Providing No-Cost Sanitary Products in Municipal Bathrooms

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Policy Research Process

Phase 1:

Research & Idea Formulation

Commission and/or Commissioner determines problem to be solved and where it aligns with the strategic plan.

Policy staff may utilize Strategic Initiatives to help determine best match to strategic plan.

Policy Staff research and refine ideas for GPC discussion.

Phase 2: GPC

Consideration

Commissioner presents research, idea, and alignment to the strategic plan for discussion at GPC.

Item further refined by GPC.
If GPC wishes to proceed,
item assigned to appropriate
Charter Officer.

Background Information

 Access to sanitary products, including menstrual hygiene items (i.e., menstrual pads, tampons, etc.), has become a globally recognized public health topic due to cost and access inequality.

 Sanitary products can help stop the spread of both bodily fluids and blood borne pathogens but can be costly - with the average menstruating person spending over \$1,700 on the products in their lifetime and an average of \$300 per year.

Background Information

- 64% of low-income participants in a 2019 study were unable to afford menstrual hygiene products during the previous year. 37% of students surveyed by Women's Reproductive Health said that they have missed school due to a lack of access to menstrual hygiene products.
- Almost 44% of Floridian children are living in or near to living in poverty, and about 30% of Gainesville residents live below the poverty line.

State of Florida

2017	Menstrual hygiene products were made tax exempt as medical items.
2019	Dignity for Incarcerated Women Act – requires state correctional facilities to provide incarcerated women with healthcare products including menstrual hygiene products
2021 and 2022	In recent Florida Legislative Sessions, bills have been introduced to make sanitary products available in schools but have not made it out of committee.

Case Studies: Brookline, MA

- Ordinance was passed in 2019 and went into effect in FY22 which required that menstrual products be provided in all municipal bathrooms, the town hall, recreation centers, and libraries regardless of gender.
- The ordinance requires that restrooms designated for public use must be equipped with machine dispensers to dispense hygiene products at no cost.
- The city has expected a two year roll out process with an estimated cost of \$50,000 – including machine dispensers.
- This policy does not apply to the public school system, and Brookline has a population of ~63k.

Case Studies: Salt Lake City, UT

- \$20,000 pilot initiative which provides free menstrual hygiene products in all municipal buildings including City Hall and all city library branches.
 - The hope is that this program will be expanded to prisons, and the city has encouraged airport, public utilities, and golf facilities to consider the initiative.
- The Utah State Legislature additionally passed legislation in 2022 which required local schools to provide no cost period products in female and unisex bathrooms on school grounds.
 - \$1.75 million has been allocated for the first two years of implementation.

Case Studies: Ann Arbor, MI

- In 2021, Ann Arbor passed an ordinance to provide no-cost sanitation supplies (soap, toilet paper, menstrual pads, and tampons) in all public restrooms.
 - Public restrooms include schools, gymnasiums, hotels, airports, public transit stations, public buildings, bars, office buildings, stadiums, restaurants, etc.
 - No required implementation model.
- Individuals responsible for managing and maintaining public restrooms must provide all sanitary products at no cost, and failure to do so results in a civil infraction punishable by a fine of up to \$100.
- The ordinance provides exceptions for places of religious or spiritual worship.

Case Studies: College Programs

University of Minnesota

• One machine which provides free sanitary products must be in every building on campus. In the first three months of implementation, \$1,600 was spent on tampons, \$500 on machine installation, and \$100 per machine. Student population of 50,000.

Florida International University

• Allocated \$25,000 for a one-year pilot that provides 15 dispensers with sanitary products across campus. Student population of 55,000.

Florida State University

- Student government allocated \$370 for the purchasing of 500 pads and 500 tampons to donate to students through the food pantry. Student population of 32,000.
- Nonprofits advocate for the allocation of \$5-7 per student or \$10-15 per menstruating student when starting a free sanitary product program.

Potential Advantages to Policy

- May benefit lower income neighbors due to the cost of sanitary products.
- Restroom necessities may become more accessible to neighbors.
- Sanitary products can help stop the spread of blood borne pathogens and diseases.

Potential Disadvantages to Policy

- Finding adequate, cost-efficient sources of products may be difficult.
- Facilitating the policy would require additional work for restroom managers.
- Potential environmental impacts of sanitary product waste management.
- Potential misuse of sanitary products provided in restrooms.

Policy Research Process

Phase 3: Timeline Development Lead Charter convenes cross departmental working group.* Charter Officer determines time/resources required to evaluate proposal and creates community engagement plan.

Lead Charter submits timeline as outlined by working group.

Phase 4: Full Staff Analysis and Proposal

Development

Lead Charter continues to convene working group.*

Charter officer and staff assess GPC directive for impacts (operational, fiscal, etc.) and requirements.

Office of Equity & Inclusion conducts an Equity Analysis.

Management conducts an Operational Risk Assessment.

The City Attorney conducts Legal Review.

Phase 5: Proposal Returns to GPC Policy Staff Coordinates final presentation to ensure the idea has been passed to each Charter.

Charter staff presents final operation recommendations and community engagement to full Commission at GPC.

City Commission decides whether to augment, implement, table, or archive the proposal.

Phase 6: Implementation Policy implemented and metrics gathered for KPIs.

Discussion?