

Toilets: no laughing matter

Invariably, when the topic of toilets comes up, people laugh. We all have deep-seated attitudes and inhibitions about the use of toilets, and for good reason. It is a private space. However, the laughing should not be allowed to conceal the importance of usable toilets for people with dementia.

Wheelchair users have succeeded, to a great extent, in ensuring that there is usually a toilet available that enables them to use it. But no such priority has been given to the needs of people with dementia. Being able to find, and then safely use, a toilet is crucial if people with dementia are to participate in society and use public spaces such as bus and train stations, museums, cinemas, concert halls, service stations, hotels and so on.

Article 29 of the UN Convention on the Rights of Persons with Disabilities asserts the right to participation in political and public life, while article 30 sets out the right to participation in cultural life, recreation, leisure and sport. If people with dementia are effectively prevented from participating in these ways – because toilets are inaccessible – their human rights have been infringed.

There is a clearly observable trend, increasingly mentioned in the media, for ever more incomprehensible signage and equipment for toilets. The reasons for this are debatable, but the impact is devastating for people who are struggling to make sense of it.

To take one example, Morag Dunning (not her real name) had to accompany her mother to the toilet in the club they went to regularly because her mother was unable to use the taps, soap dispenser and hand drier. Morag was outraged because her mother could cope independently with the toilet at home, yet she had to seek the help of her daughter if they

Toilets as a subject of conversation may raise a smile, but when it comes to dementia they are no laughing matter.

Mary Marshall explains why

went out together.

Many public toilets are not even age-friendly, let alone suitable for people with dementia. It is not difficult to work out what is needed if we start with the impairments most common for older people and then carry on to those of people with dementia.

Most older people will have some deterioration of their muscles; the ones often neglected in design are those of the neck and shoulders (signs need to be lower down) and those of the wrist and hands (flush buttons are really

difficult). Most older people will have a degree of impaired sight so need good contrast and at least double the levels of light necessary for younger people.

Hearing usually deteriorates and is often accompanied by hypersensitivity, which means noisy driers are hard to tolerate. Balance is often affected as proprioception and the labyrinth of the ear are less effective, meaning that cramped and crowded spaces are increasingly tricky. An often unmentioned impairment is the need to get to the toilet quickly as a consequence of either

prostate problems or weaker pelvic floor muscles. This often causes high levels of anxiety.

If we combine these normal impairments of ageing with those common for people with dementia, we can begin to understand why so many public toilets are a problem. If you have an impaired memory, you are often making sense of the world using past experience. But many modern toilet signs bear no relation to past experience and are therefore incomprehensible.

These signs should either be familiar from the past or at least very obvious. If you combine poor sight with a loss of recent memory, stick figure signs are often meaningless. An impaired ability to learn will mean that people may not remember where



Far left: Bad – mirrors and stainless steel predominate, causing confusion for people with dementia

Left: Good – simple colour contrasts work well at Monkwearmouth acute dementia unit in the UK

Below: Bad – toilet sign is too high



Above: Bad – the only easily visible features to the ageing eye are the toilet roll holders, brush holder, toilet paper tube and the emergency pull!



Above: Good – toilet sign leads the way. Credit: StudioLR



Above: Bad – this frequently used toilet sign sows confusion



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the toilet is, even if they have used it before. Perhaps the most profound impairment is that of reasoning. If you struggle to work things out, much modern signage and equipment is impossible.

Many people with dementia have sensory challenges (Houston 2015), especially perceptual problems. This can result in seeing a step when there is a change in floor tone or a contrasting threshold strip, or perceiving specks in the floor covering as litter. Elaborate patterns can seem as if they are moving.

Finding the toilet is the first challenge if you have dementia. My father walked straight past the toilet door in the airport and got lost because he failed to understand the sign which was both too high and too abstract. Here are some rules for signs:

- They may need to be high in big spaces but there should also be low ones on the door itself (1.2 metres from the floor).
- There should be colour contrasts both within the sign

itself and between the sign and what it is fixed to.

- They should have words and a meaningful picture or diagram.

There are several entertaining (and worrying) web pages of funny toilet signs, all requiring a degree of reasoning to work out.

Entering the toilet cubicle is often off-putting for people with dementia who can neither see nor understand the engaged / vacant signs. The standard issue is a small red and white indicator which is meaningless, even if someone can see it. Many people with dementia wait until someone comes out so they know the cubicle is vacant.

Once in the toilet, it can be difficult to see anything because the whole place is white. Unless the seat, the paper dispenser and the cistern contrast with the wall and floor, they can be invisible to the ageing eye. There are then further challenges. Is the toilet paper reachable and in a container that makes sense? Is the flush a

normal lever? Is the lock to get out easy to understand and use?

Here is another example from real life. Ann Bennett (not her real name) got stuck in the toilet because she could not work the lock. A caretaker managed to break the lock but not before a great deal of distress was caused, to the consternation of her daughter and other people present. Once outside, the taps often provide the next hurdle. It can be very entertaining watching people trying to work out how to use a tap (the comedian Michael McIntyre does a wonderfully funny dance in his YouTube film on “public toilet technology”) but it is very humiliating if you have dementia and very little confidence. We need straightforward, easy to understand taps with blue and red on top.

Soap dispensers get more complex every day. Increasingly they are movement operated which makes no sense to someone who struggles with the simplest press-button version. Taps and soap are important if

we want people to leave the toilet with clean hands. Modern hand dryers are wholly non-intuitive as well as noisy.

Finally, getting out of the toilet can sometimes be remarkably complicated with several doors looking the same. People with dementia can be very distressed if they feel trapped (Tales *et al* 2017).

There are numerous other problems, but my intention here is simply to draw attention to the fact that they are solvable. With greater awareness, and a little extra expenditure, we can ensure the provision of toilets which enable people with dementia (and many others with similar impairments) to join us fully as fellow citizens. ■

References

- Houston A (2015) *Dementia and sensory challenges*. Glasgow: Life Changes Trust. Download at www.lifechangestrust.org.uk.
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