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A CRITIQUE OF THE HAND TEST

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THE problem of predicting overt aggressive behavior in the prison inmate, the hospitalized patient, and other institutionalized individuals has been investigated in several studies (Finney, 1955; Gluck, 1955; Rust, 1948). The results have been, in general, discouraging. This thorny problem has recently received new attention in conjunction with the publication of a semistructured projective technique, the Hand Test (Wagner, 1962). The authors of this instrument maintain that they have developed a test which predicts this behavior in the individual case and they attempt to support this claim by citing numerous research studies which are summarized in a recent monograph (Bricklin, Piotrowski & Wagner, 1962). A cursory perusal of this research reveals that these claims are totally unjustified and are, in fact, in contradiction with the test parameters enumerated in the manual for administration (Wagner, 1962).

The source of this confusion seems to lie in the authors' failure to discriminate between predictive and concurrent validity. The research which they cite has repeatedly verified the hypothesis that the Hand Test can differentiate between individuals who are currently exhibiting overt aggressive behavior and those who are not. However, the assumption of predictive validity is totally unsupported by research and appears to be based solely upon what has been termed "common sense validity . . . the product of confident ignorance" (English & English, 1958, p. 575).

The confusion is compounded by the manual for administration (Wagner, 1962). While claiming on the one hand that ". . . not only

the probability but also the violence of acting-out can be predicted by the (test)" (p. 26), it states elsewhere, "The Hand Test seems to be optimally sensitive to the subject's immediate psychological state. It reveals the individual as he is at present—not as he was or could be" (p. 2).

Before these claims of predictive validity can be taken seriously it would seem preferable to complete at least one study specifically designed to determine the predictive qualities of the test. A predictor of overt aggressive behavior would probably be of greatest use as a screening instrument for incoming residents of psychiatric and penal institutions and, as such, should be tested within such a locale. If the nature of the test is such as the authors' contend above, such a study would seem foreordained to produce negative results. This does not lessen the need for this research; we already have far too many myths in psychology that "everybody" knows are foolish and therefore nobody takes the trouble to disprove.

In summary, until contraindicated by future research, it appears that the Hand Test serves only one function in the "prediction" of overt aggressive behavior in the institutionalized individual. That function is to enable the psychologist to give a test and then tell the psychiatrist, ward nurse, physician, or warden that a given patient is being overtly aggressive if that inmate is, at that time, causing them grave concern because of his overt aggression.

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