



A quarterly publication of the
Department of Psychiatry
and Behavioral Medicine
Medical College of Wisconsin
Summer 2022



Notes from the Department Chair "The Times They Are A-Changin'"

This Summer edition of Psyched will focus on the challenge of change and how each of our areas in the department is leading through change

"The Times They Are a- Changin'" - an anthem of change written by Bob Dylan and released in 1964 was fitting for the 60's and in some ways still applies to our world today. The horrible Coronavirus Pandemic has made us lose over 1 million people in our country, and many more internationally. However, it is leading to significant change all around us. Our world and our people are forever affected and changed. How has the pandemic changed us and our world? What is the "new normal"?

People have learned to live day to day these past years, not knowing what tomorrow brings. There is uncertainty when the pandemic will surge again, and if we may have to shut down again. People are living more for today, one day at a time. People are investing less in the future and spending today. We are in the middle of what is being called a "great resignation"- many people are retiring earlier, or, leaving their work to find more meaningful work that gives them more quality of life.

Goods and services are bought and ordered almost entirely online these days. We may have seen the end of big brick-and-mortar specialty goods stores. Will we even have movie cinemas down the road now that everyone is streaming so much media?

Recreation has taken a huge step toward people doing activities outdoors, with surges in fishing, boating, camping, kayaking, bike riding, hunting, and visiting national and state parks.

Hybrid business world: office buildings lay empty across our cities as many businesses learned they could manage the business working from home, unloading the huge infrastructure cost, yet effectively coordinating the business with virtual communications. Many people learned that they often even preferred working from home.

At least to some degree that they are selecting hybrid models of work, with decreased office space needs.

Here at MCW, we have been able to educate in a virtual way very successfully. We will always now do more online and virtual education. Much of our research, though initially slowed by the pandemic, can be done and managed from home. What aspects of research must be completed in the office or lab? The future for some will be working from home 3-4 days per week and coming in to see your team 1-2 days per week. What will the balance look like? Can a student work from home half of the time and come into school only half the time? What critical aspects of the learning are best in person? Clinically, the pandemic has opened the telemedicine highway. In behavioral medicine, people discovered they could access psychotherapy and psychiatric care from the privacy of their homes and/or offices, successfully traversing the stigma barrier. The pandemic illuminated the health disparities and the need for health and resource equity. Internet access is important for all. As healthcare leaders, we need to find ways to be more supportive of our precious resource of people - our health care and behavioral health care workers. Fortunately, we have been building a culture that helps us develop our own people and we have been trying to identify potential successors for our leaders, whenever possible, over the last several years. Employee satisfaction and engagement have always been important, but today with the shortages of health care workers and behavioral health care workers these are more important than ever before. I believe by working together as a team, our department is ready to move into this uncertain and changing future in a way where we can adjust to the challenges and barriers with resilience and continue to grow and meet our community's needs.

Jon A. Lehrmann, MD Charles E. Kubly Professor and Chairman
Department of Psychiatry and Behavioral Medicine
Associate Chief of Staff for Mental Health, Milwaukee VAMC



Notes from Administration

Future Proof

As Dr. Lehrmann notes, change is our constant and in addition to the examples of how we have adapted to the effects of the pandemic over the last 30 months, I'd like to comment on two building projects in which Psychiatry has been engaged. These projects reflect the accommodations, changes and technology accelerated by the pandemic and position the department for adaptive growth for the future.

ThriveOn, the new facility representing a partnership between MCW, the Greater Milwaukee Foundation, Royal Capital Group and the local community, will be the new home for the department's Health Intervention Sciences Group/Center for AIDS Intervention Research. With a sizeable footprint on the 2nd floor of the 3-floor project, HISG/CAIR will be positioned to optimize collaborative opportunities with fellow community-based service and research programs. Federally funded and other extramurally funded research awarded to HISG/CAIR investigators will be supported by state-of-the-art design and technology. As was noted in MCW's InfoScope:

[The 3 Partners] have established the historic community-based ThriveOn Collaboration founded on a joint vision for Milwaukee that is equitable, healthy and thriving for all. This commitment is physically embodied in the restoration and redevelopment of an iconic building in the Historic King Drive district at the nexus of three vital north side neighborhoods – Halyard, Harambee and Brewers Hill.

With this vision, location, partners, and community, HISG/CAIR is positioned for future growth and success.

