

# Do You Know Scale

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**THE DO YOU KNOW SCALE**, a measure developed by DR . MARSHALL DUKE and DR. ROBYN FIVUSH of Emory University, is comprised of 20 questions seeking knowledge about family history. Children who score high on the DYK scale are associated with higher levels of self-esteem, an internal locus of control, better family functioning, lower levels of anxiety, fewer behavioral problems, and better chances for good outcomes if faced with educational or emotional/behavioral difficulties. The following questions test knowledge of things that children could not possibly have learned first hand but from others through stories, writings or other indirect resources.

1. Do you know how your parents met? **Y/N**
2. Do you know where your mother grew up? **Y/N**
3. Do you know where your father grew up? **Y/N**
4. Do you know where some of your grandparents grew up? **Y/N**
5. Do you know where some of your grandparents met? **Y/N**
6. Do you know where your parents were married? **Y/N**
7. Do you know what went on when you were being born? **Y/N**
8. Do you know the source of your name? **Y/N**
9. Do you know some things about what happened when your brothers or sisters were being born? **Y/N**
10. Do you know which person in your family you look most like? **Y/N**
11. Do you know which person in the family you act most like? **Y/N**
12. Do you know some of the illnesses and injuries that your parents experienced when they were younger? **Y/N**
13. Do you know some of the lessons that your parents learned from good or bad experiences? **Y/N**
14. Do you know some things that happened to your mom or dad when they were in school? **Y/N**
15. Do you know the national background of your family (such as English, German, Russian, etc)? **Y/N**
16. Do you know some of the jobs that your parents had when they were young? **Y/N**
17. Do you know some awards that your parents received when they were young? **Y/N**

18. Do you know the names of the schools that your mom went to? **Y/N**

19. Do you know the names of the schools that your dad went to? **Y/N**

20. Do you know about a relative whose face “froze” in a grumpy position because he or she did not smile enough? **Y/N** More often than not, stories are told in order to teach a lesson or help with physical or emotional hurt. The accuracy of the stories are not critical. In fact, there are often disagreements among family members about what really happened! These disagreements then become part of the family narrative.

**NOTE** Good outcomes are not produced simply by knowing the answers to the questions above: *“If simply knowing family history could make for better states of well-being, some might propose (confusing correlation with causation) that we simply teach children various facts about their families and they will become stronger. Clearly, this approach would not work! Rather, it is our belief that knowledge of family history reflects certain processes that exist in families whose members know their histories. One such process is the communication of family information across generations; important questions about this process would include “Who is passing this information?” and “When is this information transmitted?” In our study of family stories at the Emory University Family Narratives Project funded by the Sloan Foundation, we found that family stories seem to be transferred by mothers and grandmothers more often than not and that the information was typically passed during family dinners, family vacations, family holidays, and the like. Other data indicated that these very same regular family dinners, yearly vacations, and holiday celebrations occur more frequently in families that have high levels of cohesiveness and that they contribute to the development of a strong sense of what we have called the intergenerational self. It is this intergenerational self and the personal strength and moral guidance that seem to derive from it that are associated with increased resilience, better adjustment, and improved chances of good clinical and educational outcomes.” (Duke, M.P., Lazarus, A., & Fivush, R. (2008). Knowledge of family history as a clinically useful index of psychological well-being and prognosis: A brief report. *Psychotherapy Theory, Research, Practice, Training*, 45, 268-272.)*