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Further evidence against eye-hand coordination as a general ability

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Keywords:	visuo motor skills, motor ability, skill acquisition, eye-hand coordination, vision training
Abstract:	<p>A number of companies are marketing general eye hand coordination (EHC) training devices, which are purported to enhance performance on the device and in a sporting domain. An act comprising EHC involves the complex combination of a number of distinct functions and an investigation of what tasks share this common factor has not been completed. There is also a lack of evidence investigating the interrelationship between different tests to assess EHC using these devices. A number of different EHC abilities, rather than one common factor, could potentially underpin any range of tasks involving EHC and visual stimuli. Therefore, the present study investigated the theoretical assumption upon which such EHC training devices are based; that is, whether EHC is a general ability. Eighty-seven currently active sportspeople (age 18.6 ± 0.9 years; 58 males and 29 females) completed four tests of EHC: three laboratory tasks (the Sports Vision TrainerTM; Batak ProTM; and Graded Pegboard) and a field task (wall catch test). Intercorrelations between the tasks ranged from weak to strong, but the percentage of shared variance was typically low. Overall, the results do not support the existence of a common EHC ability underpinning performance on general EHC training devices. Consequently, coaches and sport scientists should be aware that training on general EHC training devices is unlikely to transfer to sporting performances. Instead, practitioners are encouraged to explore sport-specific assessment and training of EHC.</p>

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Further evidence against eye-hand coordination as a general ability

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Abstract

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2 A number of companies are marketing general eye hand coordination (EHC) training
3 devices, which are purported to enhance performance on the device and in a sporting
4 domain. An act comprising EHC involves the complex combination of a number of distinct
5 functions and an investigation of what tasks share this common factor has not been
6 completed. There is also a lack of evidence investigating the interrelationship between
7 different tests to assess EHC using these devices. A number of different EHC abilities,
8 rather than one common factor, could potentially underpin any range of tasks involving
9 EHC and visual stimuli. Therefore, the present study investigated the theoretical
10 assumption upon which such EHC training devices are based; that is, whether EHC is a
11 general ability. Eighty-seven currently active sportspeople (age 18.6 ± 0.9 years; 58 males
12 and 29 females) completed four tests of EHC: three laboratory tasks (the Sports Vision
13 TrainerTM; Batak ProTM; and Graded Pegboard) and a field task (wall catch test).
14 Intercorrelations between the tasks ranged from weak to strong, but the percentage of
15 shared variance was typically low. Overall, the results do not support the existence of a
16 common EHC ability underpinning performance on general EHC training devices.
17 Consequently, coaches and sport scientists should be aware that training on general EHC

