ASLEF The train drivers’ union

>>> Health Implications of not having access to toilets at work
HEALTH IMPLICATIONS OF NOT HAVING ACCESS TO TOILETS

The health implications of not having access to toilets at work

The lack of access to safe, clean, and appropriate toilet facilities, and the lack of opportunity for workers to access them during their working day, is a human rights issue, an occupational health and safety issue, an equalities issue, and a public health issue.

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A public health issue

Workers who cannot access toilet facilities, or feel that they cannot take the time to do so, may be forced to urinate in public areas, defecate in the open, use containers, or even soil their clothes or seat.

As well as being hugely stressful and humiliating, the related public health impact affects not only the worker themselves, but also their colleagues, cleaning staff and the public, who are all potentially exposed to human waste.

It also leads to untreated human waste getting into the environment, which pollutes and can spread deadly and chronic disease such as cholera, hepatitis, polio, diarrhoea and typhoid.

Access to toilets and washing facilities is therefore essential for public health to prevent the spread of disease.

The COVID-19 Coronavirus pandemic has thrown into stark relief the importance of hygiene and access to adequate toilet and hand washing facilities in the prevention of the spread of transmissible diseases.

An occupational health and safety issue

Lack of access to safe, clean toilet facilities can have a substantial impact on the health and safety of workers and can cause a range of health problems, including serious life-long issues.

Inadequate facilities or a complete lack of facilities impacts on workers’ well-being and dignity at work, and can contribute to work-related stress and anxiety. A lack of toilet breaks and, in particular, regular scheduled breaks can compound these problems.

There are a number of health risks for workers associated with lack of prompt access to suitable toilet and washing facilities.

COVID-19

COVID-19 Coronavirus is a contagious disease caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). COVID-19 is primarily transmitted between people through respiratory (droplet and aerosol) and contact routes. Small particles of the virus can remain suspended in the air from minutes to hours. Touching a contaminated surface or object may lead to infection.

Regular handwashing is recommended to help prevent transmission of the virus. Shared workspaces, like bathrooms, should be regularly cleaned and sufficiently ventilated, in order to prevent transmission of the virus within workplaces. Running water, soap and hand drying facilities should be provided.

COVID-19 typically presents with respiratory symptoms, however some experience gastrointestinal symptoms. COVID-19 has been detected in blood, faeces and urine, indicating a risk from human faeces through faecal-oral/respiratory transmission.
Metabolic Waste and Dehydration, and Consequential Harm

Urination is an important and essential biological process, whereby metabolic waste products, such as water, minerals and salts, urea and uric acid, are removed from the body. The accumulation of these wastes inside the body can be harmful. Drinking plenty of water and regular urination are important in ensuring the kidneys and urinary tract are healthy and functioning normally.

Workers who are denied access to toilet facilities or adequate toilet breaks, may be forced to ‘hold it in’ until their scheduled break or end of shift and may restrict the amount of liquid they drink. Intentionally restricting fluid intake in order to reduce the need to urinate could result in dehydration, which can in itself can cause health issues or exacerbate existing medical conditions, particularly if it is a regular occurrence.

Dehydration can cause reduced physical performance, reduced short-term memory, depressed mood, constipation, cystitis, urinary tract infections, increased risk of kidney stones, headaches, stress, and reduced levels of alertness, all of which can then be further exacerbated if working in hot conditions.

Urinary Tract Infections

Bacteria that are naturally present in the urinary tract, and usually excreted with urine, may accumulate and multiply when the urine is held in the bladder, and this can result in an urinary tract infections (UTIs). UTIs are painful, can result in more frequent and painful urination and once triggered can keep recurring.

Not drinking enough fluids can also increase the risk of UTIs, with the NHS recommending, amongst other things, drinking plenty of fluids, particularly water, so that you regularly urinate during the day to help prevent their occurrence.

Kidney Stones

Holding in urine and drinking too little water can increase the risk of kidney stones, especially in people who have a history of this condition.

Kidney Stones form when waste products in our body calcify and develop into crystals. Urine contains high amounts of minerals such as calcium oxalate and uric acid, which can lead to the formation of stones. This can be a very painful condition and in some cases may require surgery.

A kidney stone that blocks the ureter can lead to kidney infections because waste products are unable to pass the blockage, which may cause a build-up of bacteria.

