

Perceived Coping Strategies to Overcome Aggressive Driving Behaviour among Road Users in Sultan Idris Education University

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Abstract

The aim of this research was to analyze the perceived coping strategies to overcome aggressive driving behaviour among road users in Sultan Idris Education University (UPSI). This research was conducted by using the cross sectional survey method. A total of 117 participants, male and female with age ranging from 18 to 60 years were recruited using convenient sampling. The participants of this research were administered with Aggressive Driving Scale (ADS) and Driver Coping Questionnaire (DCQ). The results obtained for the correlation between aggressive driving behaviour and all the coping strategies (task – focused, reappraisal, confrontive, avoidant and emotion–focused) were $r = 0.283$, $r = 0.266$, $r = 0.329$, $r = 0.638$ and $r = 0.288$ respectively. The correlations between aggressive driving behaviour and coping strategies were significantly positive. The study indicated that aggressive driving behaviour can be managed using these coping strategies which results in either positive outcome (task-focused coping style and reappraisal coping style) or negative outcome (confrontive coping style, avoidant coping style and emotion-focused coping style). The suggestion of this study was to educate road users about the coping strategies and to apply when facing violence on road.

Keywords: Aggressive driving behavior; task-focused coping style; emotion-focused coping style

1. Introduction

In these recent days, the number of road rage accidents increased rapidly in Malaysia which marked the third highest from all over Asia and ASEAN countries, behind Thailand and Vietnam (Ruxyn, 2017). According to Feng, Lei, Liu, Kumfer, Zhang, Wang and Lu (2016), road rage defines as the emotion of anger or caused by pressure and frustration involved in driving. Road rage is a form of uncontrollable violence on road that has been a subject of study for more than 30 years (Brewer, 2000). Moreover, an incident that happened on the 10th of August 2019 really impacted the researcher and led into conducting this research. It was the eve of Eid Al-Adha, Muslims and non-Muslims were busy going back to their respective hometown for the holidays while a man was killed due to a devastating road rage that occurred near Sungai Besi toll plaza, Malaysia (Golingai, 2019). The incident showed that aggressive driving behaviour is deadly and it is necessary to know the coping strategies to overcome the aggressiveness before more unfortunate cases occur.

The analysis of Number of Road Accidents in Malaysia from 2012 to 2019 indicated that the highest number of road accidents were recorded in

2019 since 2012 with an alarming of 567,520 cases which included road rage as one of the causes of accidents (Müller, 2021). Almost everyone in Malaysia had at least honked in anger, shot death glares and even flipped the finger at some point or been on the receiving end of these displays of anger (Wong, 2019). Aggressive driving behaviour is an alarming phenomenon for road safety because it is associated with an increased risk of road crashes and accidents (Krahe, 2005). For instance, inappropriate driving or aggressive driving behaviour results in accidents, serious physical injury such as losing limbs, physical and mental impairment as well as death to the driver or another party (Franzen, 2017).

According to World Health Organization (WHO), the Road Safety of Western Pacific Region, reported that road fatalities of Malaysia was 6872 and estimated road traffic death rate per 100 000 population was 25.0 which was far more higher than other country such as Australia which reported road traffic fatalities 1363 and estimated road traffic death rate per 100 000 population was 6.1 (2013). This statistics also shows that Malaysia is a high risk country with road fatalities and accidents compared to other countries such as the United States, Britain, Australia, New Zealand, Spain and Turkey.

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Furthermore, road rages that leads to accidents causes financial burden to the government and Malaysia's society (Masuri, Dahlan, Danis & Isa, 2015). Based on a study by Sullman et al., (2015), higher number of crashes were reported compared to previous study which also supports the official statistics that highlights the fact that traffic injury and fatalities rate in Malaysia were considerably higher compared to other countries.

In Malaysia, many interventions were done, such as increasing the amount of summons which aims to educate the drivers had seen no changes on driver's behaviour (Masuri et al., 2015). The Malaysian Institute of Road Safety Research (MIROS) conducted a research on high fatalities cases which involved three fatalities and above from 2014 to 2016. The summary of the analysis showed that more cases were recorded in 2016 despite the formulation of new strategies, legislation, policies, and enforcing measures governing road safety at the national level safety (2020). Therefore, it was necessary to conduct this research to study the coping strategies to overcome aggressive driving behaviour which was based on two significant theories: General Aggression Model (GAM) used to explain the aggression as a function of social-cognitive interactions which can be used to relate with aggressive driving behaviour and Matthew's Transactional Model of Driver Stress was developed in 2001 and it was based on the premise regarding stress which arises out of dynamic transactions or encounters between person and environment. These transactions were developed by ways of cognitive stress processes which includes a cognitive appraisal of the encounter, choice and regulation of coping strategies (Matthew, 2001).

