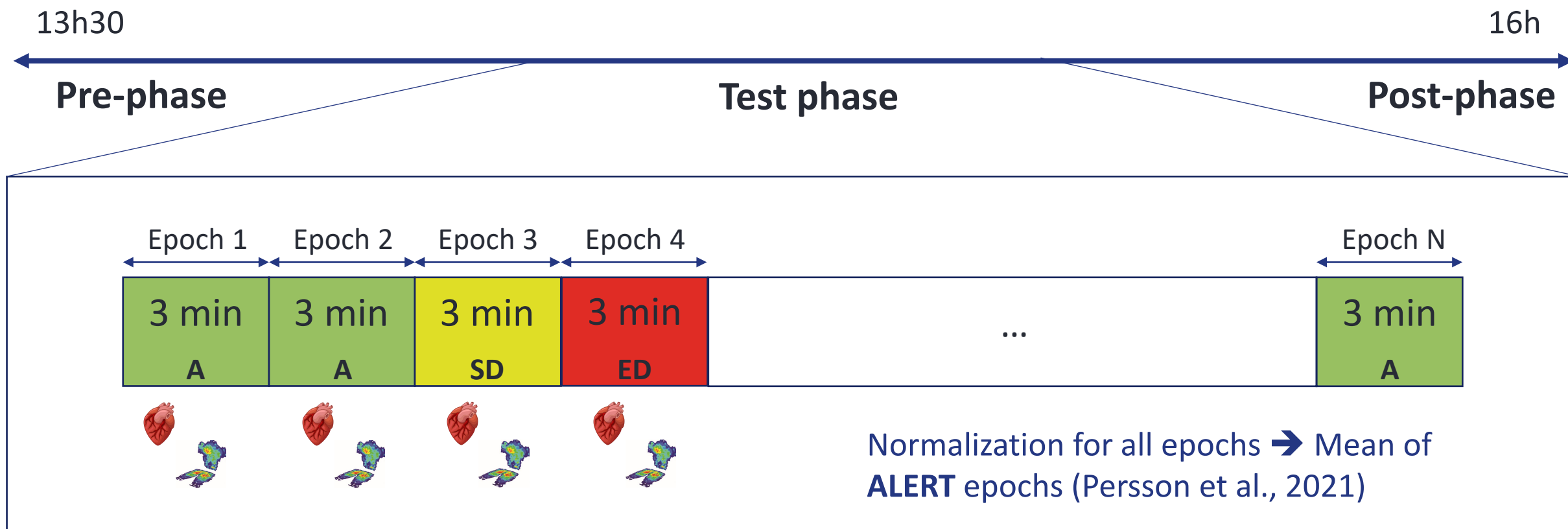


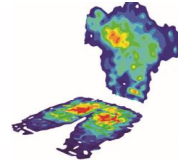
Mean of PERCLOS70 over the epoch

- **Percentage of Eye Closure (PERCLOS70) → GOLD STANDARD**
- Blinks (duration and frequency)
- Others ocular parameters

