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SHORT REPORT

Complaints about dog faeces as a symbolic representation of incivility in London, UK: a qualitative study

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During a ‘Well London’ study, residents were asked about their neighbourhood and its environment. Above all other complaints, ‘dog poo’ was mentioned as a key concern. Despite low rates of infection and disease among the human population resulting from contact with canine faecal matter, the concerns of the public continue to rate it as a serious public health issue. Most public health studies, therefore, seek to identify processes of transmission and disease pathology as a method of addressing the problem. This study approaches the issue through a contextualised analysis of residents’ complaints, using anthropological theory to examine the symbolic representation of ‘dog poo’. Analysis of the interviews shows that these specific complaints were located among less easily defined or articulated experiences of social and environmental neglect, where neighbours were estranged from one another and local authorities seen as negligent. This approach has important implications for public health, as it provides not only a strong indicator of the level of dissatisfaction within some of London’s more disadvantaged neighbourhoods, but also identifies a need for policies that are grounded in cross-disciplinary research into the relationship between health, ‘wellbeing’ and experiences of marginalisation among urban populations.

Keywords: public health; canine faeces; symbolism; anthropology

Introduction

In 2008, the Greater London Authority and the London Health Consortium, with funding provided by the Big Lottery, instigated a series of health interventions entitled ‘Well London’. These activities were set up in 20 of London’s most disadvantaged neighbourhoods, in an effort to promote healthier life-styles as a way of combating chronic disease¹ (Wall et al. 2009). An evaluation of the project was undertaken in which a series of in-depth interviews were conducted with 60 residents across three of the Well London areas; a key component of the interview was to enquire about the environment and residents’ perceptions of their neighbourhood. A frequent and vociferous complaint that arose unprompted concerned the

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prevalence of dog excrement, or to use local terminology: ‘dog poo’. Not only was the frequency of the complaint remarkable, but also its specificity and distinctive nature, making further detailed investigation necessary. Apart from an element of antipathy, there was also considerable anger expressed in relation to: who was responsible; the lack of care demonstrated by its ongoing presence; and fear over its risk to human health. ‘Dog-poo’ was not the only form of pollution complained about in the three areas, but it was the most frequently cited.

In terms of risk to human health, the incidence of transmitted infection from canine faeces in England and Wales is negligible. For example, since 2000 between one and eight laboratory confirmed reports of toxocarosis have been received annually by the Health Protection Agency (HPA 2011). In addition, a ‘Keep Britain Tidy’ report into litter cites a 40% drop in the incidence of dog faeces in the UK over recent years (2007). Despite this lack of evidence concerning risk or prevalence, canine faeces continues to be a significant cause for complaint, requiring further explication in order to understand its relevance for public health.

In a study of urban environmental factors that impact on health, Kennedy (2000) cites residents’ complaints of dog faeces as a blight that affected their sense of wellbeing. Similarly, two separate studies by Jones (1996) and Cresswell (1992) report residents’ complaints of dog faeces in urban areas of the UK affected by poverty and environmental neglect. Therefore, the presence of dog faeces has associations and implications that can be linked with more subjective responses. One key facet of the complaints raised by residents in the Well London study was a sense of disgust evoked by ‘dog poo’ that was disproportionate in relation to actual prevalence. Therefore, the challenge was to explore not the grievance itself (whether ‘dog poo’ existed or its potential as a disease carrying agent) but rather the symbolic ‘message’ that lay behind it. This article critically engages with residents’ explicitly focused disgust with canine faecal matter and generates understanding of its symbolic value that helps clarify what has to date, been a poorly resolved public health issue.

Methods

The data presented derives from evaluation of the Well London Cluster Randomised Control Trial. Sixty qualitative interviews were conducted in total: 20 individuals in each of the three Well London areas, which were located in the north, east and south of the city. Participants were of mixed age (19–83), gender and diverse ethnicity. All three areas were characterised by high levels of unemployment, poor health, environmental neglect and a mixed indigenous and global migrant population. Interviews were audio taped, transcribed and entered into Nvivo for coding and analysis. Quality assurance procedures were undertaken whereby three randomly selected interviews were recoded, blind to the initial coding, by two independent researchers. The three versions of each interview were then compared to identify new codes and establish the degree of consensus in applying a particular code to similar text.

