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The Influence of the War in Iraq on American Youth's Fears: Implications for Professional School Counselors

Before and after the initial invasion of Iraq in 2003, the fears of youth in grades 2–12 were examined using the American Fear Survey Schedule for Children and Adolescents (Burnham, 2005). In a pre-invasion and post-invasion comparison, results revealed significant age and gender differences between pre- and post-invasion samples. In addition, the post-invasion sample reported more war-related fears. Implications are discussed and potential resources for professional school counselors are presented.

Children and adolescents have long been influenced by natural and human-made disasters and traumas (Gold, 2001; Hamblen, 2002; Hebert, 2007; Newman, 1976; Pine & Cohen, 2002; Squires, 2002). Recent traumas that have been shown to influence children and adolescents include the 9/11 terrorist attacks (Gil-Rivas, Silver, Holman, McIntosh, & Poulin, 2007), Hurricane Katrina (Hebert, 2007), the Columbine school shootings (Windham, Hudson, & Hooper, 2005), and the Virginia Tech shootings (Fredland, 2008). In addition to these events, American youth have been exposed to the invasion of, and war in, Iraq since 2003. Even though American youth are geographically distant from the Iraq war, many of them have observed the deployment of U.S. troops and the media coverage of the past 5 years (Atwood & Donnelly, 2002; Stomfay-Stitz & Wheeler, 2004). Additionally, some youth have had direct exposure to the war through their own family members' involvement in the war (Lamberg, 2004).

Because of the ongoing war and its possible short- and long-term deleterious effects on American youth, an exploratory study examined the extent to which specific war-related fears among children and adolescents may have changed following the advent of the war in Iraq. For the purposes of this study, the term *children* includes ages 7–10, while the term *adolescents* includes ages 11–17. The term *youth* includes both children and adolescents.

YOUTH'S FEARS AND REACTIONS TO TRAUMA

Like adults, youth can experience significant stress or trauma during or after an adverse event or in an adverse environment (Tedeschi & Calhoun, 1995). However, children are often at far greater risk for negative outcomes because they have not yet fully developed cognitively and emotionally (Gold, 2001). Children are expected to experience fears as a part of normal development (Gullone, 1996; Morris & Kratochwill, 1985). Irrespective of the precipitating event or environment, fears among youth usually remain "mild, specific, and transitory," although the fears of children may "vary in intensity and duration" (Ollendick, 1979, p. 127). After exposure to trauma, fears can move from normal to abnormal or clinical in nature. Clinical fears are those fears that are atypical based on the age at which they are experienced and may persist over a longer period of time than normal fears (Gullone). Numerous studies have shown that after a traumatic or disaster-related event unrelated to war, specific fears unique to the event are elevated (Burnham, 2007; Vogel & Vernberg, 1993). However, less is known about children's unique fears about and reactions to war (Atwood & Donnelly, 2002). The present study addresses this gap.

IMPACT OF WAR AND YOUTH

War research has preliminarily shown that cognitive maturity and developmental growth influence how a child or adolescent responds to war (Atwood & Donnelly, 2002). From a developmental perspective, older children are more likely to feel equipped emotionally and cognitively to handle adverse events and crises than their younger counterparts (Dyregrov, Gjestad, & Raundalen, 2002; Ronen, Rahav, & Rosenbaum, 2003; Vogel & Vernberg, 1993). For example, younger children traditionally think concretely (Piaget, 1952) and therefore may struggle to understand and make meaning of a war (Ronen et

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al., 2003). Reports have shown that children ages 7–11 tend to be prone to display fear, confusion, psychosomatic symptoms, problems at school, and anxiety in the aftermath of war (Joshi & O'Donnell, 2003). Younger children may have some difficulty in differentiating real versus imagined facts related to the war (Atwood & Donnelly).

Adolescents, on the other hand, generally have the cognitive and emotional maturity to understand and handle adverse events, crises, and trauma (Davidson, White, Smith, & Poppen, 2001; Tedeschi & Calhoun, 1995). For example, when dealing with trauma, teenagers have deeper, more abstract concerns (i.e., moral, religious, and ethical thoughts), which can influence how they understand and react to war (Joshi & O'Donnell, 2003).

