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2 Identifying beliefs underlying pre-drivers' intentions to take risks:

3 An application of the Theory of Planned Behaviour

4

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17

18 Abstract

19 Novice motorists are at high crash risk during the first few months of driving. Risky
20 behaviours such as speeding and driving while distracted are well-documented contributors to
21 crash risk during this period. To reduce this public health burden, effective road safety
22 interventions need to target the pre-driving period. We use the Theory of Planned Behaviour
23 (TPB) to identify the pre-driver beliefs underlying intentions to drive over the speed limit
24 (N=77), and while over the legal alcohol limit (N=72), talking on a hand-held mobile phone
25 (N=77) and feeling very tired (N=68). The TPB explained between 41% and 69% of the
26 variance in intentions to perform these behaviours. Attitudes were strong predictors of
27 intentions for all behaviours. Subjective norms and perceived behavioural control were
28 significant, though weaker, independent predictors of speeding and mobile phone use.
29 Behavioural beliefs underlying these attitudes could be separated into those reflecting
30 perceived disadvantages (e.g., speeding increases my risk of crash) and advantages (e.g.,
31 speeding gives me a thrill). Interventions that can make these beliefs safer in pre-drivers may
32 reduce crash risk once independent driving has begun.

33

34 **Introduction**

35 Road traffic crashes are a serious challenge to public health. On UK roads there were 1754
36 fatalities and 23039 serious injuries during 2012 (Department for Transport, 2013). Novice
37 drivers are over-represented in crash statistics, with particular vulnerability during the first
38 few months of driving (McCartt, Mayhew, Braitman, Ferguson, & Simpson, 2009). While
39 skill deficits are likely to contribute to this crash risk among young drivers, propensity to take
40 risks and violate safe driving laws and conventions also make strong contributions (Blows,
41 Ameratunga, Ivers, Lo, & Norton, 2005; Rowe, Roman, McKenna, Barker, & Poulter, 2015).
42 Road traffic violations are more strongly correlated with crash involvement in younger than
43 older drivers (de Winter & Dodou, 2010).

44 The concept of violations includes a number of separate, though correlated, risky
45 behaviours (e.g., Reason, Manstead, Stradling, Baxter, & Campbell, 1990). Evidence shows
46 that speeding is a risk factor for crash involvement (Aarts & van Schagen, 2006). Desire to
47 drive faster than is safe for road conditions is a component of many other violations including
48 tailgating, crossing red lights and dangerous overtaking. Other well documented risk factors
49 include driving under the influence of alcohol (Fell & Voas, 2014), while using a mobile
50 phone (Ferdinand & Menachemi, 2014) and while sleepy (Garbarino, Nobili, Beelke, De
51 Carli, & Ferrillo, 2001). Young drivers are particularly likely to engage in violations (Reason
52 et al., 1990). Their sleep is more commonly disturbed (Lyznick, Doege, Davis, & Williams,
53 1998) and their driving may be more vulnerable to sleep disruption (Groeger, 2006).

54 A recent study applied growth curve modelling to violation data repeatedly measured
55 over the first three years of driving (Roman, Poulter, Barker, McKenna, & Rowe, 2015). This
56 study identified three latent classes of driver who followed trajectories of consistently high,
57 medium or low levels of violations across the study period. This suggests that the key

58 determinants of risky driving behaviour develop very early in driving or are in place before
59 driving starts.

60 A number of sources of evidence highlight that the attitudes underlying violating
61 behaviour develop during pre-driving. Pre-driving is defined here as the period before
62 independent driving on public roads. In the UK pre-drivers include people without a driving
63 licence and provisional licence holders who can only drive on public roads for the purposes
64 of training, under the supervision of a fully licensed driver. Waylen and McKenna (2008)
65 showed that correlates of risky attitudes among 11-16 year old pre-drivers were similar to
66 those in independent drivers in that they were riskier in males than females and were related
67 to social deviance and sensation seeking. Longitudinal studies show pre-driving attitudes
68 predict post-licence behaviour. Mann and Sullman (2008) found pre-driving speeding
69 intentions predicted violation behaviours ($r=.28$) when the sample was driving independently
70 12 months later. Rowe, Maughan, Gregory and Eley (2013) reported that violations were
71 predicted by attitudes to speeding in learners ($r=.33$) and non-drivers ($r=.13$) measured three
72 years earlier.

73 Effective pre-driving interventions are required to reduce the elevated crash rates
74 observed in the first few months of driving. This may offer the opportunity to influence
75 driving behaviours before they become automated (Harre, Brandt, & Dawe, 2000). A further
76 advantage is that intervention participation can be mandatory in the licencing process.
77 Current evidence indicates that: (a) attitudes to speeding become riskier during the transition
78 from pre-driver to full driver, a tendency that interventions must counter; and (b) attitudes to
79 other violations (e.g., using the horn to indicate displeasure) are safer in independent drivers
80 than pre-drivers, a trend that interventions must enhance (Helman, Kinnear, McKenna,
81 Allsop, & Horswill, 2013; Rowe, Andrews, & Harris, 2013; Rowe, Maughan, et al., 2013).

