A New Norm

with updated items, scales, and normative samples

The MMPI®-3 is the most up-to-date personality assessment available for mental health, medical, forensic, and public safety settings. The test is modernized for today’s clients and provides new norms and updated items and scales. The MMPI-3 continues to build on the history and strengths of the MMPI instruments to provide an empirically validated, psychometrically relevant standard for psychological assessment.

New, nationally representative English-language normative sample

A lot has changed in 30 years. The MMPI-3 normative sample was updated in 2020—the first time since the mid-1980s—and designed to match U.S. census projections for race and ethnicity.* It includes 1,620 individuals (810 men and 810 women) ages 18 and older from diverse communities throughout the United States.

Table 1. Race Distribution of Participants in the MMPI-3 Normative Sample Compared to 2020 Projected Census Data and MMPI®-2/MMPI-2-RF® Normative Sample

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>MMPI-3 %</th>
<th>2020 Projected %</th>
<th>MMPI-2/MMPI-2-RF %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asian</td>
<td>5.1%</td>
<td>6.0%</td>
<td>0.6%</td>
</tr>
<tr>
<td>Black</td>
<td>12.4%</td>
<td>12.2%</td>
<td>11.6%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>14.0%</td>
<td>16.8%</td>
<td>2.9%</td>
</tr>
<tr>
<td>White</td>
<td>60.3%</td>
<td>62.5%</td>
<td>81.8%</td>
</tr>
<tr>
<td>Other</td>
<td>3.7%</td>
<td>0.9%</td>
<td>3.1%</td>
</tr>
<tr>
<td>Mixed Race</td>
<td>4.5%</td>
<td>1.6%</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

*MMPI-3 norms closely match projected 2020 U.S. Census Bureau demographic

QUICK OVERVIEW

Age: 18 years and older
Qualification level: C
Reading level: 4.5 grade (Flesch-Kincaid)
Completion time: 25-50 minutes
Report options: Score, Clinical Interpretive, and Public Safety Candidate Interpretive Reports
Transparent interpretation grounded in research

As always, it’s empirically validated.

Detailed analyses reported in the MMPI-3 Technical Manual demonstrate that interpretation of the updated MMPI-3 scales can be guided by the extensive peer-reviewed MMPI-2-RF literature. A listing of these publications can be found on the MMPI-3 web page.

Shorter administration time for a comprehensive picture

Save time. With 335 items, the MMPI-3 takes only 25–35 minutes to administer using a computer and 35–50 minutes to administer by paper and pencil. Even with the shorter administration time, the MMPI-3 delivers comprehensive information from 52 scales to assist you in evaluation, diagnosis, and treatment planning.

Spanish-language translation and normative sample

¡Disponible en español! The Spanish translation of the MMPI-3 includes norms derived from a sample of U.S. Spanish speakers (275 men and 275 women).

New and updated items and scales

Brood no more! Items that no longer resonate with today’s clients have been removed or updated. Of the 335 items that comprise the MMPI-3, 72 are new and 24 have been updated to align with a more contemporary language. With a total of 52 scales, existing scales were optimized. New scales were added to assess:

- Combined Response Inconsistency
- Eating Concerns
- Compulsivity
- Impulsivity
- Self-Importance

Setting-specific comparison groups

Compare the results. Descriptive data from a broad range of settings make it possible to compare an individual’s test results with relevant groups in mental health, medical, forensic, and public safety settings. Don’t see a comparison group that fits your practice? You can create your own comparison group with the Comparison Group Generator!

Table 2. Age Distribution of Participants in the MMPI-3 Normative Sample Compared to 2020 Projected Census Data and MMPI-2/MMPI-2-RF Normative Sample

<table>
<thead>
<tr>
<th>Age Bands</th>
<th>MMPI-3 %</th>
<th>2020 Projected %</th>
<th>MMPI-2/MMPI-2-RF %</th>
</tr>
</thead>
<tbody>
<tr>
<td>18–29</td>
<td>21.6%</td>
<td>20.8%</td>
<td>26.1%</td>
</tr>
<tr>
<td>30–59</td>
<td>55.7%</td>
<td>49.4%</td>
<td>52.4%</td>
</tr>
<tr>
<td>60–79</td>
<td>20.6%</td>
<td>24.7%</td>
<td>19.1%</td>
</tr>
<tr>
<td>80+</td>
<td>2.1%</td>
<td>5.1%</td>
<td>2.2%</td>
</tr>
</tbody>
</table>

Table 3. Education of Participants in the MMPI-3 Normative Sample Compared to 2020 Projected Census Data and MMPI-2/MMPI-2-RF Normative Sample

<table>
<thead>
<tr>
<th>Education Groups</th>
<th>MMPI-3 %</th>
<th>2020 Projected %</th>
<th>MMPI-2/MMPI-2-RF %</th>
</tr>
</thead>
<tbody>
<tr>
<td>No High School or GED</td>
<td>8.6%</td>
<td>11.1%</td>
<td>5.0%</td>
</tr>
<tr>
<td>High School or GED</td>
<td>29.0%</td>
<td>29.0%</td>
<td>24.3%</td>
</tr>
<tr>
<td>Some College</td>
<td>27.7%</td>
<td>28.6%</td>
<td>25.0%</td>
</tr>
<tr>
<td>Bachelor’s Degree or Higher</td>
<td>34.8%</td>
<td>31.4%</td>
<td>45.8%</td>
</tr>
</tbody>
</table>
# MMPI-3 Scales

