LADIES AND GENTS
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PUBLIC TOILETS
AND GENDER
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When I was a graduate student at Yale in the late 1960s, my first act as a feminist was to participate in taking over the men's room in the stacks of the Yale Divinity School library. The small restroom—one urinal and one stall—was the only lavatory in the library, and women had to leave the building and walk a considerable distance in order to find a toilet. We staged a day-long sit-in, planted flowers in the urinal, and declared the facility unisex, which it remained until the library was refurbished.

Ten years later I joined the faculty of Manhattan College, just six years after it first admitted women. My female colleagues had many stories to tell about the administration's failure to plan for adequate women's bathroom space as part of the preparation for coeducation. The faculty member who was the most vocal advocate for women's toilets was known as the "toilet lady" and treated as if she were crazy. The first lavatory to be reassigned as a ladies' room turned out to have a row of urinals and no stalls! To this day, there is only one single-occupancy women's toilet on the floor with the largest number of women faculty members.

My experiences at Yale and Manhattan set me thinking about the ways in which toilets both reflect and enforce societal assumptions about gender and serve as important sites of struggle for social change. Issues surrounding toilets are located at the intersection of the inescapable materiality of the human body and the ways in which the body's demands are culturally and symbolically elaborated in relation to multiple social hierarchies. On one hand, elimination is a basic physical reality that, in the words of poet Marge Piercy, "only the dead find unnecessary." All human beings need to urinate and defecate, and excretion is potentially a great leveler, linking all persons in our common humanity. As a seventeenth-century English poem to the chamber pot quipped, "To kings and queens we humbly bend the knee, / but queens themselves are forced to stoop to thee." A young black
Potty Privileging in Perspective

Gender and Family Issues in Toilet Design

KATHRYN H. ANTHONY AND MEGHAN DUFRESNE

Although we are all forced to use them whenever we are away from home, public restrooms raise a host of problems: for women as well as men, for adults as well as children. Restrooms are among the few remaining sex-segregated spaces in the American landscape, and they remain among the more tangible relics of gender discrimination. How many times have you been trapped in long lines at the women's restroom? Why must women be forced to wait uncomfortably to relieve themselves, while men are not? Gender-segregated restrooms no longer work for a significant part of the population. Yet family-friendly or companion-care restrooms that allow males and females to accompany each other are still all too rare.

Why is this the case? And why have these problems persisted for so long? Architects, contractors, engineers, and building-code officials rarely contacted women to learn about their special restroom needs. And until recently, women were rarely employed in these male-dominated professions. Nor were women in a position to effect change. Even today, these professions remain clearly male-dominated. For example, as of 2001, women comprised just under 14 percent of all tenured architecture professors in the United States and only 13 percent of the American Institute of Architects (Anthony 2001). Yet, as more women gradually enter these professions, they increase the potential for change. And as we argue below, it is often a female legislator—or a male legislator who waited for his wife to use the restroom—who took the lead to address these pressing issues.

In recent years, feminist theorists have reexamined, reconceptualized, and recontextualized three philosophical categories: gender, power, and speech. Public restrooms can be viewed in light of all three categories. The issues raised here challenge the binary gender classifications that have traditionally restricted public restrooms to either males or females. They question the power structure reflected in the planning and design of public restrooms that, in many respects, privileges men over women. And they call for a new language to identify yet another “problem with no name.” In this respect, the power of labeling is key to legitimizing this problem. Just as sexual harassment, street harassment, and sexual terrorism existed long before the terms were invented, we propose that a new label, “potty privileging,” signifies the ways in which public restrooms have long discriminated against certain segments of our society, especially women. And we argue for an end to potty privileging.

