

Psychosocial Support Risk Prioritisation Model [PSSRPM] for Orphaned and Vulnerable Children: A Case of the Kingdom of Eswatini

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Abstract: The research was influenced by the growing demand for psychosocial support interventions owing to disintegrating family and community support systems and ineffective management of psychosocial support resulting from the effects of COVID-19 pandemic. The study analysed risk management in the Eswatini psychosocial support program for orphan and vulnerable children from a project management perspective. A self-administered questionnaire was distributed in one region where psychosocial support problems were most prevalent. The survey attracted 109 responses from caregivers, who are the face of psychosocial support service in the communities. Twelve risk indicators were analysed representing manpower, material, machine, and methods risks. Research results show that all the twelve risk indicators had moderate to very high probability of happening and the same risks could pose high to critical impact if they occurred. Respondents felt that COVID-19 caused significant change to four of the assessed risks, low change to seven risks and no change to one. This implies that the high probability and high impact of the assessed risks impeded the provision of psychosocial support in the country. The proposed way forward includes the implementation of project risk management strategies. This could include implementing the proposed psychosocial support risk prioritisation model and gaining new knowledge and information through research. The use of a model recognises the dynamic nature of project risk management. Therefore, the authorities need to continuously review and monitor psychosocial management processes and accommodate emerging issues such as COVID-19. Management must aim to eliminate complacency in psychosocial support delivery processes.

Keywords: Caregivers, Orphan and Vulnerable Children, Neighbourhood Care Points, Psychosocial Support, Risk Assessment, Risk Prioritisation Model

1. Introduction

In the Kingdom of Eswatini psychosocial support started as a community-initiated project which later attracted the attention of Government and the international donor community because demand for psychosocial support service was growing at unprecedented levels. The study focuses on the application of project risk management in a psychosocial support project environment. Psychosocial support is the process and actions that promote the holistic well-being of people in their world, and this include support provided by family and friends [1, 2]. From a management viewpoint, project management is a scientific management concept

which authorities in both the private and public sector embrace as a strategy to achieve organisational goals more effectively and efficiently. Project Management Institute (2013), defines project management as the application of knowledge, skills, tools, and techniques to project activities to meet the project requirements.

When looking at institutional operations, the project management concept is applicable when implementing projects or activities which cannot be effectively executed in the same way management execute the organisation's routine operations. Implementing a project would require special and customized treatment of the project and its activities. Unlike operational activities that seem to be permanent projects and

project activities are temporary because they must be completed within a given time frame, using a limited budget, and aiming to achieve a limited set of objectives [4]. Project risk management which is the focus of the study is a critical element of project implementation. Risk is an uncertain event or condition that, if it occurs, it influences one or more project objectives like scope, cost, schedule, and quality [5, 3, 6, 7]. Therefore, anything that disrupts or prevents the attainment of project goals is a risk which ultimately must be managed and controlled to limit its effect on the project.

The issue at hand is that it is not clear from existing policies and practices how the management of psychosocial support risks among orphan and vulnerable children (OVC) is done or ought to be done. According to Dzirikure et al., (2011), the growing number of OVC in the SADC region and the weakening or disintegrating of family and community support systems in Southern Africa have strained their capacity to respond to psychosocial support needs. This led to the development of programs that target OVC requiring psychosocial support interventions. However, UNICEF (2021), reported that serious gaps existed in early childhood development such that 62 percent of children between 36 to 59 months old do not receive adequate development support or early stimulation activities. Though UNICEF and other stakeholders supported government in the development of several child-related policies and strategies including psychosocial support services, the implementation of such strategies remained weak [9, 23]. An earlier investigation in psychosocial support for orphan and vulnerable children revealed that a long stretch of neglect has dire consequences for OVC in the form of low self-esteem, low levels of life skills, learning disabilities and disturbed social behaviour [10]. Resultantly, OVC become a threat to a country's social fabric in the future. Compounding the above problem is the existence of barriers to implementing psychosocial support such as competing priorities in the distribution of resources, insufficient resources, and lack of consensus among stakeholders [11, 23]. In today's dynamic environment, these problems are compounded by the COVID-19 and other pandemics which brought about economic crises and limited access to services which keeps the gap between the ideal and reality widening. Management of psychosocial support projects further disintegrated when early childhood development centers were closed during the COVID-19 pandemic, a move that closed the beneficiaries out of food and other benefits.