82 Many interventions using different forms of delivery and targeting various attitudes
83 and behaviours have been applied to pre-drivers with little evidence of efficacy. The literature
84 contains reports of interventions with little or no effect or that had unintended negative
85 consequences (Glendon, McNally, Jarvis, Chalmers, & Salisbury, 2014; Poulter & McKenna,
86 2010; Roberts & Kwan, 2006). This problem is not peculiar to pre-drivers; interventions for
87 drivers are also often ineffective (Ker et al., 2003). Road safety interventions are often based
88 on presenters' intuitions rather than psychological theory, although theory-based
89 interventions are likely to be more effective than atheoretical ones (Michie, Rothman, &
90 Sheeran, 2007). A recent meta-analysis of internet-based interventions across a range of
91 health behaviours (Webb, Joseph, Yardley, & Michie, 2010) found that those based on the
92 Theory of Planned Behaviour (TPB; Ajzen, 1991) showed larger effects than interventions
93 based on other theories and those without theoretical foundation.

94 The TPB has often been employed to understand the psychological antecedents of
95 health related behaviours to inform intervention design (Ajzen, 2013). For example, a recent
96 meta-analysis reported that the TPB accounted for 44% of the variance in intentions and 19%
97 of behavioural variance across 237 prospective empirical tests (McEachan, Conner, Taylor, &
98 Lawton, 2011). The TPB proposes that intention is the most proximal determinant of
99 behaviour and that intentions are themselves based upon (1) attitudes (positive/negative
100 evaluations of the behaviour), (2) subjective norms (perceived social pressure regarding the
101 behaviour) and (3) perceived behavioural control (perceived ease/difficulty of controlling the
102 behaviour). Each of these components is posited to summarise sets of salient beliefs.
103 Underlying attitudes are behavioural beliefs about likely behavioural consequences; for
104 example believing that speeding means quicker journeys might be one of a set of behavioural
105 beliefs underlying a positive attitude towards speeding. Similarly, sets of normative beliefs
106 about the perceived opinions of significant others are proposed to underlie subjective norms,

107 and sets of control beliefs about factors that facilitate or inhibit behaviour to underlie
108 perceived behavioural control.

109 Studies have demonstrated that TPB components effectively predict driving
110 violations. For example, the TPB components have been found to predict speeding intentions
111 in drivers and motorcyclists (e.g., Chorlton, Conner, & Jamson, 2012; Conner et al., 2007;
112 Elliott, Armitage, & Baughan, 2007; Parker, Manstead, Stradling, & Reason, 1992).
113 Longitudinal data have shown that change in the TPB components predicts change in
114 speeding intentions, providing increased confidence that the TPB components cause
115 intentions (Elliott, 2012). The TPB components have also been shown to underlie intentions
116 regarding other violations including drink-driving (Moan & Rise, 2011; Parker et al., 1992)
117 and mobile phone use (Gauld, Lewis, & White, 2014; Nemme & White, 2010).

118 A subset of TPB studies has examined drivers' beliefs regarding speeding (Chorlton
119 et al., 2012; Elliott, Armitage, & Baughan, 2005; Parker et al., 1992) and drink-driving
120 (Parker et al., 1992). Across these studies important behavioural beliefs have included
121 arriving at destinations more quickly, feeling exhilarated, greater fuel usage, and increased
122 crash likelihood. Identified normative beliefs include disapproval from family, friends, police
123 and other road users. Salient control beliefs have addressed road conditions, time pressure
124 and the behaviour of other drivers. Two studies have developed effective interventions to
125 change the beliefs identified via the TPB, thereby reducing violation intentions in drivers
126 with a range of experience (Elliott & Armitage, 2009; Parker, Stradling, & Manstead, 1996).

127 This paper applies the TPB to guide identification of pre-driver beliefs underlying
128 intentions to drive over the speed limit, while over the legal alcohol limit, talking on a hand-
129 held mobile phone and feeling very tired. The TPB has not previously been applied to
130 identify the beliefs underlying risky intentions in pre-drivers. Given that pre-drivers cannot

131 actually violate, we focus on intentions to violate as our outcome measure. This approach is
132 supported by evidence that intentions are strong predictors of behaviour. In a meta-analysis of
133 185 studies, the intention-behaviour correlation was .47 (Armitage & Conner, 2001). A meta-
134 analysis of 47 experimental studies showed that manipulating intentions has a significant
135 impact on subsequent behaviour ($d=.36$, Webb & Sheeran, 2006). Drivers' speeding
136 intentions correlate with self-reported behaviour, $r=.67$ to $.76$ (Elliott, Armitage, & Baughan,
137 2003; Elliott et al., 2007) and with speeding in both real driving, $r=.41$, and in a simulator,
138 $r=.48$ (Conner et al., 2007).

139 The present study has two phases. In a qualitative belief elicitation study, pre-drivers
140 identified behavioural, normative and control beliefs underlying violations. Next, a
141 quantitative study assessed the extent to which the modal salient beliefs identified in phase 1
142 were associated with components of the TPB, and which TPB components were most
143 strongly associated with intentions to engage in the risky driving behaviours once a licence
144 was awarded.

