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Editorial

Tim Eckmanns, Robert Koch Institute, Germany

In the last years, more and more projects in Europe dealt with travel and infectious disease transmission. It started with the RAGIDA Project 2008. In RAGIDA 1, a systematic review of infectious disease transmission in aircraft was conducted, and in RAGIDA 2, algorithms for pathogen specific management of infectious disease in airlines were developed (e.g. Leitmeyer, Eurosurveillance, 2011). From 2010 to 2012, the REACT Project followed. In this project, one part was infectious disease transmission in ground transport (Mohr et al., BMJ, in press). Since 2007, SHIPSAN works in the field of infectious disease on ships.

AIRSAN should not be another player in this field, but we want to coordinate the involved players and to prevent overreaction in public health events in air transport. The number of events increases as traffic increases. Reaction is dependent on political interest, public fear and infectious disease responsibility. Responses are very different in different regions; even in one country like the Federal Republic of Germany the reactions in an event like a pandemic are different in different Federal States. We try to develop a platform for the exchange of information and material, a network of players, good teaching material and comprehensive access to newly developed and already existing materials.

News from the AIRSAN Coordination

Andreas Gilsdorf, Robert Koch Institute, Germany

“Knowing is not enough, we must apply. Willing is not enough, we must do.” (Citation Johann Wolfgang von Goethe)

Dissemination of the objectives, progress and results of a project is essential for take-up, and take-up is crucial for the success of the project and for the sustainability of its outputs in the long term.

This AIRSAN Newsletter shall present the progress of the AIRSAN Project and support the process of making the results of the AIRSAN Project available to stakeholders and the wider audience.

We know that it is a challenge to report regularly in such a format. We aim to distribute an AIRSAN Newsletter every three months. We plan to report about recent developments and the next steps in the AIRSAN Project, to introduce you to teams and individual persons supporting the AIRSAN Project and to provide further interesting information, like recent publications or reports from events in the working environment of the project.

Please, do not hesitate to contact us, if you have further suggestions and expectations to the AIRSAN Project and the AIRSAN Team.

The AIRSAN Project

General project information

The AIRSAN Project has been funded by the Health Programme of the EU (Agreement Number 2012 11 02) for a period of two years (April 2013 to March 2015).

Background

The rapid increase of air transport results in a growing risk of serious cross-border public health threats in the EU. "Serious cross-border threat to health" means a hazard of biological, chemical, environmental or unknown origin which is likely to spread across national borders of Member States and which may cause a potential severe risk to public health necessitating a coordinated action at EU level.

Thus, there is an urgent need to facilitate a coordinated response to possible public health threats in air transport among EU Member States.

Objective

The objective of the AIRSAN Project is to support EU Member States to ensure a well-organized and coherent response to public health threats in air transport.

Target groups

The AIRSAN Project involves companies, such as airports and airlines, and authorities, such as public health authorities at local and national level as well as civil aviation authorities.

Expected benefits

Benefit 1: AIRSAN Network

The AIRSAN Network will bring together national public health and civil aviation authorities, local public health authorities, airport management and airlines across EU Member States. This AIRSAN Network shall facilitate greater mutual understanding of the requirements, practicalities and impact of proposed measures in the management of public health threats in air transport.

Benefit 2: AIRSAN Guidance Documents

The AIRSAN Guidance Documents will focus on managing public health threats in air transport, for example the communication with other stakeholders or the response coordination to public health threats. They will be developed following a review of existing guidance documents, e.g. in the area of the International Health Regulation 2005. The AIRSAN Guidance Documents will be tested within the AIRSAN Network.

Benefit 3: AIRSAN Website and AIRSAN Communication Platform

The AIRSAN Website and the AIRSAN Communication

Platform will serve for dissemination of information among a wider audience and for information exchange among AIRSAN Network Members.

Benefit 4: AIRSAN Training Tool

The AIRSAN Training Tool will support authorities and companies with the implementation of the AIRSAN Guidance Documents.

