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Urination needs and practices away from home: where do women go?

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This paper places the sanitation spotlight on urination. Open urination is a cause of concern for various reasons including: public decency, public nuisance, smell, health and hygiene. Measures aimed to stop the practice focus on: 1) creating and enforcing laws; 2) changing social norms; and 3) making more urinals available. For gendered reasons, women are less likely to practice open urination, instead becoming practised at withholding urination when away from home. This paper argues that attention to urination can help cast light on gendered needs, norms and behaviours (and how these change along the human life course) in a way that the sanitation focus on defecation hasn't. This paper is presented in conjunction with a side event at the WEDC conference titled: "Need to Wee?" Please join us there to continue the conversation.

Putting the 'urination' back in sanitation

People typically urinate four to eight times a day. In most people the bladder is able to store urine until it is convenient to go to the toilet, however there are differences based on medical conditions, disability or lifecourse status (i.e. age, pregnancy or menopause). Nevertheless, urination typically receives much less attention than defecation when we talk about sanitation. Rural sanitation approaches concentrate on ending open defecation as a first step to creating a clean and safe environment. Neither of the key approaches to rural sanitation - Community Led Total Sanitation (Kar and Chambers, 2009) and Community Approaches to Total Sanitation (UNICEF, 2008) - give specific attention to open (or public) urination: ending open urination is not typically included as a criteria in the certification of Open Defecation Free or Total Sanitation in communities. Yet many of the same arguments (i.e. privacy, dignity, safety) apply to ending open urination as defecation (House et al, 2017). In urban areas, on the other hand, open urination may be a particular concern for city-wide sanitation where the provision of public (or shared) latrines is inadequate to meet the needs of people in transit, away from their home or without a toilet of their own (Kendall and Snel, 2016). For some, open urination is the last resort if they can't find a public toilet, wait in the queue, afford to pay or else find that the unhygienic state of the toilets prevents use. For others, and perhaps more for men than women, open urination is a convenient and habitual (i.e. preferred) option. Nevertheless, the Joint Monitoring Programme (2015) defines sanitation in its fullest sense, as the provision of facilities and services for safe management and disposal of human urine and faeces. It follows therefore that urination should rightly be seen as part of the efforts to achieve access to adequate and equitable sanitation and hygiene for all, by 2030. This paper aims to spark a debate: can attention to urination help cast a spotlight on different people (particularly women) at different stages of the lifecourse and different behaviours in a way that is different from attention to defecation alone?

Reasons why open urination is a concern include:

• **Public decency:** In some cultures, male open urination (much less so for women) is socially accepted and a common practice. Although men can urinate without disrobing, indeed men's clothes and undergarments are specifically designed to facilitate this, open urination can offend public decency if a man is exposing his genitals in a public place. Women on the other hand usually need to partially derobe

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to urinate and often prefer to wipe or wash after urination. Derobing in public or practicing open urination compromises norms for modesty and can make women vulnerable to harassment or violence. Thus, women tend not to hike up their skirts/pull down their trousers to urinate in crowded streets or at the side of the road as people walk past. "Women living on the pavement often carry a mat to make a shield around themselves if they need to defecate or urinate in the open" (Joshi and Morgan, 2007). In UK or USA public urination can breach sex offender laws if intended to cause 'alarm' or intentionally to expose oneself.

- **Public nuisance:** In some places (i.e. in Europe and the USA) urinating in public is considered 'disorderly behaviour' and anti-social with efforts aimed to stop people relieving themselves in city centres after late night drinking or partying.
- Smell: Bad smell from human waste represents a major barrier to successful sanitation adaptation for people all over the world (Rheinländer, 2013). With the Gates Foundation, Firmenich have developed a perfume product that masks bad smells so that more people will use toilets (Gates, 2016). However, the smell of urine in public places can linger as a result of concentration and humidity/heat and the smell may be stronger depending on the health and diet of the individual.
- Health: Urine is usually considered sterile and not generally a risk to health except where schistosomiasis is endemic. Yet, a recent study (Wolf, 2015) found that bacteria are present at low levels in the urine of healthy people not suffering from a urinary tract infection. Withholding urination, on the other hand, is uncomfortable, is a cause of anxiety and psychosocial stress and is linked to urinary tract infections.
- **Hygiene:** Although 'after urination' is not specially identified as a critical moment to wash hands with soap this can be a source of hand contamination.