145

146 **Method**

147 *Elicitation Study*

148 Sixty students from a Yorkshire sixth form college participated in the elicitation study. They
149 completed the study in a classroom session under the supervision of a college tutor. Their
150 mean age was 16.6 years (range 16-18 years), 53% were female and 85% reported their
151 ethnic origin as White British. Fifty-three per cent had no driving licence, which means they
152 were prohibited from driving on public roads under any circumstances and 47% held a
153 provisional licence that allows supervised driving for training purposes. Students were
154 randomised to answer questions about behavioural, normative and control beliefs regarding

155 one of *driving over the speed limit* (N=17), *driving while talking on a hand-held mobile*
156 *phone* (N=16), *driving whilst feeling very tired* (N=12) and *driving while over the legal*
157 *alcohol limit* (N=15).

158 Following the standard method for TPB belief elicitation studies (Ajzen, 2013;
159 Conner & Sparks, 2015) we elicited behavioural beliefs in questionnaires that asked the
160 participants what they believed (a) to be the advantages, (b) to be the disadvantages (c) they
161 would like or enjoy and (d) would dislike or hate about a target behaviour. Normative beliefs
162 were elicited by asking (e) “Which individuals would approve (i.e., think it was a good
163 idea)?”, (f) “Which individuals would disapprove (i.e., think it was a bad idea)?”, and (g)
164 “Are there any other individuals or groups of people who would approve or disapprove of
165 you driving over the speed limit?”. Control beliefs were probed by asking “What things (i.e.,
166 factors or circumstances)?” would make the target behaviour (h) more and (i) less likely and
167 (j) whether there were other things that would make the target behaviour more or less likely.
168 Two raters independently coded the generated beliefs. Coding agreement ranged from 89% to
169 95% across the four violations studied. Commonly identified beliefs (identified by more than
170 3 participants), were used to populate the belief questionnaires in the main study (see Tables
171 1-4).

172 *Main Study*

173 *Participants and procedure*

174 There were 294 participants from five Yorkshire schools and sixth form colleges.
175 Questionnaires were completed in classroom settings under the supervision of school/college
176 tutors. The average age was 17.06 (SD = 0.68, range 16-19) and 62% were female. Seventy-
177 eight per cent of the sample identified themselves as White British with the remainder
178 identifying ethnicities including Black African (3%) and Pakistani (3%). Forty-six per cent

179 did not have a driving licence and 54% held provisional licences. Participants were
180 randomised to answer questions regarding one of the four violations targeted: *driving over*
181 *the speed limit* (N=77), *driving while over the legal alcohol limit* (N=72), *driving while*
182 *talking on a hand-held mobile phone* (N=77) and *driving whilst feeling very tired* (N=68).
183 Participants provided informed consent and all study procedures, including the belief
184 elicitation study, were approved by the Ethics Committee, Department of Psychology,
185 University of Sheffield.

186 *Measures*

187 Beliefs

188 The belief questions in the main study were based on the beliefs identified in the elicitation
189 study. The behavioural beliefs were presented as statements. Participants rated how likely
190 they thought each statement (e.g., Driving over the speed limit would increase my chances of
191 injuring other road users) was to be true on a 7 point scale anchored Unlikely - Likely.
192 Normative beliefs were presented as statements about different groups of people that might
193 approve or disapprove of engagement in each violation (e.g., My parents think that I
194 should/should not drive whilst talking on a hand-held mobile phone) on a 7 point scale
195 anchored Think I should – Think I should not. Scores were reversed so that high scores
196 indicated greater violation approval. Control beliefs were presented as statements about how
197 situations might affect the likelihood of engaging in the violations (e.g., Having no alternative
198 way to get home). Participants rated these on a seven point scale anchored Less likely – More
199 likely. These items were reverse scored so that higher scores indicated less behavioural
200 control.

201 Components of the Theory of Planned Behaviour

202 The components of the TPB (attitudes, subjective norms, perceived behavioural control) were
203 measured using the standard questions from the literature (Conner & Sparks, 2015). In this
204 approached each construct is probed with a set of defined items, which tap overlapping but
205 distinct aspects of the construct. The overall score for each TPB component is calculated as
206 the mean of the item-set. Taking the mean provides an index of the composite construct and
207 reduces the impact of item-specific measurement error on the construct score. Cronbach's
208 alpha is calculated to check that the constituent items are measuring the same construct.
209 Alpha values range between 0 and 1 with higher scores indicating greater internal
210 consistency.

211 Attitudes

212 Attitudes to the target behaviours were measured as the mean of four semantic differential
213 items rated on seven point scales. These asked whether the target behaviour would be (1)
214 Pleasant – Unpleasant, (2) Harmful – Beneficial, (3) Negative – Positive, and (4) Wise –
215 Foolish. Items were coded so that higher scores indicated riskier attitudes. Cronbach's alpha
216 reliabilities ranged from .83 to .86 across the four target behaviours.