Closer to home, another project **encompassing the entire 3rd floor of the Tosa Health Center, the planning for the expansion and build-out of Psychiatry at the Tosa Health Center** is proceeding. This multi-million-dollar project will also represent state-of-the-art design and technology and will include building out the 3rd floor "shell space" to accommodate a geriatric psychiatry clinic, education programs, a comprehensive clinical consultation group and department administration.

The current space will be redesigned to substantially increase the clinical footprint, optimize patient flow in the delivery of virtual and face-to-face individual, family and group therapies. The space is being designed to accommodate established and emerging clinical therapies such as rTMS and Esketamine and translational research.

The space is designed to promote and support a healthy workforce with restrooms, water stations and "hospitality areas" planned along with a wellness room. Optimizing access to natural light for providers, patients and learners is top-of-mind.

Planned to be completed in two stages, the first stage could be finished as early as the spring of 2023 with the second stage completed by the end of 2023 (FY24). Once completed, Psychiatry will occupy approximately 30,000 square feet at the Tosa Health Center and be positioned to take on the challenges and opportunities of the future.

Without a doubt, these two projects (ThriveOn and the Tosa Health Center expansion) are examples of the department's commitment to adapt, to change, to grow, and to prosper.

David Peterson, MBA, FACMPE
Department Administrator Clinical



Clinic Notes

THE LESSONS LEARNED (AND STILL TO BE LEARNED) IN THE TRANSITION TO VIRTUAL VISITS



Bob Huberty (circa April 2022, during a weekly dyad meeting):
Himanshu, switching from in person to virtual was easy.
Switching back to in person will be hard.

**Himanshu (tearing his hair out, destroying Bob's office): EASY?!
SWITCHING TO VIRTUAL WAS EASY?!?**

Bob (after Himanshu settles down):OK... let me put it a bit differently. If you thought switching to virtual was difficult, switching back to an in-person/virtual hybrid will be even harder.

Himanshu (sobbing silently): Thank you, partner. I feel better....

Here are the lessons learned (and still being learned) in the transition to virtual visits:

- We learned very quickly which meetings and tasks could turn optional and dispensable as soon as meeting in person is not an option.
- If our team at Tosa Center is empowered to be self-reliant, not only can we hold our own in providing world-class care, in some arenas we can actually lead it.
- We can keep begging for telemedicine until we go hoarse, however, nothing jump-starts action more effectively than a threat to the top priorities of an enterprise.
- Adversity reveals character, and it did. Barring some minor disappointments, two years later, Bob and I have never been prouder to work with the professionals at Tosa center.
- Transitions are difficult, and do not always bring out the best in people. Sometimes, they bring out the worst in people. In the midst of global regression, we had to tell too many of our beloved patients – “We are here to serve you; however we are not your servants. Please treat us with kindness and dignity, as we try and help you the best we can in these ridiculous times.” The ones that were able to make use of this conversation have stayed. We hope that the ones that moved away have been able to make use of our message and are treating themselves and their next team better.
- Human beings thrive on Silver Linings, and Tosa Center was no exception.
- When in doubt, trust people over systems.

Himanshu Agrawal, MD
Medical Director, Psychiatry and Behavior Medicine
Clinics at Tosa Center

Bob Huberty, LCSW
Program Manager, Psychiatry and Behavior Medicine
Clinics at Tosa Center



Research Notes

THE CHALLENGE OF CHANGE IN RESEARCH: NEW DEVELOPMENTS AT THE CENTER FOR AIDS INTERVENTION RESEARCH (CAIR)

In many respects, few people dislike change any more than me. Every article, grant application, report, or other document in my entire career has been written longhand on a legal pad in a coffee house, not on a computer (including this Newsletter piece). I was among the last people to get a smartphone. I am content to have almost no social media presence.

Personal quirks aside, research—a key mission area of our Department and institution—is fundamentally about change and discovery. Research must always break new ground, advance the field's level of knowledge and understanding, and change and improve the approaches that we use to address health issues. If research stops changing, it stops advancing and loses its potential to benefit health. Research=Change.