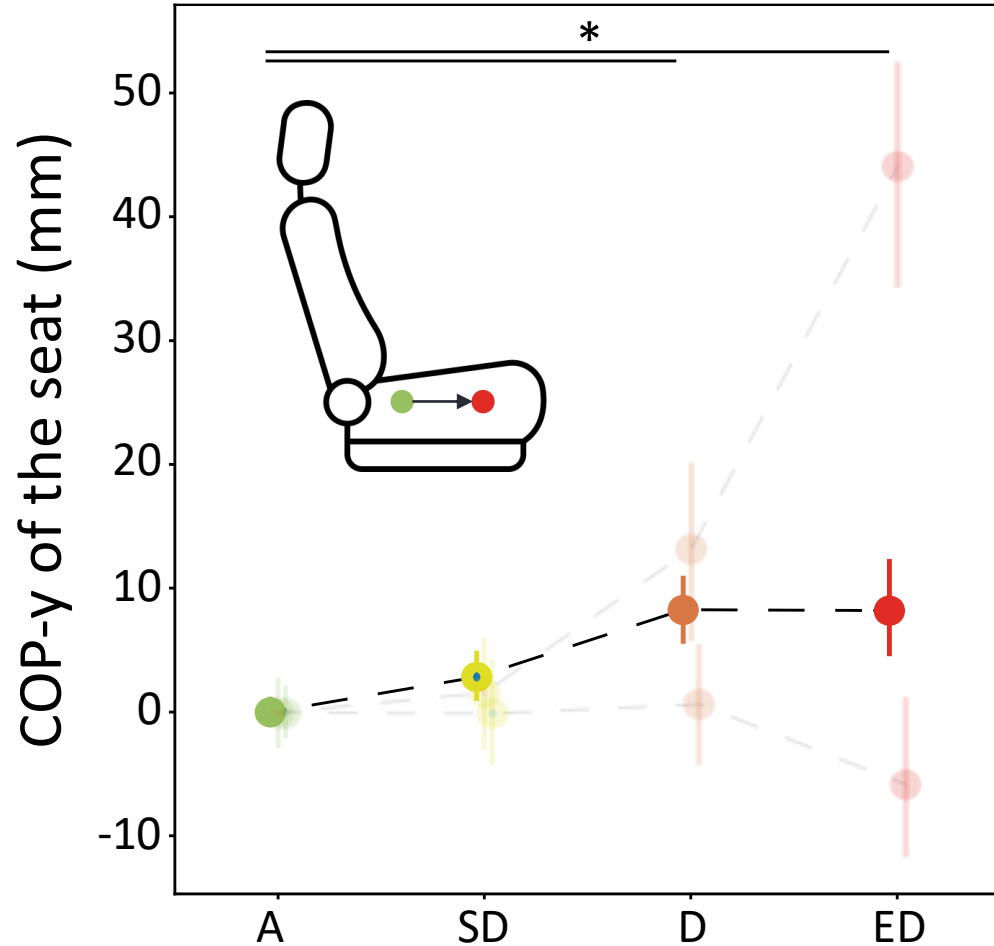
Based on Chang et al., 2022

# DATA SLICING AND NORMALIZATION

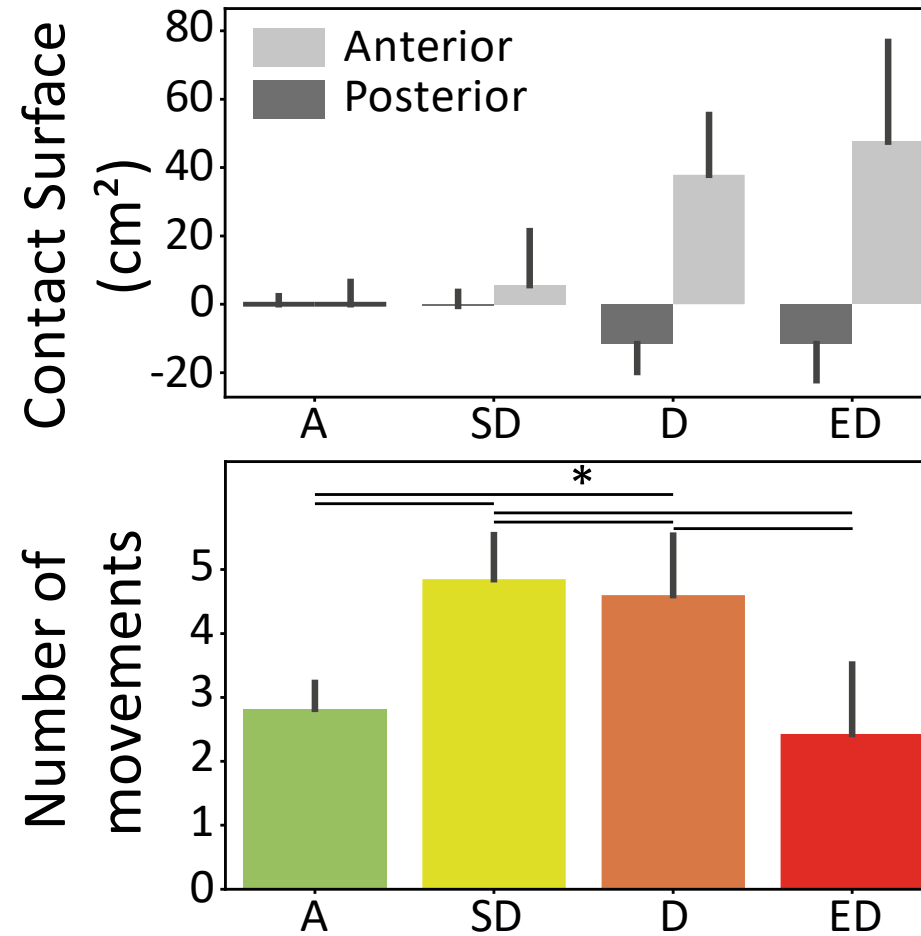




## SEAT FEATURES

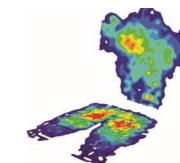


