

Factors contributing to individual differences in facial expression categorization

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Abstract

Individuals vary in perceptual accuracy when categorizing facial expressions, yet it is unclear how these individual differences in non-clinical population are related to cognitive processing stages at facial information acquisition and interpretation. We tested 104 healthy adults in a facial expression categorization task, and correlated their categorization accuracy with face-viewing gaze allocation and personal traits assessed with Autism Quotient, anxiety inventory, and self-monitoring scale. The gaze allocation had limited but emotion-specific impact on categorizing expressions. Specifically, longer gaze at the eyes and nose regions were coupled with more accurate categorization of disgust and sad expressions, respectively. Regarding trait measurements, higher autistic score was coupled with better recognition of sad but worse recognition of anger expressions, and contributed to categorization bias towards sad expressions; whereas higher anxiety level was associated with greater categorization accuracy across all expressions and with increased tendency of gazing at the nose region. It seems that both anxiety and autistic-like traits were associated with individual variation in expression categorization, but this association is not necessarily mediated by variation in gaze allocation at expression-specific local facial regions. The results suggest that both facial information acquisition and interpretation capabilities contribute to individual differences in expression categorization within non-clinical populations.

Keywords: Individual differences; Facial expression categorization; Gaze behaviour; Personal traits

Introduction

Facial expressions of emotion transmit a wealth of visual information that is indicative of an individual's emotional state and intention. The ability to recognize other people's expression accurately and quickly plays a crucial role in our social communication. Even though common facial expressions, such as happy, sad, fear, anger, disgust and surprise, represent our typical emotional states, are associated with distinctive patterns of facial muscle movements, and are culturally similar (universal) among humans (Ekman & Friesen, 1976; Ekman & Rosenberg, 2005), psychological studies often observe significant individual differences in perceptual accuracy for categorizing these common expressions (e.g., Hall & Matsumoto, 2004; Arrais et al., 2010). However, it is still unclear what personal factors are contributing to the observed individual differences in expression recognition, especially among non-clinical populations. Considering that facial expression categorization would involve (at least) two main stages of cognitive processing, selectively extracting diagnostic facial information from local facial features and then integrating and interpreting these facial cues appropriately, it is plausible that individual variability in cognitive strategy and/or performance in these two processing stages could contribute to individual differences in expression categorization.

At the processing stage of facial information selection and extraction, by presenting parts of an expressive face in isolation (e.g., through masking or 'bubbles' protocol in which participants viewed a face through a set of simultaneously presented, randomly allocated small Gaussian windows across the face), previous studies have suggested that the key internal facial features (i.e., eyes, nose and mouth) and their surrounding regions contain diagnostic information for recognizing some facial expressions (Smith, Cottrell, Gosselin, & Schyns, 2005; Calvo & Nummenmaa, 2008;

Blais, Roy, Fiset, Arguin, & Gosselin, 2012). For instance, the eyes and mouth often transmit crucial cues for detecting angry and happy expressions, respectively. This suggestion has been confirmed by recent eye-tracking studies with an expression categorization task. Although participants tended to scan all key facial features (Guo, 2012, 2013; Guo & Shaw, 2015), they looked more often at the local facial regions that are most characteristic for each facial expression, such as the mouth in happy faces (Eisenbarth & Alpers, 2011; Guo, 2012, 2013).

The importance of extracting appropriate featural cues for expression recognition has been highlighted by studying neurological patients such as SM. With bilateral amygdala damage, SM showed a selective impairment in recognizing fearful expression and was unable to spontaneously look at a person's eyes when viewing expressive face images. However, if she was explicitly instructed to fixate the eye region she was able to recognize fearful faces at a level similar to that of healthy controls (Adolphs et al., 2005). Taking these behavioural, eye-tracking and neuropsychological observations together, it seems that the tendency to attend to local facial features could be associated with expression recognition accuracy, and individual variation in gaze allocation in face-viewing might contribute to individual differences in expression perception.

An individual's capability of integrating and interpreting the selected and extracted expressive facial information could be another contributing factor. For instance, although men and women attend to the same facial parts in face-viewing (Smith et al., 2005; see also Vassallo, Cooper, & Douglas, 2009), women often outperform men by demonstrating higher accuracy and/or faster responses in recognising facial expressions (Hall & Matsumoto, 2004; Hampton, van Anders, & Mullin, 2006), especially for disgust, fearful and sadness expressions (Mandal &

Palchoudhury, 1985; Rotter & Rotter, 1988). Recent studies have also observed that some personal traits could be linked to our ability to decode facial affects. For instance, aggressive people tend to classify ambiguous facial expression as anger (Penton-Voak et al., 2013); sensitivity to detect fearful expression is positively correlated with an individual's trait anxiety and personality traits such as neuroticism and harm avoidance (Doty, Japee, Ingvar, & Ungerleider, 2013); and anxious girls are less accurate at recognising disgusted faces and often mistake this emotion for anger (Lee, Herbert, & Manassis, 2014). It appears that different groups of individuals may have different ways of interpreting the perceived facial affect information.

