

Testimony of Holly Pendell National Multiple Sclerosis Society, Ohio Chapters Submitted for Committee March 29, 2017

Good afternoon Chairman Ginter, Ranking Minority Member Representative Boyd and committee members. My name is Holly Pendell and I represent the National Multiple Sclerosis Society in Ohio.

On behalf of the approximately 20,000 Ohioans who live with multiple sclerosis, the National Multiple Sclerosis Society wishes to offer the following comment on House Bill 115, which addresses a voluntary communications disabilities registry, accessible by law enforcement to build more effective means of communications and understanding.

I would like to begin with a bit of information about multiple sclerosis. MS interrupts the flow of information from the brain to the body and stops people from moving. Every hour in the United States, someone is newly diagnosed with MS, an unpredictable, often disabling disease of the central nervous system. Symptoms range from numbness and tingling to blindness, and even paralysis. The progress, severity and specific symptoms of MS in any one person cannot yet be predicted. The cause is unknown and there is no cure. Most people with MS are diagnosed between the ages of 20 and 50 and it is the leading cause of disability in young adults. MS affects more than 2.5 million worldwide.

Speech disorders are fairly common in MS. They occur among 25 to 40 percent of MS cases. Speech patterns are controlled by many areas in the brain, especially the brainstem. Lesions (damaged areas) in different parts of the brain can cause several types of changes in normal speech patterns. They range from mild difficulties to severe problems that make it difficult to speak and be understood. Scanning dysarthria produces speech in which the normal "melody" or speech pattern is disrupted, with abnormally long pauses between words or individual syllables of words. People with MS may also slur words. This is usually the result of weakness and/or incoordination of the muscles of the tongue, lips, cheeks and mouth. Other speech problems include nasal speech, which sounds as though the person has a cold or nasal obstruction. Additionally, dysarthrias are commonly associated with other symptoms caused by lesions in the brainstem. These include tremor, head shaking or incoordination. These symptoms may occur permanently or come and go within hours.

As you can imagine, an otherwise routine traffic situation can become much more heightened and stressful when an officer discovers a person with slurred speech answering their questions. Follow that up with an inability to walk a line or touch one's own nose, also potentially caused by symptoms of MS, and it would come as no surprise that officers could potentially make

assumptions that a person is driving under the influence in these scenarios. While breathalyzers regularly defuse this situation, a law enforcement officer's knowledge or sensitivity to MS or other communication disability symptoms would likely reduce several tense moments spent between law enforcement and a person with MS.

The National MS Society supports the efforts of this bill to improve the law enforcement officer's ability to communicate with people with disabilities. We appreciate that this bill does not mark vehicles, causing privacy concerns for people with disabilities, and that registration is purely voluntary. Thus the absence of registering should not be seen as waiving any rights already given by law. We also strongly support the provision stated in the law exempting the registration information from public record and as such exempt from Ohio Open Records Law (Ohio Rev. Code sec. 149.43.)

In addition to our support of the current language, we recognize the point of this law is to allow for law enforcement to act on their responsibilities to ensure the safety of the public, but with increased knowledge and sensitivity to the person with disabilities that they may encounter. As such the information provided to an officer that they are encountering a person with a communications disability, is only of value if that officer has received applicable cultural practice and training. Training must continue to be available to officers in this competency.

The National MS Society respectfully urges the committee to consider HB 115 and favorably recommend it, helping to ensure that people living with MS in Ohio and so many other communication disabilities receive the opportunity to effectively and safely interact with law enforcement.

We wish to thank the House Community and Family Advancement Committee for the opportunity to submit this testimony.

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