The American Academy of Pediatric Dentistry (AAPD) is the recognized authority on children's oral health. As advocates for children's oral health, the AAPD promotes evidence-based policies and clinical guidelines; educates and informs policymakers, parents and guardians, and other health care professionals; fosters research; and provides continuing professional education for pediatric dentists and general dentists who treat children. Founded in 1947, the AAPD is a not-for-profit professional membership association representing the specialty of pediatric dentistry. Its 9,300 members provide primary care and comprehensive dental specialty treatments for infants, children, adolescents and individuals with special health care needs. For further information, please visit the AAPD website at http://www.aapd.org or the AAPD’s consumer website at http://www.mychildrensteeth.org.

Vision Statement
The vision of the AAPD is optimal health and care for infants and children through adolescence, including those with special health care needs. The AAPD is the leader in representing the oral health interests of children. The pediatric dentist is a recognized primary oral health care provider and resource for specialty referral.

Mission Statement
The mission of the AAPD is to advocate policies, guidelines and programs that promote optimal oral health care for infants and children through adolescence, including those with special health care needs. The AAPD serves and represents its membership in the areas of professional development and governmental and legislative activities. It is a liaison to other health care groups and the public.
Status of Children’s Oral Health

- Dental decay is the most common chronic childhood disease in the United States. Sadly, it also is the most easily prevented.
- Children from low-income families experience a disproportionately higher amount of dental disease than the general child population. 80 percent of all the dental problems in children are found in those 25 percent from lower income groups that often are on public assistance and eligible for Medicaid or CHIP. There is a significantly higher need for dental treatment in black and Latino children.
- Tooth decay can cause impairments such as difficulty eating, speaking, maintaining cognitive focus and controlling behavior. In fact, one study found that 17 percent of all missed school days are due to dental pain and infection.
- While fluoridation and improved oral hygiene have resulted in fewer cavities overall among Americans in recent years, cavities in young children are on the rise. The Centers for Disease Control and Prevention’s (CDC) most recent report on oral health trends in America shows that while older children’s oral health is improving, young children’s oral health is of increasing concern. Tooth decay declined in every other age group, except for children ages 2-5 years which increased from 24 percent to 28 percent between 1988-1994 and 1999-2004. **This means that more than a quarter of all U.S. preschoolers have tooth decay.** Preliminary CDC data suggest some progress has been made in reversing this trend, with more very young children receiving care, most likely due to the increased number of pediatric dentists who care for this age group and improvements in Medicaid dental programs in some states. However, the majority of Medicaid children still are not obtaining oral health services on a par with those privately insured.
- Approximately 70 percent of pediatric dentists accept Medicaid or CHIP patients, constituting a vital component of the social safety net.

**Studies show that early establishment of a Dental Home (by age 1) reduces subsequent dental disease and treatment as well as related hospital costs.**

*Any children’s health insurance plan—Medicaid, CHIP or ACA—should have a robust network of pediatric dentists in order to help the most children.*

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