

MACHOVER DRAW-A-PERSON TEST (DAP TEST)

Authored by
Mohammed loot

October 13, 2025

RECOMMENDED CITATION

Mohammed loot (2025). *MACHOVER DRAW-A-PERSON TEST (DAP TEST)*. Encyclopedia of psychology. Retrieved from <https://encyclopedia.arabpsychology.com/?p=13663>

The Machover Draw-A-Person Test (DAP Test) in Psychology

The Core Definition of the Draw-A-Person Test

The Machover Draw-A-Person Test, often abbreviated as the **DAP Test**, is a psychological assessment tool developed by Karen Machover in 1949. It belongs to the category of projective tests, which are designed to reveal unconscious feelings, attitudes, and personality characteristics by asking the participant to respond to ambiguous stimuli. Unlike objective tests that rely on standardized scoring (such as multiple-choice questionnaires), the DAP Test is a highly qualitative instrument that interprets the subject's internal state through the stylistic and content analysis of human figure drawings.

The fundamental mechanism underlying the DAP Test rests on the hypothesis of body image and projection, often summarized by the phrase: "The person draws himself or herself as he or she sees himself or herself." This principle suggests that the figure drawn reflects the individual's self-concept, their perception of their own body, their psychological defenses, and their emotional relationships with others. The assessment typically requires the individual to complete two drawings: one of a person of the same sex as themselves, and one of a person of the opposite sex. The subsequent analysis of these figures offers clinicians potential insights into the individual's inner conflicts, anxieties, and overall emotional functioning, particularly concerning gender identity, sexual awareness, and interpersonal relationships.

While the DAP Test is a widely recognized name in the history of clinical assessment, its use today is often tempered by methodological considerations. It is primarily utilized as an exploratory tool to quickly gain rapport with a client or to supplement findings from more empirically validated measures. The test attempts to uncover aspects of the participant's emotional life that might be difficult to articulate verbally, providing a non-threatening and indirect avenue for self-expression, which is particularly useful when working with children or individuals resistant to traditional interviewing techniques.

Historical Development and Origin

The conceptual roots of the DAP Test predate Machover's work, tracing back to the early 20th century. The earliest standardized use of human figure drawing in psychology was the Goodenough Draw-A-Man Test, introduced by Florence Goodenough in 1926. However, Goodenough's test was strictly designed as a non-verbal measure of cognitive maturity and intellectual development, with scoring based on the inclusion and accuracy of details, not emotional content. It was the crucial work of Karen Machover in the late 1940s that transformed the figure drawing technique from an intellectual measure into a projective measure of **personality** and emotional state, thereby formalizing the DAP Test as we know it today.

Machover published her seminal work in 1949, titled "Personality Projection in the Drawing of the Human Figure." Her approach was heavily influenced by psychodynamic theory, particularly the psychoanalytic concept that the human body represents the self, and any distortions or emphasis placed on parts of the body reflect areas of psychological conflict or fixation. Machover provided a detailed set of interpretive hypotheses, linking specific drawing elements--such as disproportionately large heads, heavy shading, or omission of limbs--to specific psychological traits or conflicts, such as grandiosity, anxiety, or aggression, respectively. Her work propelled the DAP Test into widespread usage in postwar clinical psychology settings where rapid, qualitative assessment tools were highly valued.

The historical context of its development is important: the mid-20th century was the golden age of projective testing. Tools like the Rorschach and the Thematic Apperception Test (TAT) were dominant, and the DAP Test provided a simple, quick-to-administer addition to this battery. Its simplicity meant it could be administered easily in schools, hospitals, and private practice, making it an accessible component of the comprehensive psychological evaluation process, though its interpretive complexity required specialized training rooted in psychodynamic frameworks.

The Administration and Mechanisms of Interpretation

The administration of the DAP Test is remarkably straightforward, requiring only a pencil, paper, and a simple instruction. The examiner typically asks the participant to "Draw a person." Once this drawing is completed, the participant is then instructed to "Draw a person of the opposite sex." Crucially, no further instruction or guidance is provided, allowing the participant maximum freedom of expression. Following the completion of the drawings, the examiner often conducts a brief inquiry, asking the participant to describe the figures they drew, including their age, occupation, and emotional state, which provides context for the subsequent analysis.

