

The version of record is available at <https://doi.org/10.1108/CI-02-2022-0040>. The full citation is as follows:  
Newton, S. (2022), "Measuring the perceptual, physiological and environmental factors that impact stress in the construction industry", *Construction Innovation*, Vol. ahead-of-print No. ahead-of-print.  
<https://doi.org/10.1108/CI-02-2022-0040>



**Measuring the perceptual, physiological and environmental factors that impact stress in the construction industry**

Journal:	<i>Construction Innovation: Information, Process, Management</i>
Manuscript ID	CI-02-2022-0040.R1
Manuscript Type:	Research Article
Keywords:	Biometric, Electrodermal Activity, Psychometric, Pulse Rate Variability, Stress, Anxiety

SCHOLARONE™  
Manuscripts

# Measuring the perceptual, physiological and environmental factors that impact stress in the construction industry.

## Abstract

**Purpose:** The aim of this study is to highlight and demonstrate how the study of stress and related responses in construction can best be measured and benchmarked effectively.

**Design/methodology/approach:** A range of perceptual and physiological measures are obtained across different time periods and during different activities in a fieldwork setting. Differences in the empirical results are analysed and implications for future studies of stress discussed.

**Findings:** Results strongly support the use of multiple psychometrics and biosensors whenever biometrics are included the study of stress. Perceptual, physiological and environmental factors are shown to all act in concert to impact stress. Strong conclusions on the potential drivers of stress should then only be considered when consistent results apply across multiple metrics, time periods and activities.

**Originality:** First study to focus explicitly on demonstrating the need for multiple research instruments and settings when studying stress or related conditions in construction.

**Research limitations/implications:** Stress is an incredibly complex condition. This study demonstrates why many current applications of biosensors to study stress in construction are not up to the task, and provides empirical evidence on how future studies can be significantly improved.

## 1 Introduction

### 1.1 Study objectives

The construction industry has long been associated with producing a stressful workplace – high-pressure project schedules, hazardous work environments, unhelpful social stigmas, and complex work practices (Campbell, 2006; Chan et al., 2020). The stress of construction work is not confined to the construction site. Stress is recognised as an issue across the construction industry, including for construction professionals, regulators, trainers and many others associated with construction work (Kamardeen, 2022). In various contexts, high levels of occupational stress have been shown to result in lower productivity, poor physical wellbeing, and a significant increase in work-related mental illnesses (Langdon and Sawang, 2018; Hagermoser Sanetti et al., 2020).

Traditionally, the primary means used to study stress in construction has relied on self-reported psychometric tests of perceived stress levels. Psychometric stress tests have certainly provided important insight into the causes, management and mitigation of stress in various aspects of construction (see for example, Love et al., 2010). Nevertheless, sole reliance on the subjective recall of self-reporting individual perceptions can introduce significant issues of misperception and the limitations of perceptual bias (Textor, 2019). Furthermore, as the aetiology of stress is better understood, a complex of factors, levels, characteristics and

1 modes has been associated with stress – a complex that current psychometric testing alone is  
2 often not able to differentiate (Crosswell and Lockwood, 2020).

3 Recent developments in the field of neuroscience and biometric sensor technologies have  
4 promoted the application of affordable biosensors to study the physiology of the stress  
5 response more directly and objectively (Jebelli et al., 2019). These biosensors are being  
6 applied increasingly to study stress responses in general (Sampson and Koh, 2020). There is  
7 also now a rapidly expanding literature that employs biosensors to study stress and related  
8 emotional and cognitive responses to risk, workload, fatigue, awareness, etc., in a variety of  
9 construction settings (Saedi et al., 2022). That trend is set to accelerate as biosensors become  
10 more generally accessible, and biometric data processing tools are improved. However,  
11 biosensors have their own attendant problems for the measurement of biomarkers in general,  
12 and for stress in particular (Samson and Koh, 2020). Stress is just one potential in a complex  
13 of physiological responses that can all register in very similar ways using common biosensor  
14 monitors – making it difficult to distinguish stress from various other factors, or to  
15 distinguish those other factors from each other (Geršak, 2020).

16 Significantly, stress responses are often (incorrectly) conflated with anxiety responses.  
17 Where stress is considered as an external trigger of emotional response, anxiety is a more  
18 persistent internal driver of emotion. Indeed, stress and anxiety are complementary aspects of  
19 the same stress/anxiety complex. This makes it extremely problematic to consider either in  
20 isolation from the other when measuring relevant biometrics (Bystritsky and Kronemyer,  
21 2014). Furthermore, an expansive range of personal and environmental factors are known to  
22 mediate how a particular individual, in a particular situation, manifests their biomarkers  
23 (Crosswell and Lockwood, 2020).

24 This study is motivated by the number of otherwise sound recent studies in construction  
25 that employ biosensors to study stress and related emotional responses, but fall short of  
26 incorporating the necessary combination of perceptual, physiological and environmental  
27 measures. It is all three of these factors, acting in concert, that influence stress. All three  
28 factors are therefore implicated in the measurement of stress and the various other emotional  
29 and cognitive responses increasingly being investigated with biosensor technologies (Jebelli  
30 et al., 2019; Chae et al., 2021). Nevertheless, there are construction studies that omit to  
31 sample (and thereby to account for) the emotional disposition of individual participants. For  
32 example, studies that do not undertake relevant psychometric testing of the participants  
33 (Hwang et al., 2016; Jeon and Cai, 2021; Nwaogu and Chan, 2021). There are construction  
34 studies that omit to measure the range of appropriate physiological biomarkers. For example,  
35 because they focus on a single metric (Choi et al., 2019; Chen and Tserng, 2022), measure at  
36 an insufficient sample rate (Jebelli et al., 2018), or for an insufficient period of time (Ke et  
37 al., 2021). There are construction studies that omit to provide an ecologically valid setting for  
38 the research. For example, because they rely on laboratory-based tests of site conditions (Jeon  
39 and Cai, 2021; Ke et al., 2021), or because they employ contrived or otherwise poorly  
40 simulated construction site and office settings (Jeon and Cai, 2021; Chae et al., 2021).

41 The purpose of this study is to demonstrate that both psychometric and biometric  
42 instruments are required, collectively, and applied in ecologically valid settings, to make  
43 adequate sense of the stress responses of individuals (and by implication other related  
44 emotional and cognitive responses). Further, that whenever multiple research instruments are  
45 applied to the same study, results are generally more nuanced. Particular care is then needed  
46 to ensure that conclusions are only drawn when consistent results across instruments are  
47 found.

48 The focus of the study is therefore on the extent to which the outcomes of a stress study  
49 can vary depending on the emotional disposition of the participants, the choice of biomarkers  
50 being measured, and environmental changes to the temporal and activity settings. That

1 variation is demonstrated using multiple psychometric and biometric measures across  
2 different time periods with different activities, compared between two participants in an  
3 identical fieldwork setting. The data is derived from a study of two construction management  
4 educators in a classroom (fieldwork) setting, team teaching across 3 days. Whilst each  
5 construction setting may be different, the primary consideration for this study is to show that  
6 quality data can be captured outside of the laboratory, in an ecologically valid (fieldwork)  
7 setting. The study demonstration then measures, analyses and compares a range of selected  
8 emotional and physiological biomarkers from two participants in the exact same situation,  
9 across time and in a variety of environmental settings. Discrepancies in the results highlight  
10 the potential variability between each metric and setting.

11 Previous studies of stress in the construction industry have sought to include a  
12 combination of perceptual, physiological and environmental factors (see, for example, Lee et  
13 al., 2017). However, this study is the first to incorporate such an extensive range of  
14 psychometric and biometric instruments, across time, and with markedly different activities.  
15 It is the first to focus explicitly on highlighting the need for multiple research instruments and  
16 settings when studying stress or other related emotional and cognitive responses in  
17 construction. This empirical demonstration of how perception, physiology and environmental  
18 factors act in concert, and should therefore all be represented and accounted for in the study  
19 of stress, is of particular significance given the accelerating application of biosensors to  
20 construction settings.