1.1 Objective

The objective of study that has been achieved at the end were an indicator of purpose of research. Hence, the objective of the research is to study the relationship between aggressive driving behaviour and perceived coping strategies such as task-focused coping style, reappraisal coping style, avoidant coping style, confrontive coping style and emotion-focused coping style.

1.2 Hypothesis

The hypothesis of the study is to test the significant relationship between aggressive driving behaviour and perceived coping strategies such as task-focused coping style, reappraisal coping style, avoidant coping style, confrontive coping style and emotion-focused coping style. For instance, the null hypothesis indicates there is no significant relationship between the two variables while the alternative hypothesis indicates positive significant.

H0 1: There is no significant relationship between aggressive driving behaviour and task-focused coping style.

H1 1: There is a positive significant relationship between aggressive driving behaviour and task-focused coping style.

2. Literature Review

A study conducted by Zhang, Houston, and Wu (2016) on psychometric examination and validation of the aggressive driving scale (ADS) explained the fundamental issues relating to aggressive driving behaviour. The scales used were ADS (measures the frequency of aggressive driving behaviour), Buss-Perry aggression questionnaire (BPAQ) and State-trait anger expression inventory (STAXI) (self-report scale measuring anger). ADS is one of the current questionnaires designed to measure aggressive driving behavior. The advantage of aggressive driving behaviour as stated in this study is that it focuses exclusively on observable behaviour and thus relies less on an individual's self-perception. Drivers in Malaysia are more prone to commit to aggressive driving behaviour rather than overcoming it with positive outcome coping strategies (Husain, Mohamad and Idris, 2019). This study provided evidence on the influence of individuals and the daily levels of emotional demands on self-reported crashes, mainly through daily acute fatigue and safety motivation among taxi drivers in Malaysia (Husain et al., 2019).

Albentosa, Stephens and Sullman (2018) analysed driver's tendency to become angered and how they appraised the anger provoking situation. Thus, drivers with higher traits in anger were more likely to experience higher levels of anger in driving situations when they made negative appraisals of the driving situations. The use of swear words had a cathartic effect, helping drivers to reframe anger by changing the affective valence in a situation with high negative affect and high physical activation (Popușoi, Havârneanu and Havârneanu, 2018). Drivers in Malaysia that preferred high speeds more likely to be angry and explained road rage is common psychological condition that affects traffic safety throughout the world (Feng et al., 2016). According to a study by Morshidi and Norazahar on occupational stress among bus drivers in Johor indicated that occupational stress contributes to bad driving behaviour which leads to accidents (2019). The study also mentioned that physical surroundings such as noise and lightings have been tested and found to be the contributing factors of occupational stress.

An experiment study conducted by Cardoso, Fulton, Callaghan, Johnson and Albert (2018) regarding task-focused coping style used Driver Stress Inventory (DSI), Driver Coping Questionnaire (DCQ) and Useful Field of View (UFOV) test to assess the participants. The study also indicated that stress which is fatigue should be considered as a chronic form of stress. Thus, physical and psychological bodies are strongly interrelated therefore if physical failure occurs, psychological failure will shortly follow. The recommendation

derived from this study was maintaining proper posture which could be the key to delaying the onset of fatigue during a prolonged driving task. A study conducted by Steinberger, Moeller and Schroeter (2016) illustrated that low traffic indicates less focus and initiation of cruise control. Hence, slow or constant speed indicates pay less attention, lower crash risk and eventually tend to lose focus at constant pace.

Another case study on professional drivers conducted by Feng et al., (2016) illustrated the driving behaviours with different types of personality that copes with the traffic situations. The Chinese version of this study scored $M= 2.78$ anger scores which are lower levels of anger compared to USA and Malaysia that exceeded $M= 3.06$ anger scores. The results also indicated that drivers who preferred high speeds more likely to be angry and explained road rage is common psychological condition that affects traffic safety throughout the world. A recent study showed that factors such as the increased stress and anxiety brought about by the pandemic Covid -19, more "free" time, increased consumption of alcohol and drugs. This has led to greater opportunities for speeding and stunt driving that causes hazardous for road safety (Vingilis, Beirness, Boase, Byrne, Johnson, Jonah...Wisenthal, 2020). The study suggested that it is important to monitor traffic collisions during the pandemic, the expected pandemic waves and in the post-pandemic period as well as many of the ongoing social and behavioural changes that were initiated during this time.

