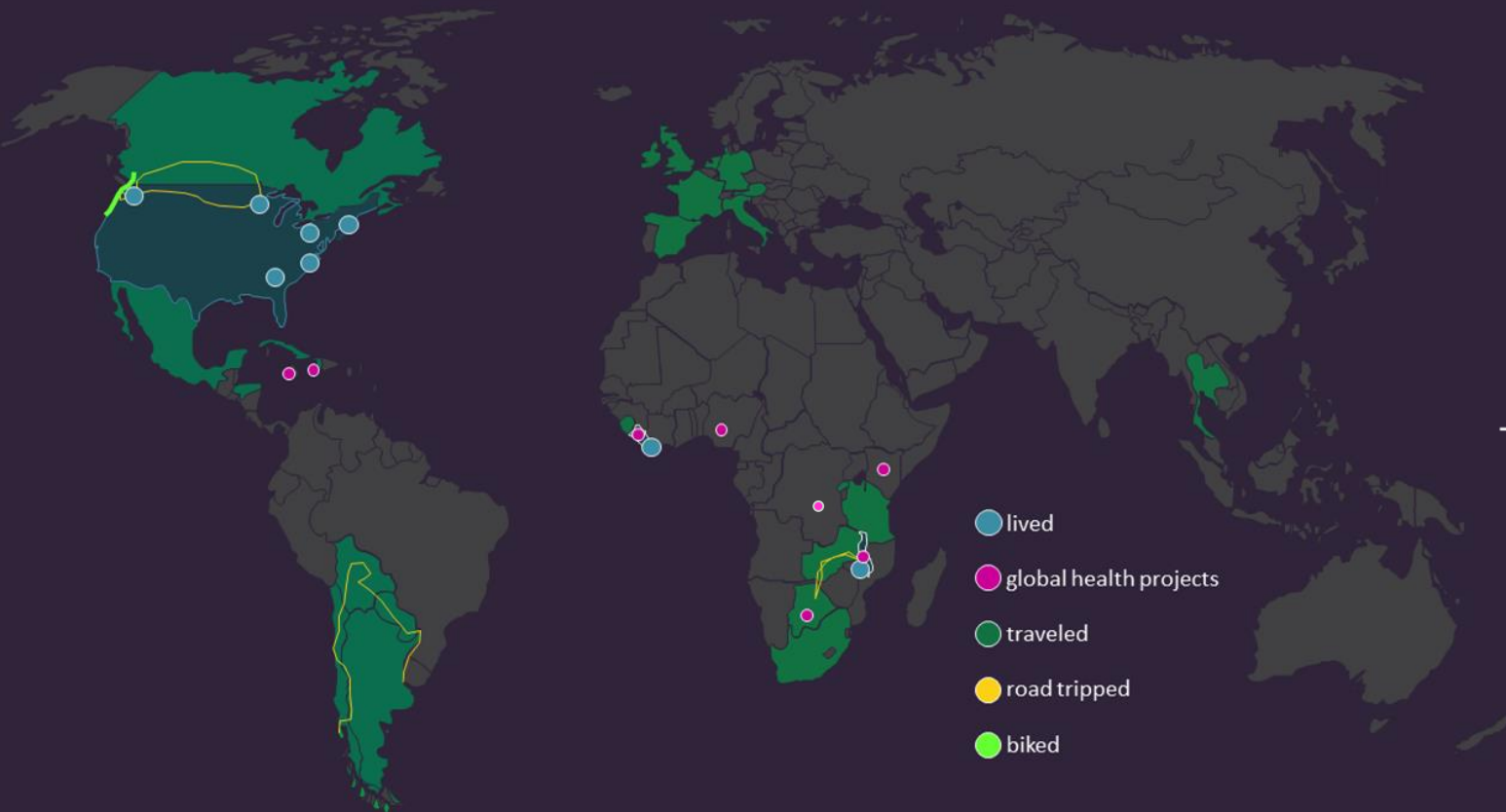


# Hello, I'm Elizabeth

[Publications](#) | [LinkedIn](#) | [Website](#)



I'm a global health tech design researcher and epidemiologist with 15+ years' experience optimizing domestic and global health interventions. Open to collaborations, your wild ideas & freelance projects.

