- 1 Effect of Riding Experience and HMI on Users' Trust and Riding Comfort in Fully
- 2 Driverless Autonomous Vehicles: An On-Road Study
- 3
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12 ABSTRACT

13 The wide adoption of autonomous vehicles (AVs) or robot taxis relies on technological 14 advancements and public acceptance, which can be influenced by users' trust in AVs and 15 comfort during rides. Among the influential factors of riding comfort, motion sickness (MS) 16 has attracted lots of attention in previous research, and both trust and MS have been found to be associated with human-machine interface (HMI) designs in AVs. However, previous 17 research on trust and MS in AVs predominantly utilized driving simulations or "Wizard of 18 Oz" methods, which failed to introduce risk and realistic vehicle motions, potentially 19 20 introducing bias to conclusions. For the first time, our study investigated the impact of displaying the dynamic path trajectories of AVs on passengers' perceptions of system 21 22 transparency, trust, and MS in a commercially running AV. The results from 16 participants and 32 rides revealed limited effects of the dynamic path trajectory on trust, and a discernible 23 24 but statistically non-significant trend in motion sickness alleviation. Further, we found that the 25 initial riding experience was more important in trust enhancement than subsequent rides. 26 These results provide insights into future HMI design in robot taxis and suggest directions for 27 future research in trust enhancement and MS alleviation in AVs. 28 Keywords: motion sickness; trust; on-road study; autonomous vehicle

30 1. Introduction

31 With the rapid advancement of driving automation technologies, Level 4 autonomous 32 vehicles (AVs) have become commercially operational in several cities (Nina, 2022; SAE, 33 2021). The widespread adoption of AVs is anticipated to generate substantial economic and 34 societal benefits by enabling passengers to repurpose commuting time for work or 35 entertainment activities. However, two critical challenges hinder the mass adoption of AVs: users' relatively low trust in autonomous systems (Hegner et al., 2019) and the high incidence 36 37 of motion sickness (MS) during engagement in non-driving-related tasks (NDRTs) while 38 riding in AVs (Isu et al., 2014). 39 Trust is a key determinant of users' acceptance of AV technology (Adnan et al., 2018) 40 and is influenced by various factors, including driving style (Ekman et al., 2019), individual 41 characteristics (Mosaferchi et al., 2023), and the design of human-machine interfaces (HMIs) (Qi et al., 2024). Among these, providing HMIs to users has been identified as a controllable 42 43 and low-cost solution. Thus, previous research and operators of AV fleets have proposed 44 different human-machine interfaces (HMIs) to improve users' trust in AVs. For example, 45 Oliveira et al. (2020) found that providing information regarding an AV's intended trajectory 46 and the perception of hazards can boost passengers' trust in AVs. Another study investigating 47 the impact of HMI design on trust had similar findings, indicating that presenting driving-48 related information through HMI can enhance passengers' trust in AVs (Hartwich et al., 2021). 49 However, these findings were mostly based on studies conducted in simulated environments 50 or "Wizard of Oz" conditions, where actual driving risks and realistic vehicle dynamics are

absent. Consequently, the external validity of these findings remains uncertain, underscoring
the need for validation under real-world traffic conditions.

53 At the same time, MS, primarily caused by sensory conflict (Reason, 1975), presents 54 another significant barrier to AV adoption. As AVs liberate users from monotonous driving 55 tasks and transition them into the role of passengers, engagement in non-driving-related tasks 56 (NDRTs), such as watching videos, becomes common. However, passengers, unlike drivers, are more susceptible to MS, likely due to their reduced ability to anticipate future vehicle 57 58 movements (Rolnick & Lubow, 1991). Furthermore, the introduction of in-vehicle displays 59 may exacerbate MS symptoms, especially when passengers are engaged in visually demanding tasks such as reading (Morimoto et al., 2008) or video watching (Kato & Kitazaki, 60 61 2006). Prior research suggests that providing anticipatory information about future vehicle 62 maneuvers, such as upcoming turns, accelerations, or decelerations, can help alleviate MS 63 symptoms (Karjanto et al., 2018; Li & Chen, 2022; Maculewicz et al., 2021). However, most existing studies employed static, discrete cues delivered several seconds before the actual 64 65 vehicle motion. For example, in previous field experiments, motion planning information was 66 pre-defined and consistently matched the upcoming maneuver, with signals such as LED 67 stripes indicating a lane change 1-3 seconds in advance. While effective in controlled 68 environments, such setups are unrealistic in real-world driving, where an AV's path planning 69 must be continuously updated in response to dynamic traffic conditions. Consequently, the 70 potential of real-time dynamic trajectory information to mitigate MS remains underexplored.