## 21 22 1.2 Stress and anxiety

23  
24 In general, stress is most often used as a term to represent the mental or emotional strain  
25 caused when an individual is unable to respond effectively to the challenges or adverse  
26 conditions being encountered (Fink, 2017). Stressful challenges or “stressors” are the  
27 discernible and discrete events or circumstances that can trigger a stress response. Stressors  
28 can vary by type (from physical to social to cognitive) and significance (from the mundane to  
29 the catastrophic). Different individuals may respond differently to the same stressor  
30 depending on how it presents (the duration, circumstance, how it is perceived, etc.).  
31 Significantly, stressors can manifest in a variety of forms, from acute or otherwise traumatic  
32 episodes of limited duration, as a single point individual life event, or as a chronic and more  
33 persistent disruption to the physiological steady-state (or ‘homeostasis’) over time (Crosswell  
34 and Lockwood, 2020). In this way, even otherwise relatively mundane, so-called “daily  
35 hassles” can accumulate over time, to overwhelm the capacity of an individual to respond  
36 effectively. A stressor is therefore anything that causes a biological or behavioural correction  
37 to the threat of a homeostasis imbalance (such anticipatory adaptation is called the ‘allostatic  
38 load’) (Samson and Koh, 2020).

39 The stress response of an individual depends on the physiological, cognitive, behavioural  
40 and emotional resources and options available to them before, during and after the exposure  
41 to stressors (Cohen et al., 2016). That dependency accounts for the manifest potential for  
42 stress to cause both serious physical and mental health issues, as the coping mechanisms  
43 themselves (the heightened allostatic load) can damage the very biological systems on which  
44 they depend (Epel et al., 2018). The stress responses also range across multiple levels (social,  
45 psychological, physiological, etc.) and involve several related but otherwise discrete  
46 biological systems. Collectively, this not only means that stress responses are complex and  
47 multifarious, but also renders them as rather amorphous and difficult to ‘locate’ in specific  
48 physiological systems. The diversity also demands a range of research instruments and  
49 multiple metrics in a variety of settings, are necessary to enable meaningful conclusions to be

1 drawn from studies of stress, stress-related behavioural reactions, or stress-related health  
2 outcomes (Crosswell and Lockwood, 2020).

3 Like stress, anxiety typically arises in response to a perceived environmental threat.  
4 Anxiety however comes primarily from the mental response to a fear and/or anticipation of  
5 the potential threat of an imminent or uncertain outcome (Julian, 2011). Anxiety, whilst  
6 prompted by environmental factors and manifested as allostatic load, is entirely more  
7 psychological in nature than is the case for stress. Nevertheless, the anxiety responses overlap  
8 and intertwine considerably with regular stress responses. The two sets of responses share the  
9 vast majority of significant response features and biomarkers, and indeed there is a reciprocal  
10 and dynamic relationship between stress and anxiety (Epel et al., 2018). Stress can lead to  
11 anxiety. Anxiety will condition stress. This cumulative and compounding relationship  
12 between stress and anxiety renders the independent measurement of stress even more  
13 intractable. It requires the factors associated with anxiety, and the problematic cognitive,  
14 affective and behavioural processing that accompanies anxiety, to be factored in to any  
15 consideration of stress (Bystrisky and Kronemyer, 2020). Further, the inseparable  
16 stress/anxiety complex is of particular significance to emerging biometric measurement,  
17 because similar neurobiological mechanisms (and thereby the same biomarkers) are  
18 implicated in both stress and anxiety responses (Geršak, 2020).

## 20 **2 Identifying meaningful measurement instruments**

### 22 *2.1 Identifying relevant psychometrics*

24 According to the prevailing transactional theories of emotions (Lazarus and Folkman  
25 1987), the experience of stress or anxiety involves an actual, physiological arousal  
26 (precipitated by stressors) in necessary combination with a cognitive appraisal (testing beliefs  
27 about the nature and cause of the arousal). To experience stress or anxiety a person must first  
28 perceive a situation or circumstance to 'be' stressful or anxious (Bystritsky and Kronemyer,  
29 2020). Thus, the measurement of perceptions is essential to the study of stress. The  
30 measurement of perceptions generally requires the construction and validation of assessment  
31 instruments such as interviews and questionnaires.

32 There is currently no universally recognised standard for stress or anxiety evaluation  
33 (Kim et al., 2018). However, multiple and various psychometric instruments have been  
34 developed and tested which have helped better clarify the important study dimensions and  
35 parameters of stress and anxiety (Fink, 2017). For example, both stress and anxiety (at least  
36 in general) are best considered to have two broad dimensions: state/phasic conditions, which  
37 reflect the presence and severity of current symptoms; and trait/tonic conditions, which  
38 reflect the generalised propensity of an individual towards stress and/or anxiety. Further, both  
39 stress and anxiety are heavily influenced by a variety of individual and situational factors  
40 (such as age, health, temperature, activity, and environmental distractions). There are also  
41 various forms of stress (acute, chronic, post-traumatic, etc.) and anxiety (social, specific  
42 phobias, panic attacks, obsessive compulsive disorders, etc), including generalised forms of  
43 both (Karatsoreos, 2018).

44 There is now an extensive array of established psychometric survey instruments  
45 developed specifically to measure perceived stress and anxiety in various contexts and with  
46 various demographics. Arguably the most widely used stress survey instrument is the  
47 Perceived Stress Scale (PSS), which measures generalised stress (Ribeiro Santiago et al.,  
48 2020). The typical PSS comprises 14 statements, each with a five-point response scale. The  
49 statements evaluate a two-factor structure of perceived stress (negative) and perceived coping  
50 (positive). Participants are asked about their feelings and thoughts during a specified period



1 (the past 24 hours, week, month or year, depending on the study purpose). In each question,  
2 the participant is asked how often they have felt or thought a certain way. The PSS score (the  
3 higher the value the higher the perceived level of stress) is calculated by summing the stress  
4 scores and subtracting the coping scores. Whilst the PSS remains the most widely used  
5 instrument, a recent validation study concluded that there were critical concerns with the  
6 validity of several questions; discouraged the combination of the stress and control sub-scores  
7 into a single PSS score; and identified measurement bias when scores for each question are  
8 weighted equally (Ribeiro Santiago et al., 2020). The findings would indicate that PSS  
9 requires further validation in other large sample general populations particular to other  
10 countries and cultures. However, at this stage the PSS remains the most robust measure of  
11 perceived general stress (Lee, 2012).

12 Anxiety also requires a raft of tailored questionnaire instruments to measure the many  
13 variations in diagnostic criteria and specific anxiety disorders (Julian, 2011). However, for  
14 generalised anxiety measurement the State–Trait Inventory of Cognitive and Somatic Anxiety  
15 (STICSA) is a commonly administered self-report instrument of increasing popularity (Grös  
16 et al., 2007). The STICSA consists of two identical, 21-item scales: a state scale that  
17 measures mood at that moment in time; and a trait scale that measures mood in general. The,  
18 21 items comprise two subscales: 10 items particular to cognition and how participants think  
19 about anxiety; and 11 items particular to somatic anxiety and how people feel about anxiety.  
20 Items are measured on a 4-point scale ranging from 1 (not at all) to 4 (very much so). A  
21 recent validity study of STICSA (Styck et al., 2020) highlighted potential convergence  
22 problems, but concluded that these correlations are inescapable in a multidimensional  
23 psychological construct. The use of STICSA may best be justified when applied to simply  
24 structured (more homogenous) populations (Styck et al., 2020).

25 Psychometrics offer important insight into the disposition of a study participant to stress  
26 and anxiety, because they sample the cognitive perceptions that test and determine how such  
27 arousals are processed. There are well-established psychometric instruments for measuring  
28 general stress and general anxiety in small populations. However, further development and  
29 extension of alternative instruments may be required when considering stress in specific,  
30 complex and/or large sample populations, or when more specific forms of anxiety are being  
31 studied.

## 32 2.2 Identifying relevant biometrics

33 Stress and anxiety responses are promoted through nearly every system of the body.  
34 However, two systems are most frequently used for measurement: the autonomic nervous  
35 system (ANS) and the hypothalamic-pituitary-adrenal (HPA) axis. The ANS is an involuntary  
36 and rapidly operating (sub-second timeframes) mechanism. It primarily regulates through two  
37 very distinct, often antagonistic but ultimately complementary pathways: the sympathetic  
38 nervous system (SNS), and the parasympathetic nervous system (PNS). The SNS actively  
39 promotes immediate change (increase) in response to a perceived threat or fear. The PNS  
40 actively seeks to calm responses and maintain resting functions over the longer term. The  
41 PNS can, however, respond immediately to suppress itself and thus enable the impact of the  
42 SNS to be less constrained and more impactful (Krebig and Gendolla, 2014).