We begin this chapter by describing how public restrooms historically have been settings for privileging one group and discriminating against another. We turn our focus to gender discrimination issues and how restrooms have tended to discriminate especially against women. At the same time, we discuss how restrooms have also been troublesome for many men, posing serious problems that can no longer be ignored. We examine how public restrooms have presented special health and safety problems for women, men, and children—family issues that span many types of users. We then address events leading to the passage of recent “potty parity” legislation, examining the impacts of and backlash against these new laws. Sources of information include an eight-year extensive literature review including legal research and media coverage of these issues. We searched several library databases, including LexisNexis Academic Universe, Wilson, ArticleFirst, and NetFirst, along with myriad Internet sources. This research is an outgrowth of our prior work in design for diversity (Anthony 2001, 2008; Anthony and Dufresne 2004a, 2004b, 2005, 2007) and the first author’s participation in the American Restroom Association (www.americanrestroom.org).

Relatively little has been written about gender and family issues in restroom design. Alexander Kira (1977) was among the first academics to examine both public and private restrooms in his landmark book The Bathroom. He covered the subject from multiple perspectives, including social, psychological, historical, and cultural. Marc Linder, a labor lawyer and political economist, and Ingrid Nygaard, a physician specializing in urogynecology, coauthored Void Where Prohibited: Rest Breaks and the Right to Urinate on Company Time (Linder and Nygaard 1998). While Linder and Nygaard do not focus on restrooms per se, they stress the physiological consequences that workers without legal protection face when not allowed rest breaks to urinate. Clara Greed’s (2003) Inclusive Urban Design: Public Toilets was the first book to address toilets as an integral part of urban design. Greed argues that toilets should be seen as a core component of strategic urban policy and local area design. She provides compelling evidence that toilets are valuable features in their own right as manifestations of civic pride and good urban design that add to the quality...

### Public Restrooms as Settings for Discrimination by Class, Race, Physical Ability, and Sexual Orientation

Placed in a broader framework, throughout American history public restrooms have reflected various forms of discrimination. Not only have they embodied gender discrimination, favoring the needs of men over those of women, but they have also mirrored social discrimination among classes, races, and persons of different physical ability and sexual orientation. Public restrooms provided by airports are a far cry from those found in Greyhound stations. Throughout much of the American South, until the passage of Title II of the Civil Rights Act in 1964, African Americans were forced to use separate restroom facilities from those of whites, due to the infamous Jim Crow laws. Such laws called for racially segregated hotels, motels, restaurants, movie theaters, stadiums, and concert halls, as well as transportation cars.

It was not until the passage of the Americans with Disabilities Act (ADA) in 1990 that public accommodations in the private sector—including public restrooms—were required to eliminate physical, communication, and procedural barriers to access (Wodatch 1990, 3). The transgender population still can be at a loss in deciding which public restrooms to use. For gay men and lesbians, public restrooms have long provided a venue for derogatory graffiti as well as hate crimes.

While public restrooms have reflected discrimination according to gender, class, race, physical ability, and sexual orientation, only race and physical ability have been addressed through federal legislation in the United States. No such federal legislation provides equal access to public restrooms for women. Restrooms still remain common sites of gender discrimination.

### Public Restrooms as Settings for Gender Discrimination

Gender discrimination in public restrooms can be seen in several spheres. In the workplace, legal scholar Sarah Moore (2002) argues, restroom inequality is a form of subtle sexism or sex-discriminatory behavior in office life. It often goes unnoticed and is considered normal, natural, or acceptable, but its effect is to maintain the lower status of women. Moore identifies four types of restroom inequity in the workplace and describes the results of courtroom battles for each of these:

- **Unequal restrooms**, where women’s restrooms are fewer in number, smaller in size, or more distant than men’s
- **Inadequate women’s restrooms**, where women and men have equal facilities but lack of soap or running water makes restrooms unhealthy for women
- **Missing women’s restrooms**, where women must share facilities with men
- **No restrooms at all**, where women must either “hold it” or seek whatever privacy nature might provide

Unequal restrooms often can be found where women as a group are new to the work environment. The U.S. Capitol Building in Washington, D.C., is one such example. On the House side is a “Members Only” bathroom behind the chamber; it is still a men’s room. Off Statuary Hall is the “Lindy Boggs” room, named after the U.S. representative from Louisiana, who, in the 1960s, corralled a suite with a restroom and sitting area for women members. Prior to that time, congresswomen lacked these basic necessities (Richie 2008). By contrast, congressmen walked a few feet away from the House floor, where their restroom had six stalls, four urinals, gilt mirrors, a shoe shine, a ceiling fan, a drinking fountain, and television. The ladies’ restroom on the first floor of the House side was remodelled in 2000, just in time for the Million Mom March, resulting in seven stalls where there had been four (Moore 2002).