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UNIVERSITY *of* WASHINGTON

**DIGI**  
DIGITAL INITIATIVES  
GROUP AT I-TECH

**Senior Digital Health  
Specialist**

HUMAN CENTERED  
DESIGN & ENGINEERING

**PhD Candidate**  
Committee: Drs Beth Kolko, Nancy  
Puttkammer, Sean Munson, Sarah Iribarren

# Skills & Interests



## Approaches

**Data:** Participatory Design, Quantitative & Qualitative methods, Individual & group interviews, Survey Design

**Design & Informatics:** Usability studies, Journey & Workflow Mapping, Heuristic Evaluation, Research Study design and protocol development



## Tools

**Data:** PowerBI, Excel, R Studio, SAS, Stata, ATLAS.Ti, Google Sheets, DHIS2, OpenMRS, CommCare, Community Health Toolkit

**Design & Informatics:** Figma, InDesign, Miro, WordPress, Wix, Jira, Balsamiq, Powerpoint, Google Slides



## Interests

**Data:** Data visualization, Inclusive design, Key Performance Indicator development, Data ethics, Monitoring and Evaluation

**Design & Informatics:** Tech design & implementation with marginalized populations, Healthcare & public health tech, UX/UI research, Ethical AI, Creating visual decks, Strategic planning, Social Justice, Human Rights

# Clients, Employers, & Affiliations



**MASS.**



Interstitial Technology

**TAT Lab**

# Education



**Master of Science**

**PhD Candidate**

Human Centered Design and Engineering  
University of Washington



**Master of Public Health**

Infectious Disease Epidemiology  
Johns Hopkins



**Bachelor of Arts**

Comparative religion & pre-med  
College of Wooster

# Projects

a selection of digital health projects

# Traveler Monitoring Dashboards

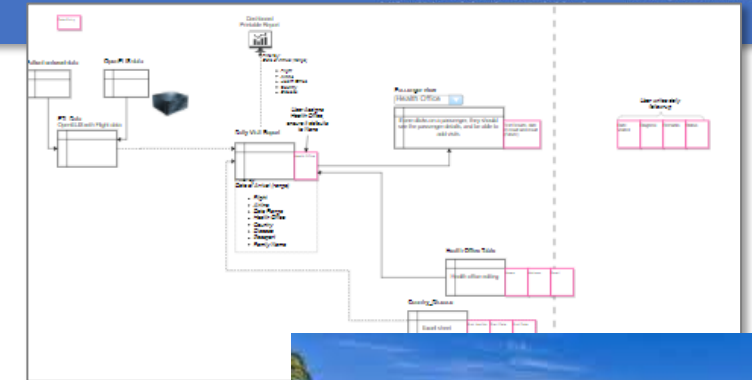
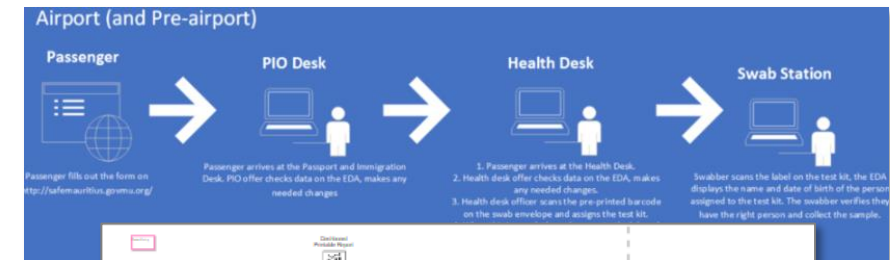
## data visualization

**Mission** a tropical island nation reliant on tourism sought new system to visualize incoming traveler information to support outbreak prevention