The mechanism of interpretation is complex and qualitative, revolving around the detailed analysis of numerous features. The analysis does not focus on artistic quality but on the symbolic meaning of the form, structure, and content of the figures. Examiners look for consistent patterns and deviations from typical drawing norms. Key interpretive features analyzed include:

Size and proportions: A figure's size is often interpreted in relation to self-esteem and ego strength. For example, an unusually small figure placed near the bottom of the page might suggest feelings of inadequacy or low self-regard, while an overly large or expansive figure could be hypothesized to reflect narcissism or an aggressive, attention-seeking personality.

Body features and detail: The presence or omission of specific body parts carries significant symbolic weight. The absence of eyes, for instance, might be interpreted as resistance to social interaction or a lack of insight into one's own issues. Excessive detail or meticulous rendering of the face, however, might point toward **obsessive-compulsive tendencies** or high social anxiety

related to presentation.

Dress and clothing: The way the figures are clothed can provide clues about social adaptation, sexual identity, or preoccupation with external appearance. Drawing figures with heavy or elaborate clothing might suggest a need for social protection or excessive concern over social appropriateness, while the drawing of adult clothing by a young child could indicate issues surrounding maturity or role confusion.

Position and posture: The dynamic pose of the figure--whether static, moving, aggressive, or withdrawn--offers insights into the participant's emotional state. A figure drawn with tightly crossed arms or a rigid posture might suggest defensiveness or emotional constriction, whereas a figure drawn in a very active, aggressive posture might suggest underlying hostility or impulsiveness.

Shading and erasures: These graphical elements are often interpreted as markers of anxiety and conflict. Excessive or heavy shading concentrated on specific body areas (e.g., the throat or genitals) is frequently hypothesized to indicate anxiety or conflict related to that specific body function or symbolic meaning. Frequent erasures or sketchy lines can suggest feelings of uncertainty, indecisiveness, or poor impulse control during the task.

A Practical Scenario: Applying the DAP Test

Consider a scenario involving a 10-year-old boy, Alex, referred to a clinic due to increasing social withdrawal and difficulty concentrating in school. During the initial personality assessment battery, the clinician administers the Machover DAP Test to establish rapport and gain rapid insight into Alex's internal world before proceeding to structured interviews.

Step one involves the drawings themselves. Alex draws both figures (male and female) significantly smaller than average, positioning them in the corner of the page rather than centrally. Both figures are drawn with flimsy, barely visible outlines. The male figure is drawn without hands, and the female figure has exaggerated, elaborate hair but no feet. Step two is the clinical interpretation based on Machover's hypotheses. The small size and corner placement suggest feelings of low self-worth, inadequacy, and a desire to retreat or minimize his presence in the world. The flimsy outline reinforces a lack of ego boundaries or underlying anxiety. Step three focuses on specific omissions and exaggerations. The absence of hands, often interpreted as the organ of interaction and control, might indicate feelings of helplessness, guilt, or difficulty engaging effectively with his environment. The exaggerated hair on the female figure, coupled with the absence of feet (representing stability and grounding), might suggest an overemphasis on superficial appearance or intellectualization as a defense mechanism, perhaps reflecting a conflicted relationship with a significant female figure in his life.

The DAP Test, in this context, does not diagnose clinical depression or generalized anxiety, but it provides compelling qualitative data that guides the subsequent clinical interview. For instance, the clinician would now specifically explore Alex's feelings about his capabilities (hands) and his

relationship dynamics with female authority figures (exaggerated female hair/figure). The DAP Test serves as a projective "icebreaker," providing thematic material that the clinician can use to validate or contradict through objective measures and direct conversation.