217 Subjective Norms

218 Subjective norms regarding the target behaviours were measured as the mean of two items,
219 each rated on a seven point scale, e.g., (1) People who are important to me think I
220 should/should not *drive over the speed limit* and (2) People who are important to me would
221 approve/disapprove of me *driving over the speed limit*. The poles were labelled Think I
222 should – Think I should not and Would approve – Would disapprove for these items
223 respectively. These items were coded so that higher scores indicated greater approval for
224 violating. Alpha reliabilities ranged from .58 to .72 across the four target behaviours.

225 Perceived Behavioural Control

226 Perceived behavioural control was measured using the mean of four items addressing (1)
227 How much control would you have over whether or not you would *drive over the speed limit?*
228 with scale poles labelled Complete control – No control, (2) I would have complete control
229 over whether or not I would *drive over the speed limit* with scale poles labelled Agree –
230 Disagree, (3) If I wanted to, *driving over the speed limit* would be... with scale poles labelled
231 Easy – Difficult and (4) If I wanted to, I could easily *drive over the speed limit* with scale
232 poles labelled Likely – Unlikely. High scores indicated more difficulty in controlling the
233 behaviour. Alpha reliabilities ranged from .48 to .78 across the four target behaviours.

234 Intention

235 Intention was measured as the mean of three items; (1) How likely is it that you would *drive*
236 *over the speed limit?* (Likely – Unlikely) (2) I would be very likely / unlikely to *drive over*
237 *the speed limit...* (Very likely – Very unlikely) and (3) How willing would you be to drive
238 over the speed limit? (Very willing – Not at all willing). Items were recoded so that higher
239 scores indicated riskier intentions. Alpha ranged from .64 to .80 across the four target
240 behaviours.

241 *Analysis*

242 There were many moderate and strong correlations within the sets of behavioural, normative
243 and control beliefs elicited. Therefore we conducted exploratory factor analyses to combine
244 related beliefs into scales. Many belief variables were non-normally distributed. Therefore we
245 analysed them as ordinal scales using Geomin rotation, allowing correlated factors to be
246 extracted, in MPlus 7.11 (Muthen & Muthen, 2013). The only exception was the control
247 beliefs regarding driving while tired where the Mplus models would not converge. Therefore

248 a principal component factor analysis with promax rotation was conducted in Stata 10.1
249 (StataCorp, 2007) for these items. Factor solutions were primarily chosen based on the scree
250 plot and factor interpretability, with cross-loading items minimised. We then formed scales
251 by adding up the scores of high loading items ($>.5$), the reliability of which were examined
252 using Cronbach's alpha. Regression models guided by the TPB identified the extent to which
253 behavioural beliefs predicted attitudes, normative beliefs predicted subjective norms and
254 control beliefs predicted perceived behavioural control. We also fitted models to identify the
255 extent to which attitudes, subjective norms and perceived behavioural control predicted
256 intentions to drive riskily.

257 **Results**

258 *Exploratory Factor Analyses of Belief Variables*

259 Driving over the speed limit: The commonly identified beliefs from the elicitation study, and
260 the results of the factor analyses conducted on the quantitative items formed from these
261 beliefs, are shown in Table 1. Two factor models provided good fits to the behavioural,
262 normative and control beliefs. Factor structure was interpretable with the minor exception of
263 one cross-loading control belief item. This item was omitted from both scales. Items
264 addressing dangers of speeding, such as the chances of injuring others loaded onto one
265 behavioural beliefs factor. The other represented advantages of speeding, including "looking
266 cool" and arriving more quickly. The normative belief analysis identified separate factors
267 comprising disapprovers (e.g., the police) and approvers (e.g., young people) of speeding.
268 The two control beliefs factors separated items that formed pressures for speeding (e.g., being
269 in a rush or an emergency) from those that inhibited speeding (e.g., weather conditions). In
270 all cases correlations between factors were modest. Alpha analyses indicated that summing
271 the high loading items generated reliable scales.

272

273 Table 1. Factor analyses of beliefs regarding driving over the speed limit

Belief	Factor 1*	Factor 2*
<i>Behavioural beliefs</i>		
<i>Driving over the speed limit would...</i>	<i>Dangers</i>	<i>Advantages</i>
...increase my chances of injuring other road users	.99	
...increase my chances of injuring myself	.97	
...increase my chances of trouble with the police	.88	
...increase my chances of having an accident	.87	
...annoy other road users	.57	
...make me look good/cool		.83
...give me a thrill		.78
...allow me to get to my destination quicker		.62
Factor correlation = -.08	$\alpha=.89$	$\alpha=.71$
<i>Normative beliefs</i>		
<i>...think that I should/should not driver over the speed limit</i>	<i>Disapprovers</i>	<i>Approvers</i>
Police / Other authorities...	.97	
Older people...	.93	
Sensible people...	.90	
Most people...	.85	
My family...	.81	
My friends...	.65	
People who enjoy speeding...		.82
Young people...		.70
Men...		.67
People such as chavs...		.50
Factor correlation = .16	$\alpha=.89$	$\alpha=.69$
<i>Control beliefs</i>		
<i>...would make driving over the speed limit less/more likely</i>	<i>Pressures</i>	<i>Inhibitors</i>
Being in a rush...	.75	
Being in an emergency...	.83	
Certain weather conditions (e.g. rain, fog)92