43 The ANS activity is most often measured through associated changes in the heart rate  
44 (HR), heart rate variability (HRV), and pulse rate variability (PRV). Various biometric  
45 technologies are able to provide HR, HRV and/or PRV readings. PhotoPlethysmoGraphy  
46 (PPG) is often favoured because it provides a simple, single measure of the blood volume  
47 pulse (BVP) from which an accurate HR and PRV can be determined efficiently. Direct  
48 measurement of the HRV requires an Electrocardiogram (ECG) monitor, to record the

1 electrical signals of the heart. HRV is then considered the better measure of cardiac rhythm,  
2 and is often favoured in clinical studies of workplace stress (Järvelin-Pasanen et al., 2018).  
3 Whilst the issue lacks consensus (Mejía-Mejía et al., 2020a), PRV is often used as a surrogate  
4 for HRV. HRV/PRV is a common choice of biomarker in construction studies that employ  
5 biometrics (Lee et al., 2017; Nwaogu and Chan, 2021), and is generally preferred for the  
6 assessment of ANS responses more broadly (Mejía-Mejía et al., 2020b). In any event,  
7 HRV/PRV is ultimately more of a relative measure of an individual's capacity to respond  
8 effectively to stress and other ANS stimulations over time. It typically requires an individual  
9 baseline measure to be determined over a period of days, and even then, fluctuates constantly  
10 depending on multiple environmental factors and activity levels (Chalmers et al., 2022).

11 ANS activity is also increasingly measured by monitoring changes in ElectroDermal  
12 Activity (EDA). EDA provides a measure of the electrical resistance/conductance associated  
13 with skin sweat secretion. One involuntary consequence of the ANS being stimulated, is the  
14 tiny volumes of skin sweat secretion measured by EDA sensors. EDA is an increasingly  
15 popular measure of ANS responses because it is immediate, non-intrusive and can be  
16 monitored continuously using low-cost and stable devices. As with other biomarkers of ANS  
17 stimulation however, EDA requires a baseline measure for each individual to be established  
18 over several hours.

19 The HPA axis relies on a slower acting system of various chemical messengers  
20 (hormones) that travel through the bloodstream and induce specific functional responses from  
21 specific organs and tissues in the body. There are several important hormones involved in  
22 stress responses, but arguably the best direct indicator of HPA activity relevant to stress is  
23 Cortisol (Ali and Nater, 2020). This is because Cortisol is directly implicated in stress  
24 management, and Cortisol levels can be measured non-invasively in several readily-available  
25 bodily fluids (including sweat and saliva) (Samson and Koh, 2020).

26 Ultimately, managing both the ANS and HPA is the brain. Brain activity can also then  
27 offer a direct measurement of stress and anxiety responses. Brain activity during cognitive  
28 tasks is most typically monitored using fMRI (functional Magnetic Resonance Imaging)  
29 technologies. fMRI measures the changes in blood oxygenation and blood flows through the  
30 brain that occur in response to neural activity. However, fMRI has prohibitive limitations for  
31 the study of stress and anxiety specifically, due to the size and stress-inducing nature of the  
32 fMRI technologies themselves. fMRI testing is both loud and claustrophobic. Recent  
33 advances in non-invasive fNIRS (functional Near-Infrared Spectroscopy) measure secondary  
34 blood oxygenation and flow at the cortical surface. fNIRS offers a much-improved option  
35 over fMRI in terms of mobility and temporal resolution, making fNIRS the preferred  
36 technology for stress and anxiety measurement in ecologically valid (ie. fieldwork) settings  
37 (Quaresima and Ferrari, 2019).

38 Prior to fNIRS the most viable, and still the most popular, technology for mobile brain  
39 activity imaging is ElectroEncephaloGraphy (EEG). EEG measures the electrical activity of  
40 the brain directly, providing significantly more temporal resolution (milliseconds) than the  
41 fNIRS, but having the distinct disadvantage of introducing a substantial extent of signal noise  
42 artefacts. Significant signal noise artefacts can be introduced through nothing more than eye  
43 movement and other facial muscle activities, cardiac activity through blood pulses, and even  
44 the extrinsic environmental electrical activity of mobile phones, computers and other nearby  
45 electronic devices (Jiang et al., 2019). Signal noise artefacts are especially problematic when  
46 the EEG device only records a small number of channels – less than, say, 64 electrodes. It is  
47 noteworthy that the consumer-grade, wearable EEG devices typically being used by academic  
48 researchers currently (see for example, Jeon and Cai, 2021; Ke et al., 2021) are limited to just  
49 14 channels/electrodes. A recent assessment by Wexler and Thibault (2019) concluded that



1 such consumer-grade EEG devices do not record brain activity with sufficient validity or  
2 reliably to accurately reflect the mental states they claim to measure.

3 Biosensors are of growing interest to the study of stress and anxiety in construction  
4 because they offer a more objective measure of the relevant biomarkers. This means  
5 biosensors offer a critical complement to psychometric measurement. It does not mean that  
6 biosensors offer a valid alternative or stand-alone measurement for stress. In any event, there  
7 is no single biomarker for stress or anxiety. Multiple forms of biosensors, measuring multiple  
8 biometrics, are necessary to make sense of physiological responses to stress.

9 When considering the ANS response, the most promising biometric measures are  
10 provided by PPG and EDA biosensors. Alternatively, for HPA activity, Cortisol levels also  
11 provide an effective indicator. When considering brain activity more directly, fNIRS  
12 technology offers future promise. However, the use of many consumer-grade EEG devices is  
13 to be discouraged – at least until a significantly higher density of signals (minimum 64  
14 channels in general, and increasing to 125 channels when task specific placement of  
15 electrodes is not possible, Lau et al., 2012) and/or greatly improved signal quality is  
16 achieved.

### 17 3 Study Method

#### 18 3.1. Context and procedures

19 The aim of this study is to highlight and demonstrate how the study of stress and anxiety  
20 in construction can best be measured and benchmarked effectively. A demonstration study is  
21 presented to highlight the key characteristics for an effective study of stress: perceptual and  
22 physiology research instruments should be used in combination, and not independently;  
23 multiple psychometric and biometric measurements are necessary to make sense of the  
24 stress/anxiety complex; data collection must include a sufficient richness of data points,  
25 recorded over a sufficient timeframe, at sufficient density, and across a sufficient range of  
26 participant activities to warrant strong conclusions; and the stress study environment,  
27 especially for construction-related studies, heavily prioritises the ecological validity of  
28 relevant fieldwork settings over laboratory-based settings.

29 A range of perceptual and physiological research instruments are considered and  
30 incorporated into the study. Multiple psychometric and biometric measures are obtained. The  
31 range of metrics are collected across a variety of environmental settings, including at  
32 different times and during different activities. A fieldwork setting is selected for the study  
33 that is relevant to construction, noting that the focus of this study is to demonstrate the  
34 importance of ecological validity across fieldwork settings, not just for onsite construction  
35 work. Rather than having to deal with the full extremes of a construction site, the fieldwork  
36 setting selected is a construction management classroom. Clearly, the construction  
37 management classroom is not generally as dynamic as the construction site, but it can be  
38 considered directly equivalent to onsite training rooms or to many construction office  
39 settings. The overarching characteristic is that it is not a laboratory-based/contrived setting. It  
40 is a live, ecologically valid fieldwork setting, where the research instruments have to be  
41 straight-forward to administrate, robust, and unobtrusive to the participants.

42 Furthermore, the study explicitly does not seek to draw conclusions about the particular  
43 drivers of stress or how participants respond to stressors in a specific workplace context. It is  
44 not a study of stress of itself, but rather a study that seeks to demonstrate how stress can be  
45 measured effectively in a construction industry setting. For that reason, the number of study  
46 participants is far less significant than the number of metrics and the range of environmental  
47 factors included in the study. Indeed, limiting the number of participants to just two, enables  
48  
49  
50

1 a more explicit comparison of results between the participants. Having many more  
2 participants would allow for statistical comparisons of results, but the number of participants  
3 required to make significant statistical tests across so many variables and contexts would be  
4 prohibitive. This purpose and approach adopted for this study only requires two participants,  
5 each measured using the same range of metrics, for the periods of time, with the same  
6 activities, in the same fieldwork setting.

7 We present a combination of representative psychometric and biometric measures for  
8 two Australian university teachers during a shared, face-to-face, block-teaching assignment,  
9 teaching a first-year subject in the Master of Integrated Project Delivery study program at a  
10 university in Hong Kong. The teaching block extended over 3 consecutive days (consisting of  
11 recorded teaching periods 09:15-16:40, day 1; 08:15-15:35, day 2; and 09:10-12:35, day 3),  
12 to a consistent class cohort of 30 local and mainland Chinese graduate students. Teacher A is  
13 a male academic with 40 years teaching experience and a specialisation in construction  
14 management. Teacher B is a male academic with, 25 years teaching experience (10 years  
15 younger in age than Teacher A) and a specialisation in digital architecture. Neither participant  
16 had any known underlying medical conditions that would influence PPG or EDA  
17 measurements. Both participants had taught the same subject together, in the same location,  
18 on two previous occasions. This was the first occasion the teachers had taught/met this  
19 particular cohort of students.

