# Enhancing Health Security in Saudi Arabia: Strategies for Preparedness and Response to Epidemics and Biological Threats

Moamen Abdelfadil Ismail<sup>1</sup>, Ahlam Ibrahim Alharbi<sup>2</sup>, Ahmed Eid Mohammed Alharbi<sup>3</sup>, Aljawharah mohammed Alotaibi<sup>4</sup>, AHMAD ALI ALGHUBAINI<sup>5</sup>, NAIF NAWAF ALAZMI<sup>6</sup>, Salman Saad Alazmi<sup>7</sup>, Samiyah Mohammed Hassan Asiri<sup>8</sup>, Abdulrahman Ibrahem Yahya Mudarbish<sup>9</sup>, Mohammed saleh saleh hashmi<sup>10</sup>, Nujud Ibrahem Yahya Mudarbish<sup>11</sup>

#### Abstract

Background: Saudi Arabia has made significant progress in enhancing its health security through robust preparedness and response mechanisms to address epidemics and biological threats. Given its strategic location, dense population centers, and the annual influx of pilgrims for Hajj and Umrah, the country faces unique challenges in disease prevention and control. The COVID-19 pandemic underscored the importance of resilient healthcare systems, rapid response frameworks, and digital health technologies. This study evaluates Saudi Arabia's health security strategies, focusing on preparedness, public awareness, and resource availability. Methods: A mixed-methods research design was employed, combining quantitative surveys with qualitative expert interviews. The study involved 250 survey respondents and 50 interviews with public health officials, healthcare professionals, and academic researchers. Data were collected through structured questionnaires, epidemiological trend analysis, in-depth interviews, and policy document reviews. Quantitative data were analyzed using descriptive and inferential statistics, while qualitative data were thematically coded using NV ivo software. Results: The findings revealed that 85% of participants had moderate to high awareness of epidemic preparedness strategies, though 15% reported low awareness. Half of the respondents expressed confidence in the health system's response capabilities, while 25% were not confident. Resource availability was inconsistent, with 50% reporting occasional shortages. Key challenges included insufficient public awareness (35%), lack of medical resources (25%), and coordination gaps (20%). Suggested improvements included more public awareness campaigns (45%) and increased healthcare funding (25%). Conclusion: Saudi Arabia has established a strong foundation for health security, but gaps remain in public awareness, resource allocation, and inter-sectoral coordination. Strengthening public education, ensuring consistent medical supplies, and enhancing collaboration between stakeholders are critical for future preparedness. The study highlights the need for continuous improvement and alignment with global health security standards to mitigate the impact of epidemics and biological threats effectively.

Keywords: Health Security; Epidemic; Biological Threats.

## Background

Saudi Arabia has made significant strides in enhancing its health security by developing robust preparedness and response mechanisms to address epidemics and biological threats. Given its strategic location, dense population centers, and annual influx of millions of pilgrims for Hajj and Umrah, the country faces unique challenges in disease prevention and control. The Kingdom has prioritized health security through national strategies, collaborations with global health organizations, and the implementation of advanced surveillance systems (Alyami et al., 2020).

The COVID-19 pandemic highlighted the importance of resilient healthcare systems, rapid response frameworks, and coordinated public health efforts. Saudi Arabia's response to COVID-19 demonstrated

<sup>&</sup>lt;sup>1</sup> Lecturer of Internal Medicine, Faculty of Medicine, Helwan University, Internal Medicine consultant, King Abdulaziz specialist hospital - Sakaka – Aljouf, moamen.fadil83@gmail.com.

<sup>&</sup>lt;sup>2</sup> Health Security, Bagedo Health Center.

<sup>&</sup>lt;sup>3</sup> Health security guard , AlGhazala General Hospital.

<sup>&</sup>lt;sup>4</sup> Health security, Riyadh Second Health Cluster (Al-khaleej 2 Health center).

<sup>&</sup>lt;sup>5</sup> Health Care Security, Hail General Hospital.

<sup>&</sup>lt;sup>6</sup> Health Care Security, Sharaf Hospital in Hail.

<sup>&</sup>lt;sup>7</sup> Health Care Security, Sharaf Hospital in Hail.

<sup>&</sup>lt;sup>8</sup> Health Care Security, Al-Halqa Health Center.

