Commentary

Mattering as a Vital Support for People During the COVID-19 Pandemic: The Benefits of Feeling and Knowing That Someone Cares During Times of Crisis

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ABSTRACT

The COVID-19 pandemic is a global health crisis that continues to grow. It is a source of mounting stress and anxiety that is exacting an overwhelming toll on individual people. It is during times like these that psychological resources are just as important as the tangible resources available to people. We focus in this commentary on the key psychological resource of feelings of mattering to other people. Mattering is a core element of the self and identity that is especially relevant during transitions. We present the argument that mattering is a key resource when faced with a broad public health crisis such as the current pandemic. In this commentary, we briefly review the concept of mattering and how it is distinguished from related concepts such as belongingness and social support. We also discuss the vital role of mattering in combating feelings of loneliness and safeguarding the health and mental health of people of all ages at all times but especially when in crisis situations. A substantial focus in our commentary is on the need to promote a sense of mattering in the community and the benefits derived from actions and programs that leave people with a core sense that their community cares about them. More generally, we discuss the public health implications of promoting this sense of mattering and steps that can be taken by individuals, organizations, and governments to mobilize mattering as an essential resource for all people, but especially for those individuals who have felt marginalized and perhaps forgotten. When viewed through a mattering lens, exceptional acts of selflessness, volunteerism, and altruism are reframed as acts of mattering that underscore the importance of both having value and giving value to others during times of crisis.

Keywords: Mattering; pandemic; covid-19; crisis
The COVID-19 pandemic has many characteristics and associated features that make it exceptionally stressful for billions of people around the world. It involves an unknown degree of risk to health and well-being not only for individual people but also for their family members, friends, colleagues, and co-workers. Levels of stress and strain are heightened further among people who are influenced acutely by a sense of uncertainty and feelings of uncontrollability. Most notably, there is also a great disruption of daily routines which results in just about everyone feeling like a key part of themselves has been lost or put on hold, at least for the time being. Of course, the psychological toll for many is also related directly to the economic costs and consequences of the pandemic as it hits home to everyone that it is not “business as usual.” This stress is, in all likelihood, magnified for those people who were already experiencing a sense of overwhelming distress and who were perhaps already coping with a mental health or physical health condition or both.

When people find themselves in “times of trouble,” it is human nature to turn to others for comfort and reassurance and tangible forms of aid and assistance. Supportive interactions and contacts can make a world of difference and can determine whether someone is able to adapt and survive. However, in this instance, as virtually everyone knows by now, we are all being told at present to keep our physical distance from other people in order to limit the spread of the virus. This is unquestionably a sound, essential practice but it is also a practice that can be incredibly difficult for people who need to access the emotional support and tangible support available from other people in order to help them get through a crisis. This distancing has been characterized as “a heart-wrenching isolation” (see Clark, 2020). People who were already anxious and stressed prior to the crisis are particularly in need of reassurance from other people, yet this is not possible when isolation is demanded.

A strong case can be made for the argument that research is at its best when knowledge that has been learned can be put into practice. Many academics enjoy scholarly debates for the sake of debate, but it seems imperative during a time of crisis to focus on core concepts that can be put to use in order to make people’s lives better and society a better place in which to live. The current commentary focuses on one of these core psychological concepts – mattering. We maintain that mattering matters at the best of times but it actually matters more during times of crisis such as the pandemic being experienced at present. In part, our argument reflects the contention that mattering is particularly important during transitions and stressful, uncertain times (see Rosenberg & McCullough, 1981; Schlossberg, 1989). Efforts to enhance the personal sense of mattering to others and to a broader community are central to coping efforts and the capacity to maintain a sense of hope that things will indeed get better.