Other differences exist between children and adolescents in dealing with the potential psychological effects of war. For example, in a Gulf War study, the younger participants (ages 7–11) had higher fears and anxieties than the older participants (ages 12–16), while the older participants reported more attentiveness to the war than unease (Rahav & Ronen, 1994; Ronen, 2002). Age was a factor in how the children responded to others' reactions to the war. While younger children were more impacted by parental responses, older children had more influences outside of the home.

The increased cognitive skills of adolescents, compared to those of children, may serve as both a protective factor and a risk factor. On the protective side, the increase in skills may enable adolescents to better cope with their anxiety and fears related to the war. On the risk side, this increase in cognitive skill could increase the likelihood of adolescents withdrawing (Stomfay-Stitz, & Wheeler, 2004), trying to deal with their thoughts, feelings, and reactions to the war on their own, thereby potentially making them more prone to depression (Flannery-Schroeder, 2006; Joshi & O'Donnell, 2003; Stomfay-Stitz & Wheeler).

In addition to the age effects often evidenced among youth and often reported in the trauma- and disaster-related literature, unique findings related to gender are reported, although the research remains equivocal (Ronen et al., 2003). For example, some studies have shown that girls have significantly higher fears than boys after trauma (Pfefferbaum et al., 1999; Pine & Cohen, 2002; Shaw, 2003). Other studies have found no gender differences (Rahav & Ronen, 1994). The gender effect that is sometimes found in studies could be because girls are more likely to *report* anxiety, fears, and depression than are boys (Vogel & Vernberg, 1993). Shaw (2003) noted that this gender effect ought to be interpreted with caution: Even though girls may experience and report greater rates of symptomatology (e.g., symp-

toms of posttraumatic stress), boys are more likely to behaviorally act out their reaction to traumatic and adverse events.

While some research has been conducted and briefly reviewed in this article, overall very little research has examined the unique aftereffects (e.g., fears, trauma, mental health disorders) of war on youth (Ronen et al., 2003). Toward this end, researchers have discussed the dearth of literature on the aftereffects of war and terrorism on youth (Barenbaum, Ruchkin, & Schwab-Stone, 2004; Jensen & Shaw, 1993; Joshi & O'Donnell, 2003; Minkowski et al., 1993; Prinz & Feerick, 2003; Shaw, 2003). Fifteen years ago, Jensen and Shaw stated that there were limited studies on how war influences children. Ten years later, Prinz and Feerick reiterated the importance of research that focused on youth impacted by war and terrorism. Other researchers also contended that few studies have been completed on the effects of war and how it impacts victims of war (Joshi & O'Donnell). The acknowledgment of the limited number of studies underscores a considerable gap in the literature.

Of significance to the current study, only a small amount of research (e.g., Smith & Moyer-Guse, 2006) has been *specifically* directed toward the impact of the Iraqi war on American children, even though the need has been underlined (DeRanieri, Clements, Clark, Kuhn, & Manno, 2004; Elias, 2003; Stomfay-Stitz & Wheeler, 2004). Smith and Moyer-Guse attempted to begin to fill this gap by examining the relationship between viewing media coverage of the Iraqi war and children's fears among a sample of 5- to 17-year-old youth. Using parents' reports of children's fears, the researchers found age to be a significant predictor of children's rates of fears and the intensity of those fears; as children's age increased, rates of fears and the intensity of those fears increased. Smith and Moyer-Guse suggested that their findings may be related to the amount of time children spent viewing media coverage of the war (i.e., older children watched more news coverage and were exposed to more violent coverage than were younger children). They also contended their findings are consistent with developmental theory: Older children may have a clearer understanding of the seriousness of the war, and thus have increased fears, as compared to their younger counterparts.

In summary, the paucity of literature comes at a critical time when American youth are faced with potential deleterious effects—such as increased fears—of the war. With more than 1.5 million U.S. youth with parents on active duty and 49,000 youth with both parents involved (Lamberg, 2004), and with the number of active American military personnel in Iraq presently at 160,000 and the death toll of U.S. soldiers at 4,000 (as of March 2008), more

research on the Iraq war's influence on American youth is indicated (Thorne, 2003). The current study is directed toward filling this gap.

