SDG Goal 3	**Good health and well-being**
SDG Target 3.b	**Support the research and development of vaccines and medicines for the communicable and non-communicable diseases that primarily affect developing countries, provide access to affordable essential medicines and vaccines, in accordance with the Doha Declaration on the TRIPS Agreement and Public Health, which affirms the right of developing countries to use to the full the provisions in the Agreement on Trade-Related Aspects of Intellectual Property Rights regarding flexibilities to protect public health, and, in particular, provide access to medicines for all**
SDG Indicator 3.b.1	**Proportion of the target population covered by all vaccines included in their national programme**
Time series	**DTP vaccination coverage at school entry**

1. General information on the time series

- Date of national metadata: 23 May 2023
- National data: http://sdg-indicators.de/3-b-1/
- Definition: The time series measures the diphtheria, tetanus, pertussis (DTP) vaccination coverage at school entry.
- Disaggregation: Not available.

2. Comparability with the global metadata

- Date of global metadata: March 2023
- Global metadata: https://unstats.un.org/sdgs/metadata/files/Metadata-03-0b-01.pdf
- The time series is compliant with the global metadata.

3. Data description

- The vaccination data of children is documented during the school entry health examinations according to the German Protection against Infection Act (§ 34 (11) IfSG) by the public health offices or authorised private doctors. According to IfSG the aggregated and anonymised data has to be reported to Robert Koch Institute (RKI) since 2001. The final data is centrally recorded and evaluated by the RKI. Because the survey in the federal Länder takes place with different methods, the RKI and the Länder have developed a common data collection sheet.
  The coverage of DTP are separately collected in school entrance examinations. Generally, these three estimates vary slightly. The DTP coverage estimate is the arithmetic mean of the percentage values of the three diphtheria, tetanus, and pertussis coverage estimates. Each coverage estimate is calculated as the share of children with documented complete vaccination in relation to all children presenting their vaccination card at the school entry health examination (92-93% of all checked children). The age at school entry and time of school entry examination vary in the 16 federal Länder. Four vaccinations are defined as completed primary immunisation.

4. Access to data source

- Vaccination coverage of children presenting their vaccination card at school entry health examinations – GBE:
  http://www.gbe-bund.de/gbe10/I?I=831:27110398E
- Epidemiological Bulletin 48/2022 (only available in German):
  https://www.rki.de/DE/Content/Infekt/EpidBull/Archiv/2022/Ausgaben/48_22.pdf

5. Metadata on source data

- Epidemiological Bulletin 48/2022 (only available in German):
  https://www.rki.de/DE/Content/Infekt/EpidBull/Archiv/2022/Ausgaben/48_22.pdf
- Vaccination coverage of children presenting their vaccination card at school entry health examinations – GBE:
  http://www.gbe-bund.de/gbe10/I?I=831:27110398E

6. Timeliness and frequency

- Timeliness: t + 20 months
- Frequency: Annual

7. Calculation method

- Unit of measurement: Percentage
- Calculation:

$$\textbf{Coverage of DTP} = \frac{\sum_i \text{Children with documented vaccination against disease } i \text{ [number]}}{\text{Children presenting their vaccination card [number]} \cdot 3} \cdot 100\,[\%]$$

$i \in \{\text{diphtheria; tetanus; pertussis}\}$

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SDG Indicator 3.b.1	**Proportion of the target population covered by all vaccines included in their national programme**
Time series	**HPV vaccination coverages among 15 years old girls and boys**

1. General information on the time series

- Date of national metadata: 23 May 2023
- National data: http://sdg-indicators.de/3-b-1/
- Definition: The time series measures the humane papillomavirus (HPV) vaccination coverages among 15 years old girls and boys.
- Disaggregation: sex

2. Comparability with the global metadata

- Date of global metadata: March 2023
- Global metadata: https://unstats.un.org/sdgs/metadata/files/Metadata-03-0b-01.pdf
- The time series is compliant with the global metadata.