### Overview

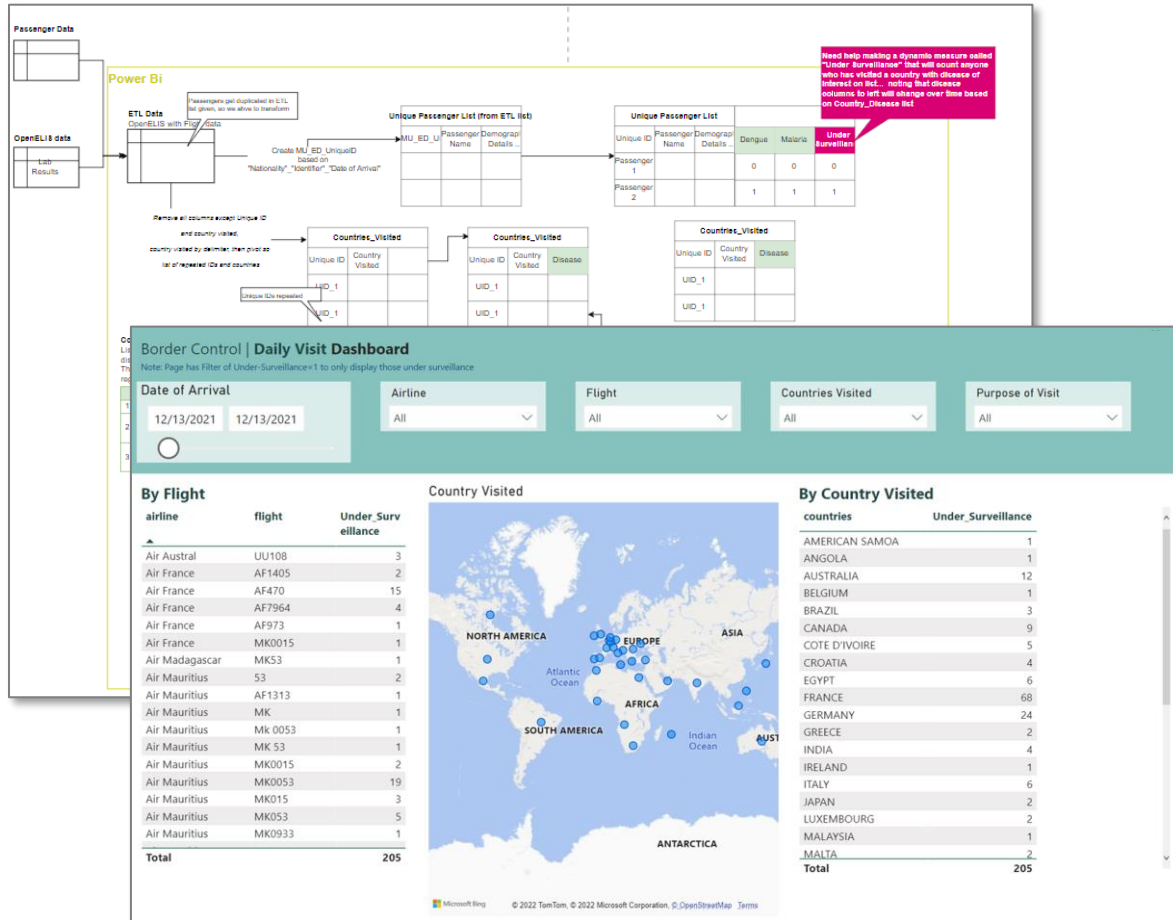
The COVID-19 pandemic halted global travel, creating risk to tourism-based economies. One tourism-reliant country requested a new dashboard to combine datasets and better visualize information about incoming travelers to better mitigate outbreaks.

- Skills Used: data visualization, workflow diagramming, data quality checks
- Collaborators: Ministry of Health, large global health funding organization, Digital Initiatives Group at I-TECH



# Traveler Monitoring Dashboards

## data visualization



## Process & Artifacts

I worked with in country and US-based informatics teams to create a data workflow diagram, document project requirements, and use PowerBI to import, clean, and visualize data.

## Insights & Impact

After extensive product review, data visualization tools did not meet client needs for data entry and data visualization. My project contextualization helped client create new solutions for data entry. The data visualization dashboard served as launching point for government.