Avoidant coping is associated with attempts to ignore the stressor through self-distraction and one possible interpretation of this finding is that, under time pressure, avoidant strategies may serve to distract bus driver attention resulting in a greater incidence of forceful speed changing behaviours (Dorn, Stephen, Wählberg and Gandolfi, 2010). Next, confrontive coping relates to several behaviours that can be considered dangerous and hazardous. The cognitive processes tend to generate, first, feelings of anger and, second, dangerous driving behaviours which reduce safety. These statements were supported by (Susilowati and Yasukouchi, 2012). Drivers reported feeling worried about driving and handling the traffic but coped with the stress of driving by using emotional coping strategies, such as self-blame or self-criticism (Shamoa- Nir and Koslowsky, 2010). A discussion reported by The Star on movement control order (MCO), mental health and road safety presented that with fewer cars on the road and increased demand of food, grocery and courier deliveries. The deliveries were rushed and flouted traffic laws like crossing red lights, speeding and other manoeuvres that endanger lives (2021).

3. Methodology

A quantitative study using cross-sectional survey was used as the research design. There were two variables in this study which were aggressive driving behaviour

and coping strategies. The online survey created for this research consisted of four sections which were informed consent (Appendix A), demographic information, Aggressive Driving Scale (ADS) and Driver Coping Questionnaire (DCQ) that was distributed through social media and communicating platform which was filled in by the selected population. All respondents were required to answer all the provided self-report measure questions and the results were obtained through softcopy.

3.1 Population and sample

A total of 117 samples were used for this research and by using G*Power 3 calculation the minimum number of sample that needed for this study was 93. The choice of population in this research was drivers of UPSI, Tanjung Malim and the sample of this research were road users that obtained licenses and ranged from age 18 to 60 years old. The population choice UPSI was due to a smaller population that enabled data collection to be done in effective manner. Additionally, the roads of UPSI, Tanjung Malim is clear most of the times causing speeding and crashes. On 15 June 2017, a student passed away due to a road crash (Shamsudin, 2017). A recent accident involving a car and a motorcycle was also reported at the area of Tanjung Malim along the UPSI road (Loh, 2020). The choices of samples were male and females because in Malaysia, both genders can obtain a license and have the permit to use their vehicle. The samples were selected in convenience basis and convenient sampling is a type of nonprobability sampling in which people are sampled simply because they are "convenient" sources of data for researchers (Lavrakas, 2011). The inclusion criteria for the participants were to obtain a valid driving licence, within the age 18 to 60 years old only, had driven a car at least 6 months ago, able to understand English and within the area of UPSI.

3.2 Instrument and material

There was four sections which were informed consent, demographic questions which includes driving history, ADS scale and DCQ scale.

i) Demographic:

In the demographic section, participants were required to fill in their information such as name, age, driving history and gender. In the driving history segment, participants was asked for their years of experience in driving, number of times faced accidents or violations, and frequency of driving in a week.

ii) Aggressive Driving Scale (ADS):

Krahe and Fenske developed this scale on 2002 that consisted 24-item and assess aggressive driving behaviour. The ADS response format is a five point Likert scale which indicated respondent's particular driving behaviour and the scoring method is by cumulating the mean scores since it is a continuous scale (Krahe and Fenske, 2002). The scale ranged from "0" = never to "4" = very often. The total score

for ADS was high with a reliability coefficient of .93 and this value was used in this study as a reference.

iii) Driver Coping Questionnaire (DCQ):

The DCQ was invented by Matthews, Desmond, Joyner, Carcary and Kirby (1997) and it was used as a measuring tool for coping in driver's stress and affect. The questionnaire consist of 36 questions and uses Likert scale which has a 10 point to assess ranging from 1 (Not at all effective) to 10 (Extremely effective) (Machin, 2001). The subscales of DCQ are confrontive coping, task-focus, emotion-focus, reappraisal and avoidant (Machin, 2001). The DCQ subscales were scored so that they could potentially range from 0 to 100.

