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AAP has been leading voice on childhood vaccine recommendations since 1930s

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Since the 1930s, the AAP has been at the forefront of providing evidence-based guidance to protect children from vaccine-preventable illnesses.

“The American Academy of Pediatrics has been a leading voice on childhood vaccine recommendations since our inception in 1930 — and we will continue to be that voice,” said AAP President Susan J. Kressly, M.D., FAAP. “We start with the science to develop guidance that allows pediatricians to do what’s best for children and families.”

AAP committees first made recommendations to guide pediatricians’ use of vaccines in 1934, 1936 and 1937. In 1938, the Committee on Immunization Procedures of the American Academy of Pediatrics published an eight-page pamphlet that included recommendations for use of pertussis, diphtheria, tetanus and smallpox vaccines. The pamphlet now is known as the *Red Book*, which is authored by the Committee on Infectious Diseases in collaboration with hundreds of experts.

“Vaccine recommendations have always been an essential part of what the AAP does,” Dr. Kressly said. “Vaccines are the most important tool we have to help children’s immune systems learn to recognize and resist serious diseases, so they can stay healthy and do the important work of childhood: playing, learning and growing in their families and communities.”

Not everyone has agreed, however, on the value of immunizations. From the development of the earliest vaccines, public opposition and anti-vaccine sentiments have been on display. For example, a 1902 smallpox outbreak in Cambridge, Mass., led to a city vaccine mandate. A citizen insisted that mandating all adults to be vaccinated was a rights violation, sparking a Supreme Court case.

Schedule evolves

Over the years, immunization recommendations have evolved, and involvement of interested parties has changed.

The Academy helped inform and promote polio immunization, collaborating with the National Foundation for Infantile Paralysis, which later became the March of Dimes. Large-scale use of the vaccine began by 1955.

In the 1960s, the Academy, the U.S. government and the American Public Health Association decided a more formal process was necessary. Until this time, vaccine guidance was driven by ad hoc committees.

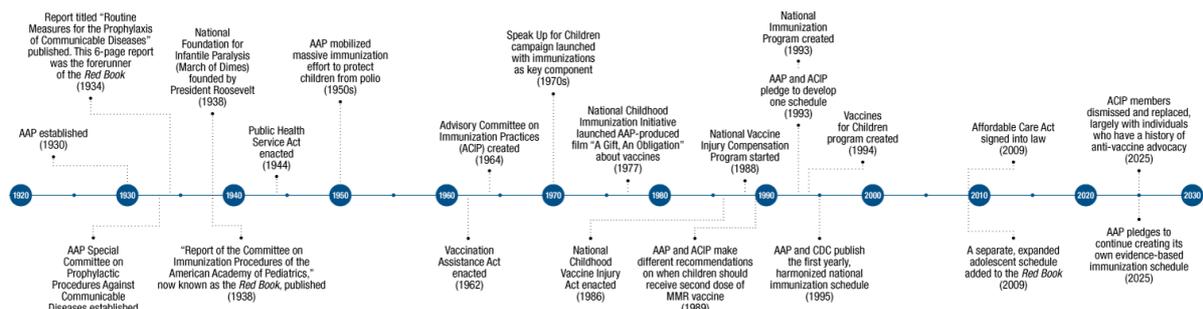
The Advisory Committee on Immunization Practices (ACIP) was created in 1964. Established by Surgeon General Luther Terry, M.D., ACIP consists of appointed members tasked with guiding the Centers for Disease Control and Prevention (CDC) and the Department of Health and Human Services (HHS) on use of immunizations. At the first ACIP meeting in May 1964, committee members recommended influenza, rubella and smallpox vaccines after considering vaccine safety, efficacy, burden of disease, health economic data and other factors.

While the AAP and ACIP made separate recommendations, they were similar in most cases. Both groups had liaison representatives to each other's committee.

One case in which they diverged occurred following a large measles outbreak in vaccinated school-age children in 1989. The AAP, ACIP and the American Academy of Family Physicians all added a second dose of measles, mumps, rubella (MMR) vaccine to childhood immunization schedules. However, the AAP and ACIP disagreed about when to administer the second dose. The CDC schedule recommended it be given between 4 and 6 years of age, when the diphtheria, tetanus and pertussis vaccine was given. The AAP schedule recommended the second dose be administered around 11 or 12 years old to boost immunity before the high-risk period.

"We have historically worked with the U.S. government and often, though not always, aligned on recommendations," Dr. Kressly said.

In 1993, a task force set its sights on harmonizing the ACIP and AAP vaccine schedules. The goal: to control or eliminate vaccine-preventable diseases by vaccinating at least 90% of children by their second birthday. The first combined schedule was published in 1995 and appeared in *Pediatrics*. It offered clinicians the option of administering the second MMR dose at either the preschool or adolescent visit.



Increasing vaccine confidence

The AAP also has worked to boost confidence in and uptake of vaccines through advocacy and campaigns, often in collaboration with the federal government.

In the 1970s, the AAP Speak Up for Children campaign included efforts to encourage immunizations to protect children from preventable illness. This was followed by the launch of Immunization Action Month in 1973 by the AAP and CDC to highlight inadequate vaccination levels in preschool children.

The AAP also advocated for the National Childhood Vaccine Injury Act of 1986, which created the Vaccine Injury Compensation Program, a no-fault alternative to the tort system with compensation to families in rare cases of vaccine injury. The act was established after lawsuits against vaccine producers led some to say they might stop manufacturing certain vaccines, which would have disrupted the vaccine supply and prices.

Another advocacy win came with the creation of the Vaccines for Children program in 1993. The program, which provides immunizations to low-income children at no cost, greatly improved vaccine uptake nationwide.

Leaning on its expertise

This year, the AAP and ACIP are diverging again.

In May, the CDC removed the COVID-19 vaccine from recommended immunization schedules for healthy children. In response, the AAP and other leading medical groups are suing HHS Secretary Robert F. Kennedy Jr. for making unilateral, unscientific changes to federal vaccine policy they called an “assault on science, public health and evidence-based medicine.”

Dr. Kressly [said](#) the administration’s actions are jeopardizing the success of the country’s immunization system, a “cornerstone of U.S. public health.”

The medical groups are asking a judge to halt Kennedy’s changes to COVID-19 vaccine policy.

Kennedy also fired all 17 voting members of ACIP and appointed new members, some of whom have a history of spreading vaccine misinformation. The new committee said it will conduct a review of the child and adolescent vaccine schedules.

In a [video](#), Dr. Kressly said creation of federal immunization policy is “no longer a credible process.”

“We won’t lend our name or our expertise to a system that is being politicized at the expense of children’s health,” she said. “But we’re not stepping back, we’re stepping up. The AAP will continue to publish our own immunization schedule just as we always have, developed by experts, guided by science, trusted by pediatricians and families across the country.”

Resources

- [Red Book Online](#)
- [HealthyChildren: How Vaccine Schedules Changed Over Time and Why](#)
- [American Academy of Pediatrics: Carrying the Mantle for 95 years](#)

