

# Pathways to Success

## Pediatrician-turned-psychiatrist Dr. Mary Dobbins breathes new insight into children's mental health

Written by Karen Carlson • Photography by James Hawker

Mary Dobbins, M.D., '84, was enjoying her burgeoning career in pediatrics. She was a successful pediatrician, with a faculty appointment at her alma mater, SIU School of Medicine. She also had a private practice, where she spent her days keeping babies healthy and watching them grow up. She had found a niche educating mothers about the importance and benefits of breastfeeding. She and her husband were raising three healthy children.

And yet something was missing.

"I needed to challenge myself," she says, with a warm smile. "I need creativity. My practice was getting routine."

While her practice may have been routine, Dr. Dobbins' journey to professional satisfaction has been anything but typical.

Petite with a self-deprecating humor, Dr. Dobbins smiles a lot. She's even able to throw her head back and laugh heartily while she remembers the psychological struggle and physical demands she has overcome to find personal satisfaction in her career. It has been a long, challenging journey.

At every step of her career, Dr. Dobbins' philosophy of caring for children has been to steer youths toward the road to success. And that means treating the whole person, a phi-

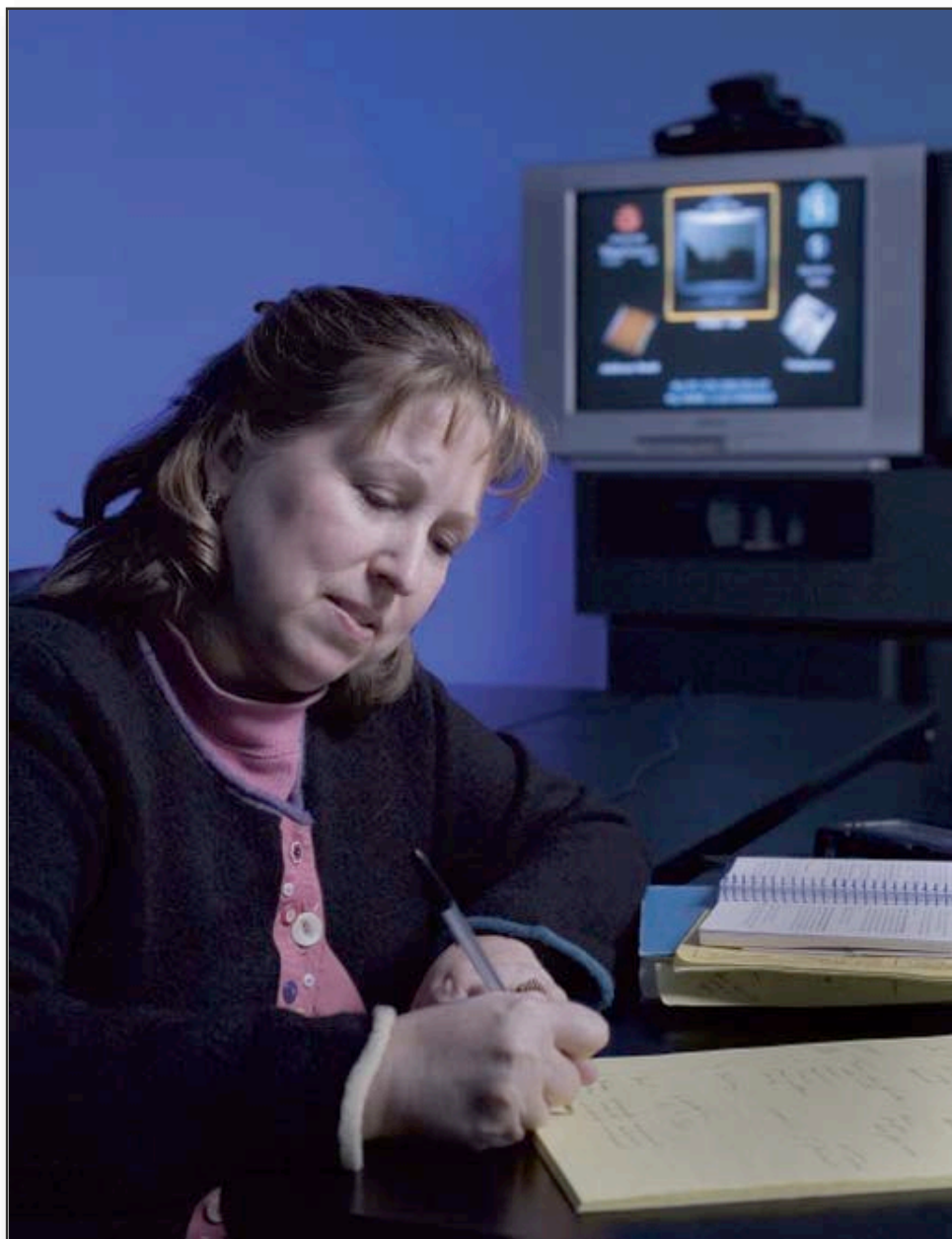
losophy she learned at SIU that may have been the impetus for her evolution as a physician.