# HIV Testing & Care Dashboard

## data use and visualization

**Mission** a large health consortium sought a way to use HIV testing and care data to support decision-making and reporting

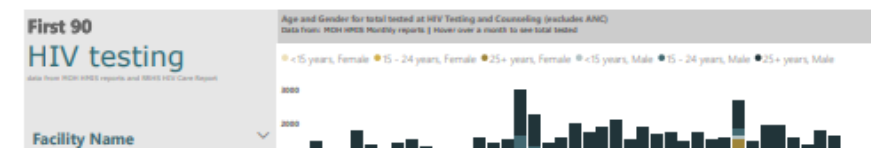
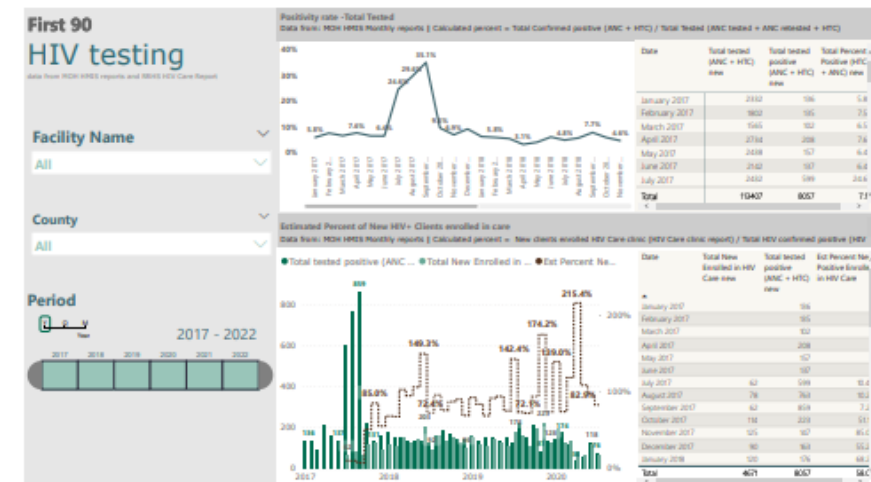
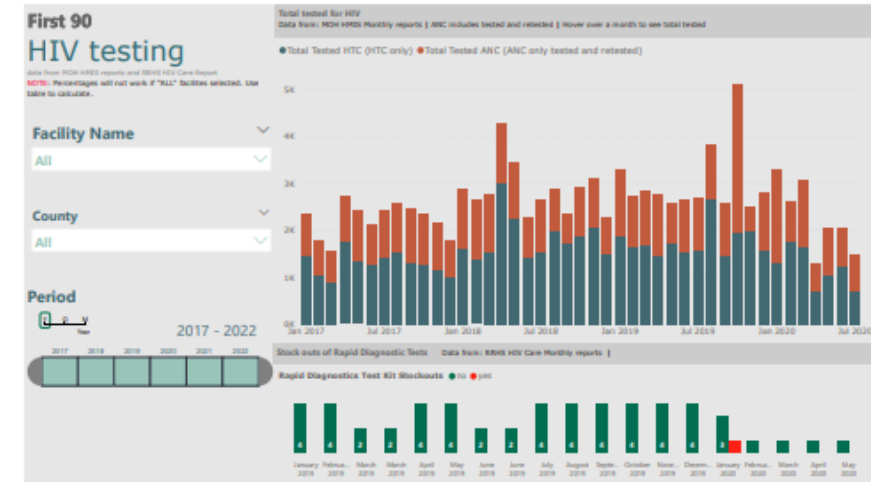
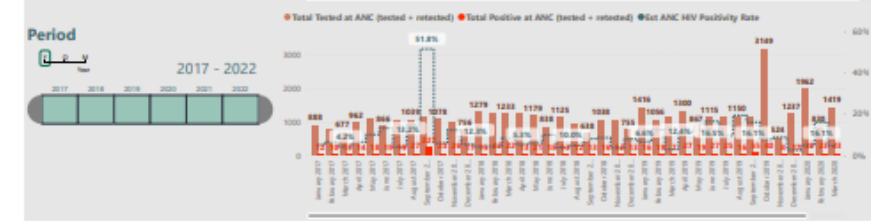
## Overview

For 2.5 years, I led work to create and update an automated HIV testing and care dashboard that relied on reports from various datasets

- Skills Used: designed customizable & updatable dashboard, architected a data reporting system & data collection tools
- Collaborators: consortium of academic partners, government agencies, large global health funding organization