<sup>9</sup> Health Care Security, Health Center Affairs in the Western Sector.

<sup>&</sup>lt;sup>10</sup> Health Care Security, Health Center Affairs in the Western Sector.

<sup>&</sup>lt;sup>11</sup> Health Care Security, Jazan Specialized Hospital.

its ability to mobilize resources efficiently, enforce strict public health measures, and deploy digital health technologies. The Saudi Center for Disease Prevention and Control (Weqaya) played a crucial role in monitoring, detecting, and mitigating the spread of infectious diseases (Pennisi et al., 2024).

Epidemics and biological threats, including emerging infectious diseases, antimicrobial resistance, and bioterrorism, require a multi-sectoral approach. The Saudi government has strengthened its epidemiological surveillance systems, integrating artificial intelligence and big data analytics to predict and track disease outbreaks. Digital health platforms such as Sehhaty and Tawakkalna have revolutionized public health monitoring and citizen engagement (Shen et al., 2025).

The Vision 2030 initiative underscores the importance of health security, aiming to develop a proactive healthcare system capable of responding to pandemics and biological threats. Investments in biotechnology, vaccine production, and medical research have positioned Saudi Arabia as a regional leader in epidemic preparedness. The establishment of local vaccine manufacturing facilities reduces reliance on external supply chains and ensures a rapid response to future health crises (Mani & Goniewicz, 2023).

Saudi Arabia collaborates with international organizations such as the World Health Organization (WHO), the Centers for Disease Control and Prevention (CDC), and the Global Health Security Agenda (GHSA). These partnerships facilitate knowledge exchange, enhance laboratory capabilities, and support early detection of health threats. The Kingdom also actively participates in global research initiatives to develop treatments and vaccines for infectious diseases (Deshore et al., 2020).

Preparedness measures extend beyond healthcare facilities to include emergency response protocols, biosafety regulations, and risk communication strategies. The government has developed national contingency plans, stockpiled essential medical supplies, and trained healthcare professionals to handle large-scale outbreaks. Public awareness campaigns play a critical role in educating citizens about hygiene practices, vaccination, and early disease detection (AL-Eitan et al., 2023).

Saudi Arabia faces ongoing challenges in combating biological threats, including antimicrobial resistance (AMR) and zoonotic diseases. The One Health approach, which integrates human, animal, and environmental health, has been adopted to address these concerns. Strengthening laboratory networks and enhancing diagnostic capabilities are essential components of Saudi Arabia's health security framework (Memish et al., 2014).

Mass gatherings such as Hajj and Umrah pose significant risks for disease transmission. The Ministry of Health implements strict health protocols, including vaccination requirements, real-time disease surveillance, and rapid response units, to prevent and manage outbreaks during these events. Innovations in telemedicine and mobile health clinics have improved healthcare access and outbreak containment (Green et al., 2020).

Despite these advancements, continuous improvement is required to enhance health security further. Investments in research, workforce training, and international collaboration will be crucial for strengthening epidemic preparedness. The integration of genomic sequencing and artificial intelligence in disease monitoring can provide more accurate predictions and faster responses to emerging health threats (Green et al., 2020).

In conclusion, enhancing health security in Saudi Arabia requires a comprehensive and adaptive strategy that combines technological advancements, policy reforms, and global partnerships. By fostering a proactive public health system, the Kingdom can effectively mitigate the impact of epidemics and biological threats, ensuring long-term health resilience for its population.

# Methodology

This study utilized a mixed-methods research design, incorporating both quantitative and qualitative approaches to comprehensively assess health security strategies in Saudi Arabia. The quantitative component involved survey-based data collection and epidemiological trend analysis, while the qualitative component consisted of expert interviews and policy document analysis. This approach provided a well-rounded perspective on preparedness and response to epidemics and biological threats.

The study targeted multiple stakeholder groups involved in health security, including: Public health officials from the Ministry of Health (MOH) and the Saudi Center for Disease Prevention and Control (Weqaya), Healthcare professionals (physicians, epidemiologists, nurses, and emergency response personnel), Academic researchers specializing in infectious diseases, public health, and epidemiology and Citizens to assess public awareness and perception of epidemic preparedness.

