

Peer Review

Review of: "Creating a Child-Centered Playroom for Marshallese Children"

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General Comments

This article presents valuable tools for developing a culturally sensitive Child-Centered Group Play Therapy (CCGPT) approach tailored to Marshallese children. It offers replicable resources, such as the “Toys for Marshallese Playroom” in Table 2 and an appendix on “Documentation of Child-Centered Group Sessions,” which could be adapted to other Pacific populations.

The manuscript also provides literature-based evidence regarding the mental health challenges faced by Marshallese children, stemming from historical injustices such as U.S. nuclear testing and the disproportionate impact of COVID-19 on this community. The section on “Child-Centered Group Play Therapy” offers a clear literature review and outlines the benefits of CCPT for marginalized children.

In conclusion, this manuscript contributes important insights into culturally responsive therapy for a historically underserved community, especially with children. With some structural adjustments and clearer articulation of its core contributions—especially regarding mental health impacts, implementation outcomes, and the role of cultural identity—the article has strong potential for publication and wider applicability across Pacific Islander and other marginalized populations.

The inclusion of further references may provide stronger support for the reported effects of the proposed CCGPT framework:

–Berman, E. (2019). *TALKING LIKE CHILDREN: Language and the Production of Age in the Marshall Islands*. Oxford Studies in the Anthropology of Language.

–Green, E. and Myrick, A. (2015). *Play Therapy with Vulnerable Populations. No Child Forgotten*. Rowman & Littlefield

Section-specific suggestions:

Introduction

-The article references the historical trauma faced by the Marshall Islands early on, but it would benefit from explicitly stating the mental health implications for Marshallese children. This would create a clearer thematic bridge to the discussion on CCPT that follows.

-**Suggested insertion for the introduction:** *“This conceptual article will focus on creating a culturally inclusive group playroom for children who are Marshallese.”*

Consider moving this sentence to the beginning of the second paragraph for clarity and framing.

-Avoid ambiguous phrasing such as: *“This historical trauma and migration have impacted the Marshallese culture in many ways.”* Specify how these factors have affected mental health or family systems, for example, to help ground the transition into the therapy discussion.

Marshallese Section

-Consider renaming the subtitle for clarity: **“Marshallese Children.”**

-The sentence *“Not only is CCPT effective with marginalized children in the US, but it is also effective with marginalized children outside of the United States”* lacks clarity and specificity. While references are cited, no examples are provided. Consider adding evidence or case studies that demonstrate CCPT’s success across cultural contexts.

-Consider including a brief literature review specific to **mental health treatments for Marshallese children** to further justify the relevance and necessity of this intervention.

Child-Centered Play Therapy

-The sentence *“Since Marshallese individuals in America value community and tend to live in multi-generational homes and use a collective voice such as ‘they’ and ‘we’...”* needs clarification. Provide contextual examples of how collective identity shapes therapeutic engagement or group dynamics.

-The purpose statement—*“This manuscript will discuss the steps in creating a culturally inclusive child-centered playroom for Marshallese children that allows for cultural opportunities to connect.”*—is clear and could be repositioned in the introduction for coherence and alignment.

-Prior to the paragraph beginning with *“The authors of this article created a multicultural playroom...”*, I recommend adding a subtitle such as **“Author Experience and Implementation Context”**.

- The narrative currently blends what was implemented and what was interrupted due to COVID-19. This structure could unintentionally diminish the value of the work. I recommend clearly separating:

1. What was achieved (e.g., design and initial sessions of CCGPT), and
2. Limitations and what could not be completed due to the pandemic.

Also, more emphasis on observed effects on children (even if preliminary) would strengthen this section.

Implications

-The current subtitle does not clearly reflect the content of the section. Consider renaming it to something more specific.

-The sentence *"It is recommended to use playful supervision approaches when supervising counselors using play with children to promote a parallel process"* is vague. Clarify what is meant by "parallel process"

Declarations

Potential competing interests: No potential competing interests to declare.