Core work packages

Work package 4:

Work package 4 consists of actions undertaken to create an AIRSAN Network and to provide a tested set of new/revised AIRSAN Guidance Documents for the response to public health threats in air transport. The objectives of work package 4 are

- to develop an AIRSAN Network,
- to perform a survey amongst AIRSAN Network members in order to gather information on existing guidance documents and regulations,
- to review existing international guidance documents and regulations,
- to develop and field test a set of new AIRSAN Guidance Documents,
- to perform a gap analysis of the field tested AIRSAN Guidance Documents in context of the core capacity list of the International Health Regulations 2005 and to determine the impact of the AIRSAN Guidance Documents on additional requirements for airport infrastructure.

Work package 5:

Work package 5 consists of actions undertaken to make the AIRSAN Project known to the public and to create an AIRSAN Communication Platform specifically for the AIRSAN Network members to exchange relevant information on public health threats in the aviation sector. The objective of work package 5 is

- to develop an AIRSAN Website linked to an AIRSAN Communication Platform.

Work package 6:

Work package 6 consists of actions undertaken to support the EU Member States applying the new AIRSAN Guidance Documents. The objective of work package 6 is:

- to develop an AIRSAN Training Tool to support countries in the implementation of the International Health Regulations 2005 and the new AIRSAN Guidance Documents.

AIRSAN Partners

The AIRSAN Project has a well-defined coordination structure that includes the project management and overall coordination of the project as well as the scientific coordination, project partners and external representation.

AIRSAN Associated Partners

The Associated Partners constitute the main working group of the AIRSAN Project.

- Department for Infectious Disease Epidemiology, Robert Koch Institute (RKI), Germany; leader of work packages 1, 2, 3, 4
- Department of Hygiene and Epidemiology, University of Thessaly (UTH-EL), Greece; leader of work package 5
- Preparedness and Response Unit, National Institute for Public Health and the Environment (RIVM), Netherlands; leader of work package 6
- Department of Epidemiology, National Institute of Public Health, National Institute of Hygiene (NIPH-NIH), Poland
- Port Health Authority, Federal Public Service Public Health, Food Chain Safety and Environment (FPS PHFCSE), Belgium
- KLM, Royal Dutch Airlines, Netherlands
- Medical Services, FRAPORT AG, Germany
- Subcontractor: International Civil Aviation Organization (ICAO)

The first three mentioned institutions also act as work package leaders and are responsible for the progress of the project and the final reporting of project results.

AIRSAN Collaborating Partners

The Collaborating Partners are invited to provide technical support to the AIRSAN Project. For example, the involvement of a number of airlines and airports from different EU Member States should enable a real-life testing of the AIRSAN Project outcomes.

- Swiss Federal Department of Home Affairs DHA, Swiss Federal Office of Public Health, Switzerland
- Deutsche Lufthansa AG, Medical Services, Germany
- Air France, Medical Services, France
- Atatürk Airport Health Control Center, Turkey
- Public Health Services of the Israel Ministry of Health, Israel
- Varna and Burgas Airport Medical Service, Bulgaria
- EUROCONTROL, Belgium
- Airport Health Control Office, Environmental Health Directorate, Malta

AIRSAN Scientific Advisory Board

In order to properly coordinate and steer the project's progress, a Scientific Advisory Board has been established consisting of representatives of international organizations for scientific advice including an advice on non-biological threats. It will also guarantee the systematic networking between all involved partners and thereby avoid overlap.

- World Health Organization (WHO)
- European Centre for Disease Prevention and Control (ECDC)
- International Air Transport Association (IATA)
- German Federal Ministry of Transport, Building and Urban Development (BMVBS)
- Office for Nuclear Regulation, an agency of the Health and Safety Executive (HSE)
- European Commission, DG MOVE
- European Aviation Safety Agency (EASA)

AIRSAN Executive Agency

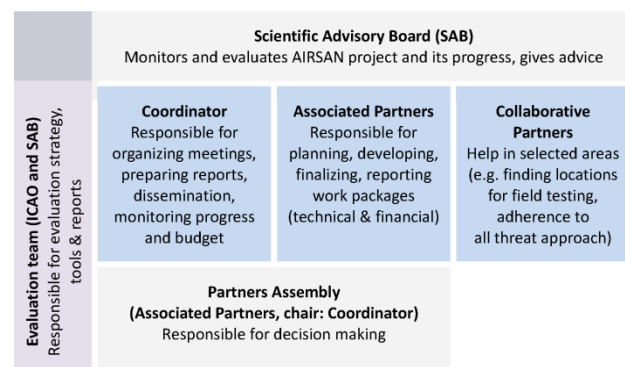
The Executive Agency provides financial resources and organizational support for the AIRSAN Project and monitors its progress.

