## PANAS - %'s

Here's a table that allows easy conversion of raw scores – both positive/pleasant and negative/unpleasant – on the PANAS to percentiles. In most clinical contexts, the concern will be whether NA (negative affect) scores are unusually high in percentile terms, and whether PA (positive affect) scores are unusually low, again in percentile terms. In the Craske et al study (see below), participants started at around 21 (in the lowest 10% of the population) for PA and around 34 (in the highest 2%) for NA.

raw score	PA %	NA %	raw score	PA %	NA %
10	1	12	30	41	96
11	1	18	31	46	97
12	1	28	32	52	97
13	1	38	33	57	<i>98</i>
14	2	47	34	62	<i>98</i>
15	2	55	35	67	<i>99</i>
16	3	63	36	72	>99
17	3	69	37	77	>99
18	5	74	38	81	>99
19	7	78	39	85	>99
20	8	81	40	88	>99
21	10	84	41	90	>99
22	13	86	42	<i>92</i>	>99
23	15	88	43	94	>99
24	18	90	44	<i>95</i>	>99
25	21	91	45	97	>99
26	24	<i>92</i>	46	<i>98</i>	>99
27	28	93	47	99	>99
28	32	94	48	>99	>99
29	36	<i>95</i>	49 & 50	>99	>99

By the end of the *Positive Affect Training,* participants had improved their PA on average to 29 (>~40% of population) and NA to 21(>~15% of population), and at six months follow-up these percentiles had improved to >50% PA and >35% for NA.

Crawford, J. R. & J. D. Henry (2004). "The positive and negative affect schedule (PANAS): construct validity, measurement properties and normative data in a large non-clinical sample." Br J Clin Psychol 43(3): 245-65.

Craske, M. G., et al. (2019). *"Positive affect treatment for depression and anxiety: A randomized clinical trial for a core feature of anhedonia."* J Consult Clin Psychol 87(5): 457-471.