| 71 | Thus, displaying upcoming trajectories of AVs on the in-vehicle HMI seems to benefit |
|----|--|
| 72 | AV occupants from both trust and MS perspectives, which has already been adopted by some |
| 73 | AV fleet operators, such as robotaxis operated by Pony.ai and WeRide (Nina, 2022; Nolan, |
| 74 | 2025). Despite the potential benefit, the influence of real-time dynamic trajectory plan |
| 75 | information on passengers' trust in AVs and their experience of MS has not been empirically |
| 76 | validated in commercially operating AVs. To address this gap, we investigated the influence |
| 77 | of real-time dynamic trajectory plan information on passengers' trust and MS development in |
| 78 | a commercially operating fully driverless taxi service. Given that the initial riding experience |
| 79 | plays an important role in shaping one's trust in AVs (Wang et al., 2024), we focused on |
| 80 | participants who had no prior experience in taking a ride in AVs. |
| 81 | Accordingly, three research questions (RQs) were proposed. RQ1: Can displaying the |
| 82 | dynamic trajectory plan in real time increase occupants' trust in AVs? RQ2: Can displaying |
| 83 | dynamic trajectory plan information help alleviate MS when occupants are engaged in visual |
| 84 | NDRTs in AVs? RQ3: Does riding experience increase users' trust in AVs? Three |
| 85 | corresponding hypotheses were formulated regarding the RQs, i.e., H1: Providing passengers |
| 86 | with a real-time dynamic trajectory plan can increase their trust in AVs, as such information |
| 87 | may increase system transparency, which is positively associated with users' trust in |
| 88 | automation (Yang et al., 2017). H2: A real-time dynamic trajectory plan can help alleviate MS |
| 89 | among passengers in AVs, as it can support passengers' expectations of AV's future motions. |
| 90 | H3: The riding experience is positively associated with users' trust in AVs. |

92 **2.** Methodology

93 2.1 Participants

94 A total of 16 participants (eight males and eight females) with an average age of 22.7 95 years (range: 18-32, standard deviation (SD) = 4.1) were recruited through online forums and 96 campus posters. Participants were required to self-report with no prior riding experience in 97 fully driverless AVs or AVs with safety guards. Additionally, they needed to have self-reported 98 MS susceptibility scores above the 50th percentile (i.e., scoring at least 11.25 out of 54 points 99 on the Motion Sickness Susceptibility Questionnaire Short-form [MSSQ-short] (Golding, 100 2006) to ensure they are prone to MS in vehicles. The Chinese version of the MSSQ-short was utilized, as the experiment took place in mainland China (Lin & Guo, 2022). The 101 participants' mean MSSQ score was 19.6 (range: 12-29, SD = 5.8), and all reported good 102 103 health and normal vestibular functions.

104 **2.2 Experiment Design**

105 Participants engaged in a closed-loop AV ride beginning at the Guangzhou campus of 106 the Hong Kong University of Science and Technology (HKUSTGZ), passing through 107 Huangge Automobile City, and concluding back at the HKUSTGZ (see Figure 1). The AV 108 had to decelerate and accelerate to follow the traffic or respond to traffic lights at 109 intersections, and change lanes if necessary to overtake slow-moving traffic. Thus, this route led to a typical urban driving trajectory involving both longitudinal and lateral accelerations. 110 111 To mitigate the influence of traffic flow, the rides occurred exclusively on weekdays between 9:00 am and 4:00 pm, avoiding peak hours. In all trials, participants took the same type of 7-112 113 seat MPV provided by the same robotaxi service provider (see Figure 2a). The intended 114 trajectory and perceived traffic were originally supplied by the service provider and shown on 115 the headrest screen. In addition, the screen also showed the perceived environment in real time, including all detected road agents (i.e., motor vehicles, non-motor vehicles, and pedestrians) and key road or traffic elements (e.g., traffic lights, lane markings, curbs, and temporary traffic cones). However, information regarding the ego-vehicle velocity was not displayed during the experiments.

120 In the experiment, a customized screen cover was utilized to conceal this information in 121 half of the rides (see Figure 2c), while it was removed in the other half of the rides, allowing 122 passengers to view the dynamic trajectory plan of the AV (see Figure 2d). Vehicle dynamics were recorded using an Xsens Inertial Measurement Unit (IMU) mounted at a fixed position 123 124 on the left armrest of the right-side seat in the second row (Figure 2b). The IMU sampled linear acceleration at 60 Hz with an accuracy of 0.01 G. According to the right-hand 125 coordinate system specified in ISO8855 (2011), the z-, x-, and y-axes corresponded to the 126 127 upward (vertical), forward (longitudinal), and rightward (lateral) directions of the vehicle, 128 respectively.