## Sampling methods included:

- Purposive sampling for expert interviews, selecting professionals with relevant expertise.
- Stratified random sampling for healthcare workers to ensure representation across hospitals and regions.
- Cluster sampling for the general population, ensuring geographical diversity across Saudi Arabia.

A total of 300 participants were included in the study, consisting of 250 survey respondents and 50 expert interviewees.

# **Data Collection Methods**

#### 1. Quantitative Data Collection

- Survey Questionnaires: Structured surveys were distributed to healthcare professionals and the general public to assess knowledge, attitudes, and practices (KAP) regarding epidemic preparedness. The surveys were administered online through platforms such as Google Forms and Qualtrics.
- Epidemiological Data Analysis: Secondary data from the Saudi MOH, WHO, and Weqaya were analyzed to identify trends in epidemic response effectiveness, vaccine coverage, and disease incidence rates.
- 2. Qualitative Data Collection
- In-depth Interviews: Semi-structured interviews were conducted with health policymakers, epidemiologists, and emergency response officials to understand challenges and best practices in epidemic management.
- Document Analysis: National health security policies, pandemic response plans, and WHO reports were reviewed to evaluate alignment with global health security standards.

## **Data Analysis Methods**

#### 1. Quantitative Data Analysis

- Descriptive Statistics: Means, frequencies, and percentages were used to summarize survey responses.
- Inferential Statistics: Regression analysis and chi-square tests were conducted to identify correlations between preparedness levels and demographic factors.

- Trend Analysis: Historical epidemiological data were analyzed to assess the impact of Saudi Arabia's preparedness strategies over time.
- 2. Qualitative Data Analysis
- Thematic Analysis: Interview transcripts and policy documents were coded using NVivo software to identify recurring themes and insights.
- Comparative Analysis: Findings were compared with international best practices to assess gaps and areas for improvement.

# Results

This section presents the findings of the study on health security strategies in Saudi Arabia, focusing on preparedness and response to epidemics and biological threats. The results are based on quantitative survey responses from 250 participants and qualitative interviews with 50 experts in healthcare and public health policy. The data were analyzed to assess levels of awareness, preparedness, and challenges faced in managing epidemics. The results are displayed in frequency tables, followed by interpretative comments.

Awareness Level	Percentage (%)
High	40%
Moderate	45%
Low	15%

Table 1: Awareness of Epidemic Preparedness Strategies

The majority of participants (85%) reported at least **moderate awareness** of epidemic preparedness strategies, with **40% indicating high awareness**. However, **15% of respondents had low awareness**, highlighting a potential gap in public education and training programs on epidemic preparedness.

Half of the respondents (50%) were somewhat confident in the Saudi health system's ability to respond to epidemics, while 25% were very confident. However, another 25% were not confident, suggesting the need for further strengthening of public trust in epidemic response measures.

While 30% of respondents reported that medical resources were always available, 50% stated they were only sometimes available, and 20% indicated resource shortages. This suggests that while Saudi Arabia has a generally well-equipped health system, there are occasional challenges in resource allocation during health crises.

A significant proportion of respondents (80%) rated the Saudi government's response to previous epidemics as excellent or good. However, 20% viewed the response as poor, suggesting some dissatisfaction, possibly due to communication gaps or logistical challenges during past outbreaks.

Less than half (45%) of respondents had participated in epidemic preparedness training, while 55% had not. This indicates a need for greater outreach and accessibility of training programs, particularly for healthcare professionals and community members.

The most commonly cited challenge was insufficient public awareness (35%), followed by lack of medical resources (25%). Additionally, 40% of respondents identified poor coordination between health sectors and slow government response as barriers to effective epidemic management. These findings emphasize the importance of enhanced public education campaigns and inter-agency collaboration to strengthen preparedness efforts.

Nearly half (45%) of respondents suggested more public awareness campaigns as a key improvement area. 25% supported increased healthcare funding, while 20% emphasized faster government

response mechanisms. Strengthening medical supply chains was also recognized as a priority by 10% of participants.