After the 1992 election, in order to accommodate the growing number of women senators, Senate Majority Leader George Mitchell announced that he was having a women’s room installed just outside the Senate chamber in the U.S. Capitol Building. At that time, only a men’s restroom was located there, with the telling sign “Senators Only,” an implicit assumption that all senators were men. The two women senators who did not qualify for admission had to trek downstairs and stand in line with the tourists (Collins 1993). And it was not until 1994 that the U.S. Supreme Court, built in 1935, was renovated to include gender-equal facilities (Kazaks 1994). No doubt such oversights explain why potty parity has often been a pressing issue for women legislators, from the U.S. Capitol to fifty state capitols across the country.

The lack of potty parity can also be readily seen at places of assembly such as sports and entertainment arenas, musical amphitheaters, theaters, stadiums, airports, bus terminals, convention halls, amusement facilities, fairgrounds, zoos, institutions of higher education, and specialty events at public parks. Several journalists have argued for gender equity in publicly accessible restrooms. Their articles have appeared in the *New York Times*, *Redbook*, *Wall Street Journal*, and *Working Woman*, among others, as well as on ABC and BBC television. One of the more vivid accounts appeared in the *New York Times Magazine* (Tierney 1996):
I've seen a few frightening dramas on Broadway, but nothing on-stage is ever as scary as the scene outside the ladies’ room at intermission: that long line of women with clenched jaws and crossed arms, muttering ominously to one another as they glare across the lobby at the cavalier figures sauntering in and out of the men's room. The ladies' line looks like an audition for the extras in *Les Miserables*—these are the vengeful faces that nobles saw on their way to the guillotine—except that the danger is all too real. When I hear the low rumble of obscenities and phrases like “Nazi male architects” I know not to linger.

The work of researcher Sandra K. Rawls sparked greater awareness about the long queuing times that women endured. Her research painstakingly documented the obvious: women take about twice as much time as men to use restroom facilities. While men took a mere 83.6 seconds, women took almost three minutes (Rawls 1988). Her findings have often been cited in media articles. Long lines in women's restrooms have commercial implications. Rather than face a long wait at the restroom, many women feel compelled to curtail or avoid liquid intake during sporting events. As a result, while men can purchase as many hot dogs, sodas, and beers as they wish, women are less likely to spend money on concessions, if they do so at all.

Some women have given up waiting in lines altogether. When, out of desperation, they choose to enter the men's restrooms, they can pay a hefty price. The most famous case is that of Denise Wells, a legal secretary. In 1990, Wells was arrested upon entering the men's room after waiting in a long line at a concert at Houston's Summit, a seventeen-thousand-seat auditorium. The charge was violating a city ordinance. She had to plead her case in a court of law. A police officer testified that twenty women were waiting to enter the ladies’ room, and that the line spilled out into a hallway, while the men's room line did not even extend past the restroom door. The jury, two men and four women, deliberated for only twenty-three minutes and found Wells not guilty (Woo 1994). Her case attracted widespread attention and letters of support from women all over the world (Weisman 1992).

Convention centers pose similar dilemmas for potty parity. In this regard, an innovative solution was designed into the Colorado Convention Center at Denver, built in 1990, where architect Curt Fentress separated men's and women's restrooms with a movable wall. When groups whose membership is primarily women—such as the Intravenous Nurses Society—hold their conventions, walls can be moved so that the women's rooms are three times larger than the men's. Conversely, when a group such as the American Association of Petroleum Geologists meets there, the ratio can be reversed (Woo 1994).