Lessons Learned from the 2003 SARS Outbreak in Toronto

This commentary was written in the Toronto area and this is noteworthy because people in Toronto are already familiar with the extreme, widespread, and varied impacts of a public health
emergency. The 2003 outbreak of severe acute respiratory syndrome (SARS) and SARS-CoV was experienced in many areas of the world but its impact was greatest in two locations -- China and Toronto in Ontario, Canada. Greenglass, Marjanovic, Fiksenbaum, Coffey, Shi, and Chen (2016) documented the widespread destructive influence of the outbreak in and around Toronto that was pervasive though obviously not at the same level it was in China. It had a devastating impact in Toronto and the surrounding area in terms of overwhelming the hospitals and the health care system, but it also had a devastating economic impact. Greenglass and colleagues (2016) also noted that the SARS outbreak caused widespread fear and uncertainty among the general public and they summarized data attesting to the comparatively greater fear, anxiety, and stress of people in the Toronto region, relative to levels of stress and anxiety among people in less impacted areas. Not surprisingly, given this impact, several research teams in the Toronto area responded by studying various aspects of the 2003 SARS outbreak. Research focused on experiences while SARS was happening as well as its aftermath. Even a cursory overview of this research yields an enhanced understanding of what is currently being experienced by people in many countries in the world. Accordingly, we provide below a brief description of this work.

The Toronto-area researchers who studied the impact of SARS documented such things as the stressfulness inherent in living in proximity to SARS, the challenges of being quarantined, and how the severe stress impacted frontline healthcare workers and how they coped heroically with it. Cava, Fay, Beanlands, McCay, and Wignall (2005) conducted a qualitative study that documented the home experiences of 21 people who were quarantined. This research emphasized that despite clear individual differences among people, there were themes common to most participants, including profound feelings of uncertainty and isolation. They called on public health officials to go beyond monitoring compliance and focus on ways of providing support and enhanced connectedness to people undergoing quarantine. Other quantitative research on a sample of people quarantined in the Toronto area documented the high prevalence of symptoms of depression and post-traumatic stress among those who were quarantined with it being noted by the authors that the degree of post-traumatic stress was comparable to the levels found among journalists working in war zones (see Hawryluck et al., 2004). The majority of the participants in this study were healthcare workers.

Other research provided a clear sense of the life of a frontline healthcare worker impacted by the SARS outbreak. A comprehensive review conducted by Maunder (2004) indicated that 29% to 35% of hospital workers reported experiencing a high degree of distress, often in ways that blended anxiety with trauma. There were also some indications that personality factors can predict who is more likely to be distressed – people who reported an insecure attachment style were more prone to stress and distress. The impact of social isolation was also documented. For instance, Maunder (2004) reported that “… staff who reported coping with
concerns about infection by avoiding crowds and colleagues were experiencing a more intense stress response” (p. 1120). Maunder (2004) also provided key observations about a wide range of issues, including the limited state of knowledge at the beginning of the outbreak, the prejudice and stigma experienced by members of the Chinese community in Toronto who were seemingly being blamed by ill-informed members of the public, and how such factors as having to don medical equipment as a frontline worker added to a sense of disconnection while at work. Another key theme was the particular need to address incorrect media portrayals of healthcare workers and the perceived risk of them spreading SARS.

We were able to get some useful insights about the relevance of feelings of mattering versus not mattering in crisis situations by reviewing work produced following the SARS outbreak. As we will emphasize below, the feeling of mattering to others is based, in part, on the sense that other people are listening attentively to what someone has to say. In other words, the person who feels like she or he matters has a voice. Some accounts suggest that a substantial source of frustration and upset for frontline healthcare workers was their realization that they were being put at risk, in part, because decision-makers in positions of power were not listening to what they had to say (see Robertson, Hershensfield, Grace, & Stewart, 2004). This sense of not being heard is distressing any time but especially when it exposes staff and their family members to potential harm.