# Discussion

Public health emergencies (PHEs) pose significant threats to global health security, affecting healthcare systems' capacity to provide essential services and respond effectively. The impact of PHEs varies based on the preparedness levels of different countries, as highlighted by Khatri et al. (2023). Many low- and middle-income countries exhibit inadequate preparedness, weak surveillance mechanisms, and fragmented response systems, leading to overburdened healthcare facilities and increased morbidity and mortality rates. A resilient health system requires proactive measures, including need-based health services, multisectoral coordination, and effective digital monitoring tools to mitigate the collateral impacts of PHEs.

The role of biosafety strategies in global health security is paramount, as demonstrated by Gao (2019). Biological threats, whether natural, accidental, or deliberate, necessitate comprehensive preparedness efforts, including biosafety laws, high-level laboratories, and systematic risk management frameworks. Countries such as China have implemented long-term biosafety measures to enhance their public health resilience. International collaborations and research funding further strengthen biosafety measures, ensuring swift identification and containment of health crises before they escalate into global disasters.

An essential aspect of global health security is the ability to predict, detect, and respond to emerging threats effectively. Qazi et al. (2024) emphasize that 'early detection and reporting' is the most critical indicator of health security, with an 87% probability improvement when properly implemented. Surveillance systems, laboratory supply chains, and transparent data-sharing mechanisms play a crucial role in preventing the escalation of infectious disease outbreaks. Additionally, strong prevention measures, robust healthcare sectors, and enhanced epidemiology workforce capabilities significantly contribute to a country's ability to mitigate health security risks.

Border health security is another vital component of emergency preparedness. Ground border crossings present unique challenges, requiring coordinated efforts to prevent cross-border disease transmission. Sami and Chun (2024) identified key components for improving emergency preparedness at borders, including infection prevention and control (IPC) measures, collaboration, research, capacity building, and effective communication. The interconnected nature of these components underscores the need for a holistic approach to health security management at international borders, ensuring seamless responses to health crises.

The role of the biomedical industry in public health emergency preparedness cannot be overlooked. According to Crooke (2024), emergent infectious diseases remain the most pressing threat to global health security, necessitating a proactive and industry-driven response. Pharmaceutical companies, research institutions, and public health agencies must collaborate to develop vaccines, therapeutics, and rapid diagnostic tools to combat emerging threats effectively. Strengthening supply chains and ensuring equitable distribution of medical resources are critical for building a resilient global health infrastructure.

Preparedness strategies must include risk assessment and early warning systems to enhance responsiveness to public health emergencies. Khatri et al. (2023) argue that better health system preparedness requires comprehensive risk assessment tools, digital alarm systems, and continuous monitoring of post-emergency outbreaks. These strategies help governments and public health organizations anticipate potential crises, allocate resources efficiently, and minimize disruptions to healthcare delivery.

Furthermore, effective response strategies require a systems-based approach integrating public health and primary care services. The findings by Khatri et al. (2023) suggest that coordinated multisectoral actions, involving both governmental and non-governmental stakeholders, improve health system resilience. Countries that incorporate digital health solutions, community engagement, and cross-sector partnerships into their emergency response frameworks are better equipped to address the long-term consequences of public health emergencies.

The importance of international cooperation and information sharing cannot be overstated. Gao (2019) highlights the need for global partnerships in biosafety and health security, advocating for transparent communication and resource-sharing among nations. The COVID-19 pandemic demonstrated how rapid and effective collaboration between countries can accelerate vaccine development, improve disease surveillance, and mitigate the socio-economic impacts of a global health crisis.

Health security preparedness also requires robust legislative and policy frameworks. Sami and Chun (2024) emphasize that clear guidelines, legal frameworks, and regulatory measures are crucial for maintaining public health safety at ground borders and beyond. Policymakers must prioritize investments in healthcare infrastructure, emergency preparedness training, and cross-border health initiatives to ensure sustainable health security outcomes.

In conclusion, strengthening global health security requires a multifaceted approach encompassing preparedness, response, and collaboration. Studies by Khatri et al. (2023), Gao (2019), Qazi et al. (2024), Sami and Chun (2024), and Crooke (2024) collectively highlight the importance of early detection, risk assessment, biosafety measures, border health security, and industry engagement in mitigating the effects of public health emergencies. Governments, healthcare systems, and international organizations must work together to develop resilient health security frameworks, ensuring rapid and effective responses to future crises.