Through psychosocial support risk analysis, the researcher aimed to help psychosocial support project stakeholders meet customers' expectations and to continuously improve the quality of psychosocial support services offered to the OVC. The continuous improvement involves careful planning, testing the plan, checking if the plan is working and implementing the plan [12, 15, 24]. Continuous improvement is a never-ending journey that saps a lot of energy from project implementers and involves operations management elements such as manpower, material, machines (technology), and methods [16, 24]. These elements were the focal point of the

psychosocial support risk investigation because they integrate with the dynamic nature of risk management.

The research aimed to analyse risks affecting the Eswatini Government's psychosocial support program for orphan and vulnerable children (OVC) with the view to contribute towards improving quality of service in the provision of psychosocial support services in the country and beyond. The first research objective was to analyse the probability and impact that manpower, material, machine (technology) and methods risks would have on psychosocial support services. The second objective was to assess the effect of the coronavirus disease on psychosocial support. The third, and last, objective was to develop a psychosocial support risk prioritisation model (PSSRPM) for mitigating psychosocial support project risks. In sync with the above research objectives, the thesis for this research was that the national psychosocial support project for OVC faced risks which affected the attainment of the psychosocial support objectives. Therefore, the research intervention would mitigate the risks and bridge the prevailing information and knowledge gaps in the provision of psychosocial support services.

Studies have shown that professionally managing project risks in the public sector should not be any different from the private sector where the market-oriented approach to management has been adopted [7, 17, 33]. Kapuscinska and Matejun (2014) and Tallaki and Bracci (2021) contend that effectively implementing projects required the adoption of market-oriented approach which entails solutions that are characteristic of business activities. The ability of management to identify project risks is a critical success factor in implementing projects [17, 18, 34]. Management is expected to eventually come up with measures to suppress the probabilities of the project risks happening and the impact that the same risks will have on project goals and stakeholders if they occur [19, 33].

For the research, effective provision of psychosocial support services to OVC was informed by two quality management concepts, the Six-sigma and SERVQUAL model and one operations management concept, the 4Ms of operations. First, Six-sigma is a quality management technique implemented for the purpose of saving time, improving quality, and lowering costs [14, 16]. The greatest achievement by advocates of this Six-sigma was the attainment of high capability and accuracy performance of not more than 3.4 defects in every 1 million trials [13]. Therefore, Six-sigma is a tight quality control program which aims at 100 percent perfection of processes. According to Heizer et al. (2013), the acronym DMAIC is used to operationalize Six-sigma and it stands for: defining the program scope and outcomes clearly, measuring process performance and gathering data for improvement, analysing the data for best performance results, improving and redesigning processes, systems and procedures and controlling and maintaining the new performance levels. Six-sigma is applicable in manufacturing and service operations and in project management environments. Therefore, the researcher found Six-sigma to be a relevant learning point for

effective delivery of psychosocial support services. In line with the first two objectives, the study was expected to: clearly identify, measure processes, and analyse risks associated with delivering psychosocial support services to OVC and recommending improvements in the controlling mechanisms to enhance the effectiveness of the psychosocial support program.

Second, the SERVQUAL model which was founded by Parasuraman in the 1980s advocates that, the ability of a company or a project to satisfy its customers is depended upon satisfying five quality attributes, which are: reliability, responsiveness, competence, understanding and physical evidence [14]. These five quality elements are popularly referred to as the SERVQUAL model in marketing and quality management studies [20]. In the case of the psychosocial support project, stakeholders can assess performance based on the service quality attributes to determine if they meet the customer satisfaction grade. The above quality attributes have been embedded in the manpower, material, machine, and methods (4Ms) risks reviewed under 1.1 to 1.4 below.