THE CURRENT STUDY

Given the extant literature base, the aims of the current exploratory study were to use a self-report measure of children's fears (the American Fear Survey Schedule for Children and Adolescents, or FSSC-AM) to (a) examine fears among a sample of American youth after the initial invasion of Iraq; (b) compare the fears of the post-invasion sample with the fears of a pre-invasion sample of youth obtained from another study; and (c) compare the responses of the two samples to nine specific war/terror-related fears (e.g., "having to fight in a war," "being threatened with a gun," "murderers," and "nuclear war"). The specific hypotheses for the current study were as follows: (a) There will be significant age, gender, and year differences between the responses of the pre- and post-invasion children and adolescents on the nine war/terror-related fear items; and (b) war/terror-related fears will emerge in the top 20 most common fears among the post-Iraq invasion sample.

METHOD

Participants

All study participants were from a small city (population 40,000) in a Southeastern region of the United States. The 2003 data (i.e., post-invasion sample) were compared with a subset of data (i.e., pre-invasion sample) derived from a large study (see Burnham, 1995) for a pre- and post-invasion comparison.

Post-invasion participants. Participants were a convenience sample of 82 elementary, middle, and high school students. Ages ranged from 7 to 18. The sample included 42 girls ($M_{\text{age}} = 12.88$, $SD = 2.55$), 34 boys ($M_{\text{age}} = 13.15$, $SD = 3.13$), and 6 participants ($M_{\text{age}} = 16.25$, $SD = .50$) who did not report gender. According to the participants' self-reports, 43 of the participants (52%) were Caucasian; the remaining participants were as follows: 21 (26%) were African American, 2 (2%) were Hispanic American, 1 (1%) was American Indian, and 15 (19%) did not report their racial background.

Pre-invasion participants. Participants were a convenience sample of 137 students in elementary, middle, and high school. These students were part of a larger study from a neighboring school district (see Burnham, 1995). The ages ranged from 7 to 17. The sample included 77 girls ($M_{\text{age}} = 12.26$, $SD = 2.90$) and 58 boys ($M_{\text{age}} = 11.36$, $SD = 2.71$), with 2 participants ($M_{\text{age}} = 10.50$, $SD = .70$) who

did not report gender. According to the participants' self-reports, 128 of the participants (93%) were Caucasian; the remaining participants were as follows: 5 (3%) were African American, 2 (2%) were Asian American, 1 (1%) was American Indian, and 1 (1%) did not report his racial background.

Instrument

To investigate the fears of youth in grades 2–12, the FSSC-AM (Burnham, 2005) was used. The FSSC-AM is a 98-item, self-report survey that was designed to assess a range of common fears (e.g., snakes, spiders, taking a test) and specific fears (e.g., having to fight in a war, nuclear war) evinced among American children and adolescents (Burnham, 1995). In the current study, participants responded to a list of 98 fear items by marking an "X" in front of the best choice that represented how they were feeling at the time of administration. Respondents had a choice of three Likert-style options for each question (*not scared*, *scared*, or *very scared*).

In a recent study, Burnham (2007) reported a Cronbach alpha reliability estimate at .97 for the FSSC-AM. Sample items on this survey included "going to the doctor," "being in a fight," "having to go to school," "being sent to the principal," "rats," and "bees." For some of the analyses in the current study, we used nine war/terror-related items from the FSSC-AM (see Table 1).

The process of selecting the nine items was guided by our knowledge and experience gained by years of research into children's fears, in addition to recommendations put forward in the research base (cf. Davidson et al., 2001). Specifically, the nine items were chosen after we went through the entire set of fear items on the FSSC-AM. First, items that were not closely and explicitly related to war or terror were deleted (e.g., "dogs," "snakes," "being sent to the principal"). Second, items that were obvious, specific, and unique to the war were included in the subscale (e.g., "having to fight in a war"). Third, we initially considered several war/terror-related items (e.g., "myself dying," "someone in my family dying") that have been top fears and highly endorsed across decades of studies (Burnham, 1995, 2005; Gullone & King, 1992, 1993; Ollendick, 1983) and that may relate to war and terror. Thus, consistent with other researchers' recommendations (cf. Davidson et al.), we included both fear items that are explicitly and specifically related to war and terror and general fear items that may be implicitly and generally related to war and terror. Finally, once the nine items were selected, we calculated item reliability coefficients. Reliability for this subscale was assessed using Cronbach's alpha. The Cronbach alpha was .87.