\* =  $p < 0,05$  Vertical bars = standard errors

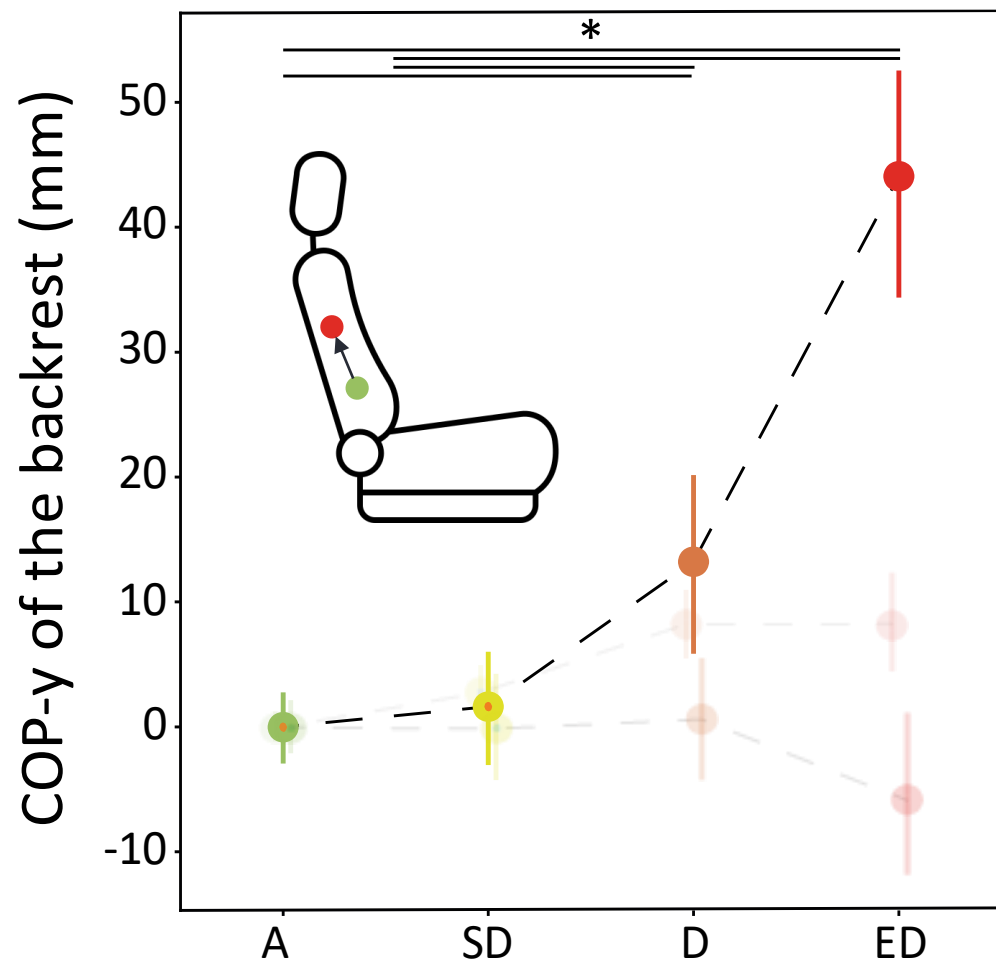


Shift of center of pressure in upper position

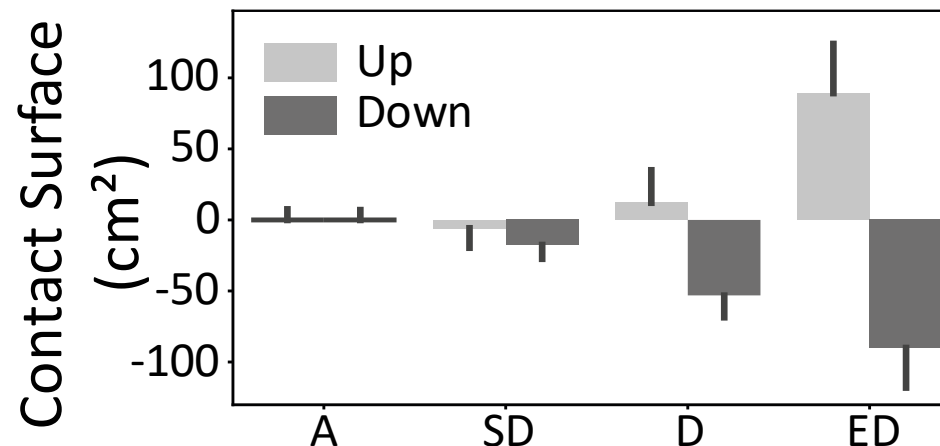
Inverted U-Shape between movements on seat and drowsy states



