Summary
World Health Organization (WHO) the mother organisation of all global health initiatives actively involved in conceiving effective strategies to fight different Communicable and Non-Communicable Diseases (NCDs) worldwide. WHO has the goal to serve poorer nation effectively so that they can have fair access to various vaccines and drugs. The organisation is also ensuring sustainable financing for the global health sector. However, to deliver the effective health initiatives all across the continents, WHO should reason more efficiently with the regional offices so that it can collaborate in decision making and implement those decisions more precisely and decisively. WHO should act in coordination with other private, country-based and global organisations. It should advocate for research independent of any industrial interest, human rights policies and improvement of health services. WHO needs to modify its global endeavours which will intensify international responses in combating any emergency. To hold on to its current leadership role, if necessary, WHO should undergo significant reformation. Until present days, there is no substitute for WHO. WHO should realise that without empowering the marginalised people no global health goal can be achieved adequately.

Key words
World Health Organization; Global Health; NGO.

Introduction
Since the establishment in 1948, the World Health Organization (WHO) a specialised agency of the United Nations (UN) is working with a motto to build a healthier and more liveable world. For last seven decades, WHO has reached many milestones in the arena of international public health and consistently striving for the people all over the continents. WHO works in partnership with governments and non-government organisations in more than 150 countries worldwide [1]. This global institution is committed to fighting against both the communicable and non-communicable diseases. They are dedicated to lowering down the maternal and child mortality rate as well as increasing the overall life expectancy [2]. WHO conducts awareness programs worldwide regarding hygiene, medicines and vaccines for various infectious diseases. They help different countries to develop a sustainable health system so that people can live longer and happier lives. WHO is also concerned with developing heath strategies to combat emerging health hazards to lower down the morbidity and mortality worldwide.

Despite all of the remarkable breakthroughs over the decades, to some extent, WHO has failed to uphold its leadership role in the Global Health Arena. Several governments and non-government agencies in different continents have challenged its authority and are adopting divergent policies to combat their public health issues [2].

Materials and methods
Medline, Scopus, Embase and Web of Science were searched for articles published from 2010 to 2016 using the keywords World Health Organization, WHO and Global Health. The reference lists of the selected publications were reviewed. Articles published only in English have been chosen.

Discussion
WHO defines health not merely as the absence of disease or infirmity but as a state of complete physical, mental and social well-being [3]. Throughout years it has achieved many feathers in
the crown and improved lives of millions, eradication of Small Pox in 1979 being the proudest achievement. WHO is the first organisation to identify HIV in 1983 [4]. The core strengths of this global team include public health surveillance, pandemic preparedness, and disaster response, global standard setting and regulation, catalysing global initiatives and advocating for policy change. For all these years WHO adopted many strategies like Global Polio Eradication Initiative, Global Strategy on Diet, Physical Activity and Health, revising the International Health Regulations and successfully controlling various contagious diseases like Severe Acute Respiratory Syndrome (SARS) H1N1 and H5N1. WHO also arranged Framework Convention on Tobacco Control and continuing its endeavour to deliver the best in global health [5]. The WHO sets standard guidelines regarding the diagnoses and treatments for different diseases in cooperation with other global institutions. WHO also continues shedding light on the risk of various environmental factors and food quality [6]. It helps in building up the health services in under-developed and developing countries, training workforce and vaccination in under-privileged areas. This organisation is fighting worldwide against malaria and other tropical infectious diseases. Fight against AIDS and eradicating polio is now on the top of its priority list. WHO is also devoted to providing proper health education in rural and remote areas of different continents [7].

As new diseases and hazardous situations are consistently coming in front with more ferocity and economic burden, the role of the World Health Organisation is now greater than any time. For more than sixty years it has ameliorated the pain and suffering of people to the fullest extent in contrast to any global organisation in the world [8]. Despite all these, it was never free of criticism. The body’s role is now more scrutinised than any other time in its working years. For last few decades, the subject how WHO should address a complex emerging health hazard been a consistent topic of debate. Despite executing many global major responsibilities competently, the policies adopted by the WHO were not free from mistakes [9]. Different guidelines set by this organisation are said to be mere recommendations which are not efficient and practical all the time. They have been criticised for inadequate addressing of a tentative problem and sometimes for setting up unrealistic goals. Conspiracy theories of hidden agendas also emerged which harmed the global reputation of this prestigious institution [10]. Some authorities even believe that WHO is not fit enough to confront newer challenges of this modern era. According to many critics, WHO has failed to ensure fair access to health for all people. For example, it has shown weaknesses at different levels and reacted in a timid manner in nuclear accidents like Fukushima (2011) and Chernobyl (1986) [11]. During those unfortunate situations WHO demonstrated a lack of competence in timely sending of the experts and regarding inspections, measurements and reportings. During the Swine Flu pandemic in 2009, according to some experts, WHO unnecessarily exaggerated the real scenario and asked governments to buy vaccines worth millions of dollars, most of which remain unused due to conflict of opinions between WHO and different countries regarding the assessment plan [12]. The Parliamentary Assembly of the Council of Europe criticised this overreaction and suspected that this might be the result of broad pharmaceutical interest [13].