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9 18 training devices is unlikely to transfer to sporting performances. Instead, practitioners are
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11 19 encouraged to explore sport-specific assessment and training of EHC.
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16 21 Keywords: visuo-motor skills; motor ability; skill acquisition; eye-hand coordination
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21 23 The drive to excel in elite sport has seen teams and organizations exploring novel
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23 24 training practices to gain an advantage over their competitors. Visual training has been one
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26 25 of the most common avenues pursued by teams in order to gain that advantage (1, 2). One
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28 26 of the key visual skills targeted by such programmes is eye-hand coordination (EHC).
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30 27 EHC refers to the synchronization of the movements of the hands to visual stimuli (3), and
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32
33 28 has long been regarded as a key contributor to success in specific sports such as table tennis
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35 29 (4), and professions such as surgery (5). Stimulated by this popular opinion, a number of
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37 30 companies now market devices which they claim can be used to measure and enhance EHC
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39 31 (e.g., the Sports Vision Trainer™ (SVT™), Sports Vision Pty Ltd, Australia; Dynavision
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41 32 D2™, Dynavision International LLC, USA; Wayne Saccadic Fixator, Wayne Engineering,
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43 33 USA; Batak Pro™, Quotronics Limited, UK).
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47 34 An inherent assumption of EHC training devices is that a common factor underpins
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49 35 performances both on these devices and in the domain-specific skills (e.g., catching a
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9 36 cricket ball). Within the motor learning literature, such common factors are termed “general
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11 37 motor abilities” (5, 6). One concern with the conceptualization of EHC as a general ability
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13 38 is that a rigorous analysis of what tasks share this common factor has not been completed.
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15 39 Such an analysis is required because any act of EHC involves the complex integration of a
16
17 40 number of distinct functions, including visual detection of the target, focusing attention,
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19 41 perceptual identification, planning and programming the initial interceptive movement,
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21 42 potential online control of the steering of the limb towards the target, and the execution of
22
23 43 the grasping/striking movement itself (7). Consequently, it is plausible that the wide range
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25 44 of tasks in which the hands are synchronized to visual stimuli are underpinned by a number
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27 45 of different EHC abilities, and not a single common factor.
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33 46 Such an interpretation is consistent with the dominant theory in relation to the
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35 47 concept of ability: Henry’s specificity hypothesis (8). In Henry’s theory, abilities are the
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37 48 hypothetical basic unit of individual differences in performance. Abilities are said to be
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39 49 specific in the sense that the performance of any motor skill is based upon a very large
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41 50 number of independent abilities, with each skill drawing upon an almost unique
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43 51 combination of abilities. Researchers have repeatedly supported Henry’s prediction when
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45 52 investigating candidate general abilities such as balance or agility (9-16), and recent studies
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47 53 of individual differences continue to support the specificity hypothesis (17, 18). Thus,
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10 54 although intuitively appealing, there are both theoretical and empirical reasons to doubt the
11 55 existence of a general EHC ability that underpins both laboratory training devices and
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13 56 domain-specific skills.
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16 57 Despite these theoretical and empirical arguments against the existence of broad
17
18 58 general abilities, the popularity of devices for the assessment and training of general EHC
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20 59 appears to be increasing (1, 19). Furthermore, inspection of the research suggests that EHC
21
22 60 may be a more promising candidate for a general ability than balance or agility. Although
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24 61 not directly investigating the existence of general EHC ability, a number of studies have
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26 62 compared performers of differing abilities on unpractised tests that involve EHC. For
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28 63 example, a wall catch test was found to discriminate between different levels of performers
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30 64 (20), and has been included as part of a national talent development programme in table
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32 65 tennis (4). Similar findings have been found in baseball (21), where high school players
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34 66 performed more poorly than college and professional players on a computerised test of
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36 67 EHC. Moreover, an EHC assessment amongst Dutch junior table tennis players aged 7–11
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38 68 years significantly predicted future competition results (22). In both the studies of Faber et
39
40 69 al. (20) and Klemish et al. (21), some findings were inconsistent with the existence of a
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42 70 common EHC ability. For example, while participants in the lowest skill group in both
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44 71 studies performed more poorly on all tests of EHC relative to higher-level performers, there
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9 72 were no differences in performance between the intermediate and high skills groups. In
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11 73 addition, within the study by Klemish and colleagues, the predicted differences between
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13 74 pitchers, whose playing position places a low demand on EHC, and hitters, whose playing
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15 75 position places a high demand on EHC, did not materialise (21). However, the comparison
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17 76 of performers of differing skill levels is a weaker test of the existence of a general ability
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19 77 than experimental approaches (e.g. 11), as multiple factors typically contribute to
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21 78 attainment within a specific sport domain (23). Consequently, these studies suggest that
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23 79 while some findings are incongruent with the concept of general EHC ability, sufficient
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25 80 evidence exists to warrant further investigation in general EHC ability.

