The World Health Organization and the prevention of road injuries: phone book analysis

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Every day about 3000 people die and about 30 000 people are seriously injured in road crashes.1 Most casualties occur in low and middle income countries, and most are vulnerable road users: pedestrians, cyclists, and motorcyclists. The World Health Organization has a lead role in the control of global epidemics, and the work is coordinated from its headquarters in Geneva, Switzerland. We conducted a phone book analysis to assess how the WHO is responding to the global problem of road injuries.

Methods and results

Briefly, phone book analysis involves obtaining a phone book and analysing its contents. The phone book of the WHO headquarters lists the name of each employee, a series of symbols indicating the employee’s position within the WHO, and the employee’s phone number. We determined the area of work of each employee from the key at the front of the book and the reference symbols. We conducted our analysis on the October 2000 phone book (the most recent edition available), taken (borrowed) from room M-505 of the WHO headquarters in April 2001. The phone book has now been returned. We extracted the names and reference symbols of all employees from the phone book, put them into a database, and calculated the number of employees working within the different parts of the WHO. We conducted our analyses in both French and English. We did not seek approval from the ethics committee.

The phone book listed the phone numbers of 2184 employees (figure). The general management unit had the most staff phones (472) and the office of the director general the fewest (48). The department for injuries and violence prevention (within the non-communicable diseases and mental health unit) had 14 (7%) of the 192 phones within the unit. Of these 14 phones, six were for staff dealing with the prevention of violence, six for staff dealing with the epidemiology of violence and non-intentional injuries, and two for staff dealing with land mines (public safety promotion). It was not possible to determine how many of the six phones allocated for violence and non-intentional injuries were for staff dealing with the prevention of road injuries, and so we obtained this information directly from the department: there was one phone.

Comment

Road crashes are responsible for over 10 million serious injuries each year. In some low and middle income countries over 25% of hospital beds are occupied by people injured in road crashes.3 Our study showed that there is only one phone for staff dealing with road injuries at the WHO headquarters, compared with 472 for staff dealing with general management. Given the magnitude of the problem of road injuries, it seems implausible that only one member of staff deals with road injuries. Staff dealing with the prevention of road injuries at WHO headquarters are therefore being denied access to phones. In support of this interpretation, a 1996 WHO report noted that fewer resources are available for research and development in road injuries than for almost any other cause of human misery.4 Although email is effective, we believe that an appropriate use of resources would be to provide phones for people dealing with preventing road injuries. In particular it would help to establish the links between researchers, practitioners, and victims’ organisations that are needed to raise the profile of this important but neglected problem.

Conspirators: IR obtained (and returned) the phone book, TH entered the data, conducted the analyses, and prepared the figure, and PE helped with the analyses. All authors wrote the paper. IR is guarantor.

Competing interests: All authors are phone users but we have never dealt in telecommunications shares nor received fees from telecommunications companies.


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