## Validity Scales

<table>
<thead>
<tr>
<th>Content Non-Responsiveness</th>
<th>Overreporting</th>
<th>Underreporting</th>
</tr>
</thead>
<tbody>
<tr>
<td>CRIN: Combined Response Inconsistency</td>
<td>P: Infrequent Responses</td>
<td>L: Uncommon Virtues</td>
</tr>
<tr>
<td>VRIN: Variable Response Inconsistency</td>
<td>Fp: Infrequent Psychopathology Responses</td>
<td>K: Adjustment Validity</td>
</tr>
<tr>
<td>TRIN: True Response Inconsistency</td>
<td>Fs: Infrequent Somatic Responses</td>
<td></td>
</tr>
<tr>
<td></td>
<td>FBS: Symptom Validity Scale</td>
<td></td>
</tr>
<tr>
<td></td>
<td>RBS: Response Bias Scale</td>
<td></td>
</tr>
</tbody>
</table>

## Higher-Order (H-O) Scales

- **EID:** Emotional/Internalizing Dysfunction
- **THD:** Thought Dysfunction
- **BXD:** Behavioral/Externalizing Dysfunction

## Restructured Clinical (RC) Scales

- **RCd:** Demoralization (DEM)
- **RC1:** Somatic Complaints (SOM)
- **RC2:** Low Positive Emotions (LPE)
- **RC4:** Antisocial Behavior (ASB)
- **RC6:** Ideas of Persecution (PER)
- **RC7:** Dysfunctional Negative Emotions (DNE)
- **RC8:** Aberrant Experiences (ABX)
- **RC9:** Hypomanic Activation (HPM)

## Specific Problems (SP) Scales

### Somatic / Cognitive
- **MLS:** Malaise
- **NUC:** Neurological Complaints
- **EAT:** Eating Concerns
- **COG:** Cognitive Complaints

### Internalizing
- **SUI:** Suicidal/Death Ideation
- **HLP:** Helplessness/Hopelessness
- **SFD:** Self-Doubt
- **NFC:** Inefficacy
- **STR:** Stress
- **WRY:** Worry
- **CMP:** Compulsivity
- **ARX:** Anxiety-Related Experiences
- **ANP:** Anger Proneness
- **BRF:** Behavior-Restricting Fears

### Externalizing
- **FML:** Family Problems
- **JCP:** Juvenile Conduct Problems
- **SUB:** Substance Abuse
- **IMP:** Impulsivity
- **ACT:** Activation
- **AGG:** Aggression
- **CYN:** Cynicism

### Interpersonal
- **SFI:** Self-Importance
- **DOM:** Dominance
- **DSF:** Disaffiliativeness
- **SAV:** Social Avoidance
- **SHY:** Shyness

## Personality Psychopathology Five (PSY-5) Scales

- **AGGR:** Aggressiveness
- **PSYC:** Psychoticism
- **DISC:** Disconstraint
- **NEGE:** Negative Emotionality/Neuroticism
- **INTR:** Introversion/Low Positive Emotionality

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## Reporting

### Report features

- Summary page facilitates standard MMPI-3 interpretation
- Comparison groups for mental health, medical, forensic, and public safety settings
- A Comparison Group Generator which allows clinicians to create setting-specific comparison groups
- Item-level information (i.e., test taker responses and normative/comparison group frequencies) can be tailored to clinical inquiry
- Annotations provide sources for all interpretive statements and up-to-date research references for empirical correlates
- Optional gender-neutral language for interpretive reports
Score Report
This report provides scores for all 52 scales of the test and includes a summary page to facilitate standard MMPI-3 interpretation along with customizable item-level information.

Interpretive Report for Clinical Settings
This report is composed of all information provided in the Score Report followed by an integrated interpretation of scores covering a summary of the major findings, comprehensive information about potential threats to test score validity, and a description of clinical symptoms, personality characteristics, and behavioral tendencies.

The interpretation continues with diagnostic possibilities indicated by test results, recommendations pertaining to treatment planning, and a list of unscorable and critical responses. Endnotes identify scores associated with each interpretive statement and a Research Reference List provides discrete publications supporting empirical-correlate-based statements.

Public Safety Candidate Interpretive Reports
The leading psychological screening tool for use in public safety settings has expanded its offerings.
Developed with new normative data and based on the most up-to-date public safety candidate outcome research, this expanded suite of reports helps psychologists identify high-risk candidates in an efficient, evidence-based, and legally defensible way.

These reports include full scoring information (see Score Report) and an integrated interpretation of scores specifically for police, correctional, dispatcher, and firefighter/medic candidates.

Administration & Scoring options
Assessments to meet your needs. Choose from a variety of administration and scoring options.

Administration: Q-global Video Proctoring (Q-gVP), Q-global®, Q Local®, or paper and pencil
Scoring: Q-global scoring & reporting, Q Local software, hand scoring, or mail-in scoring service

Training opportunities
There’s more! While the full details on the new MMPI-3 don’t fit in this brochure, we’re providing you with resources to help you transition.

Overview webinars
On-demand training modules
Virtual workshop sessions

For training, sample reports, comparison groups, and other resources visit PearsonAssessments.com/MMPI-3.