20 Immediately prior to the teaching assignment, both teachers completed a Perceived  
21 Stress Scale (PSS) and State–Trait Inventory of Cognitive and Somatic Anxiety (STICSA)  
22 survey instrument to establish the underlying levels of general stress and both the immediate  
23 and underlying levels of general anxiety.

24 The PSS is a 14-item self-report instrument composed of 7 items to measure Perceived  
25 Stress and 7 items to measure Perceived Coping. The same instrument can be configured to  
26 test responses for a variety of timeframes, from the previous day, to the previous year. In this  
27 study the longer term, underlying (trait/tonic) perception of stress over the previous year is  
28 used to determine the baseline level of stress for each participant. Each survey item then  
29 comprises a statement that always begins with “How often during the last year have you...”  
30 and then expresses either a potential stress (“...been upset because of something that  
31 happened unexpectedly?”) or a potential coping (“...dealt successfully with irritating life  
32 hassles?”). The PSS uses a 5-point scoring scale ranging from “Never (0)”, to “Very often  
33 (4)”. The Perceived Coping scores are reversed and summed with the Perceived Stress scores  
34 to determine an overall PSS score. This gives a potential overall PSS score in the range of 0  
35 (very low) to 56 (very high) levels of perceived stress.

36 The STICSA is a, 21-item self-report instrument composed of 10 items to measure  
37 cognitive symptoms (thinking) and 11 items to measure somatic symptoms (physical  
38 sensations) of general anxiety. The same instrument is used separately to rate how each  
39 participant perceives their level of anxiety at that moment in time (the State measure), and in  
40 general (the Trait measure). Each item comprises a statement (“I think that others won’t  
41 approve of me”, “My muscles are tense”, etc.) on a 4-point ordinal scale. The scale for State  
42 and Trait scores range from “not at all/almost never at all (1)” to “very much so/almost  
43 always (4)”. A study by Van Dam et al., (2011) indicated that an overall STICSA score of 40  
44 offers an effective cut-off measure for clinical anxiety. Sub-scores of, 23 and 18 were the  
45 indicative cut-offs for Cognitive and Somatic measures respectively. Van Dam et al., (2011)  
46 also found that the overall Trait score, rather than overall State score, offers the most  
47 effective measure of general anxiety.

48 Prior to each teaching day, a biometric wristband (the Empatica E4:  
49 [www.empatica.com/research/e4/](http://www.empatica.com/research/e4/)) was placed on the non-dominant arm of each teacher. The  
50 Empatica E4 is equipped with a range of medical-grade sensors selected to gather high

1 frequency, high quality data. It combines PPG and EDA sensors, along with a 3-axis  
2 accelerometer to capture movement, an infrared thermopile to record peripheral skin  
3 temperature, and a high-accuracy internal real-time clock for efficient synchronisation. The  
4 wristband records the raw data from each participant for each session to the local device for  
5 later export and analysis. Wearing the biometric wristband all day, each day over a 3-day  
6 period, provided a critical workload baseline for the study (Chen and Tserng, 2021).

7 The fieldwork teaching space utilised a 'horseshoe' style-seating arrangement as an  
8 effective way of increasing dynamic interaction between the lecturer and students. A discrete  
9 (115mm x 48mm x, 28mm) 360 degree, 5.7K (5760\*2880) resolution, 30fps video camera  
10 (the Insta360 OneX: [www.insta360.com/product/insta360-onex/](http://www.insta360.com/product/insta360-onex/)) was placed to the front, side  
11 of the main lecture presentation area, with direct registration of the lecturer presentations, the  
12 student reactions, and a wall-mounted time-clock for reference. The camera records in MP4  
13 format and saves directly to an on-board, 256 GB MicroSD Card. Whilst the Insta360 OneX  
14 does record sound, to ensure good quality audio rendition, a separate recording was made  
15 using a portable high-quality field recorder (the Zoom H4N Pro:  
16 <https://zoomcorp.com/en/jp/handy-recorders/handheld-recorders/h4n-pro/>) using the built-in  
17 X/Y stereo microphones. The device supports, 24-bit/96 kHz audio in BWF-compliant WAV  
18 format, and saves directly to an on-board 32 GB MicroSD Card. The video and audio  
19 recordings ensured precise synchronisation of the activities/behaviour of the participants with  
20 their biometric monitoring devices was achieved.

21 The fieldwork activities comprised a series of different teaching modes/situations across  
22 the 3-day teaching block: individual lecture (involving one or other of the two teacher  
23 participants presenting to the class); collaborative lecture (involving both participants actively  
24 presenting to the class at the same time); student group presentations (presented by each  
25 group of 6 students to the rest of the class, and assessed live in-class by both participants);  
26 interactive class discussion (between both teacher participants and the entire student cohort);  
27 student groupwork (in-class group activities supervised informally by both participants); and  
28 meal break (taken by teachers and students communally, inside the teaching space). The two  
29 participants were both present in the same teaching space for the entire duration of the study.  
30 A breakdown of the timings of the different teaching modes over the entire teaching block,  
31 determined from the video/audio recordings, is presented in Figure I.

32  
33 PLACE FIGURE I HERE

34  
35 Figure I: The sequence of teaching activities across the 2.5-day block presented in 1-minute  
36 intervals

### 37 38 3.2 Data processing

39  
40 The 14 item PSS survey responses for each participant were divided into Perceived  
41 Stress and Perceived Coping subscales following the procedures specified in Ribeiro  
42 Santiago et al. (2020). The Perceived Coping score is obtained by reversing the scores (0=4,  
43 1=3, 2=2, etc.) on the seven positive items and summing. Total PSS is then summed across  
44 all 14 items. Whilst conversion tables are recommended to adjust total scores for  
45 measurement bias when comparing between population groups (Ribeiro Santiago et al.,  
46 2020), no adjustment has been made in this instance given identical and very minor  
47 adjustments would apply. To provide some context, each score total is also expressed as a  
48 percentage of the maximum score possible.

49 The STICSA survey responses for each participant were separated into state and trait  
50 responses, and divided between the cognitive and somatic factors following the procedures

1 specified in Grös et al. (2007). For each factor the scores for relevant items are summed. The  
2 total scores for state and trait responses are then simply summed again for comparison  
3 purposes.

4 The Empatica E4 uses a PPG sensor to measure variation in blood volume as it passes to  
5 and from the hand with each heartbeat. The BVP is sampled at 64 Hz. Software within the  
6 device then identifies peaks in this signal and records realistic temporal distances (more than  
7 0.3 and less than, 2.0s) between these peaks as inter-beat intervals (IBI's). Using a moving  
8 10-s window, HR is then averaged from the inter-beat intervals to remove most of the serious  
9 motion artefacts in the raw PPG signal. The resulting 1 Hz (or every second) heart rate mean  
10 value is then time-stamped and downloaded as a .csv file for analysis. The raw data is then  
11 down-sampled to provide an individual mean HR for each minute of the recordings. Each  
12 minute of the recording is then tagged with the appropriate activity (teaching mode) label,  
13 derived from the breakdown of the timings of the different teaching modes presented in  
14 Figure I. The mean and standard deviation for the HR is then calculated particular to each  
15 teaching mode across all periods.

16 Similarly, the realistic IBI's are individually tagged with the appropriate activity  
17 (teaching mode) label, derived from the breakdown of the timings of the different teaching  
18 modes presented in Figure I. The collected IBI's for each period and activity are then post-  
19 processed to determine the respective PRV using a standard Root Mean Square of Successive  
20 Differences (RMSSD) method. The mean for the PRV RMSSD is then calculated particular  
21 to each teaching mode across all periods. To render changes in the PRV more apparent, and  
22 recognise that individuals may have very different baseline values, only the overall PRV  
23 results are presented in absolute values. All other PRV values are presented as a % of that  
24 participant baseline value overall.

25 To demonstrate the potential scale of impact that the circadian cycle can have on  
26 biometric measures of stress and anxiety (Scheer et al., 2019), the mean value for the HR and  
27 PRV is calculated for combined activities (excluding meal-breaks), separated between AM  
28 and PM activities. To investigate the potential scale of impact that familiarity and repetition  
29 might have, the mean value for the HR and PRV are also calculated for combined activities  
30 (excluding meal-breaks), separated between Day 1, Day 2 and Day 3. Finally, to compare  
31 overall values, the mean for the HR and PRV are calculated for combined activities  
32 (excluding meal-breaks), totalled across all 3 days of activities.