129 The order of the experiment conditions, that is, the trajectory HMI availability (i.e., 130 with and without), was adopted as the within-subject factor and was fully counterbalanced to 131 reduce the learning effect (Figure 3). To minimize the aftereffects of MS, we ensured at least 132 a 3-day gap between the two trials of the same participant.

133



134





(b)



Figure 2. Apparatus: (a) The robotaxi used in this experiment; (b) Xsens IMU for recording
vehicle dynamics; (c) Experimental condition without trajectory plan HMI; (d) Experimental
condition with trajectory plan HMI.

At the same time, throughout each ride, the in-vehicle display showed documentary videos regarding food and history as the sole task permissible for participants. The videos were presented in Chinese, the participants' native language, to reduce comprehension difficulties. Participants were informed that they needed to answer questions related to the videos after rides, and the correctness of the answers would influence the experimental compensation, aiming to encourage them to focus on this visual NDRT. During the ride, an experimenter accompanied the participant, sitting in the left seat of the second row, and occasionally reminded the participant to focus on the video task if they became distracted by
the external environment. Participants consistently occupied the right seat of the second row.
While the video content differed between rides for each participant to ensure attentiveness,
the sequence of the videos remained consistent for all participants to neutralize potential
video content effects on MS (see Figure 3).



152 Figure 3. The order of the experimental conditions (with or without trajectory HMI) and the153 video content. The blocks with the same background pattern indicate identical video content.

154 **2.5 Experiment Procedures**

151

155 Following Suwa et al. (2022), participants were instructed to prioritize self-care, ensure 156 adequate sleep, abstain from alcohol at least one day before the experiment, and finish meals 157 at least an hour before the experiment to maintain optimal health conditions. Upon arrival on 158 the experiment day, participants signed a consent form regarding the objectives, procedures, 159 risks, and benefits of the experiment. Before the ride, participants completed a pre-trial 7-160 point trust questionnaire (Manchon et al. (2022); see Table A.1 in the Appendix) and an MS 161 assessment questionnaire (MSAQ) (Gianaros et al., 2001). They were also provided with an 162 explanation of the Chinese version of the Misery Scale (MISC) (Lin & Guo, 2022), which

| 163 | measures the level of MS (Bos et al. (2005); see Table 1). During the ride, participants were |
|-----|---|
| 164 | required to watch video clips on an in-vehicle display. At the same time, a timer emitted an |
| 165 | auditory alert at one-minute intervals (90 dB loudness, 1000 Hz frequency, 1-second duration) |
| 166 | to prompt participants to orally report their MS levels using the MISC. To assist them in |
| 167 | recalling the scale meanings, the MISC was printed and affixed to the frame of the display |
| 168 | screen. After each ride, they completed the same trust questionnaire and the MSAQ again. |
| 169 | Additionally, they completed a 7-point system transparency questionnaire (Choi & Ji, 2015) |
| 170 | to assess their perceived system transparency of the AV (see Figure 4 and Table 2), both |
| 171 | before and after the ride. The MSAQ has four constructs that categorize MS symptoms into |
| 172 | four distinct dimensions: gastrointestinal, central, peripheral, and sopite-related. This |
| 173 | experiment received approval from the Human and Artefacts Research Ethics Committee of |
| 174 | the Hong Kong University of Science of Technology (HREP-2023-0246). |

| | Pre-study questionnaire | Driven stage | $\mathbf{\Sigma}$ | Post-study questionnaire | |
|------------|---|---|-------------------|--|--|
| 176 177 | Initial trust level Initial motion sickness level Initial perceived system transparency | • Reporting of MISC score per minute | cedu | Final trust level Final motion sickness level Final perceived System transparency res. | |
| 178 | Ŷ | | | | |