Third, and last, the 4Ms operations management model suggests four factors or risks that may cause operational problems in a company or project implementation which are manpower, material, machines, and methods [13]. The research paper used the 4Ms model to develop the research questionnaire. Manpower, material, machines, and methods represented the main risks which can disrupt the implementation of the psychosocial support project around the country. The 4Ms are the basic elements which can be used to assess the causes of problems or risks associated with implementing a project such as the psychosocial support services for the OVC [15, 16]. Therefore, understanding the 4Ms gives insight to project stakeholders' understanding of the risks which are experienced when implementing a project. Once such project risks are identified, analysed, evaluated, monitored, and controlled as part of the risk management process, appropriate strategies could be developed to manage the risks [7, 21]. The 4 Ms elements are explained below.

1.1. Manpower

Management ability to identify project risks and subsequently come up with mitigation measures to suppress the probabilities of the project risks happening and the impact that the same risks will have on stakeholders if they occur is one of the critical success factors in implementing a project [19]. In line with the above proposition, Dzirikure et al. (2011), contend that, effective project management requires putting in place appropriate structures, processes, capacities, and systems for mainstreaming delivery of psychosocial support. Notwithstanding the many challenges employers faced during the COVID-19 pandemic, the ILO (2021), asserts that, successful leadership should ensure that good and functional management system are in place, to integrate the various aspects of the organisation including psychosocial support. This point corroborates the fact that

there is 80% failure rate in public sector projects which was linked to manpower issues which is a decisive factor that makes the difference between success and disappointment [21]. Consultants at the famous McKinsey research group, postulates that, project success factors in government assume the presence of people factor components such as committed leadership, compelling communications, clear purpose and priorities, and coordination in delivery [19]. Therefore, the manpower element incorporates the effective policy makers, project managers and practitioners who must collaborate in designing, implementing, and monitoring psychosocial support interventions. For example, the national strategic plan on vulnerable children stipulates guiding principles like, providing best interests for the children, in particular vulnerable children, political commitment to psychosocial support program and a multi-sectoral and decentralised response [22]. Thus, the policy development process reflects that the human factor dominates factors such as materials, technology and methods when implementing strategies at national level. Other research related to national psychosocial support policy indicates that, manpower induced problems associated with institutionalisation of psychosocial support for OVC included shortage of trained personnel, inadequate skills, inadequate funding, poor planning and limited participation of children in decisions about their future [19, 21]. While encouraging management to tolerate risk as part of the organisation's processes, Tworek (2016), argues that a positive risk culture exists in an entity when officials understand the risks facing their entity and consequently make appropriate risk-based decisions. Therefore, effective manpower management must be seriously considered when managing project risks.

1.2. Material

Jusoh and Kasim (2017), postulates that material contributes 30% to 70% of total project costs and the success of many projects rely on having adequate material. Therefore, issues to do with determining specifications for material to be purchased for the project such as personnel protective equipment (PPE), food items and equipment, processes to identify and engage suppliers, and the management of purchased inventory becomes crucial in achieving the project goals of quality, time, schedule, and cost. In that same vein, the ILO (2021), notes that, lack of clarity about the best practices which is a methods issue was responsible for the shortage of PPE which had potential to increase anxiety among caregivers. In another study, Tallaki and Bracci (2021), discovered that during pandemics, public sector organisations face high levels of uncertainties both in terms of objectives to be pursued and means through which to achieve them. The pandemic environment tends to cripple most supply chains and can ultimately disrupt the movement of material.

1.3. Machine and Technology

Closely related to material is the need for efficient utilisation of equipment and technology used in psychosocial

support delivery. People automate processes and adopt technology to enhance operational effectiveness, cost management, quality of services, data security and compliance [17, 26]. In addition, a presentation on psychosocial support and use of technologies in government administrations noted that, since the cost of acquiring equipment and technology and the maintenance costs can directly or indirectly influence the overall project performance the use of project management technologies such as prince 2, critical chain methodology, process based project management and project evaluation and review technique enhances better project budgetary control and forces project teams to be accountable and eventually achieve client satisfaction [27]. Installing appropriate systems and acquiring tools required to effectively deal with an entity's project risks have been advocated world-over [28, 29].

