

Disclaimer

The E2E risk assessment tool (the “E2E Tool”) is developed by Airbus, using public health data and information publicly available at a given time as well as on various parameters, variables and calculation methods based on specific assumptions.

References, sources and detailed methodology used by Airbus to develop the E2E Tool are listed and explained in the document entitled “Hidden infectious and transmission during the travel Probability model detailed description” ref PR2100534 issue 2.

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Airbus Keep Trust in Air Travel



End-to-End Health Risk Assessment

A data driven approach to global air travel restart

Elisabeth Masset, Air Travel Health Assessment Leader | 2 June 2021

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Why a Health Risk Assessment Model?



Air transport related health risks can be addressed in a similar way as aircraft safety.



The probable risk at each step of the air travel, from entering the departure airport up to leaving the arrival airport can be quantified.



Risk can be reduced by layering and overlapping several preventive & protective measures.



Data-substantiated decision-making to achieve appropriate risk levels when reopening global air travel is realistic.



Supporting government stakeholders and regulatory bodies.

What are the risks of infection?

touching a contaminated surface



OR

inhaling virus droplets emitted by (an) other person(s)



Departure country

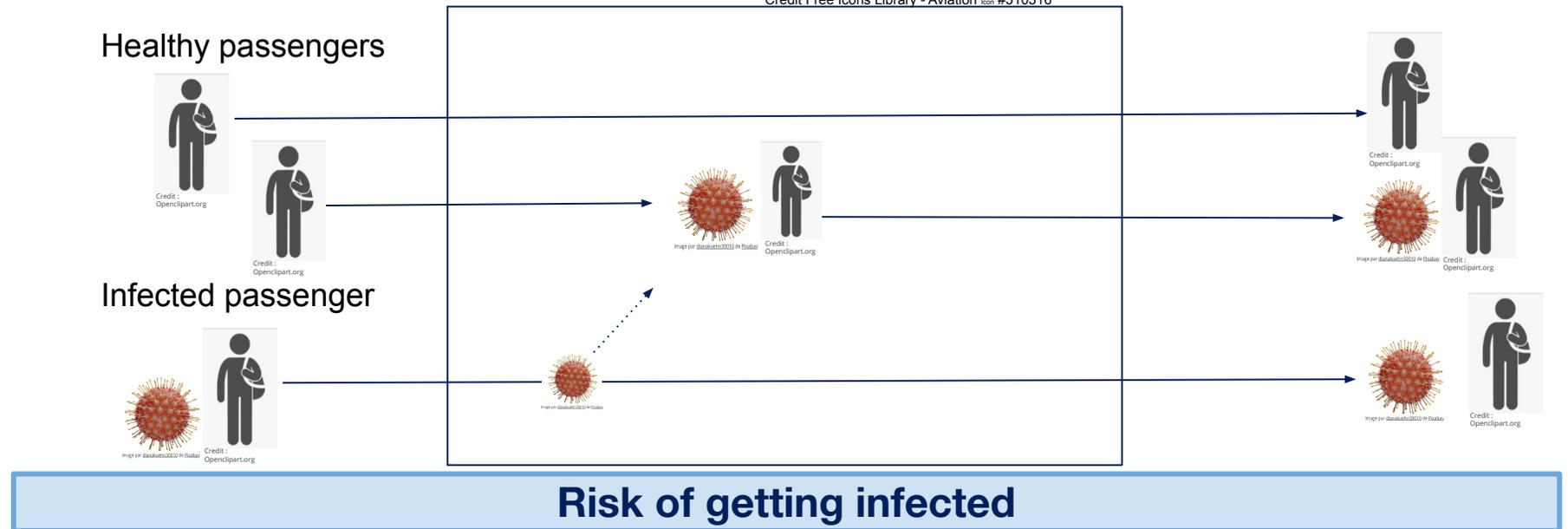
Destination country

Credit Free Icons Library - Aviation icon #310316

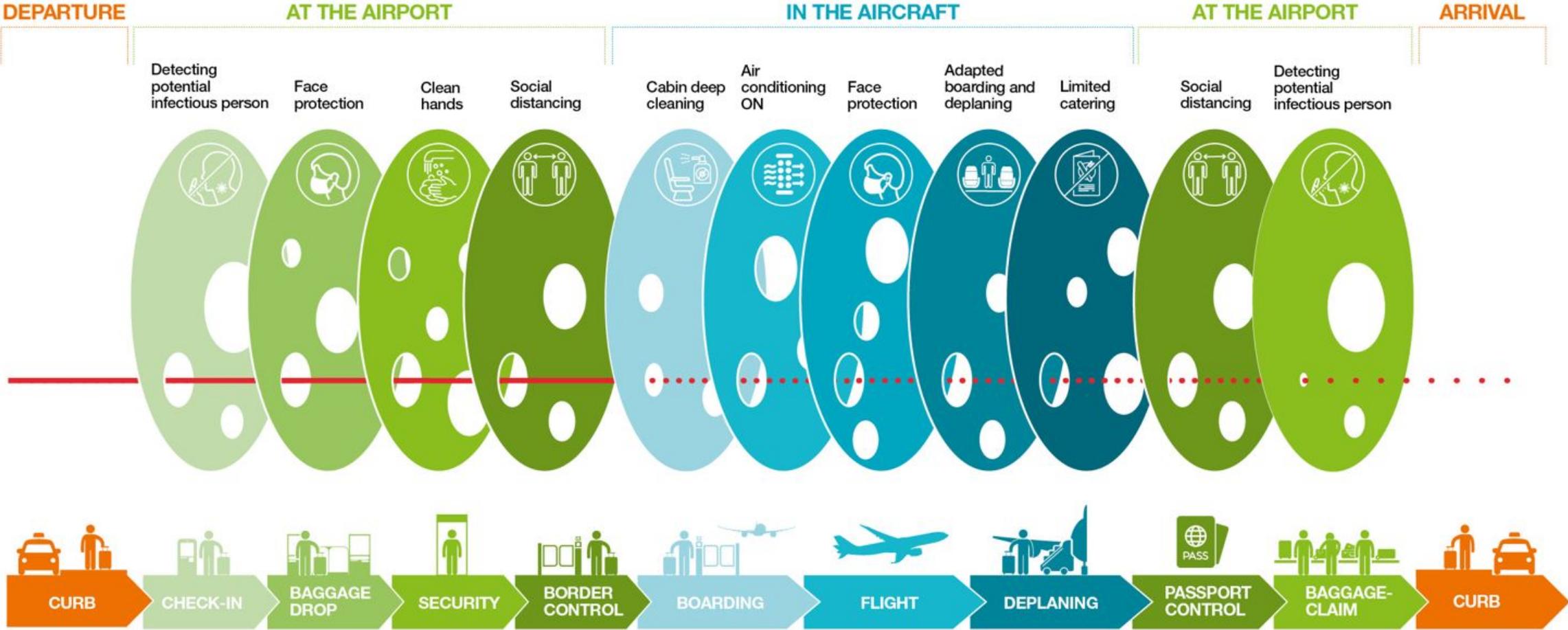
Threat:

Passengers may be infectious *before travel*

Some passengers might infect other passengers *during travel*



Air travel: A layered approach of preventative measures



Source: Mackay, Ian M. (2020) The Swiss Cheese Respiratory Virus Defence. figshare. Figure. <https://doi.org/10.6084/m9.figshare.13082618.v22>