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30 81 Comparing EHC performances across skill levels (20, 21) is complicated by limited
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32 82 access to appropriate populations resulting in small sample sizes, and by the inability to
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34 83 control for intervening variables. A more direct assessment of whether an ability is general
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36 84 or specific involves the comparison of performances on a range of tasks which are
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38 85 hypothetically underpinned by the same ability (10, 12, 14). Using this direct approach,
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40 86 early factor analysis studies did identify an “Aiming” factor, analogous to EHC (24, 25).
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42 87 However, an important criticism of this literature is that most of the tasks used in these
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44 88 studies were highly similar paper and pencil measures (e.g., tracing different patterns).
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46 89 Partially addressing this concern, an investigation of a broader range of laboratory EHC
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10 90 tasks found that performance on the Dynavision D2™ shared 31.4% of its variability with a
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12 91 30 second performance on a dominant hand pursuit rotor task, and 32.5% with a non-
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14 92 dominant hand performance (based on their reported Pearson Product Moment Correlation
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16 93 Coefficients) (19). The variability shared between the Dynavision device and the
17
18 94 Minnesota manual dexterity test was 40.9%. Thus, and in support of the findings of Faber
19
20 95 and colleagues (22) discussed earlier, these results from Vesia et al. (19) offer preliminary
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22 96 support for the concept of EHC as a general ability. However, replication and extension to
23
24 97 include field tests of EHC is essential so that the scientific and applied communities may
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26 98 have confidence in their use of specific pieces of equipment, and their recommendations
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28 99 with respect to best practice (26). As such, this study investigated the **interrelationship**
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32 100 **between different tests** on a range of common commercial (SVT™, Batak Pro™),
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34 101 laboratory (Graded Pegboard) and field (wall catch test) assessments of EHC.
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102 **Method**

103 ***Participants***

104 Eighty-seven sports participants (age 18.6±0.9 years; male athletes n=58, female
105 athletes n=29) volunteered for the study and provided written informed consent prior to
106 testing. Participants were recruited by advertisements on the local Virtual Learning
107 Environment. Inclusion criteria were: an age between 18 and 20 years and being an active

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9 108 participant of a sport. Players with injuries were excluded from the study. Full compliance
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11 109 of the Helsinki Convention were adhered to at all times. Participants had 5.7 ± 4.2 year's
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13 110 experience participating in organized sport, and currently trained for an average of 5.5 ± 4.8
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15 111 hours per week in a variety of team and individual sports. With regard to their primary
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17 112 sport for participation, 72 participants (82.8%) identified a sport involving either a ball or
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19 113 an object requiring similar EHC responses (e.g. shuttlecock, puck), by contrast to sports
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21 114 such as gymnastics or swimming. Football was the most commonly identified sport (34
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23 115 participants; 39.1% of the total sample). High level engagement in the identified sport was
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25 116 identified in terms of professional status, or representative selection for competitions at
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27 117 county, national or international level. Forty-five participants (51.7%) reported this level of
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29 118 engagement.
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35 119 ***Equipment***

36 120 *Sport vision trainer (SVTTM)*

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38 121 Participants completed six trials using the wall mounted non-portable SVTTM 80
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40 122 sensor pad (1.25 m x 1.25 m). A 20 target self-paced protocol was initiated in which targets
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42 123 were lit in a random sequence. The participant was instructed to successfully identify and
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44 124 strike each stimulus before it changed position. Once a target is struck the SVTTM
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46 125 programme immediately lights the next target. Due to the short duration of the task, the first
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48 126 two trials provided familiarisation, and the mean number of successful strikes for the final
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9 127 four trials was used for analysis. The SVT™ has previously demonstrated test-retest
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11 128 reliability of 4.76%, 0.81, and $r = 0.89$ for typical error CV, intraclass correlation
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14 129 coefficient (ICC) and Pearson's correlation coefficient respectively (27).
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16 130 *Batak Pro™*

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18 131 Participants completed two 60-second trials using the Batak Pro™ board. The
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20 132 board consists of twelve polycarbonate high impact resistant and high intensity LED cluster
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22 133 targets attached to a strong tubular frame (2.08 m (width) x 0.95 m (depth) x 1.95 m
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24 134 (height)). A 60 second self-paced protocol was initiated in which LEDs were lit in a
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26 135 random sequence. The participant was instructed to identify and strike each stimulus before
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28 136 it changed position. Once a target is struck the Batak Pro™ programme immediately lights
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30 137 the next target. Due to the relatively long duration of the task in comparison to the SVT™,
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32 138 the first trial provided familiarisation, and the number of successful strikes on the second
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34 139 trial was used for analysis.
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40 140 *Graded Pegboard*