Bowel Movements and Consequential Harm

Just as sufficient hydration and regular urination is important, regular bowel movements determine the functionality and the health of the alimentary tract. Limited access to toilet facilities or insufficient toilet breaks can impact on the gastrointestinal system and lead to constipation and related problems.
Regularly ignoring the urge to go the toilet can cause constipation, as can, not drinking enough fluids, not moving enough or spending long periods sitting or lying down. If the urge to defecate is not acted upon, the material in the rectum (stool) travels from the rectum back up to the colon, where the water in the stool is reabsorbed into the body.

Fluid restriction and underhydration can compound the problem by reducing the water content of a stool. Constipation can cause abdominal bloating and pain, and can lead to nerve damage in the rectum, anal fissures (tears in the tissue) and can make veins surrounding the anus swell, resulting in haemorrhoids.

Long-term constipation can lead to faecal impaction. Faecal impaction is a solid, immobile bulk of faeces that can develop in the rectum as a result of chronic constipation and can cause immense discomfort and pain, nausea and vomiting and can be very dangerous.

Physical inactivity, not drinking enough water, as well as holding in bowel movements, are all thought to contribute to impaction.

**Cancer**

People with chronic constipation may be at increased risk of developing colon cancer and associations have also been found between water intake and bladder, breast, and colon cancer. So not being able to drink sufficient water may have even more serious long-term consequences.

**An equalities issue**

A lack of access to suitable toilet facilities could directly or indirectly disadvantage those with legally protected characteristics, such as women, older workers or disabled workers, and place them at increased risk.

There are many medical conditions that require regular and/or increased access to toilet facilities, some of which may be defined as a disability under the Equality Act 2010. Many will be a hidden or invisible disability, which is a physical, mental or neurological condition that is not visible from the outside, yet can limit or challenge a person's movements, senses or activities.

Under the Equality Act 2010, reasonable workplace adjustments must be made to accommodate people with disabilities. Employers must take positive steps to remove barriers to disabled people accessing the workplace and ensure that the conditions of work don't further discriminate against or detriment people with disabilities and underlying health conditions.

Some medical conditions that require an increased need for adequate toilet facilities and breaks include:

**Diabetes**

Symptoms often include frequent urination, increased thirst and increased appetite. Some diabetics will also want access to a clean and private location to test blood sugar at times that may not correspond to their scheduled breaks. Over time, diabetes can lead to nerve damage that affects urinary urgency, both increasing bladder reactivity and limiting the bladder sensation of fullness.

**Sickle cell anemia**

This condition can affect kidney function and the concentration of the urine, and
cause people with sickle cell anemia to urinate more frequently.

**Interstitial cystitis**

This bladder condition causes long-term pelvic pain and problems urinating. It tends to first affect people in their 30s and 40s, and is much more common in women than men. Symptoms include intense pelvic pain, sudden strong urges to urinate, and increased urinary frequency.

**Overactive bladder (OAB)**

A condition where there is a frequent feeling of needing to urinate to such a degree that it negatively affects a person's life. The frequent need to urinate may occur during the day, at night, or both.

Overactive bladder is estimated to occur in 7-27% of men and 9-43% of women. It becomes more common with age. Another common sign of OAB is a sudden, urgent need to urinate immediately.

**Irritable bowel syndrome (IBS)**

This common condition affects the digestive system. The main symptoms are: stomach pain or cramps, bloating, diarrhoea, and constipation. IBS can also cause problems with the frequency and urgency of urinating, and bowel incontinence. The symptoms tend to come and go over time, but can last for days, weeks or months at a time. It’s usually a lifelong problem.

**Crohn's Disease**

A lifelong/chronic condition where parts of the digestive system become inflamed. Symptoms include diarrhoea, stomach aches and cramps, blood in your stools, fatigue, and weight loss. Symptoms may be constant or may come and go every few weeks or months.


**Ulcerative Colitis**

A long-term condition where the colon and rectum become inflamed. The main symptoms are recurring diarrhoea, which may contain blood, mucus or pus; stomach pain, and needing to empty the bowels frequently.

**Prostatitis**

An inflammation of the prostate gland that can cause urinary frequency, urgency, and pain. Prostatitis can come on at any age, but usually occurs in men between the ages of 30 and 50.

**Benign Prostatic Hyperplasia/Benign prostate enlargement (BPE)**

BPE is the medical term to describe an enlarged prostate, a condition that can impact urinary frequency, urgency and retention.

It is common in men aged over 50. When the prostate becomes enlarged, it can place pressure on the bladder and the urethra which can lead to difficulties urinating, a more frequent need to urinate, and difficulties fully emptying the bladder.