1.4. Methods and Processes

In a project risk management case study done in Poland where risk management is obligatory in the public sector, Tworek (2016), concluded that management must demonstrate their knowledge of risk management and must put in place rules and methods to be followed. Using the right tools and processes increases overall project performance, productivity, and motivation among project team members [30]. Therefore, Bunkers and Ventimiglia (2017), advocated implementing the site improvement monitoring system (SIMS) in psychosocial support programs. SIMS could ensure that programs met minimum standards and provided quality services to the OVC because the SIMS technique outlines best practices in OVC programming (Ibid). In corroborating the idea of appropriate methods and techniques it has been argued that, psychosocial support programs must be context specific and informed by evidence from children, families, communities, country and region and such evidence must be shared with a wider network [8]. This supports Tworek (2016)'s supposition that, different risk management methods bring different effects hence selecting methods to be applied in a specific public organisation must take into account the risk profile and the risks the specific entity faces.

1.5. Risk Management Model

Models or frameworks are powerful tools that act as guides in providing solutions to real life problems such as problems associated with managing psychosocial support services which was the focus of the research paper. Models can be in the form of mathematical equations mostly for science subjects, descriptivist (in word format or abbreviations), in business and arts subjects. Charts or diagrams are common across all disciplines, but most popular, among management sciences. Effective models are looked at as systems wherein a careful analysis of inputs to the problem for which a solution is required, processes that may be followed in solving the problem and identification of the probable outcomes, must be done [21, 33]. The purpose of the model is to represent the dynamics of the system in a

way that is simple enough to understand and manipulate, yet close enough to the operating reality to yield successful results [23, 31].

The Australian Government, Department of Finance (2016), described a risk management model as the set of components that support the consistent and systematic management of risk in an entity. The components of the risk management model must include risk management policy, the organisation's approach to managing risk, how risks will be reported to stakeholders, attributes of risk management culture, how the organization embeds the risk management culture in its processes and the endorsement of the risk management model by senior management [23, 33]. Some of the qualities of effective models include completeness, adaptability to different situations, usability, and reliability [32]. This means that when applying the adaptability concept the proposed psychosocial support risk prioritisation model (PSSRPM) can be adapted for use in a psychosocial support environment and other different situations which have nothing to do with psychosocial support. Research indicates that policy makers have not yet sufficiently embraced the prioritisation of risk management and that risk modelling and analysis is one of the most important stages in project success [18, 32]. Dobson and Hietala (2011), who advocated prioritisation of risks advanced the argument that, another way to present risks is to determine their hierarchy by arranging them in descending order according to their anticipated consequences. Thus, the research's objective to develop the PSSRPM model would address this gap.

2. Material and Methodology

The researcher felt that analysing psychosocial support project risks utilising the 4Ms is best done through interviewing caregivers who are the closest stakeholders to the psychosocial support issues when and where they occur. Thus, administering the research instrument among caregivers was influenced by the central role this group of stakeholders plays in delivering psychosocial support services in the Kingdom of Eswatini. Caregivers work at and manage regional neighbourhood care points (NCPs), when they are open. Therefore, caregivers are the face of psychosocial support service delivery in the communities. For this reason, caregivers were identified as key sources of information when investigating the provision of psychosocial support services to OVC. According to the Project Management Institute (2013), understanding project risks can assist in determining how to apply effort and resources to enhance the chances of project success. Consequently, exploring caregivers' perceptions regarding the extent to which psychosocial support risks are managed under the psychosocial support program for OVC was deemed to determine how best the psychosocial support risk dilemma could be managed.

The indicators of the 4Ms were investigated as disaggregated and de-composed elements to bring about clarity on their effect on psychosocial support delivery. Three

risk indicators were analysed under each of the 4Ms, and this resulted in the analysis of a total of twelve risk indicators. According to Kaplan and Mikes (2012), decomposing the risks allows the determination of which risks can be managed through rules-based methods and which ones require alternative approaches. The author further argue that preventable risks or internal risks are the ones that can be managed with a rules-based approach while strategy risks, which organisations deliberately adopt, require a systematic approach to reduce the probability of the risks happening and their impact, though the risks cannot be prevented or avoided. External risks which are based on external forces are beyond management influence and control owing to their natural nature such as the COVID-19 pandemic, political risks such as wars or a coup and major macroeconomic shifts [33]. To manage external risks, you need to watch out for early signs then manage by identifying the risks, assessing the risks and applying a suitable risk management strategy.