| | | MISC |
|--|--------------|--------------|
| No problems | | 0 |
| Some discomfort, but no specific symptoms | | 1 |
| Dizziness, cold/warm, headache, stomach/throat awareness, | Vague | 2 |
| sweating, blurred vision, yawning, burping, tiredness, salivation, | | |
| but no nausea | Little | 3 |
| - | Rather | 4 |
| | Severe | 5 |
| Nausea | Little | 6 |
| | Rather | 7 |
| | Severe | 8 |
| | Retching | 9 |
| Vomiting | | 10 |
| Table 2. Perceived system transparency questionna | aire | |
| Q1 I believe that the AV acts consistently and its behavior can be for | orecast. | |
| Q2 I believe that I can form a mental model and predict the future | behavior of | the AV. |
| 2.6 Statistical Analysis | | |
| In this study, a two-step data analysis was conducted in R (4.4.1). | | |
| Step 1: Quantification of motion stimuli and NDRT engageme | ent | |
| First, motion sickness dose values (MSDV) were used to compare | e motion sti | muli in both |
| experimental conditions (i.e., with and without the dynamic traject | tory plan), | adhering to |

Table 1. MISC for MS evaluation during the rides

188 ISO2631-1 (1997) guidelines. The comprehensive MSDV_{total}, as defined by Yunus et al. (2021)

and expressed in Equation (1), quantified the motion stimuli experienced during a ride.

190
$$MSDV_{total} = \sqrt{MSDV_x^2 + MSDV_y^2 + MSDV_z^2}$$
(1)

191 MSDV_x, MSDV_y, and MSDV_z calculations, as detailed in Equations (2) and (3), 192 involved the weighted integration of acceleration along different directions, where W_i 193 indicated the acceleration weight. The frequency weighting specified in ISO2631-1 (1997) 194 was applied to compute MSDV_z in the vertical direction, and frequency weightings from 195 Donohew and Griffin (2004) were used to calculate MSDV_x and MSDV_y in the lateral and 196 longitudinal directions, respectively.

197
$$\boldsymbol{a}_{i,w}(t) = \boldsymbol{a}_i(t) \times \boldsymbol{W}_i \qquad i = x, y, z \qquad (2)$$

198
$$MSDV_i = (\int_0^T (a_{i,w}(t))^2)^{1/2}$$
 (3)

199To ensure that differences in participants' engagement with the video-watching task did200not confound the development of motion sickness, we conducted an additional paired t-test on201participants' video task performance across conditions.

- 202 Step 2: Analysis of perceived transparency and trust
- 203 To assess subjective responses, linear mixed-effects models were fitted using the lmer
- 204 function in *R* (Marc, 2015). Two separate models were specified:
- Model 1 for perceived system transparency
- Model 2 for trust in the system

| 207 | As shown in Table 3, the fixed effects in both models included HMI availability (with vs. |
|-----|--|
| 208 | without), measurement timing (pre- vs. post-ride), ride order (first vs. second ride), and their |
| 209 | two-way interactions. Both models also incorporated random intercepts and slopes to account |
| 210 | for individual differences. |

211 Table 3. The structure of the models for perceived transparency and trust

| Model | Dependent | Fixed Effects | Random Effects |
|---------|--------------|---------------------------------|-----------------------------|
| | Variable | | |
| Model 1 | Perceived | - HMI availability | - Intercept for participant |
| | Transparency | - Timing (pre/post) | - Slopes for (all nested in |
| | | - Ride number | Participant): |
| | | - HMI availability× Ride number | • Ride number |
| | | - Timing × Ride number | • HMI availability |
| | | - HMI availability× Timing | • Timing |
| Model 2 | Trust Score | - HMI availability | - Intercept for participant |
| | | - Timing (pre/post) | - Slopes for (all nested in |
| | | - Ride number | Participant): |
| | | - HMI availability× Ride number | • Ride number |
| | V | - Timing × Ride number | • HMI availability |
| | | - HMI availability× Timing | • Timing |
| | | | |

212

213 Step 3: Analysis of motion sickness outcomes

As shown in Table 4, two sets of analyses were conducted to evaluate MS symptoms.First, a linear mixed-effects model (Model 3) was used to examine the effects of HMI

- 216 availability, timing, and their interaction on the MSAQ scores. Due to non-normality, a square
- 217 root transformation was applied to the MSAQ data to meet ANOVA assumptions.
- 218 For significant independent variables (p < .05), we used the "emmeans" package in R
- (Lenth et al., 2024) for post hoc comparisons, with the "Tukey" method adopted for p-value
- 220 adjustment. Furthermore, to gain insight into how each construct of the MSAQ was
- influenced by the experimental conditions (i.e., with and without the dynamic trajectory plan
- 222 information), Wilcoxon Signed-Rank Tests (WSRT) were conducted for the four constructs of
- 223 MSAQ, given the non-normal distribution of the data.
- 224