A major part of the interview focused on what residents thought about the area where they lived. Recurrent and spontaneous reference was made to the prevalence of dog faeces in the area and, more subjectively, the feelings that were evoked by its presence. Coding confirmed the prevalence of the term ‘dog poo’ (most frequently
extended coding of the interviews revealed the contextual significance of these complaints. ‘Incivility’ emerged as a recurrent theme: a lack of respect for the neighbourhood environment by residents and negligence by local authorities – whether the police or local council. This meant carrying out repairs, cleaning and ensuring personal safety, especially in relation to the presence of gangs, local drug dealers and other types of criminality. Further, measurement of actual incidence of dog fouling across London was undertaken: 40 areas were examined and divided into ‘segments’ that were measured. Of the total 291 segments, 211 were found to contain no dog faeces; 72 had a small amount and eight had a moderate amount. However, 117 coded references pertaining to ‘dog poo’ (and its synonyms: dog shit/muck/litter/mess/fouling) were found in all 60 interviews. The disparity between high numbers of complaints and the limited presence of actual faecal matter required an alternative mode of analysis that would help locate, more specifically, residents’ concerns. Interpreting how meaning is expressed through cultural symbols – in this instance ‘dog poo’ – provided an alternative theoretical approach to the problem. Analysing the symbolic content and context in which the complaints occurred, highlighted compelling evidence of its link to social neglect, including criminality, dirt and the absence of cohesive community relations.

Findings

The work of social anthropologist Douglas (1966) is seminal in the symbolic interpretation of matters pertaining to pollution. Also, studies by van der Geest (1998, 2007, 2008), Stallybrass and White (1986), Laporte (2000), Enzensberger (1972) and Miller (1997) offer useful theoretical perspectives on dirt and ‘disgust’; especially regarding bodily substances that transgress boundaries in relation to social morality, inequality and taboo. The inherent value of examining cultural symbols shows how in this instance, they express not only fears of the transgression of boundaries, but also how ‘dog poo’ is constructed as a metonym for the disgust felt by residents about their experience of incivility. This includes neglect of the environment, and a lack of respect by local authorities and fellow neighbours alike, as one resident implied: ‘And the worst thing is they just, they poo everywhere in the buildings – a month back there was dog poo in our own building. I don’t know whose poo it is – whether it’s human or dog poo, but I seen it’. Another described a similar sense of repulsion: ‘The outside spaces, there’s dog foul. You must have seen that. I mean wherever you put your feet – and it’s unsafe because the poo of the dog and you put your foot... oh no!’

The focus on canine excrement did not exclude other complaints: of drugs, gangs, noisy neighbours and the lack of intervention by either police or local authorities. However, complaining about ‘dog poo’ conveyed a powerful message about these neighbourhoods blighted by multiple problems, and often by unknown perpetrators:

Like this drug dealing problem going on, on my doorstep. Litter and other small problems like car windows being smashed. You don’t know who’s done it, or why they done it, or where did they come from. Dogs, also dogs . . . but people can’t say nothing; even the police is scared. And they’re smoking, they’ve got needles there on the stairs, they wee do on the stairs, everything – we can’t say nothing. And my lift is still broken. (Sita)
The notion of ‘incivility’ evoked through residents’ descriptions of their environment determined the appropriateness of symbolically linking complaints of ‘dog poo’, with the experiences of social neglect. As requests to improve living conditions and expressed worries about safety and cleanliness were ignored, a pervasive sense of hopelessness took over.

Right, the area is dangerous, dirty, very, very unkempt and has been basically forgotten by the powers that be for the past, I’d say, 15 years. In as much as one person who I spoke to at the local housing office who was at the time in charge of major works, didn’t even know where I was living. Didn’t know where it was, so that’s the – it’s just been a forgotten little area and it’s been left to rot and decay. (Robert)

For Stallybrass and White: ‘What is socially peripheral, is so frequently symbolically central’ (1986: 5, authors’ italics). This resonates with the Well London residents’ sense of social marginalisation that was marked by the absence of effective management of the neighbourhood, as explicitly articulated above. But, when these explicit complaints were neither heard nor acted upon, they became symbolically represented by excreta, which defined their experience of marginality.

Faecal matter – whether human or animal, is identified as a ‘core disgust elicitor’ (Simpson et al. 2006) when placed in an order, or hierarchy of repulsiveness. As one resident stated: ‘It’s disgusting. The path as you go up there, there’s always glass up there or dogs’ poo, always – there’s dogs’ poo along there and it’s, well, it’s just disgusting’. van der Geest (1998, 2007, 2008) has written extensively on attitudes towards defecation, including an historical examination of the origins of our revulsion towards bodily functions and their ‘management’. He suggests that without the containment of bodily matter, there is nothing to prevent chaos and disorder (2007). Therefore, if faeces, animal or human, is taken as an effective metonym that represents disorder, it follows that managing dirt has as its main function the restoration of order – primarily, social order as part of a civilising process.

