

FROM THE EXECUTIVE EDITOR

Dear Child Life Community,

In today's diverse and ever-evolving world, the experiences of children and families navigating healthcare systems are shaped by more than just medical diagnoses. The concept of intersectionality, a term coined by Kimberlé Crenshaw, refers to the way various social identities—such as race, gender, class, and ability—collectively shape the way individuals experience the world. As child life specialists, we are very familiar with the ways in which

the convergence of social identities creates a unique experience for each patient and family that we encounter. As we are assessing a child or a family, we understand the variety of factors that may be influencing the child's experience in their current situation, however, the intersectionality of identities that we hold as child life professionals is an element that can be easy to forget. The field of child life is often criticized for its homogeneity, and while there are groups who are certainly overrepresented within child life, we are encouraged by the ongoing work featured in this issue to build more inclusive spaces for child life students and professionals.

The theme of intersectionality and professional inclusivity emerged when Kim Corey, CCLS, MS and her colleagues submitted an article on the perspectives of BIPOC students seeking internships. In "BIPOC Child Life Students and BIPOC Student Perspectives When Applying to Internship Sites," the authors share the additional challenges in finding child life internships that they faced as people of color and first-generation college students. Their submission included such in-depth and valuable perspectives and suggestions that we will be publishing a second part to this article in the next issue.

We then received "Disabilities Don't Determine Professional Destinations" from Kendall Malkin, MS, CCLS and Sanasadat Marashi Shooshtari, MA, SVRC, QRP, who shed light on experiences of a child life specialist and child life student with disabilities and provide a comprehensive framework for discussing accommodations in the workplace. In working with these authors to edit and prepare their articles, we (Bulletin Editors) had to evaluate our feedback process for inclusivity and accessibility. Embracing

diversity within the child life community requires us all to be willing to make changes to provide equitable experiences and opportunities for every professional.

Next, Morgan Brinson, MS, CCLS submitted "Proud To Be Me" about an innovative program at her hospital to highlight LGBTQIA+ perspectives and educate staff. She shares the challenges of putting together a program focused on a divisive topic and the ultimate benefit of her child life department learning how to lean into difficult conversations and understand diverse points of view.

When we received "Cultivating Community and Critical Thinking in the Child Life Classroom" from Kathryn Cantrell, PhD, CCLS, our issue's theme was solidified. Cantrell highlights the innovative ways in which she encourages connections between students of various backgrounds to promote their growth and learning during their time in her classes and

shares a variety of ideas to help students build trust with one another and to learn from diverse perspectives.

I am proud of this issue and the opportunity it offers all of us to better understand our colleagues with diverse identities. While we are a long way from having a child life work force that matches the diversity of the patients we serve, these authors give new perspectives on the challenges they have faced by showing up as their whole selves. As you engage with this issue, I hope you continue to question your assumptions about these identities and takeaway a goal and ideas to create space for all identities in your workplace.

With appreciation and commitment to inclusivity,

Morgan Morgan, MS, CCLS Executive Editor, ACLP Bulletin