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42 141 The Sammons Preston® Graded Pegboard Set (Patterson Companies Inc, UK) is a
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44 142 30-hole pegboard consisting of a 305 mm x 255 mm wooden board and 30 pegs in five
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46 143 colours. Pegs range in height from 3.18 cm to 6.86 cm and 1.90 cm in diameter.
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48 144 Participants were seated at a table and presented with five rows of graded-height pegs.
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9 145 Pegs were laid in a random order on the table prior to the board. The same time-keeper
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11 146 counted down “3, 2, 1, go” and the participant picked up one peg at a time and inserted
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13 147 them as quickly as possible into the board. Participants received one familiarisation trial
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16 148 using both hands. Completion times in seconds for three further (i.e. critical) trials were
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18 149 recorded for data analysis: right hand only, left hand only and both hands, with a 30 second
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20 150 rest period in-between trials. A researcher made note of the time to completion.
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23 151 *Wall catch test*
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26 152 Participants stood with feet parallel and shoulder width apart behind a line marked 2
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28 153 m from a solid wall. A bucket of tennis balls were available directly in front of the
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30 154 participant and a ball was held in the dominant hand. A time-keeper counted down “3, 2, 1,
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32 155 go” at which point the ball was thrown underarm off the wall and the return was caught in
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34 156 their opposing hand. The participant then continued to throw and catch the ball in
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36 157 alternative hands for 30 seconds. If a ball was dropped participants were instructed to reach
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38 158 into the bucket of balls and to continue the test as quickly as possible. Feet remained behind
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40 159 the line at all times and catches were made one handed. Only caught balls were recorded;
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42 160 i.e., any returns trapped against the body did not count. Participants were given the
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44 161 command “stop” after 30 seconds. A second researcher recorded the number of successful
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46 162 catches. Participants received one familiarisation trial, followed by two critical trials, with
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9 163 30 seconds rest between trials. The mean number of successful catches for the two critical
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11 164 trials was used for data analysis. This type of test has been shown to elicit valid and
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13 165 reproducible results in table tennis (4) showing an ICC of 0.88 and smallest detectable
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15 166 differences (SDD) of 0.8 m ($p < 0.001$).
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19 167 ***Procedure***

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21 168 All experimental procedures were approved by the Institutional Ethics committee
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23 169 prior to testing (approval number SPA-REC-2012-007). All tests were conducted in the
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25 170 morning and participants attended one testing session lasting approximately one hour. The
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27 171 same investigator administered all the tests. The order of the four tests was randomised for
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29 172 the participants using playing cards. Participants that wore refractive correction to play
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31 173 sport were tested whilst wearing their current prescription. The ambient light in the room
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33 174 was carefully controlled and set at 420 Lux (22) using a Lux light meter (CEM DT-1300,
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35 175 Shenzhen, China).
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40 176 All participants received a demonstration and standardised explanation of all tasks
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42 177 before testing. Some studies recommend familiarisation trials as strategies to prevent any
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44 178 presence of learning curves for the collection of EHC data (27-29). To the authors
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46 179 knowledge there are currently no validated/published protocols to eliminate familiarisation
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48 180 for the Graded Pegboard or Batak Pro™ tasks. Therefore, performances on the first trial of
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9 181 each task (the first two trials in the case of the short duration SVT™ task) were regarded as
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11 182 familiarisation, and the mean performances on the remaining trials were analysed.
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13 183 *Statistical Analysis*

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15 184 Results for all four tasks were converted into a standardised “hits per second” score,
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17 185 such that a higher number of hits per second on each task represented better performance.
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19 186 A Pearson product-moment correlation analysis was used to determine the relationships
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21 187 between the four EHC tasks (SVT™, Batak Pro™, wall catch test, and Graded Pegboard).
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23 188 A correlation coefficient above 0.10 represented a weak association, above 0.30 represented
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25 189 a moderate association, and above 0.50 represented a strong association between the tests
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27 190 (30). The proportion of variance shared between two tests was calculated as the square of
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29 191 their bivariate correlation coefficient r^2 . A criterion alpha level of $p < 0.05$ was used to
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31 192 determine statistical significance. All statistical procedures were conducted using SPSS v22
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33 193 statistical software (IBM, Chicago, USA).
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39 194 **Results**