Even the famed Getty Center in Los Angeles, designed by world-famous architect Richard Meier at a cost of $1 billion, was plagued by restroom problems in its early days. When it opened in December 1997, no restrooms were included in the North or South Pavilions, causing long lines to form at a small set of women's restrooms in the West Pavilion. In this regard, *Chicago Tribune* architecture critic Blair Kamin (2004) acknowledged, "any space that doesn't attend to the basics is setting itself up for disaster." More restrooms have since been added (Creamer 2003; “Posh Museum Has Pictures, Lacks Potties” 1998).

John Banzhaf III, a professor at the George Washington Law School, is considered the “Father of Potty Parity” after authoring “Final Frontier for the Law?” where he presents major cases, studies, and products related to potty parity across the United States. He discusses potty parity as the new frontier of feminism (Banzhaf 1990). Banzhaf argues that limited restroom facilities impose a special burden on females because a significant number of women at public places will be either menstruating or pregnant. In either case, waiting can lead to medical and health complications (Banzhaf 2002).

**Public Restrooms and Health**

Public restrooms pose a myriad of health and safety issues for women and men, adults and children. Yet for many reasons—pregnancy, attending to feminine hygiene needs, breast-feeding babies, and accompanying small children—women may frequent public restrooms more often than men. And as a result, public restroom deficiencies may affect women and children more adversely than they affect most men. Women conceal feminine hygiene products such as tampons and sanitary napkins in purses, bags, and other gear—along with wallets, cash, identification cards, and personal grooming items—that inevitably accompany them to the restroom. All too often, women drop such paraphernalia on a filthy bathroom floor. Men carry no such gear, and their loose clothing allows them to place wallets in their pockets. One might argue that if men carried purses, toilet stalls would have been designed much more sensitively years ago.

Even worse, often babies and small children end up on the floor of bathroom stalls. When handicapped-accessible facilities are available, users have space to accommodate both themselves and small children. Yet when these stalls are occupied, or in parts of the world where they are not required, parents have no choice but to squeeze children with them into a standard stall and onto a dirty bathroom floor. Given what environmental microbiologist Charles Gerba’s pioneering (2005) research has discovered—that the highest levels of microorganisms in public restrooms are found on floors in front of toilets—this situation is especially alarming.

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seat. Although toilet seat covers are standard features in California’s public restrooms, they are rarely found elsewhere. New and newly remodeled restrooms featuring automatic-flush toilets and touch-free faucets are a step toward improving this disparity.

Health dangers are especially problematic in educational settings. Because children face daily deplorable conditions in their school restrooms, many avoid them altogether and wait to use their bathrooms at home. The Opinion Research Corporation conducted a study on behalf of Kimberly Clark examining this issue. Their survey used a national probability sample of 269 adults who were parents and guardians of public school children from the seventh to twelfth grades. Results showed that almost 20 percent of middle and high school students avoid using school restrooms ("Parents Sound Off on School Restroom Conditions" 2002). More than one-third of restrooms at middle and high schools in the United States lack basic sanitary supplies such as toilet paper, soap, and paper towels (Barlow 2004; "Teens Blast School Restroom Conditions" 2004).

Even if the restroom is sparkling clean, when a woman has to hold her urine while waiting in long lines, she becomes a potential candidate for cystitis and other urinary tract infections that, if left untreated, can pose serious health problems such as renal damage. For pregnant women who must urinate often, waiting in long restroom lines can lead to urinary tract infections associated with low-birth-weight babies at risk for additional health problems (Banzhaf 2002b, Naeve 1979). Medical research reveals that constipation, abdominal pain, diverticuli, and hemorrhoids can result if individuals delay defecation (National Institutes of Health 1995).

Many individuals suffer from invisible disabilities, intermittent or chronic medical conditions that require unusually frequent restroom use. These include overactive bladder, urinary tract infections, and chronic digestive illnesses such as irritable bowel syndrome, ulcerative colitis, diverticular disease, and Crohn’s disease that affect both genders (Benirschke 1996). The availability of public restrooms—or lack thereof—severely hampers their daily activities, causing many to stay home. Cold weather and side effects of certain medications can also cause individuals to need restrooms more often. Small children often face emergencies where they suddenly need to relieve themselves (Schmidt and Brubaker 2004).