Table 4. The structure of the models for motion sickness measures

| Model | Dependent | Fixed Effects | Random Effects |
|---------|--------------|--|-------------------------|
| | Variable | | |
| Model 3 | sqrt (MSAQ) | - HMI availability | - Intercept for |
| | | - Timing (pre/post) | participant |
| | | - HMI availability × Timing | - Slopes for (all |
| | | | nested in Participant): |
| | | | • HMI |
| | X | | • Timing |
| Mode 4 | MISC score | - HMI availability | - Intercept for |
| | (per minute) | - Time of measurement (minute by | participant |
| | | minute) | |
| | | - HMI availability×Time of measurement | |

Second, a linear mixed-effects model (Model 4) was built to analyze the minute-byminute fluctuation of MISC scores during each ride. Time of measurement (in minutes), HMI

227 availability, and their interaction were used as the fixed effects, with a participant-level

228 random intercepts to account for repeated measures on each participant.

3. Results

- 230 **3.1 Evaluation of Experimental Control**
- 231 The average ride duration across all trials was 29.7 minutes (SD = 4.1 min; range: 24-42
- 232 min; see Figure 9). The Wilcoxon rank-sum test revealed no significant difference in trial
- 233 duration between the two conditions (p > 0.05). To ensure fair comparisons, we first
- 234 compared the effectiveness of the experiment control between the HMI conditions.
- First, to ensure that the differences in MS were not due to the road profiles across drives,
- 236 we conducted a t-test to compare motion stimuli (i.e., MSDV) between the two conditions
- 237 (see Figure 5). The analysis revealed no significant difference in MSDV between the two



238 conditions (p > .05).

239



Second, the performance in the video-watching task under each condition was also compared. Specifically, the accuracies of participants' responses to video-related questionnaires were both 75%, regardless of HMI availability, with an SD of 24.2% and 27.4% with and without the HMI, respectively. The paired t-test revealed no significant differences across experimental conditions (p > .05), suggesting no significant variations in the level of video-watching task engagement between the experimental conditions.

248 **3.1 System Transparency and Trust**

Table 5 summarizes the results of the repeated measures ANOVA, with the transparency score, trust score, and overall MSAQ score as the dependent variables (DVs) and the results of the repeated measures ANOVA, with the trust score as the DV. As shown in Figure 6, the post hoc comparison of the timing of measurements indicates that perceived system transparency increased by 1.46 post-ride compared to pre-ride, with a 95% confidence interval (95% CI) of [1.17, 1.75] and t(45) = 10.09.





Figure 6. Effect of the timing of measurements on the perceived transparency

Table 5. Results of the statistical models.

| | HMI | Timing | Number of | HMI availability | Timing | HMI availability | Time of | HMI |
|------------------|----------------------|-------------------|-------------------|------------------|-----------------|------------------|-------------------|----------------------|
| | availability | | rides | imes timing | × Number of | × Number of | measurement | availability $	imes$ |
| | | | | | rides | rides | | Time of |
| | | | | | | | | measurement |
| Transparency | F(1,28)=0.27 | F(1,15)=87.92 | F(1,28)=0.44 | F(1,28)=1.96 | F(1,28)=0.44 | F(1,14)=0.82 | - | - |
| | <i>p</i> = .6 | <i>p</i> < .0001* | <i>p</i> = .5 | <i>p</i> = .2 | <i>p</i> = .5 | <i>p</i> = .4 | | |
| Trust | F(1,14)=1.12 | F(1,15)=17.48 | F(1,14)=6.85 | F(1,14)=0.97 | F(1,14)=.08 | F(1,14)=1.59 | - | - |
| | <i>p</i> = .3 | <i>p</i> = .0008* | <i>p</i> = .02* | <i>p</i> = .3 | <i>p</i> = .04* | <i>p</i> = .2 | | |
| Overall | F(1,45)=0.24 | F(1,45)=26.87 | - | F(1,45)=0.18 | - / | - | - | - |
| MSAQ | <i>p</i> = .6 | <i>p</i> < .0001* | | <i>p</i> = .7 | | | | |
| MISC score | F(1,931.22)=0.0 | - | - | | - | - | F(1,931.46)=194.5 | F(1,931.59)=0.7 |
| (per minute) | <i>p</i> = .9 | | | | | | <i>p</i> < .0001* | <i>p</i> = .4 |
| Note: * indicate | s significant posult | (n < 0.5) and "? | maans not applied | abla | | | | |

Note: * *indicates significant results (p* < .05), and "-" means not applicable.