Increasingly, the management of dirt became a marker of ‘civility’ and modernity that correlated cleanliness with morality (Elias 1994 [1939]). Models of social behaviour put ‘dirt’ in its rightful place – ordered and bounded within a set of social rules of behaviour. Douglas’ (1966) work on symbolism and in particular ‘matter out of place’, states that ‘dirt’ is defined by its place or context; in other words, where it is found and who is responsible for it. For example, faecal matter inside the body is less problematic than when it becomes external to it, where it is an object of revulsion. The attitude and management of excrement, both human and animal, is linked with the State as it intervenes in the management and consequent attitudes towards dirt; segregation of public and private means that all faecal matter is consigned to private rather than public space (Enzensberger 1972, Laporte 2000 [1978]). Faeces, now considered taboo in the public domain, contrasts with the pre-Victorian era when horse manure covered the streets of London and running sewers were open to public senses (Pike 2005). This segregation of public and private in relation to cleanliness was also acknowledged among residents: ‘When we moved to this area, we saw dog poo… Now it’s a little bit clean, my area is, because it’s a private area’. Another spoke of her annoyance at her neighbour who ‘pushed’ rubbish over to her side of the passageway, invading her private space and breaking boundaries. But, complaints also
illustrated a more extreme form: the permeability of private space that could be infiltrated by bad smells and noise:

Yeah, the noise. The noise it makes you mental, it just makes you crazy. My downstairs neighbours, they’re singing like five o’clock in the morning and it wakes you up and you just can’t do anything. And then they smoke marijuana and – you know this is a converted building? so there’s lots of holes in the . . . you see those things? That’s for the ventilation. So all the air in every house – it’s kind of moving around in every house. Yeah, every time they smoke, every time they drink – if they’re vomiting in their toilet, it all comes up (here). (Janice)

For residents, ‘dog poo’ has salience within their particular social and cultural milieu of urbanised, inner city London where neighbourhoods are unsafe, environmentally polluted and often without social cohesion. Anger and blame is placed on those who seem to ignore the boundaries i.e dog owners, ‘dirty’ neighbours, the police, or the local authorities responsible for the management of the neighbourhood. ‘Dog poo’ is therefore a transgression of not only spatial boundaries, but also social norms of what is considered ‘civil’ behaviour; especially when focused on personal responsibility:

And that’s one thing as well, the dog fouling, they don’t pick up. They don’t pick up their dog fouling, do you know what I mean? And I’ll tell you what, it would be a big sense of achievement if they actually put cameras in every direction to catch these people out, because it’s terrible. You’ve got kids playing around and every time they’re playing football, they stop in dog foul. (Sandra)

Conclusion

As Campkin and Cox (2007) suggest theorising about dirt is ‘constitutive of space and social relations’. Here, vociferous complaints of canine faeces in the absence of actual evidence of high incidence indicated a more hidden form of distress or grievance that was better understood by examining its symbolic content, as well as its context. By taking ‘dog poo’ as a metonym for the ‘disgust’ with which residents experienced their neighbourhoods, the authorities and each other it was possible to gain deeper insight into the problem. Complex issues are not always explicitly articulated and can therefore remain unresolved. Acknowledgement of this has implications for intractable public health problems, where not only the contextualisation of complaints is important, but also analysis of their deeper symbolic components; especially in the face of frequent, inexplicable complaints. Conducting such an analysis uncovered the distress of residents living in some of London’s more deprived neighbourhoods where grievances were frequently ignored, leading to frustration and anger. Had the issue of dog faeces been tackled as a ‘clean up’ operation alone, this would never have uncovered the scale of the problem or the depth of feeling in relation to the issues, which can be defined as poor social relations and inadequate or ineffective communication with local authorities.

Investigations and analyses of this kind lend themselves to the development of constructive, inclusive public health policies that can improve the wellbeing of marginalised populations by understanding how people articulate their concerns. The approach used here is effective in this, because it can: generate new insights into intractable public health problems; offer alternative and useful methods to understand and communicate complex social issues in relation to public health;
advance theoretical knowledge; and broaden the scope of analytic tools with which to understand well-being and society.

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Notes
1. For more details, see report by Wall et al. (2009).
2. This is preliminary data, further development of the measure is required.
3. All names and locations have been anonymised.

References