A disorder called paruresis, making it impossible for someone to urinate in public if others are within seeing or hearing distance, affects over 20 million Americans, about 7 percent of the population. This condition is also known as shy bladder syndrome, bashful bladder syndrome (BBS), bashful kidneys, or pee-phobia. Nine of ten sufferers who seek treatment are men, although women, too, can have extreme cases. According to Steven Soifer, coauthor of Shy Bladder Syndrome, about 2 million people suffer so seriously from BBS that it interferes significantly with their work, social relationships, and other important activities. It can ruin lives and careers and even end marriages. Some boys become targets for bullying—not perceived as being “manly” enough to stand up, show their equipment, and use a urinal—merely by entering a toilet cubicle. The result can lead to lifelong problems stemming from feelings of powerlessness. People with paruresis are unlikely to be able to perform a urine test for jobs that require it as part of the employment application process, and hence are knocked out of the running. Improved restroom design—an end to urinal “troughs,” greater space between urinals, the construction of floor-to-ceiling partitions between urinals, and doors on all toilet stalls—can have a strong impact on the symptoms of paruresis sufferers (Soifer et al. 2001; Wolf 2000). Recent plumbing codes have addressed this problem by requiring more sizable partitions between urinals in new construction and major building additions.

Public Restrooms and Safety

In the worst instances, the lack of alternatives to the standard men’s room and women’s room poses a serious risk to our personal safety. What happens when a single mother takes her young son to a restroom, or when a single father accompanies his young daughter? Sometimes allowing unaccompanied children to use a public restroom can place them in harm’s way—and even lead to their death.

Take the tragic case of nine-year-old Matthew Cecchi, in Oceanside, California, a 1998 story that made national headlines (Reuters 1998). Matthew’s aunt waited for him outside a public restroom at a paid camping area at the beach. While Matthew was using the men’s room, a man entered, exited minutes later, and walked away. When Matthew failed to come out, his aunt realized something was wrong. Her nephew had been brutally murdered. The man who entered and exited the restroom, a twenty-year-old drifter, slashed young Matthew’s throat from ear to ear. Although a rare occurrence, this could happen to any child when his or her caregiver of the opposite sex is forced to wait outside a public restroom. Such horrific criminal behavior has served as justification for closing public restrooms altogether. Yet avoiding the problem is not solving it. Instead, we argue that cases like Cecchi’s underscore the need to develop new prototypes and transform restrooms into safe, family-friendly spaces.

In fact, public restrooms provide convenient hiding spots for criminals, and all are potentially vulnerable. One can argue that men’s use of urinals renders them more likely than women to be victims of public restroom crimes. While women are locked away and temporarily protected in toilet stalls, men, while using the urinal, are much more vulnerable. Public men’s rooms often are venues for drug deals, drug taking, and other criminal activities.

Furthermore, some individuals are vulnerable to danger in restrooms due to their fragile mental or physical conditions. As the baby boomer pop-
ulation reaches retirement age, the numbers of those with Alzheimer’s disease, Parkinson’s disease, cancer, and other mental and physical disabilities are increasing rapidly. Today, over 5 million persons suffer from Alzheimer’s; in the past decade the numbers have skyrocketed to epidemic proportions. Those afflicted by such infirmities are often unable to use a restroom alone—yet now they are forced to do so. An anxious family member of the opposite sex must wait outside. The present alternative to this dilemma is for them to remain homebound, causing both patient and caregiver to become increasingly isolated from the everyday world.

Must we all face experiences like these to wake up to the reality that family-friendly restrooms are a right, not a privilege, that we all deserve?