- Executive Agency for Health and Consumers (EAHC)

Coordinating institute

The Coordinator of the project will be primarily responsible to ensure that all actions necessary to achieve the project deliverables are undertaken and that the deliverables are achieved in full and on time. His involvement in the project work will include organizing meetings, preparing reports, monitoring progress, support of the evaluation etc.

- Department for Infectious Disease Epidemiology, Robert Koch-Institute (RKI), Germany



AIRSAN Partnership structure

Recent meetings

1st AIRSAN Associated Partners Meeting on 15 April 2013 in Berlin

The first AIRSAN Associated Partners' Meeting was held on 15 April 2013 in Berlin, Germany.

This meeting was the first opportunity to meet all Associated Partners in person. The time table of the AIRSAN Project and the outline of the work packages were discussed. Furthermore, administrative issues of the AIRSAN Project were labeled and the Kick off Meeting to be held on 18 June 2013 in Bern was planned.

AIRSAN Kick off Meeting on 18 June 2013 in Bern

The AIRSAN Kick off Meeting was held on 18 June 2013 in Bern, Switzerland, in a back to back fashion with the CAPSCA 4th Global Coordination and 3rd Europe Meeting.

The AIRSAN Project was introduced to the CAPSCA participants. Furthermore, critical questions on all work packages were discussed with the Associated Partners, the Collaborating Partners, the Scientific Advice Board and interested participants of the CAPSCA Meeting.

2nd AIRSAN Associated Partners Meeting on 19 June 2013 in Bern

The second AIRSAN Associated Partners' Meeting was held on 19 June 2013 in Bern, Switzerland, in a back to back fashion with the CAPSCA 4th Global Coordination and 3rd Europe Meeting.

The outcomes of the Kick off Meeting one day earlier were discussed and next steps and actions points decided. Furthermore, points for discussion with representatives from the EU on 8 July 2013 in Luxembourg were discussed.

Meeting with representatives from the EU on 8 July 2013 in Luxembourg

Work package leaders of the AIRSAN Project met with EU representatives on 8 July 2013 in Luxembourg.

The outcomes of the Kick off Meeting and of the second Associated Partners' Meeting on 18 and 19 June 2013 in Bern as well as conceivable changes with respect to the grant agreement derived from the meetings in Bern were discussed. Further, the embedding of the AIRSAN Project in other initiatives of the EU was discussed. Furthermore, work package leaders had the chance to formulate their expectations to the representatives from the EU and which types of further support would be desirable.

Recent developments

Finalization of annual work plan, dissemination plan and evaluation strategy (work packages 1, 2, 3)

The annual work plan, the dissemination plan and the evaluation strategy were developed in June 2013 and finalized in July 2013 following the AIRSAN Kick off Meeting and the 2nd AIRSAN Associated Partners Meeting in Bern.

These documents now serve as the major working tools for the AIRSAN Project and enable all AIRSAN Partners, particularly the Coordinator, to monitor the progress of the work in the work packages.

Development of a pilot AIRSAN Website (work package 5)

In June 2013, the pilot version of the AIRSAN Website was implemented. The web-domain www.airsan.eu could be reserved for the AIRSAN Project.

All AIRSAN Partners are invited to provide input for this AIRSAN Website to fill it with interesting and helpful content to enable a strong support for the whole AIRSAN Project.

Meanwhile, the "AIRSAN Website working group" consisting of 9 AIRSAN Partners has been established. This working group will proof documents to be uploaded to the AIRSAN Website, decide about the design and layout and test of the usability of the AIRSAN Website and the AIRSAN Communication Platform.

Survey questionnaire on guidance documents developed and distributed (work package 4)

One aim of the AIRSAN Project is to provide a tested set of AIRSAN Guidance Documents for the response to public health threats in air transport. Therefore, we are conducting a survey among AIRSAN Partners in order to identify

- already existing guidance documents, regulations and other documents,
- documents still missing, and
- documents still needing revision.