Given that our gaze allocation in natural vision can be modulated or even determined by top-down cognitive processes such as expectation, memory, semantic and task-related knowledge (Tatler, Hayhoe, Land, & Ballard, 2011), it is plausible that a dynamic interaction between stages of information selection/extraction and interpretation could exist in the processing of expressive faces. Studies on neuropsychiatric disorder with deficits in emotion perception have implied this might be the case. For instance, individuals with high social anxiety or social phobia have exaggerated perceptual sensitivity to threatening faces (Staugaard, 2010). They tend to avoid looking at the eye region (Horley, Williams, Gonsalvez, & Gordon, 2003), and are more likely to misinterpret vague or neutral facial expressions as negative (Rapee & Heimberg, 1997) and show higher accuracy in identifying negative facial expressions such as anger (Hunter, Buckner, & Schmidt, 2009). Autism spectrum disorder (ASD) is also a commonly studied neurodevelopmental disorder in emotion perception. The patients have a tendency to avoid looking at other people's eyes, with a preference instead towards the mouth (Klin, Jones, Schultz, Volkmar, & Cohen, 2002), and show

deficit in detecting emotions often signalled by the eyes such as anger and fear (Bal et al., 2010; Pelphrey et al., 2002).

Taken together, it is not unreasonable to hypothesize those individual differences in facial expression recognition could be (at least partly) accounted for by individual variability in face-viewing gaze allocation and/or facial information interpretation. Although some previous studies have contrasted processing differences at one particular stage of expression categorization between ‘normal’ and ‘special’/clinical populations, it is unclear to what extent these two stages are correlated with an individual’s ability for expression recognition in the non-clinical population. Furthermore, the expressive faces in early studies often represented peak or exaggerated intensity for each emotional category, whereas we see less intense expressions more frequently in daily life. As the interpretation of subtle expressions heavily relies on fixation allocation (Vaidya, Jin, & Fellows, 2014) and is increasingly difficult with low-intensity facial affects (Guo, 2012), using face images with a range of expression intensities could enhance both ecological validity and manifestation of individual differences in expression perception.

In this eye-tracking study, we presented face images displaying six basic facial expressions of emotion (happy, sad, fearful, angry, disgusted, and surprised) with low, medium and high intensities, and measured expression categorization performance and associated gaze behaviour from healthy adults. The behavioural data was later correlated with their anxiety levels and autistic scores, as these two personal traits are well associated with emotion processing capability in the clinical population, but often generate inconsistent findings across laboratories, such as to what extent variance in expression recognition performance associated with anxiety or ASD is emotion-specific (fear: Surcinelli, Codispoti, Montebanocci, Rossi, & Baldaro, 2006; sad and anger:

Kessler, Roth, von Wietersheim, Deighton, & Traue, 2007; happy, sad and disgust: Simonian, Beidel, Turner, Berkes, & Long, 2001), valence-specific (negative valence: Jarros et al., 2012) or across all basic emotion categories (Evers, Steyaert, Noens, & Wagemans, 2015).

We also included participants' self-monitoring scores in the correlation analysis. Self-monitoring measures an individual's capability to understand other peoples' emotion and behaviour, appreciate the environmental context surrounding a situation, and modify one's own presentation accordingly (Lennox & Wolfe, 1984). As this measurement, comprising key elements of charisma, performance and social sensitivity (Riggio & Friedman, 1982), is correlated with emotional intelligence (Schutte et al., 2001), individuals with high level self-monitoring behaviour might be skilled at reading and understanding the others' emotion. Based on previous observations, we hypothesized the existence of correlation between participant's facial expression categorization accuracy, face-viewing gaze distribution, and personal trait measurements (indicated by anxiety level, autistic trait and self-monitoring score) in the non-clinical population.

Materials and Methods

Participants

One hundred and four participants (29 males, 75 females), aged between 18 and 48 years old (mean age 20.3), volunteered to participate in this study. All participants reported no history of neuropsychiatric disorders (e.g., ASD, depression, anxiety disorder and social phobia) and had normal or corrected-to-normal visual acuity. The Ethical Committee in School of Psychology, University of Lincoln approved this study. Written informed consent was obtained from each participant prior to the study, and all

procedures complied with the British Psychological Society Code of Ethics and Conduct.

Visual stimuli

Grey-scale western Caucasian face images, consisting of five female and five male models, were selected from the Karolinska Directed Emotional Faces CD ROM (Lundqvist, Flykt, & Öhman, 1998). Each of these models posed one neutral and six high-intensity facial expressions (happy, sad, fearful, angry, disgusted, and surprised) in full frontal view. Although they may have real-world limitations, and categorization performance for some expressions could be subject to culture influence, these well-controlled face images were chosen for their comparability and universality in transmitting facial expression signals, at least for our observer group. The faces were processed in Adobe Photoshop to remove external facial features (e.g., hair) and to ensure a homogenous grey background, face size, and brightness. Our previous research has shown that the participants' expression categorization accuracy is monotonically increased when the expression intensity is increased from low (20%) to medium (40%) and then to high (100%) level (Guo, 2012). To enhance ecological validity of this study, for each of the six expressions of each model, Morpheus Photo Morpher was used to create 3 levels of intensity (20%, 40%, and 100%) by morphing the emotional face with the neutral face. As a result, 180 expressive face images were generated for the testing session (6 expressions \times 3 intensities \times 10 models, see Fig. 1 for examples).