Potty Parity Legislation as a Response

Potty parity legislation first made national headlines in 1974, when California Secretary of State March Fong Eu smashed a toilet bowl on the steps of the State Capitol in Sacramento as part of her successful campaign to ban pay toilets in her state. In 1975, New York State outlawed pay toilets in response to charges that they discriminated against women because all women were required to pay for toileting, while men could still use urinals for free. Pay toilets have since been outlawed across the United States. Yet in many parts of the world, pay toilets for women are still commonplace.

Potty parity laws requiring greater access to women’s restrooms have been passed in several states. Currently, about twenty-one states and several municipalities have statutes addressing potty parity (Anthony and Dufresne, 2004a). While these laws have made great strides for women by increasing the number of available toilet stalls, they have not yet improved the quality of restrooms for women or for men. As a result, many public health and safety issues remain unresolved. Furthermore, almost all potty parity laws apply only to new construction or major renovations of large public buildings, where at least half the building is being remodeled. Despite the fact that these laws represent substantial progress, most of the older building stock remains unaffected. So in most cases, when nature calls, women still must grin and bear it.

Who has initiated such legislation? It is often either the rare female state legislator or the enlightened male state legislator who has been inconvenienced by waiting for his female companion. In 1987, California led the way when State Senator Art Torres (D.-Los Angeles) introduced such legislation after his wife and daughter endured a painstakingly long wait for the ladies’ room while attending a Tchaikovsky concert at the Hollywood Bowl. The bill became law that same year (Woo 1994). In Chicago, Building Commissioner Mary Richardson-Lowry introduced potty parity, spearheading its integration into that city’s Municipal Building Code. Chicago’s potty parity ordinance passed in 2001 and was applauded by women in Chicago and around the country (Spielman and Hermann 2004). In 2005, New York City legislators passed the Restroom Equity Bill (Anderson 2005). It amended the city’s building code by requiring all new bars, sports arenas, movie theaters, and similar venues to have a two-to-one ratio of women’s to men’s stalls.

The nature of potty parity laws differs in various states and cities. Most states require new ratios of two women’s toilet stalls to one men’s stall, while others require a three-to-two or simply a one-to-one ratio. A range of definitions exists about which places are and are not required to achieve potty parity. A key question has been raised in the legal literature about exactly what equality in restrooms means: is it equal square footage, equal toilets, or equal waiting time? In our opinion, Wisconsin’s law is a model, as it defines potty parity terms of equal speed of access for women and men (Moore 2002).

But is potty parity legislation the only means by which gender discrimination in public restrooms can be remedied? In fact, a more powerful means exists in the revision of building codes that could set the standards for all buildings in all states. The 2003 International Building Code (IBC) called for more water closets in stadiums for both men and women than had been previously required. It also called for family restrooms in certain building types. Yet the 2003 IBC’s “Minimum Number of Required Plumbing Facilities” still called for only equal numbers of water closets for men and women in nightclubs, bars, taverns, and dance halls (one fixture for forty occupants), as well as in restaurants, banquet halls, and food courts (one fixture for seventy-five occupants). (International Building Code 2003). Subsequent versions of the IBC show some additional improvements (International Building Code 2006).

Although such changes in building codes are steps in the right direction, they have not gone far enough. Regarding the number of toilets required, updated building codes, like potty parity legislation, apply only to new construction, major renovations, and additions—not to existing buildings. Once again, the vast majority of the older building stock remains fundamentally unchanged. Further changes to building codes—for example, if and when feasible, requiring upgrades of toilet facilities in existing buildings, as is required for ADA compliance—could lead to even more sweeping improvements in restroom design nationwide.

Impacts of Potty Parity and Its Backlash

What have been the impacts of potty parity legislation? While women rejoiced, men protested—especially in sports settings.

As a result of the Tennessee Equitable Restrooms Act that increased the proportion of female to male restrooms, at Nashville’s new Adelphia Coliseum, built in 1999 for the Tennessee Titans football team, a snake-like line of forty men formed at the top level, forcing some to wait fifteen to
twenty minutes to use the restroom. Security officers had to station themselves at the exits to some men's rooms in order to stop those who tried to avoid the line by entering the wrong way. One police officer was quoted as saying, “We're just trying to keep fights down” (Paine 1999).