I write now to share two important developments at CAIR. For nearly 30 years, CAIR investigators and staff have undertaken research to better prevent HIV infection and to promote the health of persons already living with HIV. HIV research continues to be the main focus in CAIR's extramurally-funded research portfolio. However, many interventions first developed at CAIR to address HIV are also directly relevant to other health areas. CAIR is now broadening and expanding its mission to areas beyond HIV alone. Over the past few years, the CAIR team has successfully applied lessons learned in AIDS research to such challenges as optimizing uptake in COVID-19 vaccinations in underserved communities, understanding the effects of immigration policies on public health outcomes among immigrants, strengthening the development of resilience among disenfranchised racial minority LGBTQ youth, and mobilizing community coalitions across the State to more effectively address local behavioral health needs. All of these represent changes that allow CAIR to remain a national leader in its HIV research but also apply lessons from this HIV legacy to other new and emerging health needs.

With an expanded mission comes an expanded name. The “Center for AIDS Intervention Research (CAIR)” has a strong reputation and is a strong brand in the scientific field, and we will continue to be CAIR. But —reflecting our expansion in scientific focus—we will add a second part to our name and also be known as the “Health Intervention Science Group (HISG).” This name reflects our use of behavioral and social science frameworks to develop new generations of interventions to address a range of urgent health and public health challenges.

Jeffrey A. Kelly, PhD
Professor
Department of Psychiatry and Behavioral Medicine, MCW



Faculty Development LOOKING AT THE HORIZON OF FACULTY DEVELOPMENT

Development, by its nature, implies change. Change itself can seem scary, and invoke anxiety of the unknown. But I believe change offers opportunity. Much like the opportunity of standing and looking out over a vast horizon, change is the chance to remake ourselves, pushing past the limits of what we have already accomplished and seeking ways to become more of what we want to be.

As we consider the needs of our faculty now and in the near future, many changes here at MCW will likely parallel those across the country in academic medicine. The theme of the AAMC affinity group, Group on Faculty Affairs, annual convention this year is “Reflect, Reimagine, and Redefine,” the steps of change. As we emerge from the last several years, we are all faced with determining how to evolve through new challenges.

Here at MCW, we are undergoing a holistic review of our entire promotion process. Currently, workgroups are evolving recommendations for conceptualizing our pathways for promotion, criteria required for the promotion process, alignment of developing faculty through promotion, and the definition and application of tenure. This is the reflection and reimagination of our processes in order to determine how we can best support and represent our faculty going forward. Given that we do not know what the promotion process will look like in another academic year, we have to prepare to help faculty understand and adapt to these changes. Our APT Committee will be well-poised and ready to educate faculty, manage concerns and questions, and support each step of the new processes.

Our Mentoring Committee will also provide support and education around new promotion systems, ensuring our mentors and mentees have all the information needed. Another exciting evolution in mentoring will be a new staff mentoring program being developed at the institutional level. To expand mentoring to all our employees at MCW allows us to support the growth of each of us, and will provide opportunities for our Mentoring Committee to expand our liaison with our staff leaders. Mentoring has become a strong cultural component of our department, and we are excited to have additional institutional support to bring these opportunities to our staff as well.

Redefining ourselves as we respond to waves of change becomes more robust when we have a broad diversity of input and opinions. Please share your ideas for how the APT and Mentoring Committees can support your efforts in our department. We would love to hear from you and what you see out on that horizon!

Jennifer Apps, PhD
Vice Chair of Faculty Development, Department of Psychiatry and Behavioral Medicine
Assistant Provost of Faculty Development, Office of Faculty Affairs



Education Notes THE EVERCHANGING FOOTPRINT OF EDUCATION

I started in the role of Vice Chair of Education in 2017. In the past five years, we’ve added two psychiatry residencies, a health psychology internship and fellowship, an advanced practice provider psychiatry fellowship, and a medicine-psychiatry combined residency. This has been in addition to our flagship psychiatry residency based in Milwaukee, five accredited psychiatric fellowships and medical student education across our three campuses. It is our hope that the rural track of our Child and Adolescent Psychiatry fellowship, based in the Fox Valley area, will be approved this summer. Looking forward, our medical student education will be revamped with a new curriculum within the next two years.

With the additional programs, we have added new program directors and educational coordinators, as well as have had program director and staff changes. We’ve had trainees that have come and gone (and those who have stayed around!) as well as changes to our clinical affiliates across all campuses.