259 Figure 7 Interaction effects of measurement timing and number of rides on the trust score

260 Figure 7 illustrates the post hoc comparison of the interaction effects of the number of rides and measurement timing on the trust score. The results indicate that, for the first ride, 261 262 the post-ride trust score increased by 0.55 units compared to the pre-ride trust score, with a 263 95% confidence interval (95% CI) of [0.23, 0.88] and a t-value of t(28.6) = 4.65. At the same 264 time, the pre-ride trust score was higher in the second ride as compared to the first ride, with a 265 difference (Δ) of 0.38 units, 95% CI: [0.08, 0.69], t(28) = 3.44 and the post-ride trust score of 266 the second ride was higher than the pre-ride trust score of the first ride, $\Delta = 0.59$ units, 95% 267 CI of [0.26, 0.92], t(28.8) = 4.87.

268 **3.2. Motion sickness**

258

269 **3.2.1. MSAQ score**

The results of the linear mixed-effects model indicated a significant main effect of timing, whereas the interaction between timing and the number of rides was non-significant (p > .05, see Table 6). Thus, a post hoc analysis was performed for the significant timing 273 effect. As shown in Figure 8, we observed a significant increase in the square root of the

274 MSAQ score from pre-ride to post-ride, $\Delta = 1.47, 95\%$ CI of [0.90, 2.05], t(45) = 5.16.



Figure 8 Effect of timing of measurements on the root of the square of the MSAQ score

The Wilcoxon Signed-Rank Test was conducted to further compare the MSAQ scores for each construct (see Table 6). The results showed that without the HMI, significant increases were observed in gastrointestinal, central, and sopite-related scores, but not in peripheralrelated scores; whereas with the HMI, only the central and sopite-related scores showed significant increases.

282

Table 6. Wilcoxon Signed-Rank Test (WSRT) results for the pre-ride and post-ride MSAQ

| Condition | MSAQ | | Median (IQR) | WSRT |
|---------------------|------|------|--------------------|--------------------------------|
| Without a dynamic | G | Pre | 0.00 (0.00-0.00) | z = -2.50, r = 0.70, p = .01* |
| trajectory plan HMI | | Post | 4.17 (0.00-28.47) | |
| | С | Pre | 0.00 (0.00-2.22) | z = -2.86, r = 0.72, p = .004* |
| | | Post | 11.11 (1.11-16.11) | |

| | Р | Pre | 0.00 (0.00-12.04) | z = -0.28, r = 0.07, p = .8 |
|---------------------|---|------|--------------------|--------------------------------|
| | | Post | 3.70 (3.70-8.33) | |
| | S | Pre | 4.17 (0.00-9.72) | z = -2.52, r = 0.63, p = .01* |
| | | Post | 13.89 (5.56-28.47) | |
| | 0 | Pre | 3.13 (1.22-5.73) | z = -2.80, r = 0.70, p = .005* |
| | | Post | 9.72 (4.51-23.61) | |
| With a dynamic | G | Pre | 0.00 (0.00-3.47) | z = -1.67, r = 0.42, p = .10 |
| trajectory plan HMI | | Post | 2.78 (0.00-18.06) | |
| | С | Pre | 0.00 (0.00-2.22) | z = -2.85, r = 0.71, p = .004* |
| | | Post | 4.44 (2.22-11.67) | |
| | Р | Pre | 1.85 (0.00-11.11) | z = -0.27, r = 0.07, p = .8 |
| | | Post | 3.70 (0.00-15.74) | |
| | S | Pre | 4.17 (0.00-8.33) | z = -2.49, r = 0.62, p = .01* |
| | | Post | 9.72 (2.78-20.14) | Y |
| | 0 | Pre | 2.43 (0.69-4.51) | z = -2.30, r = 0.58, p = .02* |
| | | Post | 5.56 (2.08-16.32) | |
| | | | | |

Note: In this and subsequent tables, IQR denotes the inter-quartile range. The abbreviations
G, C, P, and S correspond to the gastrointestinal, central, peripheral, and sopite-related
MSAQ constructs, respectively, while O represents the overall MSAQ score.