The Mattering Construct

Clearly, previous accounts represent a useful context for conceptualizing current experiences and events, and we will consider the role of mattering as a key resource in such contexts at length. First, however, we briefly provide a description of mattering and components of this construct. Mattering is discussed in general as a global entity but mattering is also examined in terms of its specific expression in key life domains (i.e., mattering at home, mattering at work, and mattering in the community). Relevant research is then briefly summarized on themes and issues that are particularly germane to people during this pandemic such as loneliness and various forms of psychological distress. This commentary concludes with a focus on the role of mattering in the community and ways to promote mattering as a way of coping with a global health crisis.

A central theme throughout this article is that mattering is a key psychological resource for everyone, but especially among people who are especially in need of the feeling of mattering to others (e.g., elderly people, youth at risk, homeless people, and newcomers in a community). Given the established links that deficits in mattering typically have with mental health problems among various life contexts (see Deforge, Belcher, O’Rourke, & Lindsey, 2008; Flett, Khan, & Su, 2019), a sense of mattering to others as a pandemic unfolds should be particularly beneficial to people who have already had to cope with mental health challenges in general as well as the prolonged anxiety and associated
forms of distress provoked by worries related to this global public health crisis.

Another overarching message that we alluded to earlier is that mattering is a resource that can play a vital role throughout crisis situations such as a pandemic. This view accords with the sage observations of Erich Fromm (1941) who noted that it is natural for people to feel like they don’t matter when world events seem well beyond their control. Fromm (1941) noted as World War II was unfolding that it is commonplace for people in such circumstances to feel small and insignificant and as if they don’t matter in the broader societal picture. People who are unable to shake or overcome this feeling of not mattering are prone to respond with a variety of maladaptive or perhaps even destructive responses that are not the epitome of what scholars, counselors, and therapists mean when they are referring to adaptive coping responses. Fromm (1941) emphasized that this sense of not mattering is accompanied by a feeling of being alone, and people are often faced with the seemingly bleak combination of feeling alone and feeling unimportant. We will see below that Fromm (1941) was well ahead of his time given the strong link between loneliness and feelings of not mattering to others documented in recent research.

Components and Domains of Mattering

What is mattering? Mattering was introduced by Rosenberg and McCullough (1981) as an extension of the seminal work conducted on self-esteem by Morris Rosenberg (1965). Mattering reflects our need to feel like we are significant and have meaningful connections with other people. Rosenberg and McCullough (1981) focused on three components: (1) the sense that other people depend on us; (2) the perception that other people regard us as important; and (3) the realization that other people are actively paying attention to us. They suggested that being a focus of attention is the most central mattering component.

Rosenberg (1985) expanded on these components by suggesting that mattering also includes the notion that other people would miss us if we were no longer around. This leads to the obvious suggestion that one way to enhance someone’s feeling of mattering during this pandemic is to tell him or her they are missed. Schlossberg (1989) then identified an additional element of mattering – feeling appreciated by someone -- after she conducted interviews focused on what it means to matter to other people. Here again this component reflects an easy way to enhance someone’s sense of mattering through sincere expressions of appreciation and gratitude. Ideally, these expressions will go beyond appreciation for actions, but extend to letting someone know that they are appreciated as a person who is valued.

Various authors (e.g., Elliott, 2009; Flett, 2018) have noted that mattering overlaps with related constructs such as a need to belong, social support, and self-esteem, but mattering has unique elements that distinguish it in research investigations and in people’s lives. For instance, at a conceptual level, belongingness involves fitting in; mattering is often mistakenly equated with belonging even though it reflects social significance. Someone
can be accepted as part of a group, but still have the feeling of being insignificant within the group. Regarding the overlap between mattering and self-esteem, the results of multiple research studies show that mattering is correlated substantially with self-esteem but predicts significant variance in key outcomes beyond self-esteem. This point was first illustrated in the research reported by Rosenberg and McCullough (1981).

We have come to regard a deficit in perceived mattering as a unique vulnerability unlike any other vulnerability. In fact, therapeutic and counseling interventions will fail if they do not enhance the vulnerable person’s feeling of mattering to others. People can find ways to bolster their sense of mindfulness and develop more adaptive forms of self-regulation but they are still bound to be distressed and demoralized if they are left with a profound negative self-concept dominated by the feeling that they are unimportant and insignificant to others. In short, there must be a direct focus on not mattering.