We have needed to adapt to our growth, the changing needs of learners, and the changing regulatory requirements of our accrediting bodies. COVID-19 impacted how we delivered didactic education, as well as staffing models in clinical settings. In many ways, the changes brought on by COVID-19 helped our campuses seem much closer together, allowing residents to do “away” rotations from their own homes, pairing a faculty member with a resident from a different campus for a research project or having a “remote” program director.

Clearly, there have been innumerable changes within the realm of education within our Department in the past several years. One factor that has remained constant, however, is that education is and will continue to be a priority of the Department. And that Friday late afternoon is the only acceptable time to call about a new “fire” within Education.

Christina L. Wichman, DO
Professor of Psychiatry and Obstetrics and Gynecology
Vice Chair of Education, Department of Psychiatry and Behavioral Medicine
Medical Director, The Periscope Project Director, Women's Mental Health
Program Director, Consultation-Liaison Psychiatry Fellowship
Program Director, Northeastern Wisconsin Psychiatry Residency
Medical College of Wisconsin





Veterans Administration Notes THE ONLY CONSTANT IS NO CONSTANT

Change. It's been the consistent name of the game over the course of the pandemic. Residential rehabilitation treatment programs faced many new and unique challenges related to this unprecedented time. Adaptability and flexibility, are two key concepts in an ever-changing work environment driven by a pandemic. Clinical and non-clinical staff across most, if not all, areas of practice needed to drastically change the manner they deliver services in light of guidelines developed by the CDC and other governing bodies.

Providing treatment in a shared residential environment meant re-examining every aspect of the care we deliver from admission to discharge and aftercare. By limiting admissions to the highest-risk Veterans we were able to provide an essential service safely. Another unanticipated challenge related to social distancing requirements and our need to provide group-based treatments. A group room that once held 12 Veterans, went to 9, and then 3 as distancing concerns were incorporated. In a 125-bed facility finding a way to "make it work" is no small task. And doing that in a 24-hour turn-around time to ensure vital Veteran programming continued can only be achieved through collaboration, innovation and most importantly resilience.

Speaking of resilience. Social workers served as hospital greeters and screeners, managers worked as staff nurses, psychologists learned how to use safe patient handling lift equipment, and staff were deployed to assist other VAs overburdened by Covid outbreaks.

During the height, every day was an "all hands on deck" situation. Navigating technical difficulties for staff and Veterans alike throughout the "virtual experience" is a separate article. That's just a few of the most noteworthy hurdles encountered since the pandemic began.

Both a collaborative and compassionate leadership style was needed. Many novel approaches to care were identified through ongoing collaboration. Additionally, compassion for the emotional experiences of staff and Veterans in the facility continues to be key. Validating that change is often hard but easier when faced collectively amongst staff and patients. Both participating in intensive psychotherapy and providing mental health treatment can prove emotionally demanding to begin with but adding a global pandemic to the mix certainly contributed exponentially. One message remained true, the way we provide care today may look different than yesterday, but we will continue to provide a quality service for as many Veterans as possible.

Stephen Melka, PhD Assistant Professor
Department of Psychiatry and Behavioral Medicine, MCW
Psychologist Zablocki VAMC

Flower Lewis, MSN, RN-BC, AGACNP, CNL, CCRN
Co-Program Manager Dom 123 Zablocki VAMC



Guest Corner A GRADUATION POEM (to the tune of American Pie)

A long, long time ago I can still remember, those two full days of interviews

And I knew if I had a chance, I could make those people see

That I would be the right one to choose

Wisconsin Winter made me cry, with every Epic note I signed, I knew I was learning

My future I was earning

I can't remember if I cried when I got constructive feedback for the first time

But I felt such a sense of pride, when I passed N.E.I.

So, so long to Imposter Syndrome

I packed up all my books and I left my home

I drove out to Milwaukee to the Great Unknown

Singing this'll be the year that I grow, This'll be the year that I grow...

Did you read the Book of Drugs and do you have faith in Stahl above?

If the Prescriber's Guide tells you so

Do you believe in dopamine? Can Prozac cure your self esteem?

And can ya teach me all about CBT?

Well, it's all for one and one for all these 3 musketeers have had a ball

But don't go feelin' down-because we'll all still be in town!

I was a lonely, lonely Psych NP

With no one there to support me

But I was saved so gracefully by Abi and Judy!