Figure 1. Examples of a female face image presented with varying facial expressions (from left to right: happiness, sadness, fear, anger, surprise, and disgust) at three different expression intensities (from top to bottom: 20%, 40% and 100%).

The face images were presented through a ViSaGe graphics system (Cambridge Research Systems, UK) and displayed on a non-interlaced gamma-corrected colour monitor (30 cd/m^2 background luminance, 100 Hz frame rate, Mitsubishi Diamond Pro2070SB) with the resolution of 1024×768 pixels. At a viewing distance of 57 cm, the monitor subtended a visual angle of $40^\circ \times 30^\circ$. The faces were presented in random order in the centre of the screen with a resolution of 420×600 pixels ($15^\circ \times 22^\circ$).

Procedure

All of our participants were aware of universal facial expressions. Before the testing, they were shown a PowerPoint presentation containing one male and one female model posing happiness, sadness, fear, anger, disgust, and surprise (sampled from Pictures of Facial Affect), and were asked to label each facial expression as carefully as possible without time constraint. All of them could recognize these facial expressions or agree with the classification proposed by Ekman and Friesen (1976).

A self-paced task was then used to mimic natural viewing condition. During the eye-tracking experiment, the participants sat in a chair with their head restrained by a chin-rest, and viewed the display binocularly. Horizontal and vertical eye positions

from the dominant eye (determined through the Hole-in-Card test) were measured using a Video Eyetracker Toolbox with 250 Hz sampling frequency and up to 0.25° accuracy (Cambridge Research Systems, UK). Eye movement signals were first calibrated by instructing the participant to follow a fixation point (FP, 0.3° diameter, 15 cd/m^2 luminance) displayed randomly at one of 9 positions (3×3 matrix) across the monitor (distance between adjacent FP positions was 10°). After the calibration procedure, the participant pressed the response box to initiate a trial. The trial was started with an FP displayed 10° left or right to the screen centre to minimize central fixation bias (Tatler et al., 2011). If the participant maintained fixation for 1 s, the FP disappeared and a face image was presented at the centre of the screen. The participant was instructed to “categorize this facial expression as accurately and as quickly as possible”, and to respond by pressing a button on the response box (for collecting reaction time data) with the dominant hand followed by a verbal report of the perceived facial expression (six-alternative identification task: happiness, sadness, fear, anger, disgust, and surprise). The face image disappeared immediately after manual response and the gaze tracking was stopped. No reinforcement was given during this procedure.

Either before or after the eye-tracking task, the participants were required to complete three questionnaires: (1) the Adult Autism Spectrum Quotient, chosen for its good internal consistency, high sensitivity and specificity in autism research (Baron-Cohen, Wheelwright, Skinner, Martin, & Clubley, 2001). (2) the Beck Anxiety Inventory which includes 21 anxiety symptoms and allows the participant to rate to what level each symptom has bothered them during the past month (Beck, Epstein, Brown, & Steer, 1988). This questionnaire was chosen for its minimized overlap between anxiety and depression measurement (e.g., State-trait anxiety inventory tends to be highly correlated with depression), established high level of internal consistency

and high discriminant validity when used in a non-clinical sample of anxiety research (Creamer, Foran, & Bell, 1995; Ayala, Vonderharr-Carlson, & Kim, 2005). (3) the Self-Monitoring Scale which includes 25 statements to measure participant's charisma, social performance and social sensitivity (Riggio & Friedman, 1982). This scale was chosen due to its established internal consistency and temporal stability in self-monitoring research (Snyder, 1974). Among the tested participants, 69 (20 males, 49 females; age range 18-39) completed all three questionnaires, and the remaining 35 (9 males, 26 females; age range 18-48) only completed the Autism Spectrum Quotient.

Data analysis

All the collected data was analysed off-line. For eye movement data, the software developed in Matlab computed horizontal and vertical eye displacement signals as a function of time to determine eye velocity and position. Fixation locations were then extracted from the raw eye-tracking data using velocity (less than 0.2° eye displacement at a velocity of less than $20^\circ/\text{s}$) and duration (greater than 50 ms) criteria (Guo, Mahmoodi, Robertson, & Young, 2006). Whilst determining fixation allocation within key facial features (i.e. eyes, nose, and mouth), a consistent criterion was adopted to define boundaries between local facial features for different faces (for details see Guo, Tunnicliffe, & Roebuck, 2010). Specifically, the 'eye' region included the eyes, eyelids, and eyebrows; the 'nose' or 'mouth' region consisted of the main body of the nose or mouth and immediate surrounding area (up to 1°). The division line between the mouth and nose regions was the midline between the upper lip and the bottom of the nose. Each fixation was then characterized by its location among feature regions and its time of onset relative to the start of the trial. The number of fixations directed at each feature was normalized to the total number of fixations sampled in that trial.