Demonstration: End-to-End Health Risk Assessment Model

Screening strategy comparison: Europe to Iceland

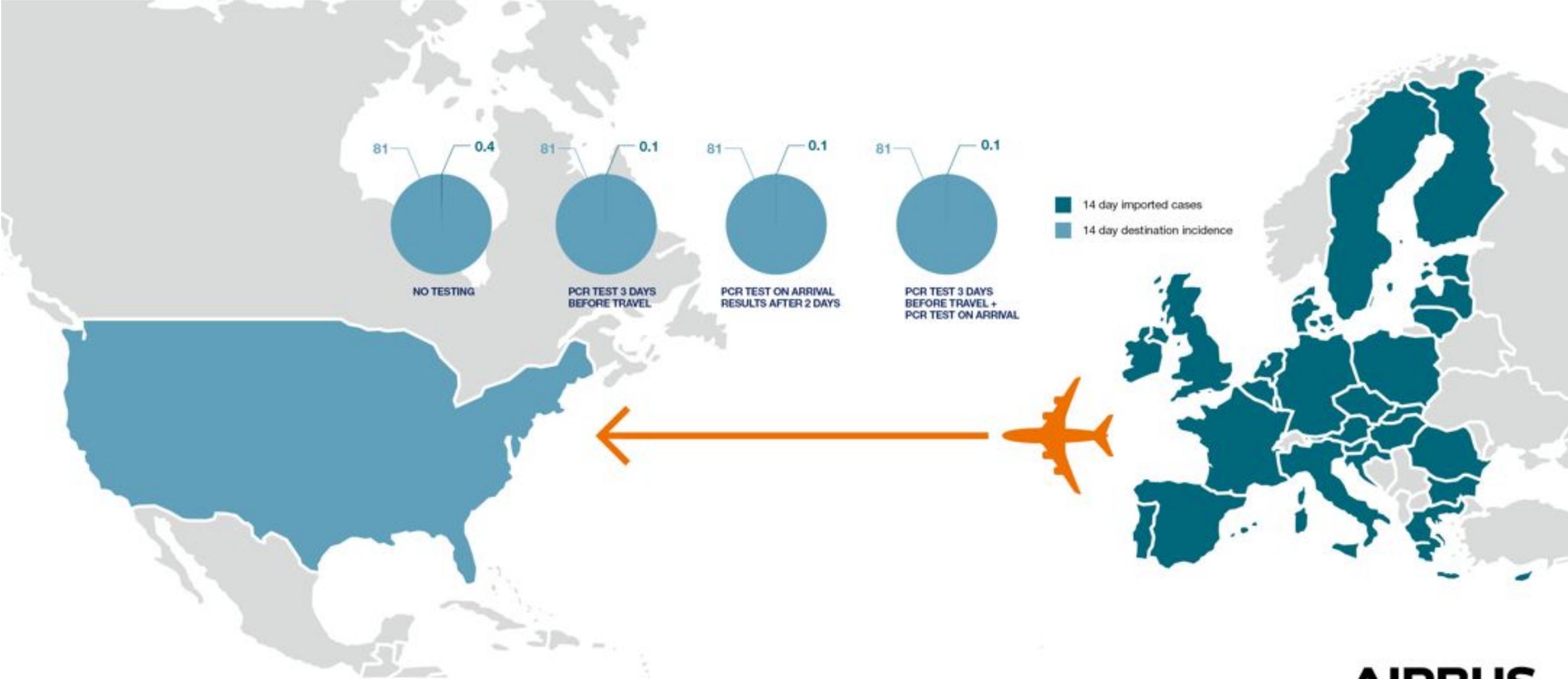


Data as of 01 June 2021

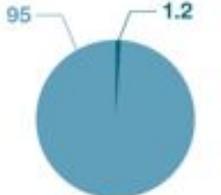
Screening strategy comparison: Europe to Singapore



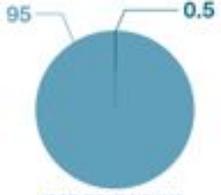
Screening strategy comparison: Europe to US



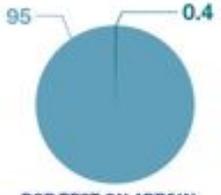
Screening strategy comparison: LATAM to Canada