Open urination free spaces

A number of actions and policy interventions have been implemented to target open urination in public places including: policies and laws to stop open urination by the individual, tackling the social norms that give permission for individual behaviour, and providing an alternative to open urination that individuals want to use.

By-laws, fines and community service: Around the world, open urination in public places is usually a minor offence prohibited through by-laws and punishable with fines and/or community service rather imprisonment. In South Africa, Ethekwini Municipality (n.d.), a new by-law on "Nuisances and Behaviour in Public Places" refers to a fine of R40,000 and/or imprisonment for up to two years. In the UK (Chester and Brighton), anyone caught urinating in the street would either pay a fine or accompany street cleaners to clean up the mess. In Manila (The Philippines), offenders either pay a fine or complete eight hours of community service (Hopes & Fears, n.d). In Rio de Janerio (Brazil) efforts to eradicate open urination in the Carnival and pre-carnival festivities include fines (Contributing Reporter, 2016).

Social norms: There are innovative examples aimed to change the social norm on urination. In India, open urination is included under the 'Swachh Bharat Abhiyan' (Clean India Mission) to end open defecation in India by 2nd October 2019. Thokne (2016) and Upadhayaya (2015) report how New Delhi launched a public awareness campaign with billboards reading "*How long will you be irresponsible? At least have some shame. Clean up your mind*" and pictures of gods, goddesses, and holy symbols have been painted on the walls frequently used by men to urinate against (in San Francisco and Hamburg, walls have been coated with a hydrophobic paint to repels urine, Morris, 2015). In Mumbai, a water tank truck painted yellow and with a special logo, sprays public urinators with a large fire hose (Youtube, 2014). In Lagos, a zero tolerance campaign on open defecation and urination (Adegboye, 2014) was launched as part of efforts to transform Lagos into a tourist centre.

More public urinals and toilets: Most European cities have long tradition of providing public urinals for men such as: the pissoir in Paris and Belgium; De Krul in Amsterdam and recently the Uritrottoir. Portable open-air urinals were trialled in Chester, UK, with mixed success: some said they were indecent, out-of-keeping, and unhygienic because there is nowhere to wash your hands. Women thought they were discriminatory because no facilities were provided to cater for them, further exacerbating the inequity of public toilet provision for men and women (Holmes, 2013). Under the Clean India mission, 256,000 public toilets are to be constructed between 2014-2018 (Government of India 2014). In New Delhi the Municipal Council provided mobile toilets in areas where open urination is practiced and made it possible to find the nearest toilet facilities using the 'NDMC311' App. On a city level, GIS mapping is a useful mechanism to

show where toilets are publically available e.g. Poo to the Loo in India. Similar maps exist for the UK, Australia and others.

Where do women go?

Urination practices result from a combination of biological and social differences: women and men are socialized differently on gendered standards for public behaviour and what is acceptable when urinating. Women are less likely to practice open urination than men. Through necessity, women report becoming practised at going for several hours without urinating, due to the lack of facilities in a variety of settings (including in the work place, in public buildings and spaces or when travelling). Women also report withholding liquids so that they won't need to go. For instance in Chittagong six million residents has no public toilets for girls and women: a readymade garment worker in Chittagong Export Processing Zone said she did not use toilet outside of her home, as there was no public toilet reserved for women (Rahaman, 2016).

Discrimination is seen in the allocation of public toilets is a result of both the number of toilets available for women and the quality of the facilities. There are often fewer public toilet facilities for women, in the UK the toilet provision ratio remains around 3:2 in favour of men; increasing provision favours providing more urinals for men as a cost-effective approach to reducing congestion (Greed 2005). On average women take longer than men to use the toilet (due to physiologies, the logistics of clothing, care giving to children and menstruation) and women's toilets need more space (i.e. because women sit in a cubicle) further reducing the provision available to women relative to men (Bauilie et al. 2009). Thus, allocating equal space to men and women's toilets is not sufficient to provide adequate provision for women.