Results

Expression categorization performance and face-viewing gaze distribution

Using similar stimuli, our previous research has shown that increasing expression intensity would improve expression categorization accuracy and shorten reaction time (Guo, 2012). Similar trend was also observed in this study for all the tested facial expressions. For instance, the participants' categorization accuracy for happy expression was gradually enhanced from 47%±21 (mean±SD) to 85%±13 and then to 99%±3 when expression intensity was increased from 20% to 40% and then to 100%. As the varying levels of expression intensity has similar impact on the participants' behavioural performance of recognizing individual facial expressions, but has little impact on their face-viewing gaze distribution, such as proportion of fixations and viewing time directed at internal facial features (Guo, 2012), the experimental data from three intensity levels were pooled together for the below correlational analyses. This approach would also reduce the number of conditions or measures for each correlational analysis, and hence family-wise error rate.

In agreement with our early observations (Guo, 2012, 2013; Guo & Shaw 2015), the participants demonstrated different perceptual sensitivities in categorizing different facial expressions ($F(5,515)=178.77$, $p<0.001$, $\eta_p^2=0.64$) with higher recognition accuracy for happy and sad expressions, and lower accuracy for surprise and fear expressions (Bonferroni correction for multiple comparisons, $p<0.01$ for all comparisons). As shown in Table 1, there was evident performance variance between individual participants in categorizing different facial expressions. For instance, for happy expressions the lowest performing participant scored 43% accuracy and the highest performing scored 100%.

Table 1. Expression categorization accuracy across participants. Data in each cell was expressed as minimum–maximum (mean±SD).

| All expressions | Happy | Sad | Anger | Fear | Disgust | Surprise |
|-------------------|---------------------|---------------------|--------------------|-------------------|--------------------|--------------------|
| 55–74% (65%±5) | 43–100% (77%±10) | 55–100% (84%±10) | 30–93% (67%±12) | 7–67% (43%±14) | 37–83% (63%±12) | 27–77% (56%±10) |

When viewing expressive faces, the participants on average made 6.02 ± 2.86 fixations and needed reaction time of $1.91s \pm 0.74$ to categorize facial expressions. Although the participants' reaction time was positively correlated with the number of fixations made per trial (two-tailed Pearson correlation, $r=0.51$, $p<0.001$), neither of them was correlated with expression categorization accuracy ($p>0.62$ for all comparisons). Regarding gaze distribution, majority of these fixations ($97\% \pm 3$) were allocated at the key internal facial features, such as eyes ($35\% \pm 19$), nose ($42\% \pm 19$) and mouth ($20\% \pm 13$). However, the proportion of fixations directed at a given facial feature significantly varied across participants with 2–87% fixations at the eyes, 4–95% fixations at the nose, and 0–64% fixations at the mouth region (Table 2).

Table 2. Proportion of fixation allocated at the eyes, nose and mouth regions across all participants. Data in each cell was expressed as minimum–maximum (mean±SD).

| | All expressions | Happy | Sad | Anger | Fear | Disgust | Surprise |
|-------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|
| Eyes | 2–87% (35%±19) | 0–83% (31%±18) | 1–88% (36%±20) | 2–90% (38%±20) | 2–82% (36%±19) | 3–90% (38%±20) | 0–88% (33%±19) |
| Nose | 4–95% (42%±19) | 4–93% (42%±18) | 5–97% (44%±19) | 5–98% (41±19) | 2–95% (43%±19) | 2–96% (40%±19) | 8–89% (44±19) |
| Mouth | 0–64% (20%±13) | 0–67% (25%±14) | 0–57% (17%±14) | 0–69% (19%±13) | 0–62% (19%±13) | 0–60% (19%±13) | 0–70% (21%±14) |

To examine to what extent gaze allocation in face-viewing was related to facial expression recognition, we conducted a series of two-tailed Pearson correlation analysis between participants' expression categorization accuracy and proportion of fixations at the eyes, nose and mouth regions (Table 3). Although the overall expression

categorization accuracy was not correlated with participant's gaze distribution in face-viewing, the recognition of a few specific expressions tended to be linked with gaze allocation. Specifically, proportion of fixations directed at the eyes was positively correlated with the recognition of disgust faces ($r=0.22$, $p=0.02$). On the other hand, fixation at the nose region was positively correlated with the recognition of sad faces ($r=0.2$, $p=0.04$), but negatively correlated with the recognition of disgust faces ($r=-0.28$, $p=0.004$).

Table 3. Correlation analysis between gaze allocation and expression categorization accuracy. Values in the table represent r value (p value).

| | Eyes | Nose | Mouth |
|-----------------|--------------------|----------------------|--------------|
| All expressions | 0.07 (0.49) | -0.06 (0.58) | 0.01 (0.96) |
| Happy | -0.12 (0.21) | 0.03 (0.73) | 0.12 (0.23) |
| Sad | -0.13 (0.19) | 0.20 (0.04) | -0.04 (0.72) |
| Anger | 0.03 (0.97) | 0.02 (0.85) | -0.03 (0.75) |
| Fear | 0.06 (0.54) | -0.03 (0.79) | -0.05 (0.59) |
| Disgust | 0.22 (0.02) | -0.28 (0.004) | 0.10 (0.30) |
| Surprise | 0.14 (0.16) | -0.10 (0.31) | -0.07 (0.51) |