Due to the extra work which the bladder muscles have to do, over time the bladder's muscular wall can become thicker and less flexible and the bladder
can also become overactive and irritable. This can cause the need to pass urine urgently, urge incontinence and the dribbling of urine.

Diverticulitis

An inflammation of one or more diverticulum, which are pockets that form in the smooth wall of the intestine. The reason that diverticulitis develops is not entirely known, but it is believed to be because faeces becomes trapped within a diverticulum. Bacteria contained within the faeces then start to grow in number causing an infection.

Diverticular disease is a related condition when the diverticula that protrude outwards from the wall of the large intestine cause discomfort or pain in the belly.

Symptoms include: tummy pain, usually in the lower left side, that tends to come and go and gets worse during or shortly after eating, constipation, diarrhoea, or both and, occasionally, blood in the faeces.

The impact on the health and safety of women and gender diverse people

Violence, Harassment, Stress and Anxiety

A lack of access to safe, clean toilet facilities is a gender-sensitive issue, which affects women, men, transgender and gender diverse people in different ways.

Not having access to suitable toilet facilities can disproportionately impact and detriment women and those assigned female at birth, trans people and non-binary people, and their health, safety and well-being. A lack of adequate toilet facilities and adequate time to access toilet facilities could prevent women and gender diverse people from fully engaging in or accessing the workplace.

Sex and gender re-assignment are protected characteristics under the Equality Act 2010.

Trans people are vulnerable to abuse and harassment and, for many trans and non-binary people, using either the women’s or the men’s room might feel unsafe, because others may verbally harass or even physically attack them. Women having to use men’s toilets or urinate in public or behind buildings also risks sexual harassment or assault, in addition to embarrassment and shame. A lack of toilet facilities or sufficient number of facilities available for all may also cause work-related stress and anxiety.

Menstruation/period dignity

Hygienic, private bathrooms with clean, warm running water, sinks, soap, and sanitary disposal is essential for women and those assigned female at birth to manage menstruation safely and with dignity. Menstruation brings an increased need to access toilet facilities. Menstruation can also increase the need to urinate
more frequently, with diarrhoea being a common premenstrual symptom. Sanitary products must be changed regularly and safely, and disposed of safely, so adequate sanitary disposal facilities should be provided, as well as ensuring adequate time in the working day to do this.

**Toxic Shock Syndrome (TSS)**

TSS is a rare but life-threatening condition caused by bacteria getting into the body and releasing harmful toxins. It is often associated with tampon use in young women and the use of high-absorbency tampons, which women may use because their period flow is heavy or because they may have to go a long time before being able to change their tampon.

To prevent toxic shock syndrome it is recommended that tampons should be changed regularly - usually at least every 4 to 8 hours, with hands washed both before and after inserting a tampon.

Although TSS is extremely rare, lack of access to suitable toilet facilities or long periods of time without being able to go to the toilet can increase the risk, as women aren't able to change their tampons often enough or may be forced to use higher absorbency tampons.

**Fibroids**

These are non-cancerous growths that develop in or around the uterus, and are common, with around 1 in 3 women developing them at some point in their life. They most often occur in women aged 30 to 50 and are thought to develop more frequently in women of African-Caribbean origin. Symptoms include heavy or painful periods, abdominal pain, lower back pain, a frequent need to urinate, and constipation. This common condition demands increased access to toilet facilities for urination and to change sanitary products.

**Endometriosis**

This condition sees tissue similar to the lining of the womb start to grow in other places, such as the ovaries and fallopian tubes. Ten percent of women worldwide have endometriosis. It can affect women of any age and is a long-term condition that can have a significant impact on a person's life. Symptoms of endometriosis include: pelvic pain, severe period pain, pain when urinating, nausea, constipation, diarrhoea, or blood in the urine.

Those suffering from endometriosis may also have heavy periods, need to use lots of pads or tampons, and may bleed through their clothes, and so will need regular access to suitable toilet facilities to manage this condition.

**Pregnant workers/new and expectant mothers**

Pregnant workers, new and expectant mothers may have an increased need to use the toilet. Pregnancy can cause constipation, nausea and vomiting. Hormonal changes increases urine production and the growing uterus puts pressure on the bladder, both increasing the urge to urinate. Holding in urine can lead to Urinary Tract Infections (UTIs) which can be of extra concern during pregnancy as they may lead to preterm labour and low birth weight. It is important to drink plenty of water while pregnant or breastfeeding and this will also increase the need for toilet breaks and suitable toilet and rest facilities.