## Insights & Impact

Dashboard was most useful to project grant leads and for funder reports





# Wholistic Community Health Workers

## design and research project

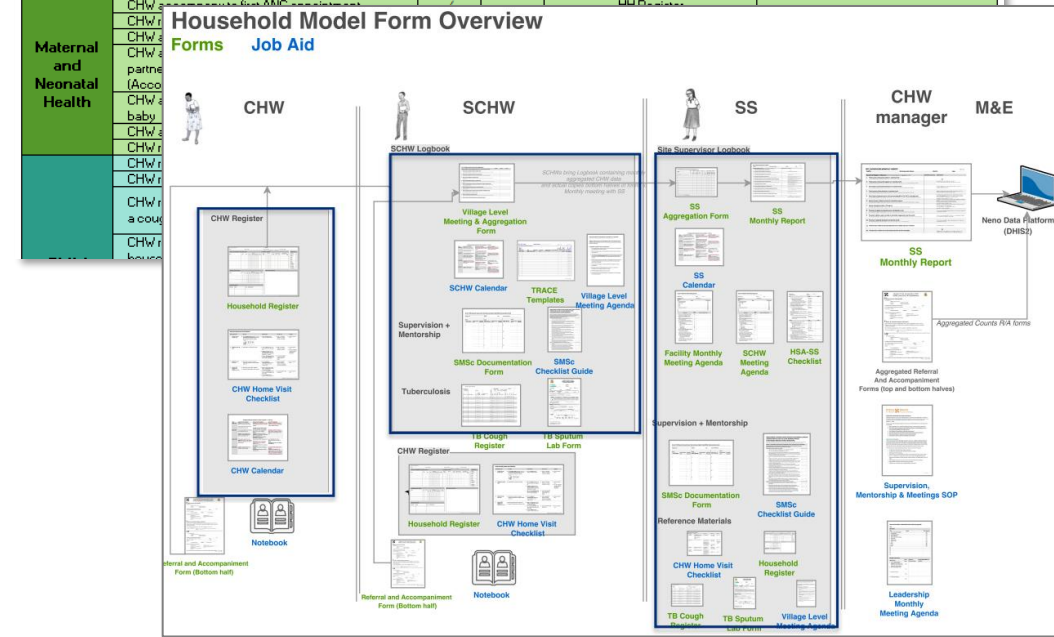
**Mission** a district-wide Community Health Worker program sought to transition programming from disease-specific to wholistic health model

### Overview

The 1,200 member Community Health Worker (CHW) team in a remote district in Malawi aimed to change to a wholistic model where CHWs would routinely visit 20-40 homes in their community.

- Skills Used: Program Design, Evaluation Design, Form and Key Performance Indicator Design
- Collaborators: Community Health Worker leadership, Clinical leadership, Ministry of Health representatives,

	CHW Output	Accompany	Refer	Documentation RIA: = referral & accomp form	Home Visit
HIVSTI	CHW refer sexually active men and women for testing		✓	RIA: tick HIV testing or tick Other STI testing	Quarterly
	CHW accompany dangerous side effects (ARVs)	✓		HH Register?	Monthly
	CHW accompany ART patients to routine visits in first year	✓		-	HIV Patient Visit for 1 year, Monthly after 1 year
	CHW refer ART clients who miss appointment		✓	HH Register: TRACE section	TRACE report cycle
	CHW refer when PLWHIV are due for viral load		✓	HH Register: TRACE section	When clinic alerts CHW
	CHW refer mothers and newborns for testing and results using TRACE report		✓	HH Register: TRACE section	TRACE report cycle
TB	CHW monitor and refer household members with signs of TB for testing		✓	RIA: Tick Cough (TB)	Monthly for new suspected cases
	CHW refer TB clients who miss appointment		✓	HH Register: TRACE section	TRACE report cycle
	For clients who have submitted sputum, follow up with smear negative clients for danger signs and refer for further examination		✓	RIA: tick Other TB sputum follow-up	TB Patient Visit
	CHWs screen family members of new TB clients and refer family members with signs of TB and refer all children <5 to facility, as notified by HSA/Site supervisor		✓	RIA: tick Malnutrition	
	CHW accompany dangerous side effects	✓		-	
	CHW accompany TB patients to routine visits	✓		-	
Family Planning	CHW refer W/CBA and partners for family planning services		✓	RIA: tick Family planning	Monthly for those on short-term methods or without
	CHW follow up and refer advise women to seek family planning counselling during their ANC referral and during their 6-week PNC referral		✓	RIA: tick Family planning	Monthly Home Visit (during woman's final pregnancy months), PNC