Whereas funding for public toilets is declining in Europe and North America (Gershenson & Penner 2009), parts of Asia are seeing a "toilet revolution", with populous countries like China and India making a high profile push towards building and upgrading public facilities. The China National Tourism Administration is currently undertaking a "toilet revolution" - a 3 year scheme to build 33,000 toilets and renovate another 25,000 toilets across the country (CNTAIC 2016). In Shenzhen, the Urban Planning Land and Resources Commission issued a 2014 ruling for public toilets for women to outnumber those for men at a 1:2 or 1:3 ratio (Hong & Jian 2014).

Cleanliness and maintenance is a core issue in the longevity and usability of public toilet. Unclean toilets (e.g. faeces visible in the pan/bowl; smeared on the floor/walls; urine on the seat) ostracize different users in different ways depending on their needs. Many women are wary of sitting down on wet or dirty public toilet seats so will (either by choice or habit) hover over a sit toilet. In a UK study, 85 per cent of women attending a general gynaecological clinic hovered over public (seated) toilets and this practice was linked to a partial emptying of the bladder (Moore et al. 1991). Either squatting or standing, urinals can allow the user to urinate without touching any shared hardware so urinals have also been promoted to address this problem. In addition, bad smell presents an overlooked barrier to toilet adoption. Rheinländer et al (2013) report research among disadvantaged ethnic minorities in Northern Vietnam, children in Scandinavia, and schoolchildren in rural Senegal showed that stinking urinals and toilets were perceived as a major barrier preventing children from using school toilets. Success of urine diversion technology in the non-domestic setting, such as emergencies or public thoroughfares, requires measures for additional cleaning either by toilet design (Kvarnström 2006) or by a regular and paid latrine attendant (Bastable and Lamb, 2012). "(*W*)e each in turn tend to exercise less care the dirtier the facility we find" (Kira 1977, p.381), suggesting that monitoring and addressing small cleanliness issues will therefore encourage users to keep public toilet facilities clean.

Blocks of open female urinals have been provided in thoroughfares (Manila), market places (e.g. Ghana) and European city centres (e.g. the UriLift, a retractable stainless steel urinal designed to provide a late-night place to urinate) as well as festivals and public events in Europe (e.g. the Shewee and Pollee). Freeman et al (2012) find that students are more likely to urinate than defecate in school and suggest construction or rehabilitation of urinals in schools could alleviate the stress on existing conditions and lessen the need to construct new latrine facilities. Female urinal designs that replicate the male version without taking into account the privacy needs of women reproduce inequalities and inequities instead of resolving them. Women's urinals may be cheaper to construct and maintain but still require doors if they are to provide privacy.

Female urinal blocks are often dismissed (for good reason) due to women's modesty, menstrual hygiene management needs (MHM) and viability vis-a-vis simply constructing adequate numbers of toilets for women. There are a growing array of products and patents for female urination devices, FUDs, aimed at women who may need to urinate discretely and safely while they are out in public but away from toilets.

These are handheld devices aimed at helping women urinate standing up via a plastic funnel or discretely not having to disrobe.

Failure to provide equivalent toilet access for women constitutes illegal sex discrimination (Banzhaf 2016) and women have taken steps to hold actors to account when their rights have been violated. In the UK, the Ladies Sanitary Association argued for 'latrine accommodation for women' in the Victorian era. In Mumbai, men can use public urinals for free, whereas women don't have urinals and are forced to pay to use latrines. Thus, a social justice movement titled 'Right to Pee' was established urging Brihanmumbai Municipal Corporation to build adequate, free and safe urinals for women (BBC, 2015).