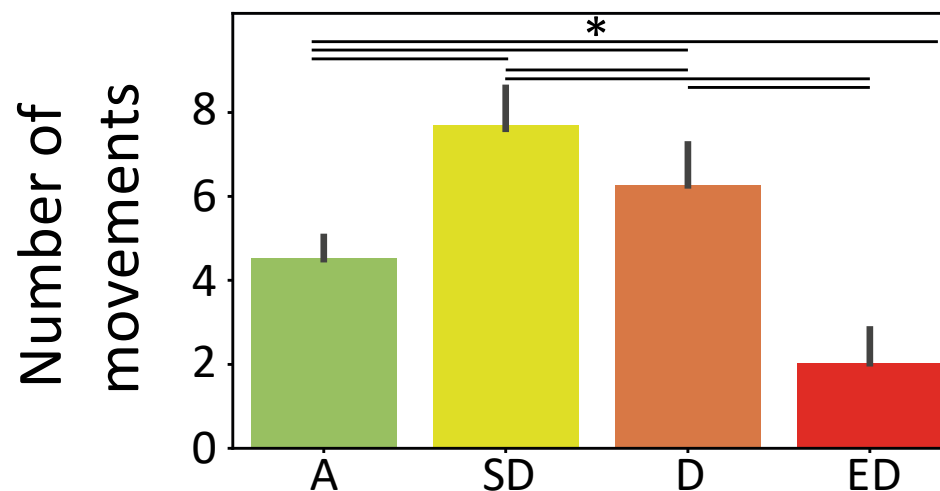
## BACKREST FEATURES



\* =  $p < 0,05$  Vertical bars = standard errors

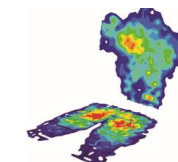


Shift of center of pressure in upper position