# Wholistic Community Health Workers

## design and research project

### Process / Artifacts

I led a series of workshops with Community Health Worker teams and government partners to design the intervention, align with current community health programs, and create a data collection flow from forms to databases. I also led the team in developing writing an extensive research protocol outlining our program evaluation plan.

### Insights & Impact

The team successfully launched this new approach to the Community Health Worker, and following our evaluation protocol, we [published this our findings](#). This model continues in the district where it was started.



# Digital Health System Design

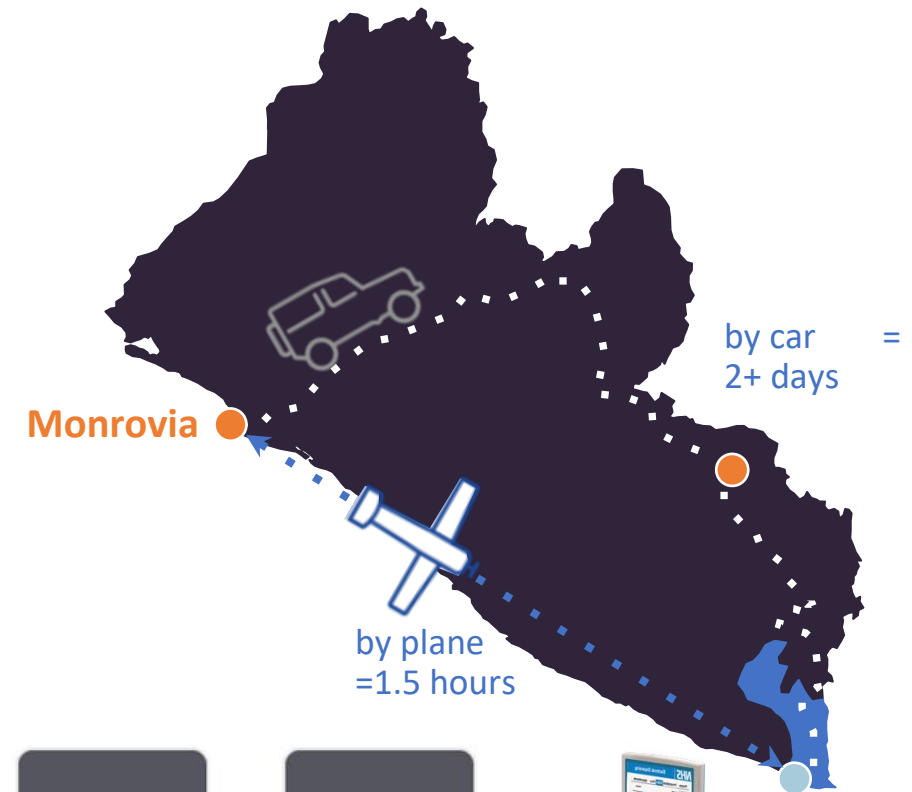
design research & informatics project **Design Phase**