#### Conclusion

Saudi Arabia has established a strong foundation for health security, but gaps remain in public awareness, resource allocation, and inter-sectoral coordination. Strengthening public education, ensuring consistent medical supplies, and enhancing collaboration between stakeholders are critical for future preparedness. The study highlights the need for continuous improvement and alignment with global health security standards to mitigate the impact of epidemics and biological threats effectively.

#### References

- Alyami, Abdullah & Dulong, Camille & Younis, Mustafa & Mansoor, Sara. (2020). Disaster Preparedness in the Kingdom of Saudi Arabia: Exploring and Evaluating the Policy, Legislative Organisational Arrangements Particularly During the Hajj Period. European Journal of Environment and Public Health. 5. em0053. 10.29333/ejeph/8424.
- Pennisi, F., Genovese, C., & Gianfredi, V. (2024). Lessons from the COVID-19 Pandemic: Promoting Vaccination and Public Health Resilience, a Narrative Review. Vaccines, 12(8), 891. https://doi.org/10.3390/vaccines12080891
- Shen, Y., Liu, Y., Krafft, T., & Wang, Q. (2025). Progress and challenges in infectious disease surveillance and early warning. Medicine Plus, 2(1), 100071. https://doi.org/10.1016/j.medp.2025.100071
- Mani, Z. A., & Goniewicz, K. (2023). Adapting Disaster Preparedness Strategies to Changing Climate Patterns in Saudi Arabia: A Rapid Review. Sustainability, 15(19), 14279. https://doi.org/10.3390/su151914279
- Deshore, Naomi & Johnson, J & Malone, P & Greenhill, Richard & Wuenstal, W. (2020). An evaluation of the global health security agenda steering group governance interventions. European Journal of Public Health. 30. 10.1093/eurpub/ckaa166.174.
- AL-Eitan, L., Sendyani, S., & Alnemri, M. (2023). Applications of the One Health concept: Current status in the Middle East. Journal of Biosafety and Biosecurity, 5(1), 21-31. https://doi.org/10.1016/j.jobb.2023.01.001
- Memish, Z. A., Zumla, A., Alhakeem, R. F., Assiri, A., Turkestani, A., Al Harby, K. D., Alyemni, M., Dhafar, K., Gautret, P., Barbeschi, M., McCloskey, B., Heymann, D., Al Rabeeah, A. A., & Al-Tawfiq, J. A. (2014). Hajj: infectious disease surveillance and control. Lancet (London, England), 383(9934), 2073–2082. https://doi.org/10.1016/S0140-6736(14)60381-0
- Green, E. D., Gunter, C., Biesecker, L. G., Di Francesco, V., Easter, C. L., Feingold, E. A., Felsenfeld, A. L., Kaufman, D. J., Ostrander, E. A., Pavan, W. J., Phillippy, A. M., Wise, A. L., Dayal, J. G., Kish, B. J., Mandich, A., Wellington, C. R., Wetterstrand, K. A., Bates, S. A., Leja, D., Vasquez, S., ... Manolio, T. A. (2020). Strategic vision for improving human health at The Forefront of Genomics. Nature, 586(7831), 683–692. https://doi.org/10.1038/s41586-020-2817-4
- Khatri, R.B., Endalamaw, A., Erku, D. et al. Preparedness, impacts, and responses of public health emergencies towards health security: qualitative synthesis of evidence. Arch Public Health 81, 208 (2023). https://doi.org/10.1186/s13690-023-01223-y
- Gao, G. F. (2019). For a better world: Biosafety strategies to protect global health. Biosafety and Health, 1(1), 1-3. https://doi.org/10.1016/j.bsheal.2019.03.001
- Qazi, A., Simsekler, M. C. E., & Al-Mhdawi, M. (2024). From prevention to response: A holistic exploration of factors shaping Global Health Security. Progress in Disaster Science, 23, 100344. https://doi.org/10.1016/j.pdisas.2024.100344

- Sami, D. G., & Chun, S. (2024). Strengthening Health Security at Ground Border Crossings: Key Components for Improved Preparedness and Response—A Scoping Review. Healthcare, 12(19), 1968. Emergency https://doi.org/10.3390/healthcare12191968 Crooke S. T. (2015). Health security preparedness and industry trends. Health security, 13(2), 74–81.
- https://doi.org/10.1089/hs.2015.0002