3.3 Ethical consideration

From this research, there were no harmful risks while answering to the surveys provided. However, participants may felt tired in answering a handful of questions that took about 4 to 8 minutes of their time. Then the next segment was about confidentiality where the information such as the participants name was not shared to people but other than that all the other information was used for the sole purpose of this research and to analyse for the result of this research. The informed consent, it was explained about participant's right to withdraw and how they can do so. All the information was disposed after the study had been completed. Once the participants had successfully answered all the questions, participants gain a chance to participate in a luckydraw as the token of appreciation.

3.4 Data analysis

The results of demographic questions were for exploration purposes only as it did not affect the main objective of this study. Then, another test was

run to analyse the Pearson Correlation for each of the hypothesis listed, which were Aggressive Driving Behaviour input and Driver Coping Questionnaire subscales (Task-Focused coping style, Reappraisal Coping Style, Avoidant Coping style, Confrontive Coping style and Emotion-Focused Coping style) input to find the correlations. The level of significance of this research is set to $p = 0.05$. When the $p \geq 0.05$, the null hypothesis was fail to be rejected and there was no significant relationship between aggressive driving behaviour and perceived coping strategies. Hence, when the $p \leq 0.05$, the null hypothesis was rejected and there was a positive correlation between the two variables in this research. In conclusion, the SPSS was used to tabulate data, present graphs and also other statistical information regarding this research.

4. Findings

4.1 Descriptive analysis

Descriptive Analysis of participant profiles such as age and gender as well as the participant's driving history such as years of having licence, frequency of driving per week and numbers of road violations encountered. The next part of descriptive analysis presents the Means (M) and standard deviations (SD) for the variables of aggressive driving behaviour and coping strategies. The analysis of inferential statistics presented Pearson's correlation test between aggressive driving behaviour and all the perceived coping strategies. Table 1 represents the respondent's profile that participated in this study. Table 2 represents the M and SD of Aggressive Driving Behaviour and Perceived Coping Strategies. Table 3 represents the Correlation of Aggressive Driving Behaviour (ADS) and Perceived Coping Strategies.

Table 1. Respondent profile

Demographic	Frequency (f)	Percentage (%)
Age		
18 – 23 years old	26	22.2
24 – 29 years old	58	49.6
30 – 35 years old	14	12.0
36 – 41 years old	15	12.8
50 years old and above	4	3.4
Gender		
Male	61	52.1
Female	56	47.9
Years of having licence		
0 – 4 years	43	36.8
5 – 9 years	42	35.9
10 – 14 years	16	13.7
15 years and more	16	13.7
Frequency of driving per week		
7 days	71	60.7
4 days	37	31.6
1 day or less	9	7.7
Numbers of road violations encountered		
0 – 4 times	60	51.3
5 – 9 times	44	37.6
10 – 14 times	13	11.1

4.2 Profile of participants

A total of 117 participants were used as the sample for this study to get a better correlation value. The mode of participant's age was under the category of 24 – 29 years old with the percentage 49.6 % overall and the difference between the total number of male and female participants were just 5 participants. The data also showed that the optional question which is the number of road violations encountered were answered by all 117 participants and majority of them experienced 4 times or less road violations. Table 1 shows the summary of participant's profile.

4.3 Level of variables

From the Table 2, the variable with the highest mean score was emotion-focused coping style with $M = 55.27$ ($SD = 16.08$) and followed by avoidant coping style with $M = 54.37$ ($SD = 16.35$). The variable avoidant coping style and emotion-

focused coping style, obtained a minimum score of 14 and 15, while the maximum score was 100 respectively. The third variable with highest mean score was confrontive coping style that obtained a minimum score of 0 and the maximum score of 100 with the mean score of $M = 42.25$ ($SD = 22.42$). The variable aggressive driving behaviour had a mean score of $M = 34.03$ ($SD = 18.15$) with a minimum statistic score of 5 and maximum statistic score of 80. Next, the last two variables with the least mean scores were reappraisal coping style with $M = 30.02$ ($SD = 16.52$) and task-focused coping style with $M = 29.70$ ($SD = 16.28$). Hence, the minimum score obtained for reappraisal coping and task-focused coping style was 0 and the maximum score was 85 and 75 respectively. This indicates that task-focused coping style had the lowest mean scores while the emotion-focused coping style had the highest mean score in this study.

