

**ILLINOIS STATE MEDICAL SOCIETY**

**Resolution 12.2022-33  
(A-23)**

Introduced by: Cecily Negri and Emma Johns, ISMS Members

Subject: Improving Restroom Access for Primary and Secondary School Students

Referred to: Council on Education & Health Workforce

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1           Whereas, barriers to restroom access for primary and secondary-school aged  
2 children impact development of appropriate hydration and voiding habits<sup>1,2</sup>; and  
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4           Whereas, hydration has key health benefits at all ages and results in the need to  
5 urinate and use the restroom<sup>3,4</sup>; and  
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7           Whereas, restricting students’ restroom habits during development can teach  
8 children to ignore their physiologic needs and affect appropriate physiological  
9 development, including weakening of pelvic floor muscles causing incontinence and  
10 urinary tract infections<sup>5</sup>; and  
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12           Whereas, dysfunctional voiding, particularly at critical times of great  
13 psychological and social development, is associated with bullying victimization<sup>6</sup>; and  
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15           Whereas, developing pubertal females require additional restroom time for  
16 appropriate menstrual hygiene and development of these practices<sup>7</sup>; and  
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18           Whereas, restroom time in elementary, middle, and high schools is not allotted  
19 with priority on development and maintenance of appropriate urinary, bowel, and  
20 menstrual habits; and  
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22           Whereas, only 24% of teachers are promoting urinary tract health, while 82%  
23 have never had training on children's bathroom regulations<sup>8</sup>; and  
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25           Whereas, the majority of primary and secondary schools have no official  
26 restroom policy for their school, allowing teachers the autonomy to decide their class  
27 restroom policy<sup>3</sup>; and

28           Whereas, schools with shortened passing time in between classes and extended  
29 travel distance between classes, with limited restroom options and potentially long lines,  
30 provide a schoolwide barrier to restroom access between classes, leading students to  
31 require restroom use during educational class time<sup>5</sup>; and  
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33           Whereas, reports indicate that teachers have minimal education on bladder health  
34 in children, while students report the main barriers to restroom usage include teachers  
35 and authority figures due to mistrust, limited support staff supervision, or a disruption  
36 to classroom activities<sup>1</sup>; and  
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38           Whereas, some states allow development of educational plans or the application  
39 of physicians notes for increased restroom access, however this solution encourages  
40 unnecessary usage of healthcare resources, clinic appointment slots, and the time of  
41 healthcare professionals and the families; and  
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43           Whereas, the Illinois State Board of Education has no policy regarding allotted  
44 time for restroom access nor any recommendations for restroom-associated situational  
45 awareness and evaluation by school staff; therefore, be it  
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47           RESOLVED, that ISMS support age-appropriate teacher education for proper  
48 bladder health and encourage equitable restroom policy in our Illinois primary and  
49 secondary schools that allows students discretionary access to the restroom during the  
50 school day; and be it further  
51

52           RESOLVED, that ISMS advocate for the Illinois State Board of Education to call  
53 for Illinois K-12 school boards to develop policy that provides students discretionary  
54 access to the restroom during the school day and may include (1) opposing limitations  
55 on frequency of restroom use (2) extending passing time in between classes and/or (3)  
56 coordinating a shorter walking distance in between students' classes.

**References:**

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  7. Brady SS, Bavendam TG, Berry A, Fok CS, Gahagan S, Goode PS, Hardacker CT, Hebert-Beirne J, Lewis CE, Lewis JB, Kane Low L, Lowder JL, Palmer MH, Wyman JF, Lukacz ES; Prevention of Lower Urinary Tract Symptoms (PLUS) Research Consortium. The Prevention of Lower Urinary Tract Symptoms (PLUS) in girls and women: Developing a conceptual framework for a prevention research agenda. *Neurourol Urodyn*. 2018 Nov;37(8):2951-2964. doi: 10.1002/nau.23787. Epub 2018 Aug 22. PMID: 30136299; PMCID: PMC6451314.
  8. Ko LN, Chuang KW, Champeau A, Allen IE, Copp HL. Lower Urinary Tract Dysfunction in Elementary School Children: Results of a Cross-Sectional Teacher Survey. *J Urol*. 2016 Apr;195(4 Pt 2):1232-8. doi: 10.1016/j.juro.2015.09.091. Epub 2016 Feb 28. PMID: 26926533; PMCID: PMC4977192.

**Fiscal Note:**

None

**Existing ISMS policy related to this issue:**

The Illinois State Medical Society advocates for the availability and delineation of an appropriate number of available public restrooms. (2022 Annual Meeting; BOT 2022-FEB; Last BOT Review 2022)

It is the policy of ISMS to support the concept of local Boards of Education establishing school based programs or clinics, that may provide education and wellness on health-related issues, as appropriate, that may provide health and sex education, counseling and access to physical and mental health care services, as determined by the communities in which the clinics exist. Local physicians should become involved in planning and delivery of those services. (HOD 1987; Last BOT Review 2014)