Significance and Role in Clinical Psychology

The Machover DAP Test holds significant historical and practical importance, primarily due to its simplicity and its ability to rapidly bypass verbal defenses. In the field of psychological assessment, the DAP Test provides a unique window into the client's non-verbal communication, which can be invaluable when working with clients who are pre-verbal, non-communicative, culturally diverse, or highly guarded. It is frequently used in initial screenings in educational, forensic, and clinical settings to quickly identify potential areas of emotional distress or conflict that warrant deeper investigation.

Despite persistent empirical challenges regarding its psychometric properties, the DAP Test remains influential because of its utility in establishing rapport. The act of drawing is often less intimidating than answering direct questions about personal conflicts, allowing the client to feel more comfortable and engaged early in the therapeutic process. Furthermore, the test is not merely about the finished product; the observation of the drawing process itself--the sequence of drawing parts, the hesitations, the use of erasures, and any verbal commentary--provides rich behavioral data for the clinician to analyze.

It is crucial to emphasize that modern professional standards dictate that the DAP Test should never be used as a standalone diagnostic tool for mental illness or psychopathology. Its primary utility lies in hypothesis generation and serving as one component of a comprehensive assessment battery, which must also include structured interviews, validated objective personality inventories (like the MMPI), and medical evaluations to ensure accurate diagnostic conclusions. The information gleaned from the drawings helps contextualize and enrich the interpretation of data obtained from more quantitative measures.

Methodological Limitations and Subjectivity

While historically popular, the Machover DAP Test faces substantial criticism regarding its methodological validity and reliability. The most significant limitation is its inherent subjectivity. Because the interpretation relies heavily on the psychoanalytic framework and the clinical judgment of the examiner, the test often suffers from low inter-rater reliability; two different clinicians may interpret the same drawing in vastly different ways, particularly when the clinicians adhere to different theoretical orientations.

Furthermore, the empirical validity--the ability of the test to accurately measure what it claims to measure (e.g., anxiety, aggression)--has been difficult to establish through rigorous research.

Many of Machover's initial hypotheses linking specific drawing signs to specific personality traits have not been consistently supported by modern quantitative studies. Variables unrelated to personality, such as artistic skill, mood on the day of testing, cultural background, and general intellectual ability, can significantly influence the resulting drawing, potentially skewing the interpretation and leading to diagnostic errors.

Another critical limitation involves cultural bias. Machover's interpretive norms were developed primarily within a Western, mid-century context. Drawing conventions, gender roles, and even the accepted proportions of the human figure vary widely across cultures. Applying standard interpretations to individuals from vastly different cultural backgrounds can lead to misinterpretations or pathologizing normal cultural differences. Consequently, while the DAP Test continues to be taught and used in some specialized settings, its role has shifted from a primary diagnostic instrument to a supportive, qualitative measure, often supplemented or replaced by more empirically grounded cognitive and personality tests.

Relationship to Other Projective Techniques and Psychological Subfields

The Machover Draw-A-Person Test is categorized within the broad subfield of **Personality Assessment**, and more specifically, within the tradition of psychodynamic projective testing. It shares its theoretical lineage and clinical application style with several other famous projective measures. Its closest relatives are the House-Tree-Person (HTP) Test, which extends the drawing task to include environmental elements, and the Kinetic Family Drawing (KFD) Test, which asks the subject to draw their family performing an activity, thereby focusing on interaction dynamics rather than just isolated self-image.

The DAP Test is often administered alongside the two most recognized projective instruments: the Rorschach Inkblot Test and the Thematic Apperception Test (TAT). While the Rorschach uses abstract forms to elicit responses reflecting core thought processes and defenses, and the TAT uses ambiguous pictures of social situations to reveal narrative themes and interpersonal conflicts, the DAP Test specifically targets the body image and the conscious/unconscious self-concept. All three tests rely on the mechanism of projection and require extensive clinical training for responsible interpretation.

Ultimately, the Machover DAP Test belongs firmly within clinical psychology and psychopathology, serving as a legacy tool that highlights the historical development of assessment techniques. While its scientific standing has waned compared to objective measures, its influence persists in how clinicians approach non-verbal communication and the initial conceptualization of a client's internal psychological landscape.