Discussion

To date, recognition and understanding of urination needs and behaviours has been slow, despite the frequency of urination compared to defecation. Joshi and Morgan (2007) report how urination practices and preferences vary across the lifecourse of pavement dwellers: young boys often defecate, urinate and even bathe in the open; defecating, urinating or even bathing on the streets are not preferred options for adolescent males; young adolescent girls report that, 'public toilets are not safe places to visit'. Men can choose to bathe, defecate and urinate in public; women experience a much greater discomfort in doing so, given the conditioning that this behaviour is not socially acceptable. There are very few examples of comprehensive multi-sectoral actions to address women's urination needs - responses tend to focus on technologies. Merely providing toilets does not mean people will use them. Efforts are needed to tackle the cost and affordability barriers for use of public toilets by women (Biran and Jenkins, 2010). Provision of adequate, private, clean, and safe toilets, with sufficient toilet breaks, is also needed in the workplace. In humanitarian camps women frequently report feeling too scared to go to the toilets because the locks on the toilets doors don't work or else men congregate around the toilets or the route to the toilet. One of the most in-demand products distributed to women in Camp de la Linière – the Dunkirk Camp – are adult nappies (Townsend, 2017)). Others - like Agasti - working in development contexts to improve access to public toilets in urban areas find that "providing a safe environment for women was as important as providing hygienic toilets" (Mairs, 2016) We suggest that by considering urination needs and behaviours - and not just technologies - may help to navigate sanitation away from home differently. Urination can also be a lens to approach other sanitation behaviours and habits. For instance, urination practices are a unique example of where it will be important to work differently with boys and men to transform norms, behaviours, and practices. Other examples of how urination could offer a new lens to other sanitation behaviours include:

- *Attention to handwashing*: Having smelly hands (e.g. after urination) can be a CLTS triggering tool for handwashing (Maulit, 2015)
- *Partial usage of toilets*: Urination could be a factor in the partial use of toilets (Chambers and Myers, 2016), related to norms around the acceptability of open urination. People may prefer open urination for fear of contamination from using "dirty" toilets, or the worry that people can hear you urinating.
- Understanding decision-making processes surrounding using toilets away from home. For example for menstruating women and girls: in Manila, Ellis et al (2016) found that menstruating girls reported not drinking or eating during school to avoid dirty toilets: Girl 5: We really don't go there even though we really need to urinate. Girl 4: That is why in the morning, we only drink a little so that we will not have an urge to urinate.
- Existing experience shows that communities are less likely to conduct their own appraisal and analysis of open urination and take their own action to become open urination free. However coalitions like the "Right to Pee" have shown the potential for a role in ensuring that women are at the forefront of experimenting with innovative solutions and in demanding accountability from public and private actors.
- Urination, public toilets and urinals present a particular set of issues for sexual and gender minorities (including intersex people). The North Carolina law, HB2, prevent people from using the public toilet that reflects their gender identity if that does not match the sex they were born (Walters, 2016). Without access to unisex facilities, transpeople are forced to go in places where they risk being subject to violence (Gershenson & Penner 2009).

Conclusion

Reaching the SDG targets of access to adequate and equitable sanitation and hygiene for all, by 2030 requires attention to urination needs as well as those of defecation. The priority of breaking the faecal–oral transmission routes has led to progress in understanding demand, disgust and triggers for change related to

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defecation. We must still have a lot to learn about other sanitation behaviours, habits and decision processes. To date, there is very little research on urination despite this being the more frequent excretion behaviour. This paper argues that more notice of the behaviours that surround urination is warranted. Meeting the urination needs of men and women in transit or away from home may offer some insights into the critical role of public toilets in achieving citywide sanitation. Furthermore, we suggest that using the lens of urination may help cast the spotlight on gender and vulnerability in a way that a focus on defecation alone hasn't. Urination specifically requires attention to both the physiological

differences and social determinants that define how, when and where women and men (as well as transgender and intersex people) urinate. Looking at urination behaviours and preferences may help us navigate sanitation behaviour and habits differently and ensure that increasing the availability of toilets/urinals will result in use. We are not saying that urination management is more important than defecation but in considering the challenges around urination offers a different perspective, where different people, different sanitation behaviours and different needs are highlighted.

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