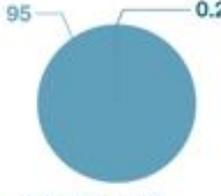
NO TESTING



PCR TEST 3 DAYS BEFORE TRAVEL



PCR TEST ON ARRIVAL RESULTS AFTER 2 DAYS



PCR TEST 3 DAYS BEFORE TRAVEL + PCR TEST ON ARRIVAL

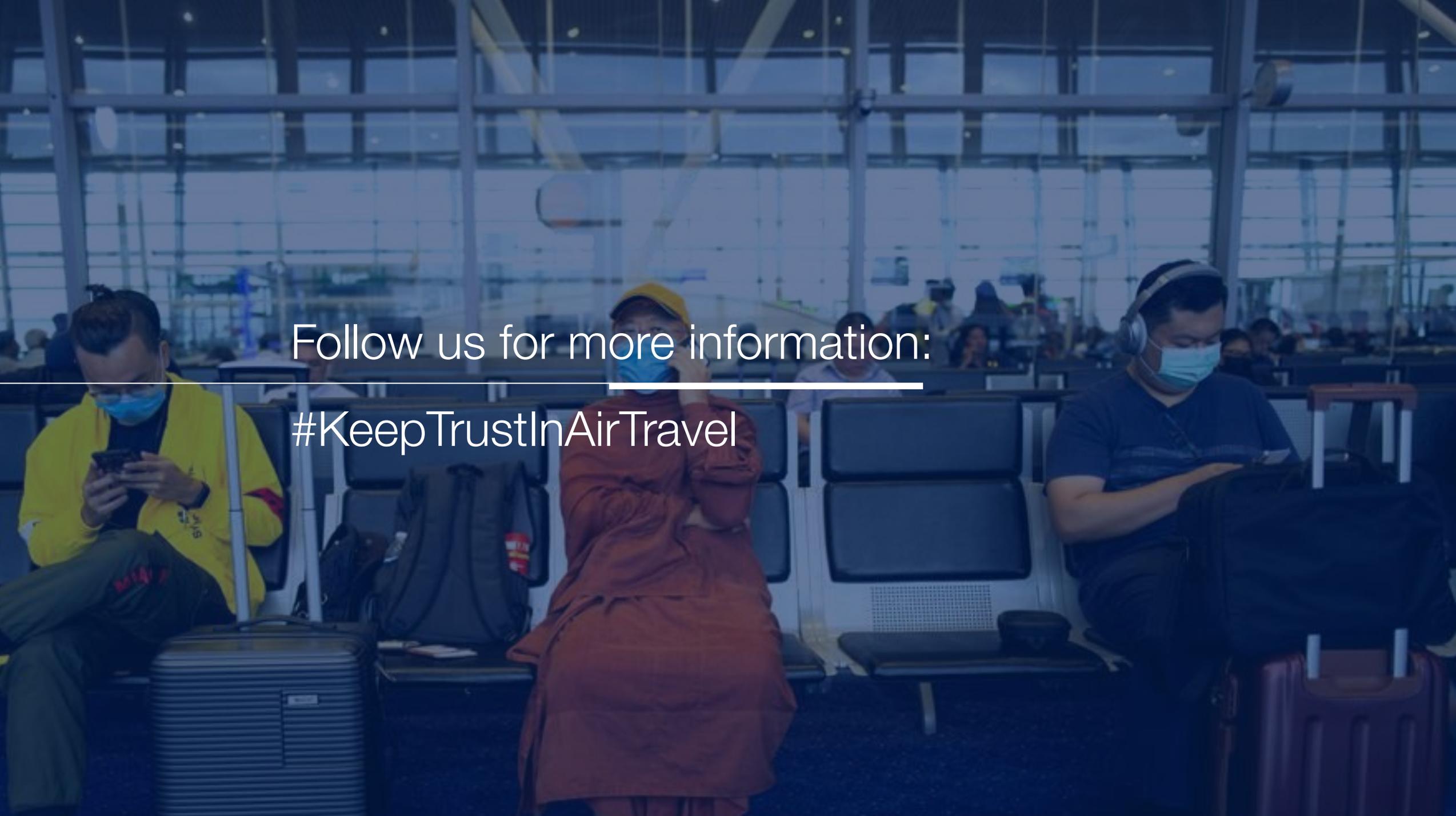
- 14 day imported cases
- 14 day destination incidence



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Key takeaways

- 1 Travelling by air remains very safe
- 2 Risk can be mitigated to an acceptable level by choosing the right screening strategy
- 3 Aviation today is capable of restricting virus translocation in collaboration with all aviation stakeholders

A photograph of an airport terminal with a blue tint. In the foreground, three people are seated on a bench. The person on the left is wearing a bright yellow jacket and a blue face mask, looking at a smartphone. The person in the middle is wearing a red long-sleeved shirt, a yellow cap, and a blue face mask, talking on a mobile phone. The person on the right is wearing a dark blue t-shirt, a blue face mask, and large headphones, looking at a device. A black backpack is on the bench between the first and second people. A silver suitcase is in front of the first person, and a brown suitcase is in front of the third person. The background shows a large window with a view of an airplane on the tarmac and other passengers in the distance.

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