3. Data description

- Nationwide and continuous surveillance of vaccination coverage according to the German Protection against Infection Act (IfSG) are only available for children at the age of school entry through school entry health examinations. This limits the knowledge of vaccination for younger children (in particular timeliness of vaccination), adolescents and adults.
  To fill these data gaps, Germany started in 2004 a nationwide immunisation information system (IIS) for the monitoring of vaccination coverage and selected vaccine-preventable diseases. The IIS is a joint project of the Robert Koch Institute (RKI) with all 17 Associations of Statutory Health Insurance Physicians (ASHIPs). ASHIPs regularly receive insurance refund claims from all ASHIP-associated physicians for outpatient medical services provided to those covered by statutory health insurance. These claims data include all recommended vaccinations and diagnosed diseases. Approximately 85% of the population in Germany is covered by statutory health insurance. The remainder is mainly privately insured. Data relevant for the project is extracted from the ASHIPs' databases and anonymised. Data is quarterly transferred to the RKI, and imported into a central database. Since 2006, the database contains patient information, data on vaccinations and diagnoses of selected vaccine-preventable diseases, and since 2008, dates of individuals' physician consultations.
  Since 2007, Standing Committee on Immunisation (STIKO) recommends HPV vaccination for all girls with the aim of reducing the burden of cervical cancer. By 2014, three vaccine doses were scheduled for the immunisation of girls aged 12-17 years. In August 2014, STIKO lowered the recommended vaccination age to 9-14 years and recommended – according to the updated approval of vaccines – only two instead of three vaccine doses for complete immunisation. Since its recommendation, HPV

vaccination is fully reimbursed by the statutory health insurances. In June 2018 the HPV vaccination was additionally introduced for boys.

4. Access to data source

- Epidemiological Bulletin 48/2022 (only available in German): https://www.rki.de/DE/Content/Infekt/EpidBull/Archiv/2022/Ausgaben/48_22.pdf

5. Metadata on source data

- Epidemiological Bulletin 48/2022 (only available in German): https://www.rki.de/DE/Content/Infekt/EpidBull/Archiv/2022/Ausgaben/48_22.pdf

6. Timeliness and frequency

- Timeliness: t + 20 months
- Frequency: Annual

7. Calculation method

- Unit of measurement: Percentage
- Calculation:

$$\textbf{Coverage of HPV containing vaccine of 15 years old girls and boys} = \frac{\text{15 year s old girls and boys within a representative sample of the statutory health insured population who received the relevant vaccination [number]}}{\text{Total sample [number]}} \cdot 100\,[\%]$$

SDG Goal 3	**Good health and well-being**
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SDG Indicator 3.b.1	**Proportion of the target population covered by all vaccines included in their national programme**
Time series	**Measles vaccination coverage at school entry**

1. General information on the time series

- Date of national metadata: 23 May 2023
- National data: http://sdg-indicators.de/3-b-1/
- Definition: The time series measures the measles vaccination coverage at school entry.
- Disaggregation: Not available.

2. Comparability with the global metadata

- Date of global metadata: March 2023
- Global metadata: https://unstats.un.org/sdgs/metadata/files/Metadata-03-0b-01.pdf
- The time series is compliant with the global metadata.

3. Data description

- The vaccination data of children is documented within the school entry health examinations according to the German Protection against Infection Act (§ 34 (11) IfSG) by the public health offices or authorised private doctors. According to IfSG the aggregated and anonymised data has to be reported to Robert Koch Institute (RKI) since 2001. The final data is centrally recorded and evaluated by the RKI. Because the survey in the federal Länder takes place with different methods, the RKI and the Länder have developed a common data collection sheet.
  The data shows the measles vaccination coverage at school entry the share of children with documented complete vaccination (two doses) in relation to all children presenting their vaccination card at the school entry health examination (92-93% of all checked children). The age at school entry and time of school entry examination vary in the 16 federal Länder.