**Menopause**

Inadequate toilet and washing facilities can directly impact on those who are menopausal. Although menopause is generally experienced by older women, younger women, as well as intersex, non-binary and transgender people may also experience menopausal symptoms. These include sweats and hot flushes, urogenital problems such as increased frequency and urgency to urinate and irregular and/or heavy, painful periods.
World Toilet Day

World Toilet Day is an official United Nations international observance day held annually on 19 November to inspire action to tackle the global sanitation crisis.

Find out more at worldtoiletday.info

Further information and references

This list is also available with links at aslef.org.uk/toilet-access

General Articles

https://www.nap.edu/read/25960/chapter/1

Lack of toilet access ‘risks transport workers’ health’:
https://www.personneltoday.com/hr/transport-workers-toilet-access-risks-health/

The ITF Transport Workers’ Sanitation Charter:

Some health risks associated with lack of prompt access to appropriate toilets and washing facilities:

Japan bullet train driver disciplined for leaving controls to go to toilet:
https://www.theguardian.com/world/2021/may/21/japan-bullet-train-driver-disciplined-for-leaving-controls-to-go-to-toilet

COVID-19

COVID-19: faecal–oral transmission?
https://www.nature.com/articles/s41575-020-0295-7
HSE – Cleaning, hygiene and handwashing to make your workplace COVID-secure:

COVID-19: epidemiology, virology and clinical features:

Pregnancy

UTIs During Pregnancy:

All About Frequent Urination in Pregnancy:

HSE New and expectant mothers who work - A brief guide to your health and safety:
https://www.hse.gov.uk/pubns/indg373.pdf

Gender and equalities

Understanding Non-Binary People: How to Be Respectful and Supportive:
https://transequality.org/issues/resources/understanding-non-binary-people-how-to-be-respectful-and-supportive

Equality of toilet provision – The Equality Act 2010:
https://accessible-toilet-project.blog/2015/11/03/equality-of-toilet-provision-the-equality-act-2010/

Invisible disability

What is an invisible disability?
https://invisibledisabilities.org/what-is-an-invisible-disability/

Invisible disabilities in the workplace:
https://www.shponline.co.uk/wellbeing-2/invisible-disabilities-in-the-workplace/?elq_mid=5685&elq_cid=1839653

On the Footplate with Crohn’s Disease – Disability History Month:

Invisible Disabilities: List and General Information, includes Colitis, Crohns disease, IBS, etc:
https://www.disabled-world.com/disability/types/invisible/

How to Support Hidden Disabilities in the Workplace:
https://www.highspeedtraining.co.uk/hub/invisible-disabilities-in-the-workplace/

Bladder health

A healthy bladder: a consensus statement:
https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3206217/

Overactive bladder in men: a practical approach:
https://bjgp.org/content/68/671/298

Menstruation and Menopause

Four ways your period messes with your toilet habits:
https://www.cosmopolitan.com/uk/body/a41600/period-diarrhoea/
Top menstrual cycle symptoms: Clue survey results:
https://helloclue.com/articles/cycle-a-z/top-menstrual-cycle-symptoms-clue-survey-results

Endometriosis facts and figures
https://www.endometriosis-uk.org/endometriosis-facts-and-figures

After the Menopause:
https://www.bladderandbowel.org/bladder/bladder-resources/after-the-menopause/

ASLEF: menopause in the workplace campaign
https://aslef.org.uk/campaign/menopause-workplace

Hydration

Drink Up! Water Supports the Body and May Help Reduce Cancer Risk:

Physical Inactivity, Water Intake and Constipation as Risk Factors for Colorectal Cancer among Adults in Jordan:

‘Holding it in’

What happens to your body when you hold on to go to the toilet – it’s not good:
https://www.mirror.co.uk/lifestyle/health/what-happens-your-body-you-12386067

Stop holding it in! 4 bodily functions you should let out:

Holding in your urine for long is hazardous to health:
https://kauveryhospital.com/blog/urology/holding-in-your-urine-for-long-is-hazardous-to-health

Chronic constipation linked to increased risk of colorectal cancer:
https://www.sciencedaily.com/releases/2012/10/121022081228.htm

Definitions

Urination:

Defecation:

Faecal Impaction:
https://en.wikipedia.org/wiki/Fecal_impaction

Fecal-oral route:
https://en.wikipedia.org/wiki/Fecal%20oral_route

Information about specific conditions

NHS - Urinary Tract Infections:
https://www.nhs.uk/conditions/urinary-tract-infections-utis
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### Health Services, Support and Advice

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