WHO has been criticised for its budget shortage. The organisational reform is demanded as there are deficient skilled staff and less collaboration in between the headquarter and regional offices [14]. Local agencies sometimes defy the guidance from the headquarter or even develop their strategy at work. The organisation showed weakness in political leadership, technical expertise and focused investments. For last few decades, WHO’s annual budget is declining which makes policy making full of hardships at different levels [15]. The members often don’t allow WHO to interfere in their internal health affairs which make reaching laudable goals a daunting task. On the other hand, for last few decades, different global organisations and private donors with good funds are coming forth in addressing numerous health issues worldwide demanding the goals and actions of the WHO to be more precise and efficient [16]. These private organisations, with ties with different pharmaceuticals industries in most of the occasions, have less interest in providing expensive drugs and vaccines to poorer countries at an affordable cost. In the absence of
any clear role, support and direction from the WHO to resolve this issue, these countries are forced to take the different actions on their own [17]. To some instances, the result of these efforts was promising. All these matters together require WHO to adopt a suitable approach to fighting new issues as the world’s leading health authority. It should also improve its performance, transparency and accountability [18].

In December 2013 the Ebola infection, a deadly viral disease with a very high mortality rate, spread out of control across the African continent. The primary foci were Liberia, Guinea and Sierra Leone. Before this outbreak, West Africa had no record for Ebola deaths. Cases were first reported in Guinea. There were 17145 probable, suspected or confirmed cases with 6070 reported deaths by December 2014 [19]. Primarily this infection was limited to the rural areas with a gradual urban spreading. The affected countries are indigent with vulnerable health systems. During this outbreak, the role of WHO and the African Office (AFRO) was highly criticised as ineffective, late and dysfunctional. Some critics believe that if WHO responded earlier to this outbreak, many lives could have been saved. It also could minimise substantial loss in the health infrastructure [20].

From this indiscipline in controlling the outbreak of Ebola and failure to come out with a contingency plan, world community again felt the dire need for reformation of WHO as there was no effective plan to connect with the wider international communities. During this situation, the leadership was highly criticised to be failed which was not expected regarding the direction and coordination WHO provides on health work worldwide. Lack of communication with other global partners during this challenging time was very evident which ultimately affected the proper approach to mitigating the problem. The Ebola crisis proved that WHO has an inefficient response to a new global health crisis, especially in developing countries [21]. Alongside WHO’s organisational failings, the crisis also delineated the limitations of the International Health Regulations (2005) which demands the timely strengthening of all the health regulations adopted by this organisation to fight an outbreak of any infectious disease. Many authorities advised improving WHO’s emergency response capacity.

During the Ebola incident, there was no prioritised plan from WHO, and there was a delayed response in declaring the health emergency [21]. There was also a lack of financing plan and clear-cut direction to the member states regarding the control of the infection. WHO failed to discourage the countries from imposing unnecessary restriction in air travel, which had huge adverse effects on traffic and trade. During this episode, the concerned governments created social distancing, eg. closing schools, banning gatherings. Instead of a traditional burial, governments forced the cremation of corpses which was emotionally stressful for the grieving relatives of the deceased. It produced fear in the societies which clearly depicts WHO’s failure in creating mass awareness across the borders [22].

During the outbreak, as there was a lack of trained staff and inefficient infection control methods, the health professionals faced a significant threat from this disease, and many of them did die from it. Failure to provide sufficient salaries created an alarming shortage in human resources, which again shows the shortcomings of WHO’s policy making [23]. There was clear evidence for lack of funding and technical assistance. The rapid response system, surveillance, health infrastructures and laboratories were also not up to the mark for which a proactive and strategic response was needed from the World Health Organization which it failed to provide in time. Management of outbreak was taken out of the hands of the local community-based organisations despite having the expertise and social mechanisms to deal with numerous adversities in past which also fueled distrust among the sufferers in the affected countries [24]. The isolated people and families suspected of infection had inadequate access to food and pure water; a problem should have been adequately addressed by the WHO. The organisation was supposed to build a sustainable plan for social education to overcome the barrier of poverty and illiteracy to fight back the infection and for improvement of lives. WHO should have taken pragmatic intends to support the communities and households at risk. WHO apparently failed to build a partnership with community and faith-based organisations in the affected societies which are not expected from the leader of world health.
Conclusion
The extent to which WHO can adjust to the emerging challenges regarding governance will determine its future role in global health. Leaving the core responsibility of performing adequately during any emergency on the hand of regional governments and local offices do not always work out [25]. The Ebola crisis points the finger towards this crucial point of reconsideration. The improvements in internal governance and finance are of sheer importance in this regard. The organisation should show financial innovation and increase the proportional levies from the member countries to cop-up with the rising financial demands [26]. WHO should include both the Government and the Non-Government Organisations (NGOs) in the decision implementation stage [27]. Without a robust response system to any health emergency and efficient strengthening of the health systems, WHO will fail to fight severe epidemics like Ebola in future [28]. To modify its policies, WHO should acquire fair-minded approach to deal with all the confusions to adapt itself to the world political climate which will ultimately lift up people's confidence in its role, fix up the damaged reputation and will again make WHO the most productive player in the realm of global health.

Disclosure
All the authors declared no competing interest.

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