When the community perceives a need, it is easy to fulfil that need. And when the leader of the community is someone who experiences the need more than others, the solution for the need is bound to be close. Gollapadu Gram Panchayat (GP); located in Muppala Mandal of Guntur district is one such village where both things happened.

Gollapadu GP consists of 530 households with people belonging to various communities i.e, Scheduled castes, Scheduled Tribes, Other Backward Castes and Other Castes with a total population of 1969. The GP reached a mark of 100% Individual Household Latrine (IHHL) cover after constructing 51 toilets under Swachh Bharat Mission (SBM) scheme. Before being declared as open defecation free, the Panchayat encountered quite a few challenges which it overcame with support from GP team (i.e., the Sarpanch, ASHA workers, Anganwadi workers, ANMs, Field assistants), community and Officials at Village, Mandal and District levels.

In Gollapadu, around 75% of the households in GP already had IHHLs when SBM scheme began. Around 15% of the toilets initiated under the NBA were completed after SBM began and round 10% of the remaining i.e, 51 IHHLs were constructed under SBM there by reaching a coverage of 100% IHHLs in the GP.

When the SBM scheme began, open defecation was still prevalent as a few of the households did not have IHHLs. According to the Sarpanch, “we used to ask families to construct toilets, but NBA didn’t cover families without job cards and these households
also did not have enough money to construct toilets on their own. In such a situation we also cannot force them to undertake construction”.

Apart from the problems caused by open defecation to women and old people, the Gram Panchayat saw a calamity eight years ago when it lost two children to snake bite when they went to defecate.

After SBM was launched, the Sarpanch of the village sought the help of GP team to evaluate the number of houses without an IHHL. Being a woman herself, the Sarpanch worked with the motto of “dignity and respect to women in society” to motivate these households to take up construction of IHHLs. IEC activities like wall paintings, posters, CLTS (Community Led Total Sanitation) exercise were taken up in full swing. IEC activities aimed at informing the community of the scheme and the process involved to construct an IHHL and motivating them to take up construction.

The Panchayat Secretary took care of all documentation necessary for availing the financial support the scheme provides. GP also worked with a motive of ending open defecation and not just constructing IHHLs. To achieve this, the sarpanch along with Gram Panchayat team started motivating the households regularly and is now in the process of monitoring toilet utilization of the GP.

The Panchayat Secretary (PS), field assistants, Anganwadi and ASHA workers played a key role in the process of motivating households. External motivation support was gathered from Mandal level officials. School teachers also played an active role in discussing sanitation, need for having and utilizing IHHLs with parents during School Committee meetings.

Interpersonal relations between communities and presence of political parties made unity a challenge in the village. The GP over a period through regular interactions with household members, explained to families regarding health and financial benefits that sanitation brought. In addition individuals were told that they should get IHHLs constructed when the scheme lasts as it involves financial subsidy.

A few of the families did not have money to initiate construction and Narendra, a youngster belonging to the village, helped these households realise their dream. A laudable case of community responsibility, he worked along with the Panchayat team, spent his own money to initiate construction in houses which did not have the financial capacity to do so. After receiving first instalment from SBM, families used that money to complete the process and acquire an IHHL.

A few households did not have houses in which an IHHL with stipulated measurements was possible. In those cases, GP identified available space in each of such household and constructed IHHLs within the available space.

The GP team achieved 100% construction of IHHL and is now in the process of achieving 100% utilization of the toilets. Though around 80% of the households are utilizing IHHLs, remaining 20% need to be motivated further in order to be free of open defecation. There are reports of workers in agricultural fields and some men who are habituated to a smoke and outside defecation not using the toilet and the GP is working to change this situation.

This reluctance was also found among other villagers who have IHHLs. A group of households were identified to be using toilet cleaning material (Harpic). Upon enquiry they revealed that their children who are in schools bought the cleaning equipment and liquid by convincing their parents about how maintain the toilets is also very important.

Gollapadu has good water resource facility which ensures availability of water to households for proper utilization of the toilets. Schools and Anganwadi toilets are also maintained hygienically. School children are aware of the hand washing practices, importance of sanitation and cleanliness which is discussed by teachers regularly so as to ensure sanitation in the GP.