**Mission** digitizing a novel, chronic disease clinic in remote Liberia

## Overview

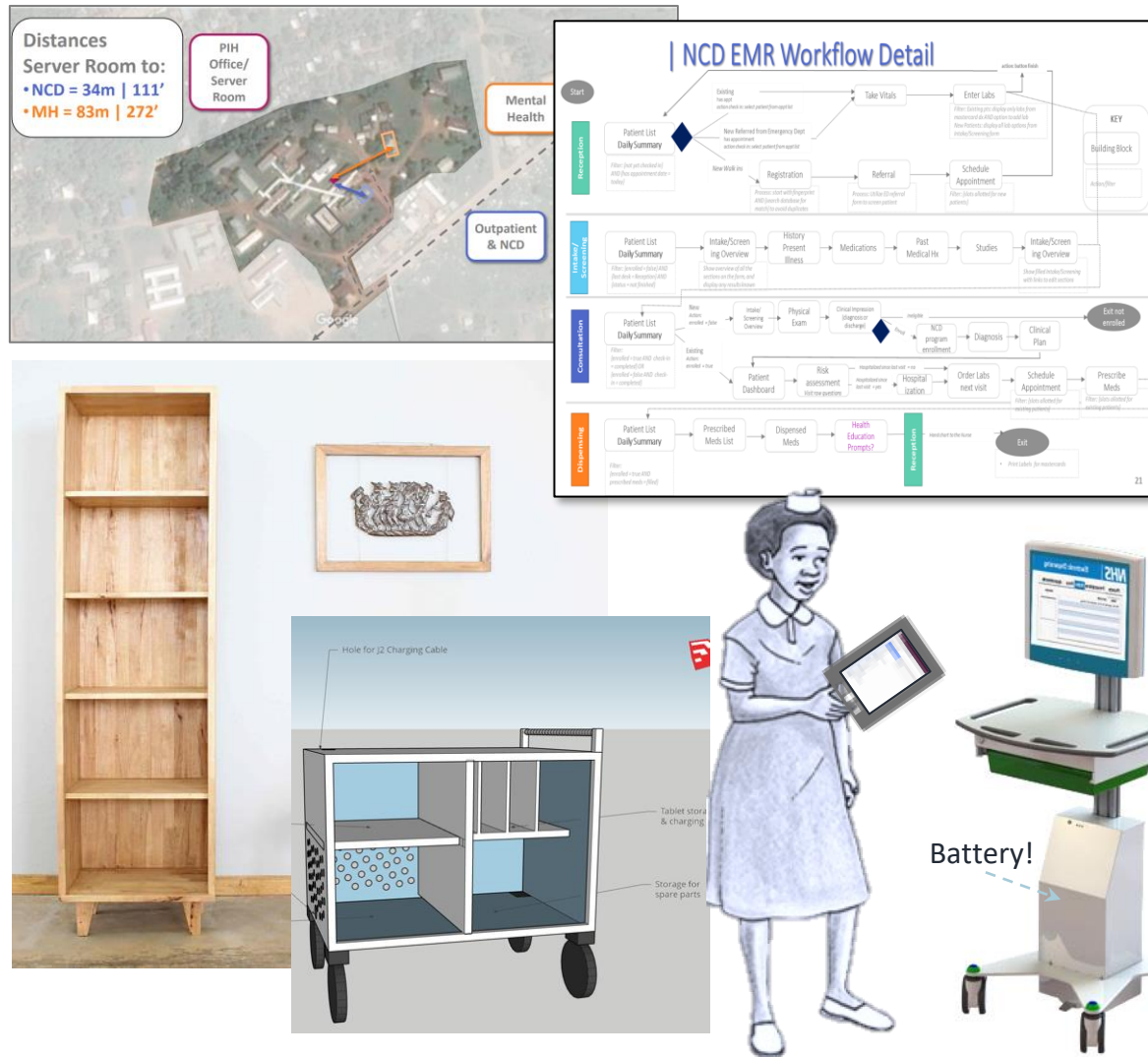
Treatment of chronic diseases like hypertension, diabetes and asthma remains rare in many low- and middle-income countries. A new, chronic care clinic sought a strategy to go digital to better support complex patient care in a mixed-use, clinical space

- Skills: design research, project management, workflow diagramming, wireframing,
- Collaborators: clinicians, developers, technical consultant, government officials



# Digital Health System Design

design research & informatics project **Deliverable**



## Process & Artifacts

We observed patient care, mapped workflows, and documented contextual complexities. We then built digital workflows and wireframes to begin imagining a new system. This led to many sessions with clinical teams to refine designs and adapt a digital system to context.

## Insights & Impact

Clinicians had limited exposure to typing, leading us to design a fully, touchscreen system that could adhere to clinical guidelines while supporting clinician needs. The shared clinical space and intermittent electricity required us to design a “pop up” Electronic Health Record complete with locally built furniture and charging kiosk.



# Contact



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**Seattle**

open to travel & move