4. Access to data source

- Vaccination coverage of children presenting their vaccination card at school entry health examinations – GBE:
  http://www.gbe-bund.de/gbe10/I?I=831:27110398E
- Epidemiological Bulletin 48/2022 (only available in German):
  https://www.rki.de/DE/Content/Infekt/EpidBull/Archiv/2022/Ausgaben/48_22.pdf

5. Metadata on source data

- Epidemiological Bulletin 48/2022 (only available in German): https://www.rki.de/DE/Content/Infekt/EpidBull/Archiv/2022/Ausgaben/48_22.pdf
- Vaccination coverage of children presenting their vaccination card at school entry health examinations – GBE: http://www.gbe-bund.de/gbe10/l?l=831:27110398E

6. Timeliness and frequency

- Timeliness: t + 20 months
- Frequency: Annual

7. Calculation method

- Unit of measurement: Percentage
- Calculation:

$$\textbf{Coverage of measles containing vaccine at school entrance} = \frac{\text{Children with documented vaccination [number]}}{\text{Children presenting their vaccination card [number]}} \cdot 100\,[\%]$$

SDG Goal 3	**Good health and well-being**
SDG Target 3.b	**Support the research and development of vaccines and medicines for the communicable and non-communicable diseases that primarily affect developing countries, provide access to affordable essential medicines and vaccines, in accordance with the Doha Declaration on the TRIPS Agreement and Public Health, which affirms the right of developing countries to use to the full the provisions in the Agreement on Trade-Related Aspects of Intellectual Property Rights regarding flexibilities to protect public health, and, in particular, provide access to medicines for all**
SDG Indicator 3.b.1	**Proportion of the target population covered by all vaccines included in their national programme**
Time series	**Pneumococcal vaccination coverage at school entry**

1. General information on the time series

- Date of national metadata: 23 May 2023
- National data: http://sdg-indicators.de/3-b-1/
- Definition: The time series measures the pneumococcal vaccination coverage at school entry.
- Disaggregation: Not available.

2. Comparability with the global metadata

- Date of global metadata: March 2023
- Global metadata: https://unstats.un.org/sdgs/metadata/files/Metadata-03-0b-01.pdf
- The time series is compliant with the global metadata.

3. Data description

- The vaccination data of children is documented within the school entry health examinations according to the German Protection against Infection Act (§ 34 (11) IfSG) by the public health offices or authorised private doctors. According to IfSG the aggregated and anonymised data has to be reported to Robert Koch Institute (RKI) since 2001. The final data is centrally recorded and evaluated by the RKI. Because the survey in the federal Länder takes place with different methods, the RKI and the Länder have developed a common data collection sheet.
  The data shows the pneumococcal vaccination coverage at school entry the share of children with documented complete vaccination in relation to all children presenting their vaccination card at the school entry health examination (92-93% of all checked children). The age at school entry and time of school entry examination vary amongst the 16 federal Länder.
  The pneumococcal vaccination is recommended by the Standing Committee on Immunisation (STIKO) only until the end of the second year of life. For a complete pneumococci vaccination series, depending on the age at first dose, one to four vaccinations are necessary. Age at first vaccination:
  - 2-6 months: at least four vaccinations
  - 7-11 months: at least three vaccinations
  - 12-23 months: at least two vaccinations
  - 24 months and older: at least one vaccination
  - alternatively the application of at least two vaccine doses will be considered as complete series of vaccination regardless of the age.

  In September 2015 the vaccination schedule of the standard pneumococcal vaccination for mature infants was reduces from 4 (3+1 schedule) to 3 vaccine doses (2+1 schedule).

4. Access to data source

- Vaccination coverage of children presenting their vaccination card at school entry health examinations – GBE:
  http://www.gbe-bund.de/gbe10/I?I=831:27110398E
- Epidemiological Bulletin 48/2022 (only available in German):
  https://www.rki.de/DE/Content/Infekt/EpidBull/Archiv/2022/Ausgaben/48_22.pdf

5. Metadata on source data

- Epidemiological Bulletin 48/2022 (only available in German):
  https://www.rki.de/DE/Content/Infekt/EpidBull/Archiv/2022/Ausgaben/48_22.pdf
- Vaccination coverage of children presenting their vaccination card at school entry health examinations – GBE:
  http://www.gbe-bund.de/gbe10/I?I=831:27110398E

6. Timeliness and frequency

- Timeliness: t + 16 months
- Frequency: Annual

7. Calculation method

- Unit of measurement: Percentage
- Calculation:

$$\textbf{Coverage of pneumococcal conjugate vaccine at school entrance} = \frac{\text{Children with documented vaccination [number]}}{\text{Children presenting their vaccination card [number]}} \cdot 100\,[\%]$$