33 The Empatica E4 measures EDA by passing a miniscule electrical current between two  
34 electrodes in contact with the skin, and recording the electrical conductance in microSiemens  
35 ( $\mu\text{S}$ ). Raw data from the EDA sensor is sampled at 4Hz, time-stamped and downloaded as a  
36 .csv file for analysis. The raw data from the Empatica E4 is then processed in LedaLab  
37 (ledalab.de/), a Matlab-based software licensed under the GNU General Public License. The  
38 raw data is pre-processed in LedaLab using adaptive smoothing and automatic artefact  
39 correction. Continuous Decomposition Analysis (CDA) is then performed to decompose the  
40 pre-processed data into continuous signals of phasic and tonic activity, as recommended by  
41 Benedek and Kaernbach (2010). The phasic component of each dataset is extracted to  
42 indicate event-based arousal. Based on a standard trough-to-peak (TTP) or min-max analysis,  
43 LedaLab exports a listing of all significant skin conductance response (SCR) amplitudes  
44 (measured in  $\mu\text{S}$ ) with a corresponding time of onset. Thus, for each significant phasic  
45 component, the amplitude (size) of the response and the point in time (nearest second) when  
46 the response occurs are both known.

47 The start and end time (nearest second) for each different teaching mode activity is  
48 determined from the sequence of teaching activities presented in Figure I. Using the start/end  
49 times as cut-off points, the list of phasic components is blocked into separate periods  
50 particular to each teaching mode. The mean amplitude for each block, along with a count of



the number of phasic components/events in total for each block, is then calculated. Dividing the total number of events for each block by its duration, the rate of phasic events per minute is determined. The mean amplitude value provides a measure of the relative scale of the SCR for each teaching mode (the size of the response). The rate of events per minute provides a measure of the relative frequency of phasic events for each teaching mode (the frequency of response).

#### 4 Results

A summary of the PSS and STICSA measures that characterise the stress and anxiety levels of the two participants is provided in Table I.

Both participants report relatively low levels of stress overall (Teacher A = 12; Teacher B = 14), considering that the mean overall PSS score for Australian males is, 23-24 (Ribeiro Santiago et al., 2020). This low level of overall PSS is due in large part to the high levels of perceived coping reported by both participants (Teacher A =, 26; Teacher B =, 23). Teacher A has the slightly higher level of perceived stress, but this is offset by a significantly high level of perceived coping. Thus, Teacher B has the slightly higher overall self-reported level of underlying stress (PSS score). However, to some degree this single rating disguises a more complex set of results between the participants.

Both individual teachers generally self-report medium levels of anxiety in total State and total Trait score terms (given the possible range for either score is, 21 to 84 with a clinical cut-off at 40). For Teacher A, the Cognitive to Somatic comparison is similar across both State and Trait scores, although total State anxiety is markedly higher than total Trait anxiety. For Teacher B, the Cognitive to Somatic comparison is almost exactly reversed between the State scores and the Trait scores. Thus, both participants have elevated levels of State Somatic anxiety - close to the indicative cut-off score of 18 (Van Dam et al., 2011). Focussing on the overall Trait score, offering the most effective measure of general anxiety, Teacher B has the slightly higher level of self-reported anxiety, and most particularly in Trait Cognitive terms. Once again, however, the underlying data is more nuanced.

Table I: Psychometric comparison of prevailing teacher self-reported stress and anxiety

PLACE TABLE I HERE

A summary of the mean values determined for the HR, PRV(%) (relative to individual overall baseline), EDA, Amplitude and Rate (frequency) of events for both participants, is provided in Figure II. Results are provided across the entire teaching block (Overall); individually for each day (Day 1, Day 2, Day 3); split between morning and afternoon (AM, PM); and individually for each teaching mode (Lecture\_Self, Lecture\_Other, Lecture\_Both, Student\_Presentation, Student\_Interaction, Student\_Groupwork, Meal\_Break). To summarise results, the ranking of each value in Figure II is shading-coded between the relative best (white), middle (light shading) and worst (dark shading) result values within each metric, across teaching periods and across teaching modes. The results Overall are compared and shading-coded between participants. All other results are compared and shading-coded particular to each participant.

The HR means for each participant are markedly different. Teacher A has a significantly lower/better (shaded white) mean HR overall (84bpm) than Teacher B (110bpm). The lower HR overall for Teacher A is reflected in lower HR for each day, for am and pm, and for each teaching mode. The HR for both participants reduces from Day 1 to Day 3 (87, 83, 80bpm for Teacher A; 118, 107, 99bpm for Teacher B). Where the HR for Teacher A increases slightly

1 from am to pm (84 to 85bpm), the HR for Teacher B falls from am to pm (113 to 107bpm).  
 2 The highest/worst (shaded dark) HR means for Teacher A are for Lecture\_Self (93bpm) and  
 3 Lecture\_Both (88bpm); middle (shaded light) HR means are for Student\_Interaction,  
 4 Student\_Groupwork and Meal\_Break (84, 84 and 83bpm respectively); and the lowest/best  
 5 (shaded white) HR means are for Lecture\_Other and Student\_Presentation (80 and 77bpm  
 6 respectively). This is in contrast to Teacher B, where the worst HR means are for  
 7 Lecture\_Other (121bpm) and Student\_Interaction (118bpm); middle HR means are for  
 8 Lecture\_Both, Student\_Presentation, Student\_Groupwork and Meal\_Break (112, 108, 109  
 9 and 109bpm respectively); and the best HR mean is clearly for Lecture\_Self (103bpm).

10 In contrast, it is higher PRV(%) values that generally indicate a more resilient stress  
 11 response. Thus, Teacher A has a significantly lower (worst) mean absolute PRV overall  
 12 (0.005) than Teacher B (0.020), which is the exact opposite of the respective HR results. The  
 13 breakdown and cross-participant comparison of the mean PRV(%) values is then rather  
 14 variable across periods and activities, and when compared to respective HR values. Where  
 15 the PVR(%) for Teacher A declines from Day1 to Day 3 (142, 85, 85), the PVR(%) for  
 16 Teacher B improves over the same period (65, 113, 131). For Teacher A this is in contrast to  
 17 the equivalent HR relationship, where the HR relationship remains consistent for Teacher B.  
 18 Where the PVR(%) for Teacher A remains steady from am to pm (at 100), the PVR(%) for  
 19 Teacher B improves from am to pm (89.20 to 107.70). This largely follows the relative HR  
 20 values for both participants. Conversely, there is no consistent comparison apparent between  
 21 the HR and PVR(%) results for the different teaching modes, for either participant. For  
 22 example, for Lecture\_Self, Teacher A goes from worst HR to best PVR(%), whereas Teacher  
 23 B goes from best HR to middle PVR(%). Contrast that again with Student\_Interaction, where  
 24 there is no change in relative value between HR and PVR(%), for either participant.

25 The EDA, phasic Amplitude and Rate of events are generally more consistent within  
 26 each participant, but by no means identical. For the overall means, the relative EDA, Amp  
 27 and Rate correspond to the relative absolute PVR, and contrasts with the HR for both  
 28 participants. From Day 1 to Day 3, for Teacher A, the EDA, Amp and Rate are broadly  
 29 consistent with the HR but contrast with the PVR(%). From Day 1 to Day 3, for Teacher B,  
 30 the EDA, Amp and Rate contrast with both HR and PVR(%). There is more consistency  
 31 across all metrics for relative am and pm mean values, but the relative values for Teacher A  
 32 contrast entirely with Teacher B.

33  
 34 PLACE FIGURE II HERE

35  
 36 Figure II: Comparison of highest, middle and lowest values, shading-coded.

37  
 38 For Lecture\_Both and Student\_Groupwork activities, between both participants there is  
 39 general consistency in relative values across all metrics. For Lecture\_Self and  
 40 Student\_Interaction activities, between both participants there is general variation in relative  
 41 values across all metrics. For Lecture\_Other and Student\_Presentation activities, for Teacher  
 42 A there is some consistency across all metrics, but for Teacher B more variation. For the  
 43 Meal\_Break activity, this time there is some consistency across all metrics for Teacher B, but  
 44 for Teacher A some variation.