Expression categorization performance and trait measurements

Participants' personal traits were assessed using the Adult Autism Spectrum Quotient, the Beck Anxiety Inventory, and the Self-Monitoring Scale. Across the participants, the Autism Quotient (AQ) score varied between 0 and 46 (14.93 ± 8.36), the anxiety inventory (AI) level varied between 1 and 47 (15.52 ± 10.16), and the self-monitoring (SM) score varied between 5 and 21 (12.97 ± 3.69). To examine to what extent these personal traits were correlated with an individual's facial expression recognition performance, we conducted two-tailed Pearson correlation analysis between AQ, AI or SM scores and expression categorization accuracy (Table 4). Participants' AQ scores were positively correlated with the recognition of sad expressions ($r=0.2$, $p=0.04$), but negatively correlated with the recognition of anger expressions ($r=-0.2$,

$p=0.04$). Although not reaching the significant level, AQ scores also showed tendency to be negatively correlated with the recognition of fear ($r=-0.18$, $p=0.06$) and disgust expressions ($r=-0.17$, $p=0.08$). On the other hand, AI scores were positively correlated with overall facial expression categorization accuracy ($r=0.26$, $p=0.03$), but were not correlated with the recognition of individual expressions. SM scales, however, had no evident correlation with expression categorization performance.

Table 4. Correlation analysis between personal trait measurements and expression categorization accuracy. Values in the table represent r value (p value).

| | Autism Spectrum Quotient | Beck Anxiety Inventory | Self-Monitoring Scale |
|-----------------|--------------------------|------------------------|-----------------------|
| All expressions | -0.11 (0.24) | 0.26 (0.03) | 0.12 (0.34) |
| Happy | 0.14 (0.17) | 0.12 (0.32) | 0.11 (0.36) |
| Sad | 0.20 (0.04) | -0.04 (0.77) | 0.07 (0.60) |
| Anger | -0.20 (0.04) | 0.14 (0.25) | 0.18 (0.15) |
| Fear | -0.18 (0.06) | 0.21 (0.08) | -0.14 (0.25) |
| Disgust | -0.17 (0.08) | 0.11 (0.35) | 0.01 (0.96) |
| Surprise | 0.01 (0.91) | 0.05 (0.67) | 0.14 (0.24) |

Face-viewing gaze distribution and trait measurements

To examine whether participants' personal trait measurements were related to their gaze distribution in face exploration, we performed a series of two-tailed Pearson correlation analysis between AQ, AI or SM scores and proportion of fixations directed at the eyes, nose or mouth region (Table 5). The analysis demonstrated no apparent correlation between AQ or SM score and face-viewing gaze distribution regardless of expression types. Although not reaching the significant level, AI scores showed tendency to be positively correlated with proportion of fixations directed at the nose region across all facial expressions. However, there was no clear correlation between AI score and proportion of fixations directed at the eyes or mouth region. Furthermore, no significant correlation was found between trait measurements and reaction time or number of fixations per trial ($p>0.15$ for all comparisons).

Table 5. Correlation analysis between personal trait measurements (Autism Spectrum Quotient, Beck Anxiety Inventory, Self-Monitoring Scale) and proportion of fixations allocated at local facial regions. Values in the table represent r value (p value).

| | | Autism Spectrum Quotient | Beck Anxiety Inventory | Self-Monitoring Scale |
|-------|-----------------|--------------------------|------------------------|-----------------------|
| Eyes | All expressions | -0.003 (0.97) | -0.11 (0.37) | 0.01 (0.95) |
| | Happy | -0.02 (0.86) | -0.10 (0.42) | 0.03 (0.78) |
| | Sad | 0.02 (0.85) | -0.09 (0.44) | 0.01 (0.95) |
| | Anger | 0.004 (0.97) | -0.10 (0.39) | -0.01 (0.91) |
| | Fear | 0.01 (0.96) | -0.10 (0.40) | 0.01 (0.91) |
| | Disgust | -0.02 (0.81) | -0.09 (0.44) | -0.01 (0.94) |
| | Surprise | -0.01 (0.93) | -0.15 (0.23) | 0.02 (0.89) |
| Nose | All expressions | -0.04 (0.73) | <i>0.22 (0.07)</i> | -0.02 (0.89) |
| | Happy | 0.001 (0.99) | <i>0.19 (0.11)</i> | -0.05 (0.71) |
| | Sad | -0.05 (0.61) | <i>0.21 (0.09)</i> | 0.01 (0.96) |
| | Anger | -0.05 (0.63) | <i>0.20 (0.10)</i> | -0.01 (0.97) |
| | Fear | -0.04 (0.69) | <i>0.22 (0.07)</i> | -0.04 (0.73) |
| | Disgust | -0.01 (0.90) | <i>0.23 (0.06)</i> | -0.02 (0.89) |
| | Surprise | -0.05 (0.60) | <i>0.22 (0.07)</i> | -0.003 (0.98) |
| Mouth | All expressions | 0.02 (0.82) | -0.15 (0.23) | 0.04 (0.77) |
| | Happy | -0.01 (0.95) | -0.14 (0.24) | 0.43 (0.73) |
| | Sad | 0.01 (0.92) | -0.15 (0.22) | 0.01 (0.96) |
| | Anger | 0.06 (0.54) | -0.12 (0.32) | 0.05 (0.67) |
| | Fear | 0.01 (0.96) | -0.16 (0.20) | 0.05 (0.68) |
| | Disgust | 0.03 (0.77) | -0.18 (0.14) | 0.06 (0.62) |
| | Surprise | 0.04 (0.68) | -0.11 (0.39) | -0.01 (0.96) |