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41 195 Table 1 summarises the raw performance scores for the four tests administered.
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9 198 Table 2 provides a summary of the analyses based upon the standardised scores for
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11 199 each task. Four correlations were identified as statistically significant, but only two were of
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13 200 moderate or greater strength. The strongest correlation in Table 2 was observed between
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15 201 the Batak Pro™ and the SVT™ ($r^2 = 29\%$), whilst with regard to the confidence intervals
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17 202 shown, for the lower limit $r^2 = 14.1\%$ and for the upper limit $r^2 = 45.7\%$. A moderate
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19 203 correlation was observed between the Batak Pro™ and the wall catch test ($r^2 = 12\%$), with
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21 204 $r^2 = 2.76\%$ for the lower limit and $r^2 = 26.6\%$ for the upper limit. The remaining four
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23 205 intercorrelations were weak with none of the r^2 values for shared variance shown in Table 3
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25 206 exceeding those already reported.

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31 207 *[Table 2 & 3 about here]*

32 208 **Discussion**

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34 209 Relationships between performances on four tests of EHC were examined to
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36 210 evaluate whether a general EHC ability underpinned performance on these tests.
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38 211 Identifying whether EHC is a general ability has important implications for coaches and
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40 212 sport scientists designing training programmes for athletes. Consistent with the majority of
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42 213 research on general motor ability (12, 13, 14) and Henry's specificity hypothesis (8),
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44 214 intercorrelations between performances on the four tasks were mostly weak. Only the
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46 215 correlation between the SVT™ and the Batak Pro™ could be categorised as strong, and it
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48 216 should be noted that these two tests utilise highly similar procedures, differing only in the
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9 217 number and location of targets to be hit. Overall, therefore, the results cast doubt over the
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11 218 existence of a general EHC ability underpinning performance on the selected generic EHC
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13 219 training devices. Consequently, these findings question the rationale for generic EHC
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15 220 training devices.
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19 221 The generally weak correlations observed within the current study are somewhat at
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21 222 odds with the findings of Vesia et al. (19). Given the similarity in age, educational
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23 223 background and experience with the tests of the participants in the current study and that of
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25 224 Vesia, the differing results may be due to some difference in the protocol of the testing.
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27 225 The obvious difference is in the use of the Dynavision™ within Vesia et al.'s experiment,
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29 226 compared to the SVT™ and Batak Pro™ within the current experiment. However, all three
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31 227 devices operate on the same principles of reaching for randomly presented targets, with
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33 228 differences in the size, number (8-80) and location of potential targets between models.
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35 229 Alternatively, the different findings may be due to the tasks used by Vesia et al. (19) being,
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37 230 for the most part, of longer duration than the tasks used in the current study. That said, it is
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39 231 not clear why differences in task duration would influence the relationship between
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41 232 performances on differing tests of EHC.
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47 233 The general lack of association between tasks is consistent with Henry's theory of
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49 234 specific motor abilities (8). According to this theory, small differences between test
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9 235 demands have potentially large effects on performance due to the specificity of what is
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11 236 learned with practice. For example, among the studied tasks, the pegboard places a greater
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13 237 demand on accuracy of fine motor actions compared to performance on the Batak Pro™.
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16 238 The Batak Pro™ involves greater use of peripheral vision compared to the SVT™. The
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18 239 SVT™ presents a discrete, static stimulus, whereas the wall catch test requires the tracking
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20 240 and interception of a dynamic stimulus, although it should be noted that the wall catch test
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22 241 does not replicate a game situation and is not necessarily sport specific. Any of these
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25 242 differences may be responsible for the relative lack of association observed between tasks.