A farmer's daughter from Pittsfield, Ill., Mary was inspired by the doctors in her community and on television, but she entered Quincy University as a music major, specializing in piano and voice.

College activities kindled her interest in medicine, and she was drawn to SIU's uniqueness and small size. "SIU made medical school training available to me locally. I didn't realize it at the time, but I was getting the advice of nationally renowned physicians right here at SIU." While SIU School of Medicine brought medicine closer to her, she says it distanced her from her family, who are farmers and educators. "I'm doing things nobody in my family has done. But SIU took care of me," she says. Pediatrics, her last rotation, seemed like a good fit for her bright personality.

Along with her successful pediatrics practice, Dr. Dobbins found a niche helping new moms feel successful, especially with breastfeeding. That interest evolved into an interest



Working in Springfield, Dr. Dobbins prepares for a videoconference case consultation with family practice residents in Carbondale.

**Nationwide,  
child  
psychiatry  
will become  
one of the  
top three  
shortage  
specialities  
in the  
United  
States.**

in family development and mental health issues.

“A lot of mothers identify breastfeeding babies as the epitome of being a good mother — maybe too much so. When it doesn’t go well, they’re devastated. Grandmothers will even talk about harboring guilty feelings that their breastfeeding experience didn’t go well.” She began talking with mothers about what they were feeling as a parent. “I wanted to help them psychologically.”

Soon, she saw the psychological needs in her young patients and realized that many (in-

cluding a family member) needed help with the suffering that anxiety, depression and Attention Deficit and Hyperactivity Disorder (ADHD) can cause. A professional restlessness set in. “My standard pediatrics practice wasn’t addressing emotional health in the depth and breadth I wanted it to. I needed clinical training.”

While she had only planned on getting some additional training to address emotional issues, she soon discovered a whole new world in child psychiatry.

“When I look at the needless suffering of

## Anger management

Aggression in children is becoming more prevalent, Dr. Dobbins says. However, it can occur for many different reasons, not just “bad behavior.” She notes that anxious children tend to withdraw and become depressed until they can’t cope any more, and then they act out in aggression.

She also notes self-regulation problems of children, particularly with Asperger’s disorder, a high-functioning autism. These children, for example, can’t stand a clock ticking, can’t adjust to the changing environment of a typical school day, or can even become over stimulated by bright light. “These children can’t adapt to tasks or to environments. They have trouble adapting socially.”

Dr. Dobbins is very optimistic about putting these children on the road to successful lives. “Kids want to be successful, they want to please people. They crave attention, and they want to feel good about themselves.”

Treatment begins with finding out why children are aggressive before it escalates and help them feel successful. “You can virtually always help the child feel better,” Dr. Dobbins notes.

children with less severe afflictions who live with it . . . I had to act. It’s the physician as healer. I wanted to help alleviate the suffering.”

Dr. Dobbins first completed a fellowship in Child and Adolescent Psychiatry at the University of Iowa, then pushed on to a general psychiatry residency at SIU School of medicine — 14 years after her training in pediatrics.

She isn’t afraid to admit that there were growing pains as she learned a new specialty, treated new, adult patients, and maintained her family life. “To disrupt your life, your family, say goodbye to your patients, it was hard. And it was hard to take care of myself, let alone tend to the family. Sometimes I took it a day or a half-day at a time.”

Her family — husband, Brian, and children Debbie, now 20, Ben, 18, and Joe, 10 — were scratching their heads, wondering why she would leave a successful pediatrics practice. But they stuck with her saying, “Make it work.”

There were times, she says, that she was second-guessing herself and wanted to quit. But with the support of her family and SIU faculty she completed that residency last July.

Today, Dr. Dobbins is extraordinarily happy and busy in her new position as assistant professor of clinical psychiatry, in the SIU Division of Child Psychiatry. She also has a cross-appointment in pediatrics. Child Psychiatrist Ayame Takahashi, M.D., who joined SIU about the same time as Dr. Dobbins, is director of the child and adolescent fellowship training program. David Decker, M.D., assis-

tant professor of medicine and Stephen Soltys, M.D., chair of the SIU Department of Psychiatry, round out the team of SIU child psychiatry specialists.