In September 2013, the questionnaire for this survey had been approved by the AIRSAN Associated Partners. Afterwards, it was distributed among all AIRSAN Partners. Completed questionnaires will be entered into a database for further analysis.

Based on this survey, in a next step, documents identified as missing or still needing revision should be prioritized and documents prioritized with the highest values should be developed/ revised.

Next steps

Review of existing guidance documents

The review will start with already existing guidance documents made available by ICAO (CAPSCA) and WHO. First, these documents will be systematized for their correspondence to the core capacity list of the International Health Regulations 2005.

Later, a gap analysis of the field tested AIRSAN Guidance Documents in context of the core capacity list of the International Health Regulations 2005 will be performed to determine the impact of the AIRSAN Guidance Documents on additional requirements for airport infrastructure.

People from the AIRSAN Project

We will use this and the upcoming issues of the AIRSAN Newsletters to introduce you to the main teams of the Associated Partners and also to some individual persons who support the AIRSAN Project.

AIRSAN Team at the Department for Infectious Disease Epidemiology, Robert Koch Institute (RKI), Germany

The Robert Koch Institute (RKI) is Germany's national Public Health Institute. It is the central institution of the Federal Government in the field of surveillance, control and prevention of diseases.

The Department for Infectious Disease Epidemiology is concerned with the collection and analysis of data communicated to the RKI as a result of the Protection against Infection Act (Infektionsschutzgesetz, IfSG) as well as their epidemiological interpretation. The Department further conducts research in infectious disease epidemiology as well as sentinel surveillance projects and supports the federal states in outbreak investigations.

The Surveillance Unit is primarily responsible for the implementation of the notification system within the framework of the Protection against Infection Act (IfSG). It also coordinates the new and further development of surveillance methods and instruments and is responsible for the organisation of the RKI Situation Centre. The unit is the contact for the Public Health Service at the municipal and state level in Germany and for the international health authorities of the EU and the WHO and exchanges information with international collaborators, e.g. ECDC, EU Member States' public health institutes or CDC.

Andreas Gilsdorf studied medicine and obtained a doctorate ("Dr. med."). He completed the postgraduate training for applied epidemiology at the RKI. Since 2008 he worked as a scientific coordinator for international

cooperation in the Department for Infectious Disease Epidemiology at RKI. Since 2012 he is head of the Surveillance Unit.

Tim Eckmanns studied medicine and obtained a doctorate ("Dr. med."). He completed a study in medical computer science and obtained a Diploma in Tropical Medicine and Public Health and a Master of Science in Epidemiology. Since 2006 he works as an epidemiologist at the RKI and was head of the Surveillance Unit from 2006-2012. Then he took over the head of the Unit "Healthcare-associated Infections, Surveillance of Antimicrobial Resistance and Consumption".

Yanina Lenz studied medicine and obtained a doctorate ("PhD"). She obtained MSc in Control of Infectious Diseases and Diploma in Tropical Medicine and Hygiene. Since 2010 she works as an epidemiologist at the RKI.

Maria an der Heiden studied veterinary medicine and obtained a doctorate ("Dr. med. vet."). She completed the postgraduate training for applied epidemiology. Since 2007 she works as an epidemiologist at the RKI.

Benedikt Greutelaers studied medicine and International Health. He completed the postgraduate training for applied epidemiology at the RKI and the Master of Science Programme in Applied Epidemiology. Since 2009 he works as an epidemiologist at the RKI.

Astrid Milde-Busch studied psychology and obtained a doctorate ("Dr. rer. nat."). She completed a postgraduate study in public health and epidemiology. Since 2010 she works as an epidemiologist at the RKI.

Justus Benzler studied medicine and obtained a doctorate ("Dr. med."). He completed a training in tropical diseases and in medical informatics. From 2002-2006 and again since 2010 he works as an epidemiologist at the RKI.

Juliane Seidel accomplished a professional training as a nurse and studied Regional Studies Asia-Africa (B.A.). She completed a postgraduate Master Programme in Public Health and works as a research associate at the RKI since October 2013.

Birgit Arnold studied landscape architecture and business science. Since 2006 she works as an administrative officer at RKI and is responsible for the financial and administrative project management of international third party funded projects at the RKI.