Having passengers in my car...		.84
The presence of police / speed cameras...		.69
Being with my friends who are encouraging me to speed**...	.58	.59
Certain road conditions (e.g. busy traffic)...		.51
Factor correlation = .13	$\alpha=.70$	$\alpha=.77$

274 *Only factor loadings above .5 are displayed

275 **Cross-loading item omitted from both scales

276

277 Driving while over the legal alcohol limit: Two factor models were again selected for all
 278 belief types (Table 2). Behavioural beliefs were separated into negatively correlated factors
 279 representing the dangers (e.g., increased accident risk) and advantages (e.g., give me a thrill)
 280 of driving under the influence of alcohol. Normative beliefs separated into disapprovers (e.g.,
 281 my family) and approvers (e.g., “chavs”¹). Control beliefs were separated into pressures to
 282 encourage driving under the influence (e.g., an emergency) and inhibitors (e.g., the presence
 283 of police). Scales based on high loading items had acceptable reliabilities.

284

¹ “Chav” is slang for an antisocial young person

285 Table 2. Factor analyses of beliefs regarding driving while over the legal alcohol limit

Belief	Factor 1*	Factor 2*
<i>Behavioural beliefs</i>		
<i>Driving while over the legal alcohol limit would...</i>	<i>Dangers</i>	<i>Advantages</i>
...increase my chances of hurting other road users	.99	
...increase my chances of injuring myself	.95	
...increase my chances of having an accident	.92	
...impair my driving performance (e.g. poor judgement, slow reactions etc.)	.90	
...increase my chances of losing control of the car	.87	
...be fun and give me a thrill		.94
...put me in a good mood		.89
...give me an advantage over other road users		.72
...be more convenient for me		.60
Factor correlation = -.33	$\alpha = .94$	$\alpha = .85$
<i>Normative beliefs</i>		
<i>...think that I should/should not drive whilst over the legal alcohol limit</i>	<i>Disapprovers</i>	<i>Approvers</i>
My family...	.99	
My parents...	.98	
Other road users...	.96	
Sensible people...	.95	
Most people...	.85	
My friends...	.81	
The police/authorities...	.92	
People such as chavs...		.92
People who have a drinking problem...		.77
Foolish people (e.g. idiots)...		.78
Factor correlation = .05	$\alpha = .92$	$\alpha = .82$
<i>Control beliefs</i>		
<i>...would make driving whilst over the legal alcohol limit less/more likely</i>	<i>Pressures</i>	<i>Inhibitors</i>
Having no alternative way to get home...	.83	
Having friends with me...	.71	
Being in an emergency situation...	.59	

The presence of the police...		.96
Knowing a victim of a road accident...		.93
Having thought about the risks...		.82
Having passengers in the car... **	.58	.73
Factor correlation = -.03	$\alpha=.68$	$\alpha=.88$

286 *Only factor loadings above .5 are displayed

287 **Cross-loading item omitted from both scales

288 Driving whilst talking on a hand-held mobile phone: Table 3 shows that there were two
 289 behavioural beliefs factors; dangers (including reduced control of car) and advantages
 290 containing two items (allow me to talk with people and to multi-task). Although the
 291 normative beliefs factor analysis identified two factors, the second factor had an eigenvalue
 292 of only 1.12, there were cross-loading items, and a substantial correlation between the factors
 293 ($r=.64$). Therefore a one factor solution was preferred. All items loaded positively onto the
 294 single factor representing disapprovers of driving while using a phone. Two control beliefs
 295 factors were identified: pressures encouraging phone use (e.g., an emergency) and inhibitors
 296 to prevent it (e.g., driving near pedestrians). Alpha reliabilities were acceptable for
 297 constructed scales.

298

299 Table 3. Factor analyses of beliefs regarding driving whilst talking on a hand-held mobile
 300 phone

Belief	Factor 1*	Factor 2*
<i>Behavioural beliefs</i>		
<i>Driving whilst talking on a hand-held mobile phone would...</i>		
...allow me to keep in touch / talk with people		.95
...allow me to multi-task		.58
...reduce my control of the car	.89	

...increase my chances of having an accident	.88		
...mean diverting my attention from the road	.88		
...increase my level of distraction	.88		
...increase the chances of trouble with the police	.75		
Factor correlation = .02	$\alpha=.86$		$\alpha=.67$
<i>Normative beliefs</i>			
...think that I should/should not drive whilst talking on a hand-held mobile phone		<i>Disapprovers</i>	
Older people...	.93		
Sensible people...	.90		
My parents...	.89		
Police and other authorities...	.82		
Most people...	.79		
Young people...	.57		
Foolish people (e.g. idiots)...			
	$\alpha=.77$		
<i>Control beliefs</i>			
...would make driving whilst talking on a hand-held mobile phone less/more likely		<i>Pressures</i>	<i>Inhibitors</i>
Needing to make an important or urgent call...	.93		
Receiving an important call...	.77		
Being in an emergency situation...	.51		
Driving on a quiet or remote road...			
Driving near pedestrians or a school...			.93
Police presence...			.95
Knowing of road accidents involving drivers using mobile phones...			.91
Driving in busy traffic...			.67
Factor correlation = .10	$\alpha=.71$		$\alpha=.87$