Table 1. Nine War- and Terrorist-Related Fear Items for 2003 Post-Invasion into Iraq Sample

Fear Items	Girls (<i>n</i> = 42)		Boys (<i>n</i> = 34)		7–10 Years (<i>n</i> = 17)		11–14 Years (<i>n</i> = 30)		15–18 Years (<i>n</i> = 33)	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
	(Rank)		(Rank)		(Rank)		(Rank)		(Rank)	
Having to fight in a war	2.40	.63 (6)	1.88	.84 (5)	2.41	.71 (6)	2.13	.73 (7)	2.07	.71 (6)
Our country being invaded by enemies	2.36	.76 (7)	1.88	.77 (9)	2.35	.70 (7)	2.27	.79 (6)	1.90	.82 (6)
Nuclear war	2.47	.69 (5)	2.20	.81 (1)	2.22	.83 (8)	2.40	.77 (4)	2.3	.72 (1)
Murders	2.60	.59 (1)	1.97	.76 (4)	2.76	.56 (1)	2.43	.63 (3)	1.93	.75 (5)
Being threatened with a gun	2.55	.59 (3)	1.97	.80 (3)	2.59	.71 (2)	2.50	.63 (1)	1.90	.72 (7)
Terrorist attacks	2.60	.59 (1)	2.09	.79 (2)	2.53	.72 (3)	2.43	.68 (2)	2.21	.77 (2)
Drive-by shootings	2.52	.71 (4)	1.88	.73 (7)	2.47	.80 (4)	2.40	.68 (5)	1.93	.80 (4)
People carrying guns, knives, and weapons	2.24	.79 (8)	1.56	.71 (8)	2.47	.72 (5)	2.00	.83 (8)	1.55	.69 (9)
Flying in a plane	1.85	.77 (9)	1.38	.60 (9)	1.87	.92 (9)	1.57	.63 (9)	1.59	.73 (8)
<i>Total</i>	2.40	.68	1.86	.75	2.41	.74	2.23	.71	1.93	.74

Procedure

Institutional review board approval, parental consent, and student assent were granted prior to data collection. In April 2003, 1 month after the invasion of Iraq, the researchers visited three schools—elementary (K–5), middle (6–8), and high school (9–12). During these visits, the FSSC-AM was administered by the researchers during lunchtime in the students’ classrooms. The FSSC-AM directions were read aloud to all students. While students in grades 4–12 worked independently after the directions were given on the FSSC-AM, the survey was read aloud to students in grades 2 and 3. On average, the study protocol took 20 to 40 minutes. As previously mentioned, pre-invasion data were derived from a large study conducted in April 1995 (Burnham, 1995).

Statistical Analysis

To test for significant age, gender, and year differences between the pre- and post-invasion children

and adolescents on the nine war/terror-related items on the FSSC-AM, the following procedure was performed. A $2 \times 2 \times 3$ factorial analysis of variance (ANOVA) was used to examine possible differences on the war/terror-related fear intensity score on the FSSC-AM. The ANOVA included 2 for gender (female vs. male) by 2 for year (1995 vs. 2003) by 3 for age group (7–10 vs. 11–14 vs. 15–18). The independent variables were gender, age, and year. The total score of the nine war/terror-related items was the dependent variable.