Soon after it was built, an exemption from the state's new mandate of two women's toilets for every man's toilet (2:1 ratio) was filed for Adelphia Coliseum. Even the state architect acknowledged that the state's potty parity law needed more flexibility. Yet State Senator Andy Womack argued against the exemption bill, saying that lawmakers were “micro-managing. . . . The intent of the original bill is to give parity. Now we're carving out exceptions to parity” (de la Cruz 2000; Jowers 2000; "State's Potty Parity Too High" 2000). Ironically, in a matter of months, men could undermine a law that attempted to relieve decades of discomfort from women.

Soldier Field, the renovated stadium for the Chicago Bears that reopened in 2003, also prompted heated controversy. When new construction improved wait times for women's restrooms, men were forced to wait fifteen minutes or more at some restrooms, especially in the end-zone sections (Spielman and Hermann 2004). In response to complaints, five women's restrooms were converted to men's rooms. Measurements taken during summer 2004 after the change revealed that while the wait for men was reduced, the wait time for women increased. The city was to assess the situation at the end of 2004 to ensure that average wait times were balanced between male and female fans (Hermann 2004).

Los Angeles Times reporter Carla Hall lamented that “the laws governing women's bathrooms seem to change only when men are inconvenienced.” We assume she refers to the fact that it was often sensitive males, frustrated by waiting for their female companions, who made the case for potty parity legislation. She noted that although the situation has improved slightly for women across the United States over the past decade, potty parity laws apply only to certain types of buildings, such as sports venues, concert halls, and theaters, whereas restaurants and clubs are generally omitted (Hall 2001).

Ironically, while women have waited in long ladies' room lines for years, the passage of potty parity laws created an uproar among some men who may never have had to wait in line before. Cutting in line, entering in the exits, and even fistfights resulted. More important, some men rushed to undo the new potty parity laws before the ink had even dried. The potty parity backlash leads us to question: will gender equity in restrooms ever be possible, or will it remain just a “pipe dream”?

Conclusion

In the future, improved technology may play a role in alleviating potty privileging. Some progress is already underway, such as the development of a female urinal, the She-Pee or TravelMate (Penner 2005; “Travelmate Urinary Products Overview” 2003). Yet gender equity in public restrooms is still a long way away.

In retrospect, public restrooms raise a host of complexities and contradictions. While attendants provide safety for men and women, they pose problems for men and women with paruresis. Reducing long lines for women can result in increased lines for men. The need to conduct private behavior in a public place can promote a sense of psychological discomfort and territorial invasion. Our feelings about the body, sex, elimination, privacy, and cleanliness are all called into question in public restrooms. In contrast to sacred spaces, such as houses of worship, that promote a sense of community, spirituality, and inspiration, restrooms are “secret spaces” into which we silently disappear, remaining faceless among strangers.

Whether we want to or not, we must visit them several times a day. Men and women, girls and boys, of every ethnic background, every social role, all use them. Virtually every building type must have them. In fact, they are among the most prevalent spaces in our built environment—and places that affect us all.

As we have shown, because of design decisions uninformed by women users, clients, code officials, and designers, millions of women, men, and children around the world suffer from poorly designed and maintained restrooms. As increasing numbers of women infiltrate the design and building construction professions, and as more women legislators enter the political system, a significant number of women's restrooms have gradually begun to improve. However, compared to the sweeping changes prompted by the Americans with Disabilities Act that mandated improvements benefiting persons with disabilities, the changes benefiting women have been achieved at a snail's pace. And most public restrooms still remain woefully inadequate for women's special needs—menstruation, pregnancy, breastfeeding and pumping—and men's basic needs for privacy.

Gender and family issues in restrooms must no longer be cloaked under the guise of modesty. They can no longer continue to be swept under the rug. Architects, building construction officials, and legislators around the world must call for an end to potty privileging—and the beginning of a new era of sensitive restroom design for women, men, and children.

References


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