45 To further summarise the relative values across all metrics for each period and activity in  
 46 Figure II, a Total column for each participant has been added and shading-coded. The Total  
 47 calculation counts 3 points for the best ranking, 2 points for the middle ranking and 1 point  
 48 for the lowest ranking across each metric. On that basis, the best overall ranking would score  
 49  $5 \times 3 = 15$  points, the worst  $5 \times 1 = 5$  points, and the middle rankings would score between 9  
 50 and 11 points.



1  
2  
3 1 Once again, there are periods and activities where both participants rank equal, slightly  
4 2 different and entirely opposite. According to the Totals calculated in this way, Teacher A  
5 3 becomes less stressful from Day 1 to Day 3, where Teacher B becomes less stressed on Day 2  
6 4 and more stressed again on Day 3. Where Teacher A becomes considerably more stressed  
7 5 from morning to afternoon, Teacher B becomes very much less stressed over the same period.  
8 6 Both participants are most stressed when both are lecturing at the same time (Lecture\_Both).  
9 7 Teacher A is least stressed when Teacher B is lecturing (Lecture\_Other) or students are  
10 8 presenting (Student\_Presentation). Teacher B is least stressed overall during the Meal\_Break.  
11 9 The Total rankings are consistent across both participants for Lecture\_Self, Lecture\_Both,  
12 10 Student\_Interaction, and Student\_Groupwork.  
13 11

## 12 12 5 Discussion

13 14  
14 15 The results of the psychometric instruments administered in this study indicate a close  
15 16 relationship between perceived stress and perceived anxiety. On both key criteria (overall  
16 17 PSS and Trait-Cognitive STICSA) Teacher B self-reports higher levels of stress and anxiety  
17 18 than Teacher A. Notwithstanding, there is sufficient variation in the composition of the stress  
18 19 and anxiety results from both participants to suggest the key criteria have a more nuanced  
19 20 relationship to each other. The key criteria are potentially impacted by: the extent to which  
20 21 higher levels of anxiety compound the level of stress; the extent to which higher levels of  
21 22 stress compound the level of anxiety; the significance of the high level of perceived coping  
22 23 with stress reported by Teacher A, in offsetting the otherwise high level of perceived stress;  
23 24 the potential influence of a higher State anxiety reported by Teacher A; the potential  
24 25 balancing impact of State versus Trait STICSA for both participants; and the potential  
25 26 differences in results if the more generalised stress and anxiety tests were replaced with tests  
26 27 more specific to the stress and anxiety directly associated with teaching (there are tests more  
27 28 specific to public speaking anxiety, for example).  
28 29

29 30 On that basis, neither key criteria can be taken as a surrogate for the other. Separate  
30 31 survey instruments for stress and for anxiety are required if sense is to be made of either.  
31 32 Furthermore, even when the two key criteria provide matching results, as demonstrated in  
32 33 this study, the underlying nature of stress and anxiety creates a complex interaction. Such  
33 34 complex interactions also call for multiple psychometric instruments to be administered to  
34 35 record perceived stress and perceived anxiety across multiple metrics.  
35 36

36 37 The higher levels of perceived stress and anxiety self-reported by Teacher B are  
37 38 supported by the biometric measures of overall HR. The overall mean HR for Teacher B is  
38 39 significantly higher than that for Teacher A. Indeed, the mean HR for Teacher B is  
39 40 consistently higher than that for Teacher A for every teaching period and every teaching  
40 41 activity. If nothing more than the key psychometric criteria and overall mean HR results is  
41 42 considered, then a strong conclusion would be that Teacher B experiences significantly  
42 43 higher stress when teaching than Teacher A.  
43 44

44 45 Contrast that conclusion with the overall mean values measured by PRV, EDA, Phasic  
45 46 Amplitude and/or Phasic Rate. It has been argued that these alternative biometrics provide a  
46 47 more accurate measure of stress than HR, and a more objective measure than the  
47 48 psychometric surveys (Kazar and Comu, 2022). If nothing more than the overall mean values  
48 49 for PRV, EDA, Phasic Amplitude and/or Phasic Rate are considered, then the strong  
49 50 conclusion would be that it is Teacher A who experiences significantly greater stress than  
50 51 Teacher B. Potentially, two utterly contrasting conclusions depending on which metrics are  
51 52 privileged.  
52 53

53 54 Just as the psychometric measures require multiple psychometric instruments across  
54 55 multiple metrics to be considered, so also do the measures of physiology require multiple  
55 56  
56 57  
57 58  
58 59  
59 60

1 biometrics to be considered. Indeed, adding further biometric measures such as Cortisol  
2 levels and perhaps fNIRS to the analysis would each add to the robustness of any consistent  
3 findings. Similarly, including analysis of the tonic component of the EDA and application of  
4 alternative decomposition and optimisation protocols to the raw EDA data might also reveal  
5 the sensitivity of any conclusions to such choices.

6 It is also worth noting that these contrasting conclusions only hold in either case, when  
7 the mean values overall (across all 3 days of the study) are considered. It is apparent that the  
8 conclusions drawn from the results of each individual biometric can change substantially,  
9 depending on whether values are taken from Day 1, Day 2, Day 3, am or pm. This study  
10 demonstrates that these various time periods can play a significant role in determining stress  
11 levels. Similarly, each different activity and each participant introduces a further nuance to  
12 how the results could/should be interpreted. Thus, the study also illustrates why the activities  
13 of participants is an important factor to incorporate and consider in determining stress levels.

14 The study results are discussed in the context of how emerging biosensor technologies  
15 can be applied most effectively to the study of stress in a construction industry setting. It does  
16 not seek, of itself, to draw firm conclusions about the levels or drivers of stress per se. Rather,  
17 the purpose is to highlight how variable the results can be using different research  
18 instruments, across multiple metrics, with different participants, engaged in different  
19 activities, at different times. That is not to say that all results are therefore random or  
20 inconclusive. On the contrary, the variability demonstrated promotes the need for multiple  
21 metrics, where robust conclusions should only be drawn when results are consistent across  
22 those multiple psychometric and biometric measures, and in various environmental settings.

## 6 Conclusions

26 Stress can manifest in a variety of forms and is driven by a multitude of factors. It is an  
27 incredibly complex condition to study in general (Crosswell and Lockwood, 2020), and most  
28 especially difficult to study in the particular fieldwork conditions typical of the construction  
29 industry. That complexity needs to be acknowledged and addressed in study designs.  
30 Lamentably, numerous studies of stress in construction appear not to grasp the full  
31 implications of that complexity. The potential for emerging and accessible biosensor devices  
32 to be applied without due consideration for the complexity of the condition, represents a  
33 direct challenge to the credibility of such studies. This study demonstrates both the necessity  
34 and viability of incorporating multiple psychometric and biometric research instruments in  
35 fieldwork studies, across extended periods of time, and for various activities.

36 The inseparable stress/anxiety complex demands that any study of stress that depends on  
37 the measurement of biomarkers be contextualised in both stress and anxiety terms. This study  
38 highlights the need for psychometric measures of both perceived stress and perceived anxiety  
39 to be included, along with further consideration of how each impacts the other. The particular  
40 focus in this study is on the Overall PSS and Trait-Cognitive STICSA. Those generalised  
41 instruments might usefully be replaced with survey instruments more specific to the field  
42 study activities (such as teaching or public speaking in this study). Further investigation of  
43 how perceived coping correlates with perceived stress, and the potential balancing impact of  
44 State versus Trait STICSA are both warranted.

45 The most viable and significant biosensors currently include HR, HRV, EDA, Cortisol  
46 levels and fNIRS. Based on the findings of this study, the combined use of multiple sensor  
47 types is highly recommended. PRV appears to be a viable surrogate measure for HRV in the  
48 context of non-clinical studies of stress. However, all of the biosensors considered require a  
49 separate baseline value to be determined for each participant, and that can take hours if not

1 days to establish. Significantly, the use of current consumer-grade EEG devices in a  
2 fieldwork study context, is to be discouraged.

3 Overall, the findings of this demonstration study strongly support the use of multiple  
4 biosensors whenever biometric measurements of stress are to be incorporated into a study  
5 design. Perceptual, physiological and environmental factors all act in concert to impact stress.  
6 Strong conclusions on the potential drivers of stress should only be considered when  
7 consistent results across multiple psychometric and biometric research instruments,  
8 measuring multiple biomarkers, across various periods of time and a variety of activities, in  
9 ecologically valid settings are achieved.

## 11 Acknowledgements

12 The Author wishes to acknowledge the support and participation of the Program  
13 Director, Students and Teachers involved in this study.