301 *Only factor loadings above .5 are displayed

302 Driving while feeling very tired: As shown in Table 4, we preferred a one factor behavioural
303 beliefs solution as, in the two factor model, the second factor eigenvalue was only 1.08, a
304 number items loaded onto both factors and there was a strong correlation between the factors

305 (r=.59). The single factor focussed on the dangers of driving while tired, including poor
 306 concentration. There was a single subjective norms factor including disapprovers of driving
 307 while tired. The principal components factor analysis of control beliefs identified two
 308 components. Two items loaded onto a pressures to drive while tired factor (needing to drive
 309 early in the morning and late at night). Three items loaded onto an inhibitors factor including
 310 having no real need to drive. All alphas were above .60 for the constructed scales.

311

312 Table 4. Factor analyses of beliefs regarding driving whilst feeling very tired

Belief	Factor 1*	Factor 2*
<i>Behavioural beliefs</i>		
<i>Driving whilst feeling very tired...</i>	<i>Dangers</i>	
...impair my driving performance (e.g. poor concentration)	.94	
...increase my chances of having an accident	.88	
...increase my chances of hurting other road users	.88	
...result in me having slower reactions to events on the road	.83	
...increase my chances of falling asleep at the wheel	.77	
...increase the probability of me dying	.69	
...mean I had to invest greater effort to stay awake	.67	
...get me to my destination quicker than using public transport		
...give me an advantage over other road users***	.71	
	$\alpha = .91$	
<i>Normative beliefs</i>		
<i>...think that I should/should not drive whilst feeling very tired</i>	<i>Disapprovers</i>	
The police/authorities...	1.00	
Sensible people...	.90	
Most people...	.83	
Older people...	.77	

Young people...	.66		
Foolish people (e.g. idiots)...****			
	$\alpha = .88$		
<i>Control beliefs**</i>			
<i>...would make driving whilst feeling very tired less/more likely</i>		<i>Pressures</i>	<i>Inhibitors</i>
Needing to drive in the early morning...	.90		
Needing to drive late at night...	.87		
Having no real need to make a journey...			.81
Being in an emergency situation...***			.77
Fear of having an accident...			.66
Factor correlation = .09	$\alpha = .70$		$\alpha = .61$

313 *Only factor loadings above .5 are displayed

314 **Factor results calculated using Principal Factor Analysis with promax rotation

315 ***Item reverse scored

316 **** Item dropped as preventing model convergence

317

318 *Theory of Planned Behaviour Analyses*

319 As Table 5 shows, attitudes, subjective norms and perceived behavioural control jointly

320 accounted for substantial proportions of variance in intentions regarding all behaviours (R^2

321 range .41 - .69). Attitudes were significant independent predictors of intention for all

322 behaviours, whereas subjective norms and perceived behavioural control predicted intention

323 to speed and use a mobile phone, but did not predict intention to drive under the influence of

324 alcohol or while tired.

325

326 Table 5. β coefficients (and 95% Confidence Intervals) from multiple regression models
 327 predicting risky intentions from attitudes, subjective norm and perceived behavioural control

Predictor ¹	Driving...			
	Over the speed limit	Over the legal alcohol limit	While talking on a hand-held mobile phone	While feeling very tired
N	77	72	77	68
R ²	.69***	.68***	.63***	.41***
Attitudes	.53*** (.35, .70)	.72*** (.50, .94)	.53*** (.33, .73)	.49** (.21, .78)
Subjective norms	.29** (.12, .46)	.08 (-.13, .29)	.19* (.02, .37)	.14 (-.14, .42)
Perceived behavioural control	.19** (.05, .33)	.10 (-.05, .26)	.17* (.01, .33)	.13 (-.10, .34)

328 ¹Age and sex were entered as covariates into all models.

329 ***p<.001 **p<.01 *p<.05

330

331 As Table 6 shows, behavioural beliefs regarding dangers predicted attitudes towards all
 332 behaviours. Behavioural beliefs regarding advantages predicted attitudes to speeding and
 333 driving under the influence of alcohol. Normative beliefs about disapprovers of violating
 334 predicted subjective norms for all behaviours. Where normative beliefs about approvers of
 335 violation were identified (speeding and driving under the influence of alcohol), they did not
 336 predict subjective norms independently from normative beliefs regarding disapprovers.
 337 Inhibitory control beliefs predicted perceived behavioural control for speeding, with no
 338 significant predictors of perceived behavioural control identified for the other behaviours.

339

340 Table 6. β coefficients (and 95% Confidence Intervals) from multiple regression models predicting attitudes, subjective norms and perceived
 341 behavioural control from the beliefs hypothesised to underlie these constructs according to the Theory of Planned Behaviour. Age and sex were
 342 entered as covariates into all models.