They started singing

So long to Imposter Syndrome

I packed up all my books and I left my home

I drove out to Milwaukee to the Great Unknown

Singing this'll be the year that I grow

Rachel Jones, MSN, PMHNP-BC
2022 Graduate of

Psychiatric Residency for Advanced Practice Providers, MCW



GETTING TO KNOW...

Faculty and Staff from the Department of Psychiatry and Behavioral Medicine



RADHA DHAKAL, APNP

Psychiatric Nurse Practitioner
Tosa Health Center

What is your educational background?

I completed Family Nurse Practitioner from Concordia University, Mequon, Wisconsin, and did Post Masters Certification in Psychiatric Nurse Practitioner from the University of Wisconsin Milwaukee, then completed a year of Psychiatric NP Fellowship Program at MCW.

How long have you worked at MCW?

I have been with MCW since Jan 2021-which is when I started the NP Fellowship.

Describe your typical workday.

I work 3 days a week (Mondays, Tuesdays, and Wednesdays). I see patients in an outpatient setting all day (9-4).

What do you like most about your job—what attracted you to this field?

I appreciate the continuous support from the department, especially Dr. Agrawal, since starting the NP fellowship. I have always enjoyed psychiatry and the challenges that come along with it. I decided to get certified in Psychiatry after a clinical rotation at the Milwaukee County Jail (every single patient had a diagnosis of mental illness).

Tell us about life outside of MCW.

I enjoy spending time with my husband and kids (daughter 7 years and son 6 years old). During summer we travel, go hiking and camping.

Just for fun—what are your favorite movies, books, music?

I listen to Nepali songs (my husband sings 😊). My all-time favorite movie is “The Notebook.”

Tell us a fun/unique fact about yourself.

I will be visiting my family after 17 years this August.



STEPHANIE LEE, RN, BSN

Registered Nurse
Tosa Health Center

What is your educational background?

I have both an RN and a BSN degree.

How long have you worked at MCW?

I’ve worked at MCW for 10 years. Then I came back to the Department of Psychiatry on 2/14/2022.

Describe your typical workday.

Triage patient phone calls or walk-ins, handle medication refills, medication prior authorizations, FMLA/Leave of Absence paperwork, coordinate/collaborate with hospitals, clinics, and other providers, administer injections, room patients as needed, and anything else that is needed in the clinic.

What do you like most about your job—what attracted you to this field?

Helping people live better with mental illness and working with a great group of staff who value each other’s opinions.

Tell us about life outside of MCW.

I am married with three kids. I enjoy spending time with friends and family. I also enjoy good food, camping, and golfing.

Just for fun—what are your favorite movies, books, music?

My favorite movies are Forrest Gump and Titanic.

Tell us a fun/unique fact about yourself.

I enjoy cooking and making food to share with friends and families.

Do you know someone in the Department that we all should “get to know?”

Email your nomination to dnorby@mcw.edu



LARRESHA WILLIAMS, RN

Registered Nurse
Tosa Health Center &
North Hills Health Center

What is your educational background?

I have a Master’s of Nursing through Alverno College.

How long have you worked at MCW?

I have been working at MCW since February 1, 2022.

Describe your typical workday.

Generally, I like to start my day by going through my schedule and emails. I like to prep myself and create a “game plan” prior to seeing my patients. In between patients, I will respond to emails, messages, co-sign orders, etc. I do still have quite a bit of free time which has been nice and helps me to research, plan, and not get overwhelmed.

What do you like most about your job— what attracted you to this field?

Although cliché, I have always enjoyed working with people. This field allows me to help individuals work through their struggles. When a patient comes in emotionally distraught, it is extremely rewarding and humbling to not only see but to be a part of their journey.

Tell us about life outside of MCW.

I just celebrated my 7-year wedding anniversary. I have three children, Jeffrey-12, Lauryn-8, Justin-5. They are my main hobby. I also enjoy reading and have been a part of a book club going on two years. I’m very "chill." I love the summertime and all the outdoor activities/festivals that comes along with it. I love traveling and experiencing new places and ideas I will try almost anything once.

Just for fun—what are your favorite movies, books, music?

This answer varies depending on the day. I’ll say my favorite genre of music is R&B, and my favorite genre of movies/books is Suspense/thriller. (Although I have watched Shawshank Redemption a crazy number of times.)

Tell us a fun/unique fact about yourself.