AIRSAN Team at RKI (left to right): Andreas Gilsdorf, Benedikt Greutelaers, Juliane Seidel, Tim Eckmanns, Maria an der Heiden, Astrid Milde-Busch (Yanina Lenz, Justus Benzler and Birgit Arnold are not on the picture)

Anthony Evans, ICAO

- Could you, please, shortly describe your professional background?



After leaving school I completed pilot training at the British Airways College of Air Training, Hamble, England, obtaining a commercial pilot license in 1975. However, owing to a major economic recession at the time I was not employed by BA upon graduation. This resulted in a change of career direction and I obtained degrees in Sports Science (Liverpool Polytechnic) and Human and Applied Physiology (King's College, London) before studying Medicine at Glasgow University, Scotland. After hospital and general practice training jobs I joined the UK Civil Aviation Authority (CAA) in 1987 as medical officer, eventually becoming its Chief Medical Officer. During my time with the UK CAA I obtained a Diploma in Aviation Medicine and became qualified as a consultant in Occupational Medicine. As part of my job with the CAA, I flew part-time as a pilot for a number of airlines on a variety of aircraft types, including the Boeing 757 and 767. In 2005 I joined the International Civil Aviation Organization (ICAO) a United Nations Specialized Agency (like WHO) as Chief of the Aviation Medicine Section, and in 2008 was awarded an honorary doctor of science degree by City University, London, for services to aviation safety and optometry.

- How did you start to work in the area of public health and/or the aviation sector?

In 2005, when I joined ICAO, there was much concern about “avian flu” (Influenza A, H5N1) and its potential impact on aviation. I attended a WHO meeting on the subject in Geneva when preparedness planning was discussed, but it didn't mention aviation to any significant degree. At the same time ICAO was being asked questions by stakeholders in the aviation sector as to how they should prepare for a pandemic. At that time we didn't have many answers. ICAO had some money left over from work done during SARS, and I used this to set up meetings with representatives from both public health and aviation sectors at which guidelines for States and airport operators were developed. The International Air Transport Association (IATA) already had guidelines for aircraft operators and these required only minor modification. WHO, CDC and IATA as well as Airports Council International supported the work at these meetings, which were hosted by Singapore. They were followed up with teleconference calls to finalize the guidelines. During this time I learned a great deal about public health issues, as applied to aviation. Later on, ICAO Standards (that States are obliged to implement) were amended to include the subject of public health preparedness planning.

- Which were your most important experiences in the field of public health and/or the aviation sector?

The traditional field of regulatory civil aviation medicine is quite narrow, concerned primarily with medical fitness standards for pilots, air traffic controllers and other license holders. Working with public health professionals I quickly learned that public health preparedness planning in aviation is a multi-sector, multi-stakeholder concern i.e. very different from my previous work. Cross boundary communication and collaboration is a great challenge but is also essential for the development of effective preparedness plans and response. An observation I made from Assistance Visits to individual States/airports is that effective preparedness planning requires the “buy-in” of high level management, otherwise the necessary inter-sectoral communication and collaboration is not likely to be forthcoming. In many States, such high level support is not fully established.

- Why did you join the AIRSAN Network?

AIRSAN provides a platform for multi-sector, multi-stakeholder involvement in preparedness planning, which I strongly support.

- What motivates you to contribute to the AIRSAN Project?

The goals of AIRSAN are similar to those of the ICAO Collaborative Arrangement for the Prevention and Management of Public Health Events in Civil Aviation (CAPSCA, www.CAPSCA.org) and I believe that we can work synergistically to improve preparedness plans in the aviation sector.

- Which three benefits to you expect from the AIRSAN Project?

1. Development of multi-sector, multi-stakeholder network in Europe
2. Establishment of a variety of different partnerships in Europe, which are necessary to develop effective preparedness plans
3. Improvement of preparedness plans in Europe, that should also be of value in developing preparedness planning in other ICAO regions. This will promote global harmonization.

- Do you have some personal remarks?

I have high hopes that AIRSAN will make a significant contribution to public health event preparedness planning and response in the aviation sector. The AIRSAN team has assembled an excellent group of participants that together bring a high level of experience and expertise to bear on the subject. I am looking forward to the work, and to the outcome!

