

Peer Review

Review of: "EYpA: Cultural Integration and Adaptation of the Honest, Open, Proud Program for Use in People with Multiple Sclerosis in Greece"

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Evaluation of the Study

Overall Assessment

This study presents a meaningful and well-structured cultural adaptation of the *Honest, Open, Proud (HOP)* program for people newly diagnosed with Multiple Sclerosis (MS) in Greece. The adapted program, *EYpA*, focuses on empowering individuals to make informed and self-directed decisions regarding the disclosure of their diagnosis, an area largely overlooked in MS care. The study follows the Medical Research Council (MRC) guidelines for complex interventions, which strengthens the validity of its methodology and implementation.

Strengths

Relevance and Innovation

The topic addresses a crucial and underexplored psychosocial issue in MS: stigma and disclosure.

By adapting a well-established program (HOP) to a specific cultural and diagnostic context, the study fills a significant gap in post-diagnostic support for MS patients in Greece.

Methodological Rigor

The study is designed according to the MRC framework, involving theory-driven development, stakeholder engagement, and pilot testing.

Inclusion of feedback from both participants and facilitators provides a rich, multi-perspective evaluation of the intervention.

Cultural Sensitivity

The adaptation process involved MS patients and organizations, ensuring the materials reflected cultural nuances and lived experiences.

The use of language and examples relevant to Greek MS patients enhances the program's acceptability.

Feasibility and Acceptability

High attendance (>90%) and positive feedback from participants indicate good feasibility and participant engagement.

Thematic analysis highlighted the empowering and community-building impact of the group sessions.

Limitations

Small Sample Size and Recruitment Bias

The pilot included only 12 participants, recruited via MS societies. This may limit generalizability.

Facilitators had limited control over inclusion criteria, potentially affecting group heterogeneity.

Lack of Quantitative Outcome Measures

The study relies primarily on qualitative feedback. The inclusion of standardized pre- and post-intervention assessments (e.g., stigma, self-efficacy, quality of life) would have strengthened the findings.

Limited Focus on Intersectionality

While facilitators noted the importance of intersectional identities (e.g., migration status, sexuality, mental health comorbidities), the program materials did not formally address these aspects.

Short Duration

Several participants suggested the need for more sessions or extended follow-up, pointing to the potential for a longer-term version of the program.

Suggestions for Future Work

Scale-Up and Randomized Trials: A larger study using a randomized controlled design is recommended to evaluate the program's efficacy more robustly.

Quantitative Evaluation: Incorporate validated tools such as the DISCO-MS questionnaire to assess disclosure and stigma outcomes.

Tailoring for Intersectional Needs: Develop modules that explicitly address overlapping stigmas (e.g., disability and immigration).

Integration into MS Care Pathways: Collaborate with national healthcare services to make EYpA a standard component of early MS care.

Conclusion

The EYpA study is a commendable and thoughtful adaptation of an existing stigma-reduction program, tailored to the unique psychosocial challenges faced by Greek MS patients. Despite the limitations inherent in a small pilot study, it provides a strong foundation for further development and formal evaluation. With appropriate refinement and expansion, EYpA has the potential to significantly improve the psychological well-being and social integration of individuals living with MS.

Declarations

Potential competing interests: No potential competing interests to declare.