In addition to the questionnaire's biographical data section, the objective and self-administered questionnaires adopted for the study were divided into three key sections. First, participants were asked to rate the likelihood of the selected risks happening. Second, participants were required to indicate the impact each selected risk would have on psychosocial support program objectives if it occurred. Third, participants were asked to indicate the effect of COVID-19 on the identified risks. Results of the research were presented based on de-composed risks. The probability of the risks happening were rated from very low to very high,

the impact of risk from insignificant to critical and the changes that occurred because of COVID-19 from insignificant to significant. Owing to COVID-19 induced travel restrictions, the closing down of NCPs and social distancing requirements which restricted the collection of data physically, online methods of data collection (e-mails and what's App messages) were used. The study was restricted to only one of the four regions where psychosocial support risks were most prevalent. One hundred and nine (109) valid responses were received and analysed.

3. Results and Discussion

Reviewed psychosocial support risk management literature confirmed increasing demand for psychosocial support and other related services, particularly for OVC at international, regional, and local levels and in both public sector organisations and private institutions [7, 8, 9, 17, 25, 28]. Such results signify the need for concerted efforts by all stakeholders putting heads together to fight a scourge which has potential to increase child poverty (UNICEF, 2021) and threaten the social fabric in future [10].

The 109 valid questionnaires which were completed and returned were analysed to consider the likelihood of psychosocial support risks happening, their impact if they do occur and how COVID-19 pandemic affected the psychosocial support situation that prevailed before the pandemic surfaced at the end of 2019. The results are displayed below in frequency Table 1 to Table 3.

Table 1. Percent Frequencies for the Probability of Psychosocial Support Risk Occurring.

n=109

Risk type	L	M	H	VH	Total
Poor supply of food for OVC			.9	99.1	100
Lack of PPE for Caregivers			.9	99.1	100
Poor funding for PSS project				100	100
Ineffective leadership	.9	42.2	45.9	11.0	100
Inadequate staff	1.8	35.8	41.3	21.1	100
Poor cooperation from community members	1.8	36.7	42.2	19.3	100
Lack of ICT			11.9	88.1	100
Lack of modern cooking equipment		1.8	51.4	46.8	100
Lack of transport		4.6	51.4	44.0	100
Poor coordination of NCP activities		4.6	64.2	31.2	100
Ineffective psychosocial support strategies		4.6	64.2	31.2	100
Weak psychosocial support delivery process		3.7	63.3	33.0	100

Key: L=Low; M=Moderate; H=High; VH=Very high.

Source: Research data 2021.

Table 1 show that 4 risks have a very high probability of happening as indicated by more than 88% of the respondents. Poor supply of food for OVC (99.1%, Lack of PPE for Caregivers (99.1%), Poor funding for PSS project (100%) and lack of ICT (88.1%). There is high risk probability in 5 of the risks as indicated by between 50% and 64% of the respondents; Ineffective psychosocial support strategies and poor coordination of psychosocial support activities (64.2% each), weak psychosocial support delivery processes

(63.3%), lack of modern cooking equipment and lack of transport (51.4% each). For the last three risks the probabilities range between moderate to high: Ineffective leadership (42.2-45.9%), poor cooperation from community members (36.7-42.2%) and inadequate staff (35.8-41.3%). This finding suggests that the Six-sigma goal of accuracy of performance and the SERVQUAL goal of customer satisfaction are untenable because the assessed psychosocial support risks have high probability of happening. The next

table presents the impact the above risks would have on the psychosocial support program if they occurred.