Airports at a glance

Frankfurt Airport, Germany (by Robert Payne)

Statistics (2012)

- IATA code: FRA
- Passengers: 57.5 Mio.
- Cargo: 2.1 Mio. tons
- Aircraft movements: 482,000
- Employees: 78,000
- Hub for: Lufthansa, Condor, Aerologic, Jet Executive



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About the airport

Frankfurt Airport (FRA) serves as one of the most important aviation gateways in the global air transportation system. Ranking among the Top 20 airports worldwide, FRA welcomed more than 57 million passengers, handled over 2.1 million metric tons of cargo, and registered about 482,000 takeoffs and landings in 2012. “Location, location, location” is a key FRA advantage for both business as well as leisure traffic. Frankfurt lies at the center of Germany’s population and industrial belt as well as in the heart of the huge Western and Eastern European market. Some 38 million people or nearly half of the German population can be reached within a 200 kilometer radius of FRA, Europe’s largest airport catchment area.

Not surprisingly, Frankfurt Airport is known for its Germanic efficiency, fast flight connections, and many services – about 55 percent of all passengers use Germany’s intercontinental gateway as a transfer hub. At FRA, they can find a wide choice of airlines and flights for transferring quickly to their final destination. The airline timetable offered at FRA is virtually unmatched. In passenger services alone, more than 100 scheduled passenger airlines link FRA with approximately 300 destinations in about 100 countries – a truly global network. Approximately two-thirds of Germany’s intercontinental passenger and cargo air traffic is via

Frankfurt Airport. FRA serves as the home base of the global Lufthansa, Lufthansa Cargo, and Condor fleets. Furthermore, FRA is the main European hub of the Star Alliance but is also a favorite gateway for other airline alliances. Airlines and their passengers depend on FRA’s central baggage handling system, with its more than 85 kilometers of guide ways for whisking baggage to and from flights – a high-performance system vital for transfer baggage.



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On the ground, Frankfurt Airport also has an equally impressive network of road and rail connections. The Frankfurter Kreuz autobahn intersection is the most important in Germany and is located at the airport’s northeastern corner just a few hundred meters away from the passenger terminals. This allows quick access to the high-speed A3 and A5 autobahns that function as a vital north-south and east-west highway axis for all of Germany. Boasting two railway stations and the world’s best air/rail links, FRA has been a pioneer air/rail services since 1972. The Long-distance Train Station offers more than 180 Intercity-Express (ICE) high-speed and other Intercity (IC) train services every day: to cities throughout Germany and to Amsterdam, Brussels and other cities in neighboring countries. At the Regional Train Station beneath Terminal 1, commuter trains reach the Frankfurt Central Station in 10 minutes and link other towns and cities in the Frankfurt/Rhine-Main Region, and farther away like Koblenz and Saarbrücken.



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Fraport AG, the company that owns and manages Frankfurt Airport, draws on more than 75 years at the FRA location to make service hub function like a finely tuned precision timepiece – to meet the diverse needs of customers from around the globe. A city unto itself, FRA employs over 78,000 at more than 500 companies and organizations. Thus, Frankfurt Airport has earned the title as Germany’s largest employment complex at a single location. Fraport is spearheading the development of capacity expansion of the airport as well as the “airport city”. Along with the new Runway Northwest (2011), Pier A-Plus (2012) and the future Terminal 3 project (construction scheduled to start in 2015), other exciting new real estate developments are changing the landscape and dynamics of the FRA aviation hub. For example, The Squire office and hotel complex encases the rooftop of the Long-distance Train Station like a futuristic glass space ship: This award-winning structure houses major international tenants, two Hilton Hotels, and various amenities. In the passenger terminals, more than 300 shops, cafes, restaurants and service outlets await the traveler with an amazing choice of famous German, European and international brands and culinary delights. At the Gateway Gardens business park near Terminal 2 new hotels, state-of-art headquarters office buildings and other facilities are becoming part of a new city district. Here, the House of Logistics and Mobility (HOLM) will soon be opening the world’s first airport university

campus, in partnership with four major universities, Fraport, and other organizations. HOLM will be a center of higher learning, innovation and research required for our 21st century global society that depends so much on mobility.



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