RESULTS

Comparing Fear Scores on Pre-Invasion and Post-Invasion Samples

The ANOVA was performed with corrected significance level ($\alpha/3 = .0167$). There were significant main effects for gender, $F(1, 186) = 32.09, p = .000, \eta^2 = .15$, and age group, $F(2, 186) = 8.67, p = .000, \eta^2 = .09$. Across all participants from years 1995 and

2003, girls ($M = 21.25$, $SD = 4.01$) were significantly more fearful than boys ($M = 17.20$, $SD = 4.99$). Fears significantly decreased for each age group as age increased in the combined 1995 and 2003 groups (see Table 1). In 1995, the age group means were $M = 20.40$ ($SD = 4.35$) for the 7–10 age group, $M = 19.93$ ($SD = 4.75$) for the 11–14 age group, and $M = 17.74$ ($SD = 5.54$) for the 15–18 age group. In 2003, the age group means were $M = 21.88$ ($SD = 3.80$) for the 7–10 age group, $M = 20.13$ ($SD = 4.42$) for the 11–14 age group, and $M = 17.42$ ($SD = 5.30$) for the 15–18 age group. For age group comparisons, post-hoc tests were performed using Tukey’s honestly significant difference method. Significant differences in the combined 1995 and 2003 participant groups were found between the 7- to 10-year-olds and the 15- to 18-year-olds ($p = .001$) and between the 11- to 14-year-olds and the 15- to 18-year-olds ($p = .004$). There were significant age and gender differences between the pre- and post-invasion children and adolescents, but there were no significant year differences. There were no statistically significant two- or three-way interactions.

Most Common Fears

To test whether war/terror-related fears would emerge as some of the top 20 most common fears for the 2003 participants, a list of most common fears was generated by examining the means of individual items on the FSSC-AM; fears were given ranks based on these means, with higher means indicating a higher level of fear (see Table 2). Fears with war-related content (e.g., “nuclear war,” “having to fight in a war,” and “our country being invaded by enemies”) were among the top fears in this study. We also compared the top 20 most common fears between the pre-invasion and post-invasion samples. Table 2 illustrates that the post-invasion sample reported more war/terror-related fears as compared to the pre-invasion sample. See Table 2 for the complete list of participants’ self-reported top fears.

DISCUSSION

The purpose of the current study was to explore the extent to which specific war/terror-related fears are evidenced among children and adolescents during an ongoing war. A second purpose was to determine the extent to which gender and age would be significantly associated with war/terror-related fears.

Overall, we found some differences in fears between the pre-invasion and post-invasion comparisons. Specifically, there were significant age and gender differences between the pre- and post-invasion children and adolescents, but there were no significant year differences. By closely examining the

gender differences, we found that post-invasion girls were more fearful than boys. This finding is consistent with fear studies with school-aged populations who were not exposed to trauma (Burnham, 1995, 2005; Burnham & Gullone, 1997; Gullone & King, 1992, 1993; Ollendick, 1983) and trauma-related studies (Pfefferbaum et al., 1999; Pine & Cohen, 2002; Saylor, Cowart, Lipovsky, Jackson, & Finch, 2003; Shaw, 2003; Vogel & Vernberg, 1993). Differences in fears by age revealed that, as age increased, the number of fears decreased. The age differences found in this study were consistent with trauma- and disaster-related research that have reported younger children have more symptoms than older children (Dyregrov et al., 2002; Joshi & O’Donnell, 2003; Lonigan, Shannon, Taylor, Finch, & Sallee, 1994; Ronen, 2002). An unexpected finding with the 2003 participants was that the 15- to 18-year-old girls reported being more fearful of “having to fight in a war” than the 15- to 18-year-old boys.

Of significance, a substantial number of the most commonly cited fears by youth in this study were different from fears documented in previous studies (Burnham, 1995; Burnham & Gullone, 1997; Gullone & King, 1992, 1993; Ollendick, 1983) over the past 20 years. Historically, research has found the most common fears include fears such as “not being able to breathe,” “contracting AIDS,” “drowning,” and “being kidnapped.” Importantly, of the nine war/terror fear items on the FSSC-AM, seven of them were in the top 20 fears in 2003 (see Table 2). “Flying in a plane” and “people carrying guns, knives, and weapons” were the only war/terror subscale fears that were not endorsed as top 20 fears among the 2003 participants. Conversely, among the 1995 participants, only five fears from the war/terror subscale were endorsed as top 20 fears (see Table 2). Thus, the emergence of “terrorist attacks” and “our country being invaded by enemies” as top fears in the current study was notable. Additionally, the prominence of “nuclear war” as the fifth highest fear among the 2003 participants also was noteworthy. The given findings were observed for the first time, possibly reflecting a link between youth’s specific war-related fears and the war.