Moreover, another Wilcoxon Signed-Rank Test was performed to compare the difference in the change of MSAQ scores (i.e., the difference between scores measured before and after each ride) between both conditions (see Table 7). The results showed no significant differences in changes in MSAQ constructs between conditions with and without trajectory

- 292 plan information. Nevertheless, a noticeable trend emerged: the construct scores increased to
- a lesser extent in the treatment conditions compared to the control conditions.
- 294
- Table 7. Wilcoxon Signed-Rank Test results for the difference in the change between pre- and

| \mathbf{a} | n | 6 |
|--------------|---|---|
| L | Э | 0 |
| | - | ~ |

post-ride MSAQ scores across both conditions (with versus without HMI availability)

| MSAQ | Condition | Median (IQR) | WSRT |
|------|-----------|--------------------|-----------------------------|
| G | Without | 4.17 (0.00-22.22) | z = -0.90, r = 0.23, p = .4 |
| | With | 0.00 (0.00-11.11) | |
| С | Without | 10.00 (0.00-16.11) | z = -1.13, r = 0.28, p = .3 |
| | With | 2.22 (2.22-9.44) | |
| Р | Without | 0.00 (-8.33-3.70) | z = -0.91, r = 0.23, p = .4 |
| | With | 0.00 (-7.41-3.70) | |
| S | Without | 8.33 (2.08-15.28) | z = -1.27, r = 0.32, p = .2 |
| | With | 5.56 (2.78-12.50) | |
| 0 | Without | 6.94 (2.60-17.19) | z = -0.77, r = 0.19, p = .4 |
| | With | 2.08 (0.35-10.24) | |

Table 5 summarizes the results of the linear mixed-effects model, with the MISC score measured per minute as the dependent variable. Figure 9 illustrates the fluctuation in MISC scores for each participant throughout the ride under the two experimental conditions. Results from the linear mixed-effects model revealed no significant effect of the HMI condition on MISC scores (see Table 5).

²⁹⁸ **3.2.2. MISC score**



305 Figure 9. MISC score of all 16 participants (p1-p16) during the ride in both HMI conditions.

4. Discussion

304

307 Despite extensive research on trust and MS through driving simulators or Wizard of Oz
 308 methodologies, our study explores the impact of the dynamic trajectory plan information on
 309 trust enhancement and MS reduction in commercially running AVs.

310 First, in contrast to previous findings from the Wizard of Oz approach (Oliveira et al.,

311 2020), we found that the dynamic trajectory information failed to contribute to users'

312 perceived system transparency or trust enhancement. This suggests that, contrary to our

- 313 hypothesis (H1), the effectiveness of this type of HMI design may be limited. These results
- 314 may be explained from two perspectives. First, our participants were predominantly college
- 315 students who are overall young. This population was found to have a better understanding of

AV technology and potentially higher initial perceptions of system transparency as compared 316 317 to the older and less educated population (Thomas et al., 2020). Thus, it is challenging to 318 further boost their perceived transparency of the system. Second, throughout the whole drive, 319 the vehicle operated well, and all participants experienced smooth rides, thereby diminishing 320 the observable impact of HMI design on the perceived transparency and trust of the AVs. 321 Further, we failed to observe the influence of dynamic trajectory information on MS 322 development in terms of the overall MASQ score and the MISC score (H2). However, upon further examination of the MSAQ construct, we found that the overall increase in MSAQ 323 324 scores in rides across all constructs was smaller when trajectory information was displayed 325 compared to when it was not. Further, with the HMI, the increase of several constructs 326 became nonsignificant after rides. These findings suggest that the dynamic trajectory plan 327 information has the potential to alleviate MS, but the magnitude of this alleviation is 328 relatively small. It is also possible that, unlike human drivers, the AVs adopted a relatively 329 conservative driving style (Wenger, 2024) and rarely conducted abrupt maneuvers, especially 330 in the lateral direction. While displaying trajectory information can assist passengers in 331 anticipating lateral acceleration during lane changes or turns, it does not convey information 332 on longitudinal acceleration experienced during lane following. Conveying longitudinal 333 acceleration information has been found to be able to alleviate MS in previous studies (Kehl 334 et al., 2024). This suggests that for future HMI designs aimed at mitigating MS in AVs, 335 acceleration data should also be integrated into the trajectory visualization. For instance, 336 varying colors can be used to represent different levels of acceleration, similar to how levels

337 of sound loudness can alleviate MS (Xie et al., 2025).