By 2020, the United States will have a need for about 12,600 child and adolescent psychiatrists, but only about 8,300 are estimated to be in practice, according to a report from the U.S. Bureau of Health Professions National Center for Health Work Force Information and Analysis.

“It’s going to be one of the three top shortage specialties in the United States,” Dr. Soltys says.

Nationwide, the mean number of child and adolescent psychiatrists is only about 8 per 100,000 youth. In Illinois, there are only 6.5 child psychiatrists per 100,000 youth, and most of those are in the Chicago area, according to Dr. Soltys.

Because the shortage of child psychiatrists won’t disappear soon, Dr. Soltys notes that having a former pediatrician like Dr. Dobbins is very valuable. “She is the perfect point person for our division to do outreach with primary care physicians to develop their comfort level in dealing with basic child and adolescent psychiatric problems.”

Dr. Dobbins’ eyes glimmer and her speech hastens as she explains her new job, which, she says, “defies description” and can take off in any number of directions.

She is a busy consulting on cases with SIU faculty and health-care officials in state agen-

cies; she's starting a pediatric psychiatry diagnostic clinic at SIU; she is working to establish a plan of care for children with behavioral problems at Douglas Alternative School.

Dr. Dobbins also is working with southern Illinois health-care providers to create a program to address the shortage of child psychiatrists in the area through telepsychiatry. She already consults on cases each month with the Carbondale Family Practice Residency Program.

At the January teleconference, she offered advice to family practice residents about a young patient who was witnessing physical and emotional abuse between parents.

Another part of the discussion was the nature/nurture debate of aggression in children. "There is a genetic component for a lot of illness. Something in the environment may make the genetic vulnerability come out."

She prompted questions from the nearly two dozen residents, faculty and staff members present. "You're asking 'why' — that's good," she said to one resident.

Despite the seriousness of the discussion, Dr. Dobbins' cheerful nature still emerged, and her offhand jokes put the residents at ease. Her vitality, her joyfulness is energizing those around her. "We really look forward to these case presentations," says Family Practice Resident Dr. Ben Rudd.

John Record, assistant dean of rural and alumni affairs, notes, "Dr. Dobbins is a wonderful person to help build a telepsychiatry consultation and education program. With her training in both pediatrics and psychiatry, she brings a special combination of skills and perspective. Those characteristics combined with her rural Illinois roots make her extremely well suited to work with primary care physicians and mental health workers in the region."



As a pediatrician, Dr. Dobbins brings a unique perspective to child psychiatry. "Pediatrics is about prevention, and we don't see that in psychiatry. We put out fires." Dr. Soltys notes that most children aren't brought to a child psychiatrist until they are about 6 or 7 years old. But problems begin much earlier.

Dr. Dobbins is committed to keeping children on the path to success, and that means

therapies to ward off psychiatric problems, as much as vaccines and good nutrition protect against physical illnesses. She plans to bring a preventive perspective to her work with children. "That's my passion," she says. "That's where my heart and soul are."

To further improve the chances for success, Dr. Dobbins wants to bring mental health care to younger and younger patients. How young? "I want to do infant psychiatry," she says. "We could even do prenatal visits." Really? Fetus counseling?

She flashes that warm smile. "It's important to address the mental health needs of the pregnant mothers and families," she says. "Where does the successful family start? Parents need to feel good about being parents, and children need to grow up feeling successful. The families' strengths and weaknesses impact the child. Then children will start their own families and the cycle repeats. It's all connected."

Her new perspectives on children's mental health combines with her simple philosophy of helping children achieve success. She is co-writing an article with Dr. Soltys and Dr. Theodore Sunder for *Psychiatric Times* on non-verbal learning disabilities and sensory processing disorder. "My goal is to understand how this applies to the problems kids experience in their everyday lives. If we can understand that, then we can help them become successful. And yet there's no research on it. I think it's going to have a huge impact on a lot of people."

Dr. Dobbins' herself is having an impact on a lot of people, and through her successes she has discovered her place in the world.

Does she regret the arduous journey that she went through to be where she is now? "I wouldn't be the person I am now if I hadn't gone through the pediatric experience and breastfeeding medicine. It makes me a better child psychiatrist — I understand what families are facing."

Now, after a long and winding road, Dr. Dobbins says it's gratifying to be on the frontier of a whole new journey of child psychiatry. "I want to try new things," she says. "This is what I needed to do. What's better than having a job that really matters?" ●●●

**"I wouldn't  
be the person  
I am now if I  
hadn't gone  
through the ...  
experience."**