There were limitations to this study that must be considered. First, the data in the present study all were derived from a single-source information design. Future studies should attempt to collect data from additional sources (e.g., parents, teachers) to validate self-report data. Second, the study was cross-sectional and thus no causal conclusions can be reached. Longitudinal research is needed to examine the long-term effects of war across different developmental stages. Third, no data were collected for prior or current trauma history, so this study was

From a developmental perspective, older children are more likely to feel equipped emotionally and cognitively to handle adverse events and crises than their younger counterparts.

Table 2. Top 20 Fears Reported in the Pre-Invasion (1995) and Post-Invasion (2003) Samples

Most Common Fears in 2003 for Boys and Girls (<i>n</i> = 82)		Most Common Fears in 1995 for Boys and Girls (<i>n</i> = 137)	
Fear Items	Mean % of Respondents Endorsing Fear	Fear Items	Mean % of Respondents Endorsing Fear
1. AIDS	67.1	1. AIDS	73.2
2. Not being able to breathe	65.9	2. Not being able to breathe	65.0
3. Myself dying	57.3	3. Being raped	59.5
4. Being kidnapped	56.1	4. Being threatened with a gun^a	59.2
5. Nuclear war^a	54.1	5. Myself dying	59.2
6. Being raped	53.7	6. Being kidnapped	56.7
7. Terrorist attacks^a	52.4	7. Being hit by a car or truck	54.7
8. Being hit by a car or truck	52.4	8. Someone in my family dying	54.0
9. Someone in my family dying	52.4	9. Murderers^a	51.8
10. Murderers^a	48.8	10. Nuclear war^a	50.7
11. Being threatened with a gun^a	46.3	11. Falling from high places	50.3
12. Shootings	46.3	12. Taking dangerous or bad drugs	50.2
13. Drive-by shootings^a	43.9	13. Drive-by shootings^a	47.6
14. Getting pregnant or getting my girlfriend pregnant	43.6	14. Having to fight in a war^a	47.1
15. Getting a serious illness	42.0	15. Tornadoes/hurricanes	46.3
16. Having to fight in a war^a	41.5	16. Getting pregnant or getting my girlfriend pregnant	45.0
17. Taking dangerous/bad drugs	41.5	17. Sharks	44.8
18. Our country being invaded by enemies^a	40.2	18. Car wreck/car accident	44.6
19. Having an operation	40.2	19. Getting a serious illness	44.5
20. Falling from high places	40.2	20. Shootings	42.7

^aDenotes war- or terrorist-related fears.

unable to determine whether the number or severity of traumas in previous history confounded the results of the current study. Fourth, because the post-invasion study examined a small sample of children and adolescents in three schools in one Southern state in the United States, the findings may not be generalizable to youth in other geographic regions in the country. Additionally, the samples were small and the pre-Iraq war sample was racially different from the post-Iraq war sample. Finally, the comparison sample was drawn from data collected in 1995 from sample youth in a neighboring school

system. With these limitations in mind, this study preliminarily addressed a gap in literature (i.e., examining war-related fears of American youth).

IMPLICATIONS AND DIRECTIONS FOR THE FUTURE

Overall, this study sheds light on the need for more studies on war and the impact that war may have on American youth. This need is especially pressing with the continued presence of U.S. military in Iraq and the lack of attention to its impact on American

children (Davidson et al., 2001). Similar to other post-disaster studies (Burnham, 2007; Vogel & Vernberg, 1993), this study found that fears related to the invasion (e.g., nuclear war, our country being invaded by enemies) were more prominent among the post-invasion sample. Also, consistent with findings evinced in other studies (e.g., Smith & Moyer-Guse, 2006), the current study found remnants of the 9/11 terrorist attacks 1 year and 4 months after the event among the 2003 sample (i.e., terrorist attacks were the seventh highest fear of the 98 items on the FSSC-AM; terrorist attacks were not a top 20 fear in 1995).

Based on the findings from this study, professional school counselors should consider how the effects of the war may impact school-aged children in their day-to-day life (e.g., daily emotional, behavioral, and academic functioning). Next, we consider the possible implications of the study's findings for professional school counselors.