Table 2. Mean and standard deviation of aggressive driving behaviour and perceived coping strategies

Measures	Mean (M)	Standard Deviation (SD)
Aggressive Driving Behaviour	34.03	18.15
Perceived Coping Strategies		
Task-Focused Coping Style	29.70	16.28
Reappraisal Coping Style	30.02	16.52
Confrontive Coping Style	42.25	22.42
Avoidant Coping Style	54.37	16.35
Emotion-Focused Coping Style	55.27	16.08

4.4 The analysis of inferential statistics

The table below shows the summary of the correlation between aggressive driving behaviour and all the perceived coping strategies in this research. Based on the results obtained, there was a significant positive correlation between aggressive driving behaviour and task – focused coping style at the 0.01 significance level which is smaller than 0.05 with two tailed ($r = 0.283$, $n = 117$, $p = .002$). Since $p \leq 0.05$, the null hypothesis was rejected and H1 1 was accepted. Next, the analysis showed that there was a significant positive correlation between aggressive driving behaviour and reappraisal coping style at the 0.01 significance level which is smaller than 0.05 with two tailed ($r = 0.266$, $n = 117$, $p = .004$). Since $p \leq 0.05$, the null hypothesis was rejected and H1 2 was accepted. The variable aggressive driving behaviour

and avoidant coping style showed significant positive correlation at the 0.01 significance level which is smaller than 0.05 with two tailed ($r = 0.329$, $n = 117$, $p = .000$). Since $p \leq 0.05$, the null hypothesis was rejected and H1 3 was accepted. Additionally, there was a significant positive correlation between aggressive driving behaviour and confrontive coping style at the 0.01 significance level which is smaller than 0.05 with two tailed ($r = 0.638$, $n = 117$, $p = .000$). Since $p \leq 0.05$, the null hypothesis was rejected and H1 3 was accepted. Lastly, aggressive driving behaviour and emotion-focused coping style also showed significant positive correlation at the 0.01 significance level which is smaller than 0.05 with two tailed ($r = 0.288$, $n = 117$, $p = .002$). Since $p \leq 0.05$, the null hypothesis was rejected and H1 5 was accepted.

Table 3. Correlation of aggressive driving behaviour (ADS) and perceived coping strategies

Measures	1.	2.	3.	4.	5.	6.
1. ADS	1	.283**	.266**	.638**	.329**	.288**
2. Task-Focused		1	.988**	.090	-.261**	-.253**
3. Reappraisal			1	.057	-.278**	-.271**
4. Confrontive				1	.657**	.609**
5. Avoidant					1	.927**
6. Emotion – Focused						1

Note: ** means that p is significant at $p < .01$ level (2 – tailed)

From the table, it is clear that confrontive coping style has the strongest correlation with aggressive driving behaviour compared to other variables. The variable that has the weakest correlation with aggressive driving behaviour was the reappraisal coping style. The correlation results of the coping strategies that showed lower significant positive correlation were for task-focused coping style and emotion-focused coping style as well as reappraisal coping style. In addition, the correlation results for avoidant coping style showed significant positive correlation and confrontive coping style showed higher significant positive correlation.

5. Discussion

From the results obtained in Chapter 4, it was evident that aggressive driving behaviour among the road users in UPSI was adequately high despite the low road violations experienced. It is stated that, the statistics of road rage and road accidents will only increase in the future if it is not controlled or overcome by the individual itself. Hence in this era, with the pandemic and economic downfall, stress is a significant issue in the workplace and society generally which can lead in to aggressiveness while driving. Moreover, it is clear that aggressive driving behaviour will increase in the near future especially post pandemic Covid -19 which will cause more unfortunate accidents and road rages. As restrictions ease, new patterns of behaviour will likely emerge. Those that do return to the workplace may be reluctant to use crowded public transit and choose to commute using private vehicles instead (Vingilis et al., 2020).

According to WHO Global Safety Report on Road Safety 2018, the progress that has been achieved in a number of countries to stabilize the global risk of dying from a road traffic crash has not occurred at a pace fast enough to compensate for the rising population and rapid motorization of transport taking place in many parts of the world. Hence, understanding and learning the dangers of road rages and road accidents is important to reduce the death rate by halve to achieve the Standard Developmental Goal target before 2020. It is believed that, the participants of this research were not aware of the consequences while coping differently. Therefore, it is important for driver's to learn and acknowledge the consequences of each coping strategies which will allow the drivers to understand the benefits of coping strategies.