## 15 7 References

- 17 Ali, N. and Nater, U.M. (2020), Salivary Alpha-Amylase as a Biomarker of Stress,  
18 *Behavioral Medicine. Int. J. Behav. Med.*, Vol.27, pp.337–342.
- 19 Benedek, M. and Kaernbach, C. (2010), A continuous measure of phasic electrodermal  
20 activity. *Journal of Neuroscience Methods*, Vol.190, pp.80–91.
- 21 Bystritsky, A. and Kronemyer, D. (2014), Stress and Anxiety: Counterpart Elements of the  
22 Stress/Anxiety Complex, *Psychiatr Clin N Am*, Vol.37, pp.489–518.
- 23 Campbell, F. (2006), *Occupational Stress in the Construction Industry*, Chartered Institute of  
24 Building, Berkshire, UK.
- 25 Chae, J., Hwang, S., Seo, W. and Kang, Y. (2021), Relationship between rework of  
26 engineering drawing tasks and stress level measured from physiological signals,  
27 *Automation in Construction*, Vol.124, pp.103560-1–12.
- 28 Chalmers, T., Hickey, B.A., Newton, P., Lin, C.-T., Sibbritt, D., McLachlan, C.S., Clifton-  
29 Bligh, R., Morley, J. and Lal, S. (2022), StressWatch: The Use of Heart Rate and Heart  
30 Rate Variability to Detect Stress: A Pilot Study Using Smart Watch Wearables, *Sensors*,  
31 Vol.22, No.151, doi:10.3390/s22010151.
- 32 Chan, A.P.C., Nwaogu, J.M. and Naslund, J.A. (2020), Mental Ill-Health Risk Factors in the  
33 Construction Industry: Systematic Review, *J. Constr. Eng. Manage.*, Vol.146, No.3,  
34 pp.04020004-1–13.
- 35 Chen, W-C. and Tserng, H.P. (2021), Real-time individual workload management at tunnel  
36 worksite using wearable heart rate measurement devices, *Automation in Construction*,  
37 Vol.134, pp.104051-1–15.
- 38 Choi, B., Jebelli, H. and Lee, SH. (2019), Feasibility analysis of electrodermal activity (EDA)  
39 acquired from wearable sensors to assess construction workers' perceived risk, *Safety*  
40 *Science*, Vol.115, pp.110–120.
- 41 Cohen, S., Gianaros, P. and Manuck, S. (2016), A stage model of stress and disease,  
42 *Perspectives on Psychological Science*, Vol.11, No.4, pp.456–463.
- 43 Crosswell, A.D. and Lockwood, K.G. (2020), Best practices for stress measurement: How to  
44 measure psychological stress in health research, *Health Psychology Open*, July-  
45 December, pp.1–12.
- 46 Epel, E.S., Crosswell, A.D., Mayera, S.E., Prathera, A.A., Slavichb, G.M., Putermanc, E. and  
47 Mendesa, W.B. (2018), More than a feeling: A unified view of stress measurement for  
48 population science, *Frontiers in Neuroendocrinology*, Vol.49, pp.146–169.
- 49 Fink, G. (2017), Stress: Concepts, Definition and History, in G. Fink, *Reference Module in*  
50 *Neuroscience and Biobehavioral Psychology*, Elsevier, pp.1–9.

- 1 Geršak, G. (2020), Electrodermal activity - a beginner's guide, *Electrotechnical Review*,  
 2 January, pp.175–182.
- 3 Grös, D.F., Antony, M.M., Simms, L.J. and McCabe, R.E. (2007), Psychometric Properties  
 4 of the State–Trait Inventory for Cognitive and Somatic Anxiety (STICSA): Comparison  
 5 to the State–Trait Anxiety Inventory (STAI), *Psychological Assessment*, Vol.19, No.4,  
 6 pp.369–381.
- 7 Hagermoser Sanetti, L.M., Boyle, A.M., Magrath, E., Cascio, A. and Moore, E. (2020),  
 8 Intervening to Decrease Teacher Stress: a Review of Current Research and New  
 9 Directions, *Contemporary School Psychology*, <https://doi.org/10.1007/s40688-020-00285-x>.
- 10 Hwang, S., Seo, J.O., Jebelli, H. and Lee, S.H. (2016), Feasibility analysis of heart rate  
 11 monitoring of construction workers using a photoplethysmography (PPG) sensor  
 12 embedded in a wristband-type activity tracker, *Automation in Construction*, Vol.71,  
 13 pp.372–381.
- 14 Järvelin-Pasanen, S., Sinikallio, S. and Tarvainen, M.P. (2018), Heart rate variability and  
 15 occupational stress – systematic review, *Industrial Health*, Vol.56, pp.500–511.
- 16 Jebelli, H., Choi, B. and Lee, S.H. (2019), Application of Wearable Biosensors to  
 17 Construction Sites. I: Assessing Workers' Stress, *J. Constr. Eng. Manage.*, Vol.145,  
 18 No.12, pp.04019079-1–12.
- 19 Jebelli, H., Hwang, S. and Lee, S.H. (2018), EEG-based workers' stress recognition at  
 20 construction sites, *Automation in Construction*, Vol.93, pp.315–324.
- 21 Jeon, J.H. and Cai, H. (2021), Classification of construction hazard-related perceptions using:  
 22 Wearable electroencephalogram and virtual reality, *Automation in Construction*,  
 23 Vol.132, doi:10.1016/103975.
- 24 Jiang, X., Bian, G-B. and Tian, Z. (2019), Removal of Artifacts from EEG Signals: A  
 25 Review, *Sensors*, Vol.19, No.987, doi:10.3390/s19050987.
- 26 Julian, L.J. (2011), Measures of Anxiety, *Arthritis Care and Research*, Vol.63, No.S11,  
 27 pp.S467–S472.
- 28 Kamardeen, I. (2022), Work stress related cardiovascular diseases among construction  
 29 professionals, *Built Environment Project and Asset Management*, Vol.12, No.2, pp.223–  
 30 242.
- 31 Karatsoreos, I.N. (2018), Stress: Common themes toward the next frontier, *Frontiers in*  
 32 *Neuroendocrinology*, Vol.49, pp.3–7.
- 33 Kazar, G. and Comu, S. (2022), Exploring the relations between the physiological factors and  
 34 the likelihood of accidents on construction sites, *Engineering, Construction and*  
 35 *Architectural Management*, Vol.29, No.1, pp.456–475.
- 36 Ke, J., Du, J. and Luo, X. (2021), The effect of noise content and level on cognitive  
 37 performance measured by electroencephalography (EEG), *Automation in Construction*,  
 38 Vol.130, pp.103836-1–14.
- 39 Kim, H-G., Cheon, E-J., Bai, D-S., Lee, Y.H. and Koo, B-H. (2018), Stress and Heart Rate  
 40 Variability: A Meta-Analysis and Review of the Literature, *Psychiatry Investig*, Vol.15,  
 41 No.3, pp.235–245.
- 42 Kreibig, S.D. and Gendolla, G.H.E. (2014), Autonomic Nervous System Measurement of  
 43 Emotion in Education and Achievement Settings, in R. Pekrun and L. Linnenbrink-  
 44 Garcia, (Eds.) *International Handbook of Emotions in Education*. ProQuest Ebook  
 45 Central, pp.625–642.
- 46 Langdon, R.R. and Sawang, S. (2018), Construction Workers' Well-Being: What Leads to  
 47 Depression, Anxiety, and Stress? *J. Constr. Eng. Manage.*, Vol.144, No.2, pp.04017100-  
 48 1–15.