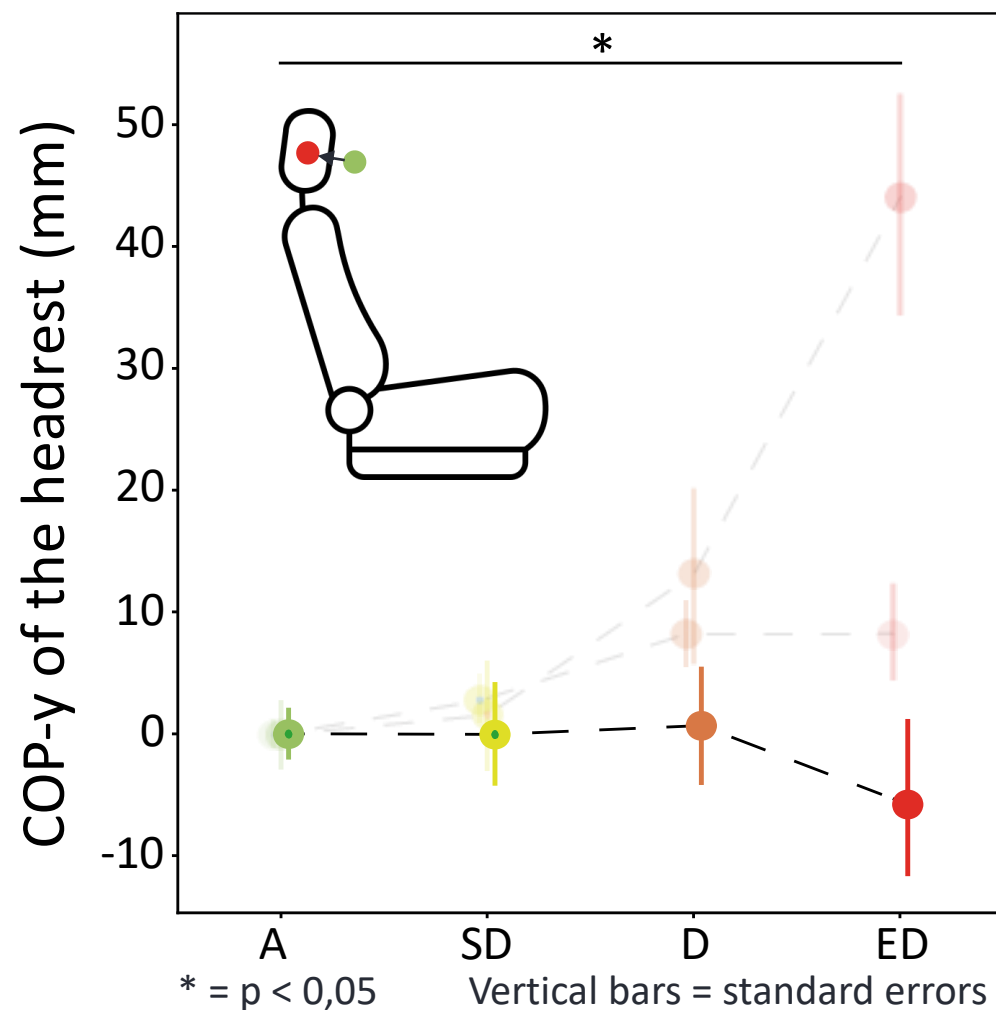


Inverted U-Shape between movements on backrest and drowsy states

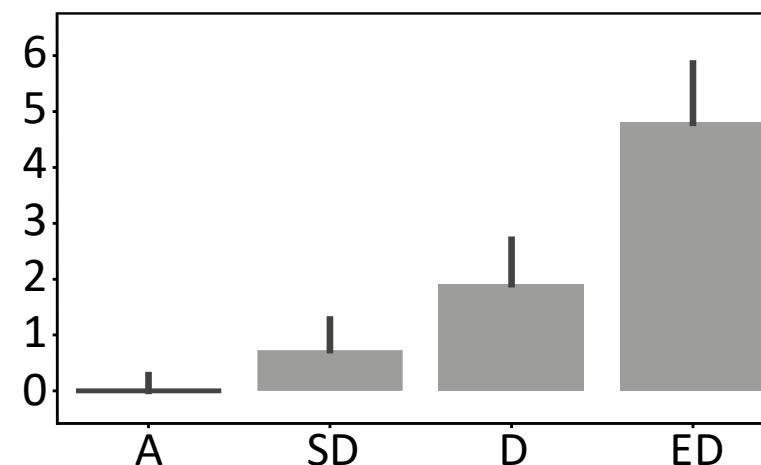




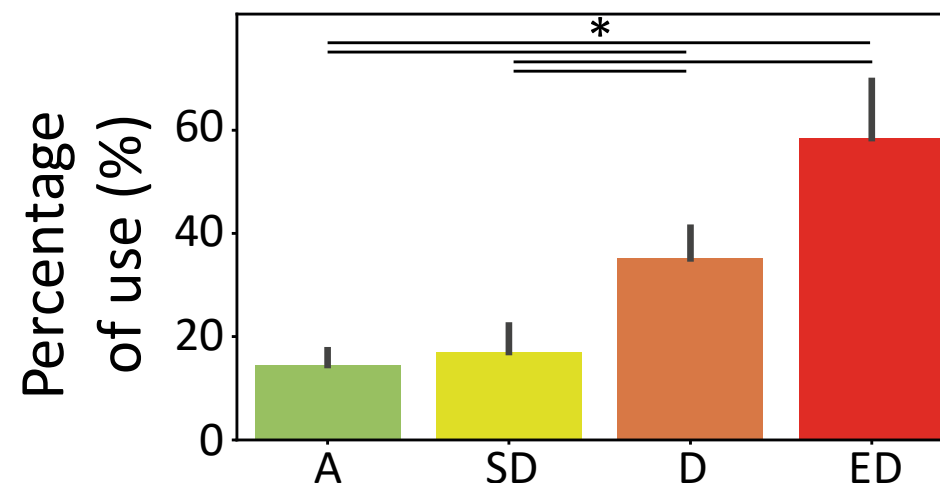