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28 243 Some limitations of this study need to be acknowledged when interpreting the
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30 244 results. The use of a typical sample of healthy young adults means data may not transfer to
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32 245 other populations (e.g. individuals with cognitive and physical impairments), athletic
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34 246 populations (e.g. elite sport) or sports. For example, the assessment might lose its strength
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36 247 in a larger homogenous sample with an elite population regarding perceptual-motor skills.
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38 248 In addition, the present study identified and examined four EHC tests, but it should be
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40 249 recognised that other tests and devices are available purporting to measure EHC which
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43 250 could be included in future. This is important as the general lack of association between all
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45 251 the EHC tests may cast some doubt over the actual measures used as they all involve some
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48 252 variations of movement coordination.
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9 253 While the present findings reject the existence of a general factor underpinning
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11 254 performance on the examined general EHC training devices, it is not possible to discount
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13 255 the existence of a general EHC ability altogether. Any act of EHC involves the complex
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15 256 integration of a number of distinct functions relating to the identification and tracking of a
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17 257 target, allocation of attention, and the planning, execution and monitoring of the
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19 258 interceptive movement (6). Furthermore, each of these operations are controlled by neural
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21 259 networks located in different brain structures (6). If EHC is viewed as the coordinated
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23 260 functioning of multiple sub-processes, then it is logical that measures of EHC ability are
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25 261 sensitive to variations in the task such as stimulus (e.g., static versus dynamic, the need for
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27 262 peripheral v central vision, etc.) or response features (e.g., gross versus fine motor control).
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29 263 According to this conceptualisation of EHC, transfer from basic laboratory tests of EHC to
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31 264 sporting tasks is predicted to be minimal unless the majority of neural processes are shared.
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33 265 Future research is required to confirm whether such shared processes are responsible for the
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35 266 identified relationship between performance on the wall catch test and table tennis
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37 267 performance (22).

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40 268 In summary, this study has provided further evidence against EHC as a general
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42 269 ability. Consequently, and in contrast to the claims published by manufacturers,
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44 270 improvements on EHC training devices are unlikely to transfer directly to enhanced
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9 271 sporting performance when the principle of specificity is violated. Practitioners are
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11 272 encouraged to explore sport-specific assessment and training of EHC.
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1 Table 1

2 *Raw performance scores for the tests administered (sec)*

3

Performance measure	Mean	SD	Maximum	Minimum
SVT: mean of successful strikes over four trials	9.92	1.03	12.69	7.87
Batak: number of successful strikes on Trial Two	68.26	8.36	83.00	43.00
Graded pegboard: critical trial				
Left hand	35.95	5.38	49.31	22.40
Right Hand	37.79	5.02	54.00	27.80
Both	28.73	5.16	44.50	20.40
Wall catch: mean of successful catches over two trials	24.70	4.89	36.50	14.00

4

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1 Table 2
 2 *Descriptive statistics and Pearson correlation coefficients for performances on four eye hand*
 3 *coordination tasks*

Device	Mean (hps)	SD	Batak Pro™	SVT™	Wall Catch
Batak Pro™	1.14	0.14			
SVT™	2.04	0.21	0.540** [0.376, 0.676]		
Wall Catch	0.82	0.16	0.349** [0.166, 0.516]	0.207 [-0.023, 0.396]	
Pegboard	0.89	0.11	0.227* [0.035, 0.398]	0.219* [-0.033, 0.428]	0.164 [-0.028, 0.352]

4 Notes. hps: hits per second. *Correlation is significant at the 0.05 level. **Correlation
 5 is significant at the 0.01 level. Values in square brackets refer to bias corrected and
 6 accelerated bootstrap 95% confidence intervals. Mean and standard deviation (SD)
 7 values are in hits per second.

8

Table 3

Shared variance (r^2) for the sample correlation coefficients and the lower and upper limit coefficients for the 95% confidence intervals reported in Table 2

Task	Statistic	Batak Pro™	SVT™	Wall catch
SVT™	Sample correlation coefficient	.29	--	--
	Lower limit	.14	--	--
	Upper limit	.46	--	--
Wall catch	Sample correlation coefficient	.12	.04	--
	Lower limit	.03	.00	--
	Upper limit	.27	.16	--
Pegboard	Sample correlation coefficient	.05	.05	.03
	Lower limit	.00	.00	.00
	Upper limit	.16	.18	.12