Driving...	Behavioural Beliefs	Attitudes	Normative Beliefs	Subjective norms	Control Beliefs	Perceived behavioural control
...Over the speed limit		$R^2=.54^{***}$		$R^2=.46^{***}$		$R^2=.20^{**}$
	Dangers	-.40*** (-.56, -.24)	Disapprovers	.58*** (.39, .77)	Pressures	.08 (-.14, .31)
	Advantages	.58*** (.42, .75)	Approvers	.15 (-.04, .33)	Inhibitors	-.33** (-.56, -.10)
...While over the legal alcohol limit		$R^2=.28^{***}$		$R^2=.19^{**}$		$R^2=.04$
	Dangers	-.32** (-.55, -.09)	Disapprovers	.43*** (.20, .65)	Pressures	.02 (-.23, .27)
	Advantages	.28* (.06, .50)	Approvers	-.16 (-.39, .06)	Inhibitors	.18 (-.07, .43)
...While talking on a hand-held mobile phone		$R^2=.27^{***}$		$R^2=.22^{***}$		$R^2=.07$
	Dangers	-.44*** (-.64, -.25)	Disapprovers	.45*** (.23, .66)	Pressures	.18 (-.06, .43)
	Advantages	.17 (-.03, .36)			Inhibitors	-.10 (-.36, .16)

...While feeling very tired		$R^2=.42^{***}$		$R^2=.45^{***}$		$R^2=.07$
	Dangers	-.64*** (-.83, -.44)	Disapprovers	.64*** (.45, .84)	Pressures	.01 (-.24, .26)
					Inhibitors	.13 (-.12, .38)

343 **Discussion**

344 Application of the TPB to pre-driver intentions

345 This study used the TPB to identify pre-driving beliefs that underlie intentions to engage in
346 four driving violations. From the perspective of the TPB, the key beliefs for interventions to
347 target are those that significantly predict TPB components that in turn significantly predict
348 intentions. In combination the TPB components were strong predictors of violation
349 intentions, explaining between 63% and 69% of the variance for driving over the speed limit,
350 driving above the legal alcohol limit and driving while talking on a hand held mobile phone,
351 and 41% in driving while feeling very tired. This compares to an average 44% of variance
352 explained in intentions by TPB variables across 206 studies (McEachan et al., 2011). In the
353 current study, attitudes were strong predictors of intentions for all behaviours while
354 subjective norms and perceived behavioural control were significant, though weaker,
355 independent predictors regarding speeding and phone use.

356 For all four violations, behavioural beliefs explained substantial proportions of
357 variance in attitude: 54% regarding speeding intentions, 42% for tiredness, 28% for alcohol
358 use and 29% for mobile phone distraction. There were some notable similarities in the
359 important beliefs identified across behaviours. A set of beliefs regarding risk of accident
360 and/or injury predicted attitudes towards all violations. Specific negative behavioural beliefs
361 were also identified. Impaired driving performance, such as diverted attention and slowed
362 reactions, and risk of loss of vehicle control were identified for alcohol use, mobile phone use
363 and tiredness. The risk of annoying other drivers was identified regarding speeding. Separate
364 behavioural belief factors regarding the advantages offered by violating were identified for
365 speeding and alcohol use. The practical advantages of violating were highlighted; arriving

366 faster for speeding and convenience for driving under the influence of alcohol. Regarding
367 speeding, a feeling of thrill and looking good or “cool” was also highlighted.

368 Subjective norms predicted intentions to speed and to use a mobile phone. Significant
369 others who disapprove of violations were prominent including the police as well as family
370 and friends, older and “sensible” people. Perceived behavioural control predicted intentions
371 to speed and to use a mobile phone. For speeding the significant control beliefs included
372 items that might reduce likelihood of speeding. These included weather and road conditions,
373 the presence of speed cameras and having passengers in the car. The identified control beliefs
374 did not predict perceived behavioural control of using a mobile phone.

375 Informing road safety interventions

376 The current results add to the information currently available to develop road safety
377 interventions for pre-drivers. Specifically, intervention designers can focus on bolstering
378 negative beliefs about risky driving (e.g., speeding increases injury risk) and countering the
379 positive beliefs (e.g., speeding substantially reduces journey times). Such belief modification
380 would be predicted to lead, in turn, to less frequent violations during future independent
381 driving. Prospective studies, ideally involving a randomised intervention to change beliefs,
382 will be needed to test this hypothesis.

383 A number of the beliefs identified here are often addressed in road safety material
384 aimed at both pre-drivers and fully qualified drivers. For example, these include the
385 behavioural beliefs that violations increase risk of crash and injury, that mobile phone use
386 causes distraction, that alcohol slows reactions, and that the police disapprove of risk taking
387 which may lead to traffic citation. Our results may therefore be seen as an impetus to
388 continue with these efforts, and in particular provide a novel basis for their extension to pre-
389 driver audiences. However, some of the other beliefs identified as important predictors in our

390 study suggest further targets for intervention. The belief that speeding will result in shorter
391 journey times could be addressed with demonstrations that speeding motorists are likely to
392 save relatively little time on many journeys. A body of literature has addressed biases in
393 assessment of time savings relative to speed (e.g., Svenson, 2008) and interventions
394 developed there could be applied in pre-driving education. Beliefs that risk-taking looks good
395 and is enjoyable may be addressed with counter-examples in which risk-taking leads to
396 negative consequences such as disapproval from passengers, embarrassing road-side
397 discussions with police or unattractive damage to vehicles. Beliefs about family and
398 disapproval of speeding and mobile phone use may be enhanced by making this a focus of
399 road safety material.