Table 2. The impact that psychosocial support risk will cause if it occurs.

n=109

Risk type	L	M	H	C	Total
Poor supply of food for OVC				100	100
Lack of PPE for Caregivers				100	100
Poor funding for PSS project			.9	99.1	100
Ineffective leadership		26.6	47.7	25.7	100
Inadequate staff		14.7	49.5	35.8	100
Poor cooperation from community members	.9	14.7	42.2	42.2	100
Lack of ICT			7.3	92.7	100
Lack of modern cooking equipment			32.1	67.9	100
Lack of transport		1.8	29.4	68.8	100
Poor coordination of NCP activities			61.5	38.5	100
Ineffective psychosocial support strategies			62.0	38.0	100
Weak psychosocial support delivery process			59.3	40.7	100

Key: L=Low; M=Moderate; H=High; C=Critical
Source: Research data 2021.

Table 2 shows that 6 risks are perceived to pose critical impact if they occur: Poor supply of food for OVC and lack of PPE for Caregivers (100% each), poor funding for PSS project (99.1%), lack of ICT (92.7%), lack of transport (68.8%) and lack of modern cooking equipment (67.9%). The rest of the items range between high to critical impact (42.2 – 62%) if they occur. The high impact levels confirm that the Six-sigma and SERVQUAL standards are not being met and

this is in line with authors who argued that achieving the objectives of projects requires adequate material [9, 24], the use of technology to improve efficiency and cut costs [9, 26, 27] and the use of appropriate methods to execute projects [8, 23, 30]. The next table shows if there was any change to the prevailing psychosocial support risks because of the COVID-19 occurrence.

Table 3. The Change that happened because of COVID-19 (%).

n=109

Change observed	NC	L (p)	Sig	Total
Supply of food for OVC			100	100
Supply of PPE for Caregivers			100	100
Funding for PSS projects		1.9	98.1	100
Leadership effectiveness	1.9	82.4	15.7	100
Staff adequacy		77.8	22.2	100
Cooperation from community members	74.1	25.9		100
Provision of ICT	28.7		71.3	100
Provision of modern cooking equipment		51.9	48.1	100
Provision of transport		51.9	48.1	100
Coordination of NCP activities		76.9	23.1	100
Psychosocial support strategies		77.8	22.2	100
Psychosocial support delivery process		81.5	18.5	100

Key: NC=No change; L (p) =Low positive change; Sig=Significant change
Source: Research data 2021.

Table 3 shows that COVID-19 has caused significant change to supply of food for OVC and supply of PPE for caregivers (100%), funding of PSS projects (98.1%), no change to cooperation from community members (74.1%) and low positive change to the rest of the assessed risks (51.9 – 82.4%). A significant no change (74.1%) to cooperation that came from the community suggest that Eswatini people have a culture of supporting their OVC regardless of the situation they faced such as the coronavirus.

Overall, there was overwhelming evidence that the reviewed risks have high probability of happening and the impacts these risks would cause if they happened were also high. However, there were not many changes that were

attributed to COVID-19 pandemic while there was no change to cooperation from community members. The revelation that the identified psychosocial support risks had high probability of occurring and high chance of impacting the psychosocial support service delivery if they occurred implies that the Government's objective of providing psychosocial support to OVC was compromised. These high probabilities and high impacts were happening even before the COVID-19 pandemic implying there was a serious issue with the provision of psychosocial support services in the country. After this discovery, appropriate intervention strategies are required to mitigate the risks and their potential impact on the psychosocial support program. In considering the

intervention strategy, attention needs to be given to risks with very high probabilities and critical impact. This is in line with [19]'s suggestion for an ABC analysis which prioritises risks according to their anticipated consequences. These high-risk areas include poor supply of food for OVC, lack of PPE for caregivers, funding for PSS project and lack of ICT. These four risks are the most affected by COVID-19 as well. Similarly, results show that the rest of the risks would require moderate to high attention as well.