- 1  
2  
3 1 Lau, T.M., Gwin, J.T. and Ferris, D.P. (2012), How Many Electrodes Are Really Needed for  
4 2 EEG-Based Mobile Brain Imaging?, *Journal of Behavioral and Brain Science*, Vol.2,  
5 3 pp.387–393.
- 6 4 Lazarus, R. S. and Folkman, S. (1987), Transactional theory and research on emotions and  
7 5 coping, *Eur. J. Personality*, Vol.1, No.3, pp.141–169.
- 8 6 Lee, E-H. (2012), Review of the Psychometric Evidence of the Perceived Stress Scale, *Asian*  
9 7 *Nursing Research*, Vol.6, pp.121–127.
- 10 8 Lee, W., Lin, K-Y., Seto, E. and Migliaccio, G.C. (2017), Wearable sensors for monitoring  
11 9 on-duty and off-duty worker physiological status and activities in construction,  
12 10 *Automation in Construction*, Vol.83, pp.341–353.
- 13 11 Love, P. E., Edwards, D. J. and Irani, Z. (2010), Work stress, support, and mental health in  
14 12 construction. *J. Constr. Eng. Manage.*, Vol.136, No.6, pp.650–658.
- 15 13 Mejía-Mejía, E., Budidha, K., Abay, T.Y., May, J.M. and Kyriacou, P.A. (2020a), Heart Rate  
16 14 Variability (HRV) and Pulse Rate Variability (PRV) for the Assessment of Autonomic  
17 15 Responses, *Frontiers in Physiology*, Vol.11, No.779, doi:10.3389/fphys.2020.00779.
- 18 16 Mejía-Mejía, E., May, J.M., Torres, R. and Kyriacou, P.A. (2020b), Pulse rate variability in  
19 17 cardiovascular health: a review on its applications and relationship with heart rate  
20 18 variability, *Physiological Measurement*, Vol.41, doi:10.1088/1361-6579/ab998c.
- 21 19 Nwaogu, J.M. and Chan, A.P.C. (2021), Work-related stress, psychophysiological strain, and  
22 20 recovery among on-site construction personnel, *Automation in Construction*, Vol.125,  
23 21 pp.103629-1–13.
- 24 22 Quaresima, V. and Ferrari, M. (2019), Functional Near-Infrared Spectroscopy (fNIRS) for  
25 23 Assessing Cerebral Cortex Function During Human Behavior in Natural/Social  
26 24 Situations: A Concise Review, *Organizational Research Methods*, Vol.22, No.1, pp.46–  
27 25 68.
- 28 26 Ribeiro Santiago, P.H., Nielsen, T., Smithers, L.G., Roberts, R. and Jamieson, L. (2020),  
29 27 Measuring stress in Australia: validation of the perceived stress scale (PSS-14) in a  
30 28 national sample, *Health and Quality of Life Outcomes*, Vol.18, No.100,  
31 29 <https://doi.org/10.1186/s12955-020-01343-x>.
- 32 30 Saedi, S., Fini, A.A.F., Khanzadi, M., Wong, J., Sheikhhoshkar, M. and Banaei, M. (2022),  
33 31 Applications of electroencephalography in construction, *Automation in Construction*,  
34 32 Vol.133, pp.103985-1–15.
- 35 33 Samson, C. and Koh, A. (2020), Stress Monitoring and Recent Advancements in Wearable  
36 34 Biosensors, *Front. Bioeng. Biotechnol.*, Vol.8, No.1037, doi: 10.3389/fbioe.2020.01037.
- 37 35 Scheer, F.A.J.L., Chellappa, S.L., Hu, K. and Shea, S.A. (2019), Impact of mental stress, the  
38 36 circadian system and their interaction on human cardiovascular function,  
39 37 *Psychoneuroendocrinology*, May, No.103, pp.125–129.
- 40 38 Styck, K.M., Rodriguez, M.C. and Yi, E.H. (2020), Dimensionality of the State–Trait  
41 39 Inventory of Cognitive and Somatic Anxiety, *Assessment*, Vol.29, No.2, pp.103–127.
- 42 40 Textor, M. (2019), Perceptual objectivity and the limits of perception, *Phenom Cogn Sci*,  
43 41 Vol.18, pp.879–892.
- 44 42 Van Dam, N.T., Gros, D.F., Earleywine, M. and Antony, M.M. (2011), Establishing a trait  
45 43 anxiety threshold that signals likelihood of anxiety disorders, *Anxiety, Stress and Coping*,  
46 44 Vol.26, No.1, pp.70–86.
- 47 45 Wexler, A. and Thibault, R. (2019), Mind-Reading or Misleading? Assessing Direct-to-  
48 46 Consumer Electroencephalography (EEG) Devices Marketed for Wellness and Their  
49 47 Ethical and Regulatory Implications, *Journal of Cognitive Enhancement*, Vol.3, 131–  
50 48 137.
- 51  
52  
53  
54  
55  
56  
57  
58  
59  
60

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28  
29  
30  
31  
32  
33  
34  
35  
36  
37  
38  
39  
40  
41  
42  
43  
44  
45  
46  
47  
48  
49  
50  
51  
52  
53  
54  
55  
56  
57  
58  
59  
60

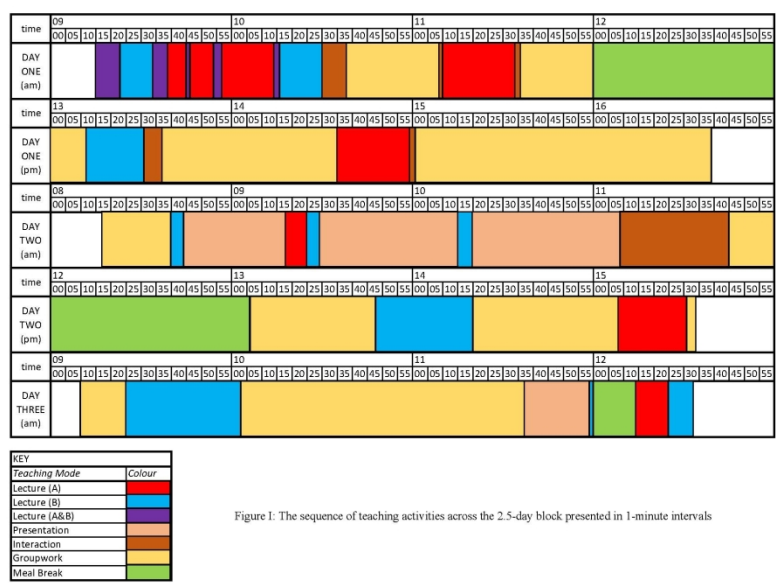


Figure I: The sequence of teaching activities across the 2.5-day block presented in 1-minute intervals

Figure I: The sequence of teaching activities across the 2.5-day block presented in 1-minute intervals  
297x210mm (200 x 200 DPI)



## The study of stress and anxiety in construction: a case for the use of a multimodal approach in fieldwork settings

Table I: Psychometric comparison of prevailing teacher self-reported stress and anxiety

<b>Stress Construct</b>	<b>Teacher A</b>	<b>Teacher B</b>
Perceived Stress	10	9
<i>relative to maximum</i>	<i>35.70%</i>	<i>32.10%</i>
Perceived Coping	26	23
<i>relative to maximum</i>	<i>92.86%</i>	<i>82.14%</i>
Overall PSS	12	14
<i>relative to maximum</i>	<i>21.43%</i>	<i>25.00%</i>
<b>Anxiety Construct</b>	<b>Teacher A</b>	<b>Teacher B</b>
State-Cognitive	14	13
State-Somatic	17	16
<i>Total State</i>	<i>31</i>	<i>29</i>
Trait-Cognitive	11	16
Trait-Somatic	14	12
<i>Total Trait</i>	<i>25</i>	<i>28</i>

Teaching Period	Teacher A						Teacher B					
	HR	PRV(%)	EDA	Amp	Rate	TOTAL	HR	PRV(%)	EDA	Amp	Rate	TOTAL
Overall	84.27	0.005	1.18	0.27	21.42		110.26	0.020	1.00	0.13	6.60	
Day 1	86.97	142	1.32	0.34	34.23	6	118.42	64	1.15	0.12	6.03	9
Day 2	83.47	85	1.15	0.21	12.49	11	107.34	113	0.61	0.11	6.50	12
Day 3	80.08	85	0.95	0.24	12.94	11	98.74	131	1.54	0.17	7.93	9
AM	83.89	100	1.17	0.26	19.85	13	112.86	89	1.26	0.14	6.44	5
PM	84.66	100	1.19	0.26	22.09	7	107.52	108	0.74	0.09	6.29	15
Lecture Self	93.01	145	1.53	0.29	27.79	10	103.40	92	1.31	0.13	9.37	9
Lecture Other	79.79	113	1.00	0.26	17.64	12	121.10	121	1.20	0.09	4.34	11
Lecture Both	88.41	100	1.40	0.40	30.21	6	111.78	52	1.57	0.18	8.93	6
Student Presentation	76.83	109	0.97	0.24	13.92	12	108.47	125	1.13	0.15	5.95	9
Student Interaction	83.92	106	1.66	0.24	20.80	10	118.47	45	0.60	0.09	5.05	10
Student Groupwork	84.29	74	1.20	0.27	22.80	9	109.11	90	1.06	0.13	6.68	10
Meal Break	83.00	174	0.82	0.37	22.37	11	108.99	116	0.33	0.04	3.81	14

Key		
Value	Best	3-point
Value	Middle	2-points
Value	Worst	1-points

Figure II: Comparison of highest, middle and lowest values, shading-coded.

536x305mm (96 x 96 DPI)