In this study, it is also found that factors that causes aggressive driving behaviour, was mainly due to stress and fatigues. Other factors that contributes to aggressiveness while driving are the lack of monitoring from the authorities can also cause road accidents. Authorities such as the police should monitor in places identified with frequent accidents (Khairul Amri Kamarudin et al., 2018). The study also indicated that the poor roads in the Malaysia has caused fatalities and road crashes as drivers needs to

focus while driving and give attention to the road, especially at night. Malaysian roads are built with many sharp turns, uneven roads and potholes. Other factors of road rages and accidents was due to the busy roads that happened especially during the holiday season (Khairul Amri Kamarudin et al., 2018). Hence, the tragic accident due to road rage that happened on the holiday season at Sungai Besi toll on 2019 which shocked the nation. As a responsible driver, it is our responsibility to drive according to the safety procedures and regulations to avoid accidents and deaths.

6. Implication

In this research study, there were some implications that based on the results of this research. The result of this study showed there was a positive significant correlation between the aggressive driving behaviour and perceived coping strategies. Hence, Road Transport Department of Malaysia may enforce integrating coping strategies when overcoming aggressive driving behaviour at driving school or during driving lessons. Additionally, enforcement and education is not sufficient to reduce the death rates and dangers on road. Intervention of road safety such as The International Road Assessment Programme (iRAP) by MIROS should also be enhanced to reduce the number of fatalities on road since the recorded cases are increasing every year. The intervention was developed to upgrade the safety of road environment in low and middle income countries in order to reduce the global death toll (2017). Moreover, media presenters can utilize this information to telecast the choices of coping strategies to other road users in order to spread awareness that such coping strategies exist to effectively reduce and avoid aggressive driving behavior. Furthermore, most drivers on the road does not know what type of stress, pressure or circumstances the other driver may be experiencing which sometimes can result in inappropriate driving (Franzen, 2017). Through this study, it was known that the scale can be self-measured and it is available online which can be utilized by drivers to evaluate the suitable coping style to reduce the aggressiveness while driving.

7. Limitation

There were several limitations throughout this study and one of it was difficulty in recruiting enough participants to participate in the survey. The number of participants driving in UPSI was lower than expected as many of students either took bus or car pooled with others. The frequency of driving per week among UPSI road users was sufficient and the number of road violations encountered was more than expected. Moreover, when going through the responses of the participants, there were three or fewer participants responded 0 for all the questions and these participants were not included in this research. This is because the responses were bias

which can lure researchers into a false sense of security about the conclusions they draw. Next, related to response biases, the instrument aggressive driving behaviour in this research was a self – reported measure which can cause response biases among participants. However, this instrument was significantly important in conducting this research and other similar instruments that investigate the aggressiveness while driving were also self – reported measure. Therefore, it is important to go through all the responses to make sure no false responses occurred and also to prevent inaccuracy in presenting information.

8. Recommendation

The limitations from the previous section had derived few recommendations for future research purposes in order to get more accurate results. This study was done based on self – report measure, which may causes biased and influenced responses. However, the suitable theories will guide the research into the direction that it meant to be. Besides, the data collection can be done in other settings and populations such as road users in traffic congested areas, highway road users and even people who committed road violence. Hence, the responses from these populations will have more impactful results compared to road users in UPSI.

Therefore, it is recommended for future research conducted to have a bilingual (Malay and English) questionnaire that can be catered to majority of the participants. Thus, the participants will have a better understanding of the questionnaire and could provide more accurate answers which can produce more reliable results. This research can be conducted using qualitative method in Malaysia, like as certain research studies that were conducted in western countries as mention in literature review. When the research is conducted via an experiment or an interview, more depths regarding the aggressive driving behaviour and perceived coping strategies can be found. Hence, it will be helpful in standardizing the coping strategies for road users and to investigate the most suitable coping strategies for different category of people.

9. Conclusion

To sum up, all the perceived coping strategies had positive correlation with aggressive driving behaviour and the results had showed that participants preferred to either avoid the aggressiveness or to cope with the situation by controlling their emotion. Based on the results, the most relevant coping strategies that road users in UPSI perceived was the confrontive coping style. However, it was clear that different coping strategies results with different outcomes. Therefore, it is important for drivers to understand and acknowledge all the consequences and benefits of coping strategies when dealing will aggressive driving behaviour or aggressors.

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