All the assessed risks are concentrated under high and very high probability (Table 1) and high and critical impact (Table 2). The conclusion that the identified risks have high probability of happening and high impact of affecting delivery of psychosocial support services on its own does not give a clear picture of what managers and stakeholders of the psychosocial support program need to do going forward. According to the ILO (2016), the analysis should indicate further action that is needed. Using a model can assist the researcher and users to gain a more complete picture of what needs to be done [28]. The study's main limitation is that the study methodology does not provide a clear way forward on actions to be taken against impending risks the study revealed. Therefore, the suggested model can give insight on how project managers can manage the risks for more effective psychosocial support delivery. The proposed psychosocial support risk prioritisation model (PSSRPM) endeavours to guide management on possible actions which

need to be taken to mitigate the psychosocial support risks and their impact while it lays down components which can support the management of psychosocial support risk from NCPs up to national level.

The Psychosocial Support Risk Prioritization Model [PSSRPM]

The proposed psychosocial support risk prioritization model [PSSRPM] has been conceptualised around the reviewed psychosocial support and project risk management literature and the current research results. This requires an immediate solution to the risks which stakeholders face in implementing psychosocial support services in the country. Findings from both literature and the research itself indicated that the delivery of psychosocial support services is under threat owing to the prevalence of psychosocial support risks and weak project risk management. The study results show that the respondents perceive all the assessed risks to have at least high probabilities of happening and if they do happen the same risks can cause high impact on psychosocial support delivery hence the need for an intervention strategy. Similarly, [9], state that, it is not clear from existing policies and practices how the management of psychosocial support risks among orphan and vulnerable children (OVC) is done or ought to be done yet according to [8], the number of OVC in the SADC region including Eswatini is increasing and has potential for dire consequences [10].

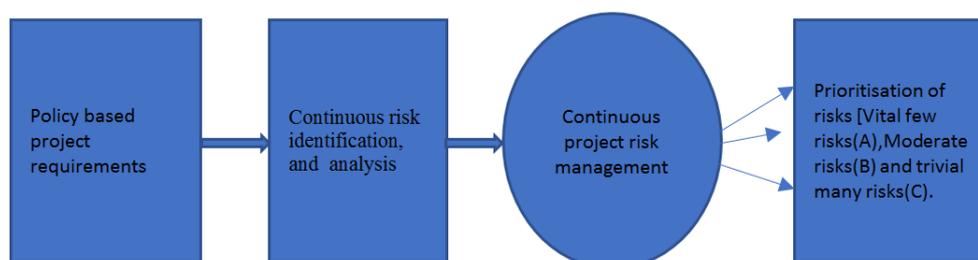


Figure 1. The Psychosocial Support Risk Prioritisation Model [PSSRPM] Source: Researcher Designed 2021.

The PSSRPM is the intervention strategy which the researcher proposes for mitigating risk activities relating to material, manpower, machine/technology, and methods of delivering psychosocial support services in the country. Effective implementation of the model could help in finding the long-term solution to the problems faced in providing psychosocial support services in Eswatini. The PSSRPM assumes that budgetary allocations associated with the analysed risk elements are known or information to that effect can be extracted from official records because it will recommend a cost-based risk classification.

Because models are aids, just like a walking stick, they can be modified to suite a particular user's own circumstances, models are not rigid, and they are not cast in iron. The PSSRPM prioritises risks and categorises the assessed risks into high, moderate, and low priority categories. The project risk prioritisation is guided by the Vilfredo Pareto's 1898 Pareto analysis principle. Use of the Pareto principle in this case will assume an ongoing project where costs of or budgets for implementing the project activities are known.

According to Grosfeld et al. (2007), the vital few activities (20%) are usually responsible for the bulk (about 80%) of the effect. In project risk management this entails that a mere 20% of the assessed risk activities are responsible for 80% of the effects that all the assessed risks have on project management. Management must pay attention to the few risks (20%) which cause the greatest (80%) impact to the program.

The implication to management is that understanding of psychosocial support risks, particularly the vital few (20%) risks that cause 80% of the damage, is critical because management efforts such as resource allocation, controlling and monitoring must be directed to the priority risk element (Vital few-category A items). Second, moderate effort, controlling and attention must be directed towards moderate risk items (category B items). Third and last, there is no need to waste resources, and management trying to manage the trivial many (80%) (Category C risk activities) which account for a mere 20% of the damage. As a result, the Pareto analysis is also known as the 80/20 rule [35].