## HEADREST FEATURES



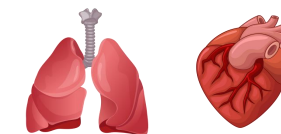
Contact Surface  
(cm<sup>2</sup>)



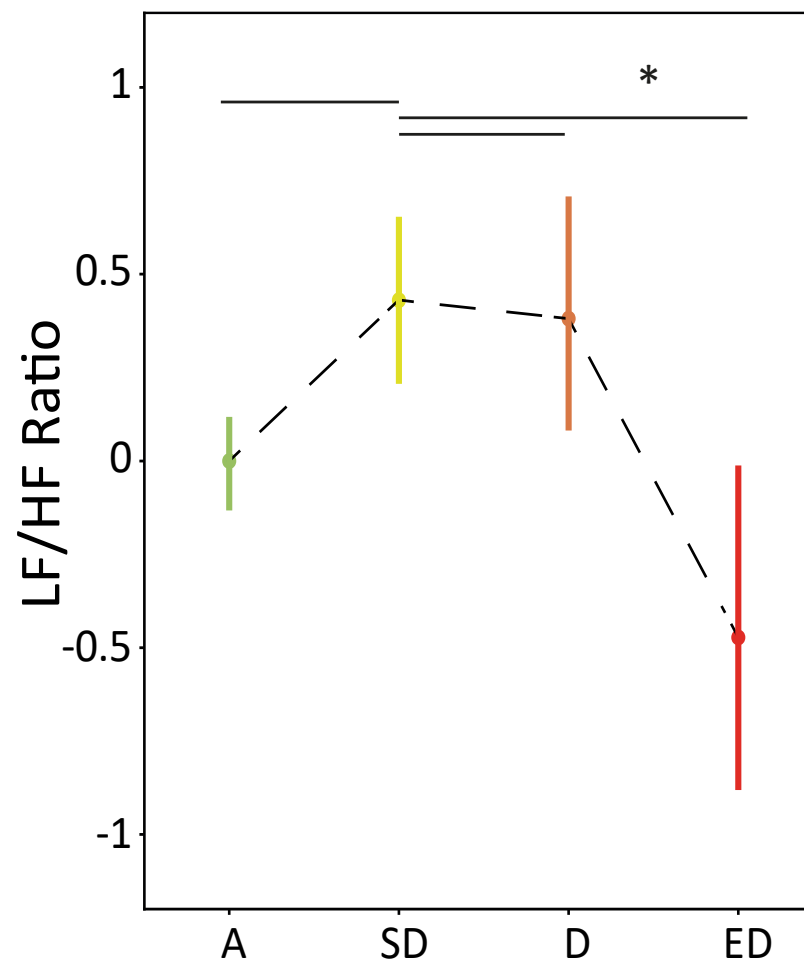
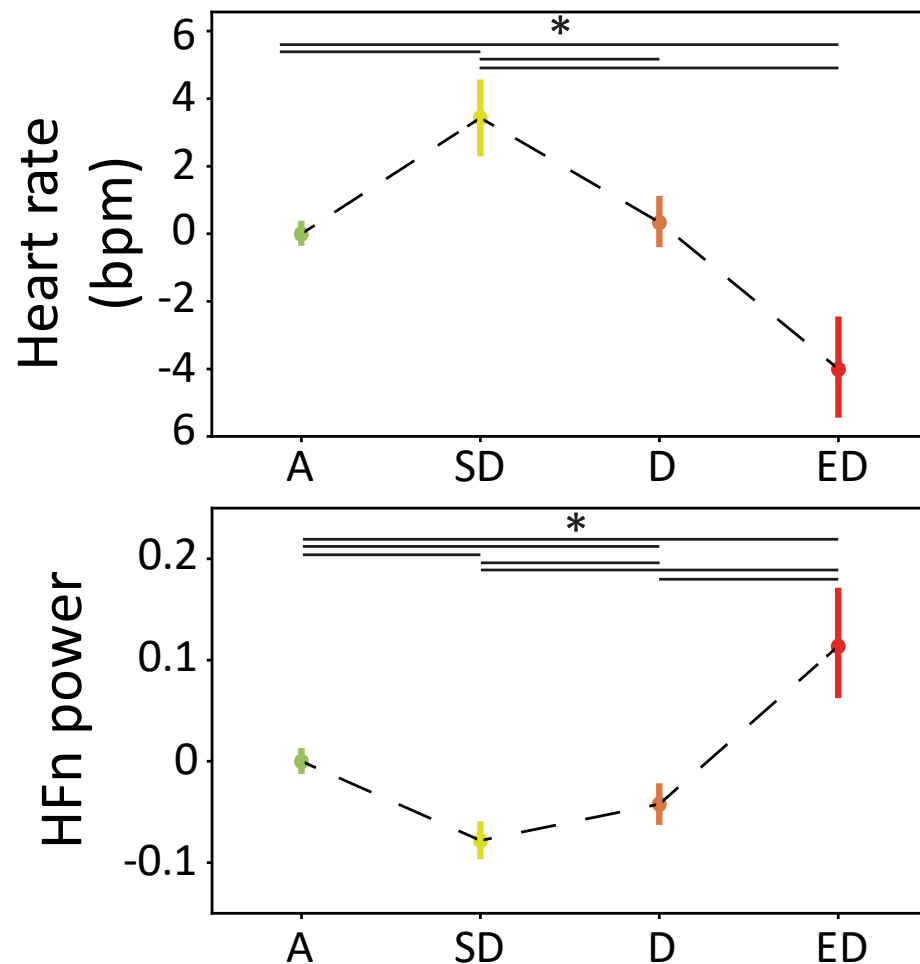
Increase of contact  
surface on  
headrest