I absolutely LOVE music!!! All different genres but mostly R&B, hip/hop, pop, and gospel. It literally gives me energy, eases anxiety/frustration, and puts me in a great mood. I have played the violin, piano, and clarinet throughout my school-age years.



MONIQUE PLEARS, MPH

Research Program Coordinator II
CAIR

What is your educational background?

I received my Bachelor’s degree in Social Work from UW-Milwaukee and my Master’s in Public Health from Purdue University Global.

How long have you worked at MCW?

I have been at MCW since 3/7/2022. Prior to being at MCW, I worked as a Public Health Officer on the Fort McCoy military base in Tomah, Wisconsin. In this role, I worked with Afghan Refugees that were in Wisconsin until they were connected with resettlement agencies in various states.

Describe your typical workday.

My typical day consists of connecting with the African American Community, completing surveys/interviews with participants, partnering with various community organizations, creating a community Advisory board, and attending community events for participant recruitment. The connections that are made, are to support efforts in broadening the VaxFax projects visibility in the community. The VaxFax project is seeking the views of the African American community about the COVID-19 Vaccination.

What do you like most about your job— what attracted you to this field?

I take pleasure in educating the community and connecting with various organizations. Being able to learn from others, allows me to expand my knowledge on how to best address community needs.

Tell us about life outside of MCW.

I have one godson, Donovan, that I adore. He is 13 years old. I enjoy traveling, reading, cooking and relaxing. I have no pets, but I hope to get a dog this year.

Just for fun—what are your favorite movies, books, music?

My favorite song is “A Long Walk”, by Jill Scott. The simplicity of taking a walk with someone can be very enlightening.

Tell us a fun/unique fact about yourself.

I am afraid of birds. I can admire them from a distance, but when they are close, it’s a different story.

DEPARTMENT HAPPENINGS



David J. Peterson STAFF Excellence Awards

Nominate staff that you feel do an exemplary job—
above and beyond their duties.

Survey will be open July 1- July 31, 2022

"Appreciation can make a day, even change a life. Your willingness
to put it into words is all that is necessary." - Margaret Cousins



American Heart Association.
Heart Walk

2022 SE WI Heart & Stroke Walk
Saturday, September 24, 2022
Veterans Park
[Heart Walk - Kristine James/Team Psych](#)



CONGRATULATIONS GRADUATES!

HEALTH PSYCHOLOGY RESIDENCY

Pallavi Babu, PhD
Devi Jayan, PhD
Adriana Swancy, PhD

HEALTH PSYCHOLOGY POST DOC FELLOWS

Alexander H. Buhk, PhD
Michelle Lee, PsyD

NORTHERN WISCONSIN PSYCHIATRY

James Billings, MD
Joanna Buck, MD
Marley Kercher, MD
Jared Metropulos, MD

CENTRAL WISCONSIN PSYCHIATRY

Shweta Karve, MD
Tsarina VanWieren, DO

MILWAUKEE WISCONSIN PSYCHIATRY

Kamal Al-Shalby, MD
Rachel Feltman-Frank, DO
Anne-Marie Giuca, MD
Zachary Markman, DO
Emily Rion, MD
Irene Warner, MD
Bradley Zastrow, MD

CHILD AND ADOLESCENT PSYCHIATRY FELLOWS

Leora Ruth Massey, MD
Brooke Mastroianni, MD
Hannah Ann Schroeder, DO
Albina Zimany, MD

CONSULTATION-LIAISON PSYCHIATRY FELLOWSHIP

Elizabeth Hovis, MD
Sara Lindeke, MD
Ana Navarro-Montoya, MD

FORENSIC PSYCHIATRY FELLOWSHIP

Colleen Considine, MD
Andressa Medrado Dias Silveira, MD

GERIATRIC PSYCHIATRY FELLOWSHIP

Hannah Reiland, DO

NURSE PRACTITIONER PSYCHIATRIC RESIDENCY

Michael Gilmartin APNP, PMHNP-BC
Rachel Jones APNP, PMHNP-BC
Anna Melville, DNP

PSYCHED is the newsletter of the
Department of Psychiatry and Behavioral Medicine,
Medical College of Wisconsin.
Jon A. Lehrmann, MD, Chairman and Professor
Editorial Team: Joy Ehlenbach • Karen Hamilton • Dawn Norby