The 80/20 rule is versatile hence it can be applicable in other situations such as inventory management where only 20% of the items held constitute 80% of the inventory value and in marketing where 20% of the customers are responsible for about 80% of sales. To maximize the benefits in each situation where the Pareto analysis is applicable management must focus on the vital (20%) critical activities [34]. While the prioritisation of risks can lead to more effective risk management and the attainment of original project objectives of cost, time, schedule and quality, the moment the challenges posed by category A and B risk activities are addressed the status of these activities automatically change. Therefore, the dynamic nature of risk management requires authorities to understand that risk profiles of all project activities are not stagnant hence they need to be reviewed on a regular basis to reflect the latest risk prioritization status. Similarly, the process of identifying and planning for new risks is also on going hence the risk register which informs the risk management strategy also requires regular updates.

The project risk management model can help project managers and authorities to prioritise critical project risk management elements such as policy development, project risk identification and analysis, implementation and risk prioritisation and achieving effective project goals. A strong and clear national psychosocial support policy which is appropriately adjusted in line with emerging issues such as pandemics must be put in place, integrating the views of stakeholders especially program beneficiaries, caregivers, and providers of the 4Ms which the research identified as the main project risk management priorities.

Mitigating activities that can prevent the attainment of the psychosocial support objectives involved a thorough analysis of the decomposed 4Ms elements with the view to get to root causes of all those risks. Once the risks of the project activities have been analysed they are prioritized into vital (A), moderate (B) and trivial (C) categories guided by budgetary allocations as proxy to these costs. This is in line with Kaplan and Mikes (2012), who advocate that, most organisations tend to link capital allocations and budgeting decisions to the identified risks. For the study, the higher the budget allocation to individual 4M activities the higher the risk associated with the individual item. Finally, effective project delivery is about meeting psychosocial support objectives from a short-term, medium term, and long-term perspective. How management handles the three categories of risks will determine if the delivery of psychosocial support is effective or not. Effective delivery is about meeting time frames, cost effectiveness, meeting delivery schedules and offering quality services that leave the psychosocial support beneficiaries happy. It is a never-ending journey requiring collaboration from all the stakeholders.

4. Conclusion

Owing to the omnipresence of risks at every stage of psychosocial support delivery, particularly at

implementation stage, those in charge of managing psychosocial support, caregivers, and government administrators, are expected to adopt and implement risk management strategies. This involves identifying the risks (4Ms of psychosocial support delivery), analysing and managing them as part of the parent Ministry's risk management process. Adopting a business approach in managing these risks can lead to improved effectiveness and higher customer satisfaction levels. To collect more psychosocial support risk related information the manpower, material, machine, and methods elements were decomposed into more specific risk elements. It was concluded that all the assessed risks had at least a high chance of occurring and if they occurred their potential to impact the delivery of psychosocial support services was high to critical. It was further concluded that the findings required further refinement for them to give better insight on what was happening and the way forward. Therefore, the proposed psychosocial support risk prioritisation model [PSSRPM] advocates prioritising risks according to budgetary allocations and place them into A, B, and C classifications which will eventually guide the allocation of resources, controlling and monitoring efforts to the different psychosocial support risk elements. This implies that the high-risk elements must be prioritised, the profiles of risks in the different categories will change based on the emerging of new risks and changes caused by management action. Therefore, project risk management is a dynamic concept which requires to be managed and reviewed continuously by reviewing and updating risk management policies and strategies in light of what is happening on the ground, and to provide an accurate risk situation to those in charge of managing the project. Since organisations face different situations and pursue different objectives the selection of risk management methods must be informed by the specific risk profile of the individual organisation. There can never be one universal standard for managing project risks but project managers must try to benchmark their processes with leading institutions and must be guided by contemporary project management best practices. Finally, though not the least, the use of risk management models is recommended because it can give management a more complete picture of their projects' risk situation hence the chosen model can always be fine-tuned to match the needs of the organisation. Management must also make sure that complacency is totally eliminated.

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