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Jackie Pabis



Jacqueline (Jackie) Pabis is currently a rising second year in Northern Illinois University's doctoral clinical psychology program with a focus on children and families. She graduated from the University of Missouri-Columbia with a bachelor's degree in psychology and sociology as well as a minor in human development and family studies with a multicultural certificate. Prior to beginning at NIU, Jackie spent time over the past four years working with children with selective mutism at Advanced Therapeutic Solutions. She initially served as an intern and volunteer, and then worked as the Research Project Manager of a longitudinal study focused on the efficacy of intensive exposure therapy for children with selective mutism. In addition to her focus on research at ATS, she has served as a counselor and facilitator for both Winter Adventure and Adventure Camp, as well as co-facilitated groups. Within her graduate work, she is focused on conducting developmental research to better understand parenting behaviors' contribution to child anxiety. Jackie looks forward to returning to Adventure Camp for the fourth time to continue her passion of practicing evidence-based skills with children and families!

Q&A with Jackie

Why are you returning as a summer AC counselor for the fourth year?

I'm returning to my fourth Adventure Camp, and plan to continue returning in the future, because of the kids! Each camper that I work with leaves such an impact on me, whether it's during Lead-In sessions or at Adventure Camp. Also, I think because each camper's case is unique, you consistently have to be creative and challenge yourself to determine what strategies will work best for the particular camper you are working with. I really enjoy that challenge and believe that every day working in this setting provides a new learning opportunity.

How do you plan to integrate this experience into your educational and professional goals?

I think having this type of training experience at any time, let alone while in a graduate clinical program, is invaluable. I have gained a much deeper understanding of what these campers experience and how to be patient and helpful in anxiety-provoking situations, which is useful in any career involving children. Additionally, I think it's important that individuals working with children receive training in specialized areas, such as selective mutism, so that symptoms can be easily recognized by a broad range of providers and kids can get the support they need.

How has your experience as a counselor at AC and working at ATS motivated you to pursue a PhD in clinical psychology?

My job as Research Project Manager required me to consistently collect and analyze data for patients, whether it was for an intake evaluation or to assess a patient's progress over time. When clinically working with the patients, I find it very interesting to see their progress with me or other individuals also being reflected in the measurements we capture. When applying for graduate programs, I wanted to continue learning about both research and clinical work; I think it is important to let one inform the other. The particular program I am in provides a balanced approach between research and clinical work, and due to my work at ATS, I chose a child-focused program and plan to continue researching internalizing disorders, such as anxiety.

What's your favorite part of Adventure Camp?

I have numerous favorite parts of Adventure Camp, however there is one field trip that always stands out to me. On the first day of camp, our very first in-vivo exposure in the community setting is to Dairy Queen where campers order their own ice cream. After only a partial day of intensive treatment, it is very moving to watch and assist campers use their brave so quickly to complete the order. There are no limits on what campers can order, so it is quite entertaining to watch the kiddos devour a large size blizzard with a big smile because of how proud they are!

What's your favorite memory from Adventure Camp?

Although most campers have an SM diagnosis in common, they all have individual fears. I was working with a very sweet camper who had a fear of others seeing her smile and laugh. On the bus on our way back from a field trip, we were so tired that we started speaking in a goofy, made-up language. In that moment, both of us started crying laughing. It was the first time I had seen this camper laugh and feel free, which I was so happy I was able to experience with her. It is very empowering to be there in a moment when someone initially breaks through one of their biggest fears.

What do you think people should know about SM?

Although one person is diagnosed with SM, we see that it can also affect the individual's family members. Similarly, treatment can be specific to the child, however we greatly encourage the child's family to be involved. I think people should know that families can continue reinforcing the treatment outside of the clinic by using PRIDE skills, facilitating community exposures such as ordering at a restaurant or asking a store employee for help finding an item, and continuing to generalize the new verbal behaviors to various people. At ATS, clinicians always suggest to practice, practice, practice - no matter if the task is easy or difficult, it will further progress!

If you could talk to your camper right now, what would you tell him/her?

I would want my camper to know that it's okay to be afraid or anxious. Everyone at camp, including other campers, counselors, and teachers all fear something. We are there to work together on our fears and you will never feel alone. You will be surprised at how much fun we will have at Adventure Camp!