Expression categorization bias and trait measurements

Full confusion matrices were computed to illustrate which expressions were mistaken for others. For each displayed expression, we calculated the percentage of the trials in which the participant categorized the expression using each of the six expression labels (Table 6). Across all the participants, the percentages of labelled expression for each displayed expression were then analysed by ANOVA combined with a posteriori analysis. Similar as in previous observations (Guo, 2012, 2013), happy, anger, fear, disgust and surprise expressions were often mislabelled as sad expression ($p < 0.001$ for all comparisons). Furthermore, fear expression was frequently

mislabelled as surprise; and disgust and surprise were confused with anger and fear, respectively ($p < 0.001$ for all comparisons).

Table 6. Confusion matrices of expression categorization (in bold): percentage of participants selecting the expression labels, averaged across the stimuli and participants.

| Displayed expression | Categorized expression (%) | | | | | |
|----------------------|----------------------------|--------------|--------------|--------------|--------------|--------------|
| | Happy | Sad | Anger | Fear | Disgust | Surprise |
| Happy | 77.26 | 10.26 | 3.75 | 3.37 | 3.75 | 1.57 |
| Sad | 2.69 | 82.69 | 4.74 | 4.39 | 5.45 | 0.10 |
| Anger | 4.29 | 18.24 | 67.34 | 3.59 | 5.38 | 0.93 |
| Fear | 4.90 | 19.87 | 4.55 | 43.17 | 4.68 | 22.72 |
| Disgust | 3.33 | 14.62 | 16.47 | 2.31 | 62.56 | 0.54 |
| Surprise | 6.12 | 17.85 | 3.20 | 14.76 | 1.47 | 56.63 |

To examine to what extent participants' categorization bias could be associated with their personal traits, we conducted two-tailed Pearson correlation analysis between AQ, AI or SM scores and categorization bias for each displayed expression. As shown in Table 7, the participants scoring higher on AQ had a consistent tendency to label other expression as sad. They also tended to mistake anger with happy ($r=0.25$, $p=0.01$), but were less likely to mistake happy with disgust ($r=-0.21$, $p=0.03$) and surprise ($r=-0.21$, $p=0.03$). It should be noted that given their relatively low confusion rate in Table 6 (e.g., 4.29% for anger being mistaken as happy), these correlation findings should be interpreted cautiously. On the other hand, participants scoring higher on AI were less likely to mistake fear or surprise with sad ($p < 0.02$ for all comparisons); and those scoring higher on SM were less likely to mistake fear with disgust or surprise ($p < 0.04$ for all comparisons).

Table 7. Correlation analysis between personal trait measurements and expression categorization bias. Values in the table represent r value (p value).

| Autism Spectrum Quotient | | | | | | |
|---------------------------------|------------------------|---------------------|---------------------|--------------|---------------------|---------------------|
| Displayed expression | Categorized expression | | | | | |
| | Happy | Sad | Anger | Fear | Disgust | Surprise |
| Happy | | 0.19 (0.05) | -0.01 (0.32) | -0.09 (0.39) | -0.21 (0.03) | -0.21 (0.03) |
| Sad | 0.11 (0.25) | | -0.24 (0.02) | -0.06 (0.53) | -0.09 (0.38) | 0.03 (0.77) |
| Anger | 0.25 (0.01) | 0.23 (0.02) | | -0.01 (0.90) | -0.14 (0.15) | -0.15 (0.13) |
| Fear | 0.13 (0.19) | 0.18 (0.07) | -0.17 (0.09) | | -0.02 (0.87) | 0.06 (0.53) |
| Disgust | 0.12 (0.21) | 0.29 (0.003) | -0.04 (0.71) | -0.10 (0.32) | | -0.18 (0.08) |
| Surprise | 0.18 (0.07) | 0.17 (0.09) | -0.17 (0.08) | -0.18 (0.08) | -0.09 (0.35) | |

| Beck Anxiety Inventory | | | | | | |
|-------------------------------|------------------------|---------------------|--------------|--------------|--------------|--------------|
| Displayed expression | Categorized expression | | | | | |
| | Happy | Sad | Anger | Fear | Disgust | Surprise |
| Happy | | -0.20 (0.11) | 0.03 (0.80) | 0.02 (0.88) | -0.01 (0.91) | -0.04 (0.73) |
| Sad | 0.08 (0.50) | | -0.14 (0.24) | -0.02 (0.89) | 0.11 (0.38) | 0.01 (0.95) |
| Anger | 0.01 (0.92) | -0.13 (0.29) | | 0.11 (0.39) | -0.07 (0.57) | -0.09 (0.47) |
| Fear | 0.08 (0.50) | -0.29 (0.02) | -0.05 (0.70) | | -0.04 (0.72) | -0.06 (0.64) |
| Disgust | -0.06 (0.65) | -0.01 (0.96) | -0.13 (0.30) | 0.17 (0.15) | | -0.21 (0.08) |
| Surprise | 0.10 (0.08) | -0.28 (0.02) | 0.15 (0.21) | 0.09 (0.45) | 0.09 (0.48) | |