First, this study informs school counselors of the emotions elicited in youth exposed to war, and it challenges all counselors to be alert to war concerns that develop among youth. We hypothesize that children's and adolescents' current war/terror-related concerns are stemming from numerous avenues, such as deployment of soldiers from communities nearby, relatives serving, injuries or deaths of military personnel, the number of family members in the military, and exposure to television. Indeed, while not measured in the current study, indirect exposure to the Iraq war through the media could potentially lead to increased fears and other negative outcomes among youth (Marshall et al., 2007; Stomfay-Stitz & Wheeler, 2004). Second, this study underlines the ethical obligation for school counselors to assist during times of crisis and challenges the helping profession to address war concerns through interventions and from a preventive stance (see Burnham, in press). War causes a "cascade of negative life events including the loss of loved ones, displacement, lack of educational structure, and drastic changes in daily routine and community values" (Joshi & O'Donnell, 2003, p. 275). With such changes, professional school counselors may be in a unique position to assist American school-aged youth.

From a clinical perspective, these findings have implications for school counselors and other helpers. First, this study supports past studies that have found girls and younger children as reporting the highest level of fear. Such knowledge can assist school counselors with screening, counseling, and intervention plans. Counseling interventions then may be culturally tailored with gender in mind. Similarly, counselors ought to be mindful of the finding that fears may be differentially presented by

girls and boys. For example, girls are generally more open and frank about their fears while boys may experience substantial war-related fears but be less open and forthright about expressing those fears, thus giving the appearance that these fears are less prevalent. Similarly, Smith and Moyer-Guse (2006) underline the potential differences between how boys and girls may perceive the war. They suggested that younger boys may be "enamored and excited" by the war whereas younger girls may be "worried and troubled" by the war. Taken together, these findings suggest that to ensure that boys' worries, fears, and anxiety associated with the war are not missed or misunderstood, school counselors may need to ask additional and different types of assessment questions of boys as compared to girls.

Assessment and intervention strategies may be tailored to the youth's age as well (Stomfay-Stitz & Wheeler, 2004). Play therapy may be effective and beneficial in helping younger children talk about their fears (Hebert, 2007), whereas brief cognitive-behavioral counseling models may be more effective in helping adolescents cope with and talk about their increased fears and anxiety related to the war (Flannery-Schroeder & Kendall, 2000). Also, given the educational approach that is often used by school counselors, psychoeducation related to war/terror-related fears, anxiety, and stress could be beneficial when working with youth (Marotta, 2000).

In addition, this study illustrates the possible after-effects of the Iraqi invasion, suggesting that traumatic events are likely to have some influence on youth, although causality cannot be established in the context of the current study. Many other factors—for example, the media, parents' fears, and the number of family members fighting in the war (see Cozza, Chun, & Polo, 2005)—may account for the relationships evidenced in the current study. Finally, the FSSC-AM may be a useful initial screening instrument to help school counselors assess the extent to which a potential "distant trauma" such as war is engendering fear among youth. Clearly, additional instruments are needed to understand the implications of identified fears and symptoms, up to and including mental health disorders.

RESOURCES FOR PROFESSIONAL SCHOOL COUNSELORS

Based on the findings from this study, the effects of the present war on American children and adolescents should be on the radar screens (Sink, 2005) of all professional school counselors, and school counselors should strive to gain knowledge, skill, and competency related to helping youth cope with the war. War/terror resources and articles for school counselors as well as other helping professionals are

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available (e.g., Baggerly & Rank, 2005; Barenbaum et al., 2004; Chibbaro & Jackson, 2006; Collins, 2005; DeRanieri et al., 2004; Hebert, 2007; Marotta, 2000; Nicholson & Pearson, 2003; Shen & Sink, 2002). Counselors and other helpers also can consult professional Web sites (e.g., American School Counselor Association, 2006; Booth, 2003; National Association of School Psychologists, 2002; National Institute of Mental Health, 2001). These articles and Web sites provide practical assistance for communicating with children, teachers, and parents; designing and conducting interventions; understanding post-disaster developmental changes; and helping children and adolescents cope. ■

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Based on the findings from this study, the effects of the present war on American children and adolescents should be on the radar screens of all professional school counselors.

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