Increase of  
percentage of time  
contact of  
headrest



## PHYSIOLOGICAL FEATURES



**U-Shape between HF Power and drowsy states**

**Inverted U-Shape between HR and LF/HF ratio and drowsy states**

\* =  $p < 0,05$  Vertical bars = standard errors

# DROWSINESS AT THE WHEELS

## Conclusions from our L2 study

### SLIGHTLY DROWSY

- ✓ Increase of number of movements with the emergence of drowsiness at the wheels
- ✓ Increase of heart rate and LF/HF Ratio → Decrease parasympathetic activity of the driver

**Struggle to stay awake ?**

### VERY DROWSY OR ASLEEP

- ✓ Decrease of number of movements
- ✓ Decrease of heart and LF/HF Ratio → Increase parasympathetic activity of the driver
- ✓ Sagging on the seat and use of the headrest more frequent

# IN A REAL WORLD ?

## Let's talk about other states

### DISTRACTED

- ✓ Impact cognitive load on physiological indicators (e.g. Hidalgo-Muñoz et al., 2019).
- ✓ Posture recognition for NDRTs (e.g. Zhao et al., 2021) and potentially associated movements (hypothesis)



### RELAXED

- ✓ No movements on the seat and the backrest (hypothesis)
- ✓ Physiological indicators of relaxed state different than in asleep state (e.g. Wörle et al., 2019)
- ✓ Relaxed non-driving posture → cue for prediction ?



# TAKE HOME MESSAGE

- **Postural** and **physiological** indicators could be **alternatives** to detect drowsiness at the wheels (even in **intermediates stages**) → Need a classifier validation
- **L2 mode** allows to characterize the **extreme state** of drowsiness at the wheels (which is limited in manual driving) → Need to better understand **the dynamic** of drowsiness in autonomous modes
- **Relevance** of indicators to **other states of inattention** (e.g. relaxed) ?

**THANK YOU FOR YOU ATTENTION !**  
**Questions ?**

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