| Self-Monitoring Scale | | | | | | |
|------------------------------|------------------------|--------------|---------------|--------------|---------------------|---------------------|
| Displayed expression | Categorized expression | | | | | |
| | Happy | Sad | Anger | Fear | Disgust | Surprise |
| Happy | | -0.08 (0.49) | -0.001 (0.99) | -0.18 (0.15) | 0.05 (0.68) | 0.01 (0.92) |
| Sad | -0.001 (0.99) | | -0.09 (0.47) | -0.07 (0.56) | 0.12 (0.32) | 0.12 (0.33) |
| Anger | 0.02 (0.90) | -0.16 (0.12) | | -0.14 (0.25) | 0.04 (0.78) | -0.09 (0.47) |
| Fear | -0.02 (0.90) | 0.04 (0.75) | 0.06 (0.63) | | -0.24 (0.04) | -0.26 (0.03) |
| Disgust | 0.07 (0.59) | -0.17 (0.16) | 0.15 (0.22) | -0.13 (0.29) | | 0.05 (0.66) |
| Surprise | 0.01 (0.94) | -0.01 (0.97) | -0.09 (0.46) | -0.12 (0.34) | -0.04 (0.73) | |

Discussion

In this study we investigated the contributing factors to individual differences in facial expression categorization performance using four different comparisons: face-viewing gaze distribution and expression recognition accuracy, personal traits and expression recognition accuracy, personal traits and face-viewing gaze distribution, and personal traits and expression categorization bias. The results revealed that gaze allocation had limited emotion-specific impact on categorizing expressions. Autistic traits tended to affect the recognition of sad and anger expressions, and contributed to

categorization bias towards sad expressions; whereas higher anxiety level was associated with greater categorization accuracy across all expressions and a tendency of gazing at the nose or mid-face region. Interestingly, although personal traits, such as AQ, could affect expression categorization accuracy and bias, there is no consistent expression-specific relation between personal trait and gaze allocation. It seems that both facial information selection and interpretation capabilities would contribute to individual differences in expression categorization within the non-clinical populations.

It has been established that the internal facial features (i.e. eyes, nose and mouth) and their surrounding regions transmit diagnostic cues for expression recognition (Smith et al., 2005; Calvo & Nummenmaa, 2008), and people often look more at local facial regions that are most characteristic for each expression, such as mouth in happy faces, and eyes in sad and fearful faces (Eisenbarth & Alpers, 2011; Guo, 2012; Vaidya et al., 2014). Here we demonstrated when viewing faces of varying levels of expression intensity, the observers' tendency to gaze at local facial features was directly linked with their categorization performance for some expressions. Specifically, longer gaze at the eyes tended to improve disgust recognition, and longer gaze at the nose would enhance sad recognition but impair disgust recognition (Table 3). Interestingly, previous studies have indicated that nose is diagnostic for recognizing disgust expression and eyes for sad when the expression is displayed at peak intensity (Smith et al., 2005; Eisenbarth & Alpers, 2011). The differences in expression intensity used in different studies may contribute to the observed discrepancies. It is plausible when the expressive facial signals are subtle or ambiguous, we tend to use cues from other facial regions to validate those cues from the 'diagnostic' region in order to reliably decode low-intensity facial expressions.

We did not observe significant correlation between gaze allocation and categorization accuracy for happy, anger, fear and surprise expressions. This might be partly caused by a ‘holistic’ viewing strategy we frequently adopt when exploring facial expressions with varying intensities (Guo, 2012, 2013). Considering that the emotional cues from a single facial feature of (especially low- and mid-intensity) expressive faces are often ambiguous, people tend to scan all key internal facial features (i.e. eyes, nose and mouth) to extract and integrate expressive featural cues in order to reliably decode facial affects (Guo, 2012). This ‘holistic’ gaze behaviour consequently reduces reliance of gazing at a particular facial region for recognizing a specific expression. It is also plausible that after initial fixation selection to extract expressive facial cues from the diagnostic facial region, such as mouth in happy faces and eyes in angry faces, the frequent re-fixations at the same region is not necessarily needed to improve recognition performance for these facial expressions (at least) in the non-clinical population. This possibility could be explicitly examined in the future research.