400 Road safety education packages addressing the beliefs identified here may take
401 various forms including media campaigns, on- and off-line literature, and live small- and
402 large-group educational programmes. For example, media-based packages often graphically
403 depict car crashes resulting from speeding, alcohol consumption, distraction or fatigue.
404 Interventions of this form are likely to have high face validity as bolstering the behavioural
405 beliefs that risky behaviour increases the risk of crash and injury; beliefs that we have
406 identified as important predictors of intentions to violate in this study. Indeed, face validity is
407 a necessary component for road safety intervention; both the presenters and audience must
408 view the intervention as acceptable and appropriate for the intervention to be viable for large-
409 scale adoption. However, face validity is not sufficient; interventions must also demonstrate
410 objective evidence that they can change their attitudinal and behavioural targets, ideally in
411 randomized controlled trials (RCT).

412 A body of research has begun to address links between parent and child driving and
413 the concept of family culture for road safety has been developed (Taubman-Ben-Ari & Katz-

414 Ben-Ami, 2012). A number of interventions for teen driver road safety have targeted parental
415 behaviours (Curry, Peek-Asa, Hamann, & Mirman, 2015). This approach may be particularly
416 well suited to intervening to improve the pre-driver beliefs identified in our study.

417 Evaluating road safety interventions for pre-drivers

418 Whatever form interventions to address pre-driving beliefs take, evidence that they
419 can reduce future crash rates would prove particularly compelling. However, the rarity of
420 crashes and plethora of other factors involved in their causation, such as exposure and the
421 behaviour of other road users, may make gathering evidence of this sort unfeasible
422 (Hutchinson & Wundersitz, 2011). Instead, intervention effectiveness may be tested in
423 studies that measure “variables that can be objectively observed and are closely related to
424 safety” (Hutchinson & Wundersitz, 2011 page 235). Therefore, for pre-drivers, measures are
425 required that can be answered by people who do not drive but that have been demonstrated to
426 correlate with safety-critical aspects of behaviour in drivers. Examples include the Attitudes
427 to Driving Violations Scale (West & Hall, 1997) which, when assessed in learner drivers
428 predicts post-license driving violations (Rowe, Maughan, et al., 2013) and the Violations
429 Willingness Scale, which correlates strongly with driving violations when measured in
430 drivers (Rowe, Andrews, et al., 2013).

431 As discussed in the introduction, there is currently little RCT evidence for the
432 effectiveness of pre-driver road safety interventions. However, there is evidence that TPB-
433 informed interventions may be effective in encouraging other health behaviours, such as
434 reduced alcohol consumption and smoking (Webb et al., 2010). We also noted that two
435 studies reported effective TPB based interventions with driving. Elliott and Armitage (2009)
436 found that messages regarding control beliefs were key to mediating the effect of their
437 intervention. Conversely, Parker et al. (1996) found that targeting normative beliefs was most

438 effective. Although not directly comparable, the strength of the association between attitudes
439 and intention is striking in the current study and indicates that behavioural beliefs may be a
440 particularly attractive initial target for RCT studies of interventions for pre-drivers.

441 Limitations

442 These results must be considered in the context of a number of limitations. First, the
443 reliability of some of the assessed TPB variables was lower than desirable. It is likely that
444 measuring these constructs using a small number of items contributed to this issue. Using
445 more items might have improved reliability but this would also have contributed to
446 participant fatigue. Second, the focus on pre-drivers meant that our outcome measures were
447 intentions to drive riskily in the future rather than risky driving behaviour. Studies following
448 up from pre-driving to actual driving behaviour months or years later are clearly of great
449 value in identifying key pre-driving beliefs and attitudes. Currently these are rare in the
450 literature. We believe that our results provide a useful guide to the pre-driving beliefs that are
451 likely to be important in safe driving that can inform intervention at the present time. Our
452 results and approach may also inform the design of longitudinal studies that can track
453 associations of pre-driving beliefs and post-driving behaviours across the driver training
454 process.

455 Implications

456 The early driving period is an attractive target for road safety intervention in that
457 crash risk is very high in the first few months after beginning independent driving (McCartt
458 et al., 2009). Therefore, interventions that are effective for only a few months could have a
459 strong road safety impact. This situation contrasts with many other health behaviours, such as
460 alcohol use and smoking, where interventions need to be effective for much longer periods to
461 have meaningful public health impact. Combined with the political and public appetite for

462 educational solutions to the novice driver problem (Williams & Ferguson, 2004), this
463 provides considerable impetus for the design of theoretically informed road safety
464 interventions. We believe that interventions that aim to modify the pre-driving beliefs
465 identified here offer the potential to impact upon the substantial public health problem of
466 novice driver crash involvement.

467

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