338 Importantly, the limited effects observed in this study may be closely tied to the specific 339 HMI design used in this study. The current interface provides only action-based information 340 (e.g., where the vehicle is going) without explaining the rationale behind these actions. Prior 341 research suggests that explaining the reasons behind system behaviors is critical for 342 enhancing system transparency and fostering trust (Luo et al., 2022). Incorporating such reasoning into future HMI designs may enhance users' trust in AVs. Further, the trajectory 343 information was displayed only at the periphery of the screen, while participants were 344 345 visually engaged with an NDRT. This may have led them to overlook or pay limited attention to the HMI. At the same time, previous studies have shown that visual anticipatory cues are 346 347 generally less effective at mitigating MS than non-visual cues such as auditory or tactile 348 feedback (Xie et al., 2023). This may be because the visual channel is often occupied with 349 other stimuli, whereas non-visual channels can more effectively capture attention via preemption effects (Smith et al., 2009; Wickens et al., 2005). Thus, future designs could 350 consider combining visual trajectory displays with auditory or vibrotactile cues to improve 351 352 both MS mitigation and trust formation.

Finally, our findings support the effectiveness of the first ride in trust enhancement (H3), and the increase becomes insignificant for the second ride. This suggests that the first riding experience plays a more crucial role in enhancing trust than subsequent rides. After the initial increase, trust levels stabilized. The benefit of the first ride experience on the users' trust in AV has been observed in a previous study (Wang et al., 2024). Our findings further confirm that this increase in trust may last and can be further enhanced by following rides. This increase in trust may have been enhanced by the increase in the perceived system transparency during the rides, as we also observed a significant increase in perceived system transparency from pre-ride to post-ride. This finding holds important implications for AV service providers: they should prioritize creating a positive and comfortable first ride for passengers to increase the adhesiveness of users.

364 5. Limitations

365 This research has several limitations. Firstly, the statistical power of our experimental design is optimized for detecting large effect sizes ($f^2 \ge 0.4$, alpha = 0.05, power =0.8), which 366 367 means that smaller effect sizes may not be captured within our framework. Second, all 368 participants in this study were from the younger generation, who typically have a better 369 understanding of new technology, resulting in higher initial perceptions of system 370 transparency and trust. Future research should aim to include a larger sample size and a more 371 diverse demographic representation. Finally, the dynamic trajectory plan information in this 372 study was presented using animation, along with other detected road elements (e.g., 373 surrounding vehicles and traffic signs). Though it is a common practice to provide both the 374 planned trajectory and the perceived environment simultaneously in robot taxis, future studies 375 could explore other rendering techniques, such as augmented reality (AR), and differentiate 376 the effect of the perceived road element and the trajectory on trust formation and MS 377 development in AVs.

378 6. Conclusion and Applications

- 379 In this study, we investigated the effects of dynamic trajectory plan information and 380 riding experiences on trust enhancement and MS alleviation in a fully driverless autonomous 381 vehicle. Our findings can be summarized as follows: 382 We found no significant effects of trajectory plan information on perceived system 383 transparency and trust enhancement. As such, the visualization of the dynamic trajectory 384 plan may be considered optional in commercially running AVs, from users' trust and 385 perceived transparency perspectives of view. A Wilcoxon Signed-Rank Test of variations in MSAQ constructs suggests that trajectory 386 information may alleviate MS, although simply displaying the planned trajectory without 387 388 conveying acceleration yielded insignificant results in ANOVA analysis. 389 The initial riding experience plays a critical role in enhancing trust than subsequent rides, 390 and trust does not appear to increase with one additional ride. AV operators may put more
- 391 emphasis on attracting first-time users.
- 392 Author Contribution

Weiyin Xie: Conceptualization, Data curation, Formal analysis, Writing – original draft,
Methodology, Investigation; Zhenyu Wang: Data curation, Writing – review & editing;
Dengbo He: Funding acquisition, Project administration, Supervision, Writing – review &
editing

397 Declaration of Competing Interest

398 The authors acknowledge that they have no conflicts of interest in this work.

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537 Appendix

Table A.1. Trust questionnaire used before and after the ride

| Question | Initial scale (before a ride) | Final scale (after a ride) |
|----------|--|---|
| Q1 | I would feel safe in the autonomous | I felt safe in the autonomous vehicle. |
| | vehicle. | |
| Q2 | The AV provides me with more | The AV provided me with more safety |
| | safety compared to human drivers. | compared to human drivers. |
| Q3 | I would trust the decisions of an AV | I trusted the decisions of an AV in most |
| | in most situations. | situations. |
| | | |
| Q4 | If the traffic conditions are | complex, I will not take an AV. |
| Q5 | If the weather conditions are terrible (| e.g., fog, glare, rain), I will not take an AV. |
| Q6 | Rather than monitoring the traffic | Rather than monitoring the traffic |
| | environment, I can focus on other | environment, I could focus on other |
| | activities confidently. | activities confidently. |
| | | |

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