In addition to face-viewing gaze allocation, some of the measured personal traits were also closely correlated with individuals’ expression categorization performance. Specifically, autistic traits led to enhanced recognition for sad expressions but impaired recognition for anger expressions (Table 4), which is consistent with clinical observation of more errors in detecting anger expression in autistic children (Bal et al., 2010; Tanaka et al., 2012). Interestingly, unlike clinically diagnosed ASD patients who often show “eye avoidance” face-viewing gaze behaviour (Klin et al., 2002; Falck-Ytter & von Hofsten, 2011), in our study autistic traits were not correlated with gaze allocation at the eyes, nose or mouth regions in face viewing (Table 5). It is plausible that in the non-clinical population autistic traits mainly affect the interpretation of more ambiguous expressive cues, rather than the selection/fixation of local facial information.

Furthermore, as autistic traits were associated with the increased categorization bias of labelling other expressions as sad (Table 7), this cognitive bias could (at least) partly account for the enhanced sad expression recognition accuracy.

The impact of anxiety on emotion perception (particularly on threatening facial cues such as fearful and angry expressions) has been widely reported in both clinical and non-clinical population. Clinical studies have revealed that women with social anxiety disorder required less emotional intensity for categorizing fearful, sad and happy faces (Arrais et al., 2010). In non-clinical population, individuals with higher levels of trait anxiety were more accurate at recognizing fearful faces (Surcinelli et al., 2006), and were more sensitive to detect fearful cues in the emotionally ambiguous faces (Richards et al., 2002) or in a masked face paradigm (Doty et al., 2013). Trait anxiety was also positively associated with attention bias towards angry faces in the visual-probe task (Telzer et al., 2008). In our study on non-preclassified healthy individuals, we noticed that participants' anxiety level was indicative for their general expression categorization performance rather than just for specific expressions. More anxious individuals tended to show higher recognition accuracy regardless of expression types (Table 4), they were also less likely to confuse fear or surprise with sad expressions (Table 7). In addition to other factors (such as variance in face stimuli, clinical and non-clinical participant population) that could lead to inconsistent findings between laboratories, different measurements of anxiety might be a contributing factor. In this study we used Beck Anxiety Inventory to measure participants' recent (i.e. for the past month) general anxiety or prolonged state anxiety rather than more specific type of anxiety, such as social, state or trait anxiety, and panic disorder. While this measurement could better represent the complex construct of our day-to-day anxious level as a whole, it is unclear to what extent different components of anxiety (e.g.,

cognitive, somatic, affective, and behavioural components) affect the participants' enhanced sensitivity to expression categorization. It would be interesting to address this issue in the future research. Self-monitoring scale, on the other hand, was not correlated with expression recognition performance, suggesting that individuals with high level self-monitoring traits might use other non-face cues to aid their emotional intelligence (Friedman & Miller-Herringer, 1991).

It seems that at the cognitive stages of processing facial expressions, performance variance in both information selection/extraction (manifested in face-viewing gaze allocation) and information interpretation (manifested in individual's autistic traits and anxiety level) were correlated with individual differences in judging expressions. Unlike in the clinical population, we did not observe significant interaction between two cognitive stages in the healthy participants. Only individuals with higher anxiety level showed a tendency to gaze more often at the mid-face nose region, but this tendency has not reached significant level (Table 5). When using high intensity expressive faces, previous studies have demonstrated that anxious individuals oriented towards diagnostic facial features (i.e. eyes and mouth) in angry and fearful faces (Bradley, Mogg, White, Groom, & De Bono, 1999; Fox, 2002). It might be that anxious individuals tend to perform featural analysis by gazing at an informative facial region when viewing high-intensity expressive faces, but use more holistic analysis with a tendency of gazing at the central face region when exploring facial expressions with varying intensities. Taken together, although both anxiety and autistic-like traits were associated with individual variation in expression categorization, this association is not necessarily mediated by variation in gaze allocation at expression-specific local facial regions.

In addition to facial expression categorization, face identity recognition performance also varies significantly across individuals in the non-clinical population. Interestingly, individual's face recognition ability seems to be strongly dissociated from general intelligence or cognitive ability, but is highly heritable (Wilmer, Germine, & Nakayama, 2014). Recent eye-tracking research further revealed some individual differences in gaze distribution during face identification which persisted over time (Peterson & Eckstein, 2013). However, it is argued that individual's face recognition performance is associated with the transition differences among fixation locations, rather than the spatial distribution differences alone (Chuk, Chan, & Hsiao, 2014). For instance, frequent gaze shifting between the left and right eyes in the viewed faces is linked with better face encoding and recognition performance (Sekiguchi, 2011).

Just like their impact on facial expression perception, personal traits also affect face identity recognition ability. Recent studies have indicated that an individual's poorer face recognition skill and performance is associated with higher social anxiety (Davis et al., 2011), higher autistic trait (Weigelt, Koldewyn, & Kanwisher, 2012), lower empathy level (Bate, Parris, Haslam, & Kay, 2010), and higher introversion personality trait (Cheung, Rutherford, Mayes, & Partland, 2010). Taken together, it seems that although facial expression and face identity are different types of facial cues (e.g., changeable vs invariant information) and involve different neural circuits for information processing (Calder & Young, 2005), the recognition performance of these facial cues are subject to the influence from similar gaze behaviour and personal traits, and are possibly correlated with each other (Franklin & Adams, 2010). Future research could systematically examine the extent to which an individual's ability to recognise facial expressions is associated with their ability to recognise face identity.

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