Mattering is being studied in a growing number of empirical investigations as a research variable, but this variable-centered approach must be balanced by a person-centered focus that reminds us that mattering, at its best, is about people. At the human level, the individual person who feels a sense of mattering feels heard and knows that people are showing their interest by truly listening. The person with a feeling of mattering also feels visible to others and cared for by others and understood by others. This person is someone who typically will be active and engaged with other people. In contrast, the person who feels a sense of not mattering is someone who feels not seen and not heard and perhaps misunderstood or even forgotten. It is possible for someone like this to wonder if they are still visible to others because they have been made to feel as if they are actually invisible and insignificant. Someone who feels this way will likely be avoidant and disengaged from other people. When mattering is framed in terms of how it feels to the individual person, it is no wonder that the feeling of mattering to other people resonates deeply with most people at a level that is highly impactful.

Prilleltensky (in press) highlighted a vital distinction in the mattering concept in his analysis of the relevance of mattering to community psychology. That is, he reminded us that mattering not only reflects having value to others, it is also about giving value to others. Ideally, people have been raised in a family atmosphere in which they are cherished; they have a sense of mattering in an unconditional way to their significant others. However, when this is not the case, it is important for less advantaged people to realize that feelings of mattering can accrue by finding meaningful and lasting ways to have value to other people. These feelings can come about by volunteering or by mentoring someone in need. It is important to underscore that people can enhance their own sense of mattering in a self-determined way by doing things for others and making a difference in their lives in ways that they will never forget. This perspective on mattering is in keeping with the emphasis Rosenberg and McCullough (1981) placed on assuming key roles in people’s lives and becoming someone who is depended on by other people.
Mattering is typically considered in terms of a global, overall sense of general mattering, but, as noted earlier, it can also be examined more definitively in terms of specific life roles and relationships and associated contexts. Mattering can be considered in terms of relatedness to specific people (e.g., mattering to mother, mattering to father, mattering to friends) and measures have been developed to assess these specific forms of mattering (see Flett, 2018) but it also can be expressed and experienced distinctly in specific contexts (e.g., mattering at school, mattering at work, mattering in the community).

The relevance of mattering to specific people and life contexts makes mattering a psychological resource with enormous scope. As underscored by Flett (2018), it is essential to remain cognizant of these myriad contexts to fully appreciate the depth of someone’s despair when this individual feels like he or she doesn’t matter at all to anyone or anywhere. This psychological state entails an overgeneralized and all-encompassing sense of insignificance and unimportance that carries with it an exceptional level of risk for individuals who have come to feel this way. The potential risk is perhaps best exemplified by the suicide prevention theme “You Matter” that has been embraced in the United States and throughout the world. Not surprisingly, a profound sense of not mattering along with the experience of equally profound psychological pain is a recipe for directing harm at oneself or other people.

Mattering as a Public Resource in Times of Crisis

Certain established research findings point clearly to how and why the promotion of mattering can be highly effective in helping people through challenging circumstances such as the current pandemic. Mattering is best seen as a resource. Moreover, unlike the dwindling supply of certain public health resources, mattering doesn’t have to be a scarce resource that is rationed in careful quantities. It can be doled out and then doled out some more.

One pervasive theme throughout the pandemic is the expressions of concern for the many people who are physically isolated or perhaps psychologically isolated and who find themselves trying to cope with profound feelings of loneliness. Loneliness is highly destructive at the best of times and it is regarded as not just a correlate but a cause of early mortality (Holt-Lunstad, Smith, Baker, Harris, & Stephenson, 2015). One of the most important findings in the mattering field is that feelings of not mattering are linked robustly with loneliness. Flett, Goldstein, Pechenkov, Nepon, and Wekerle (2016) demonstrated in a sample of undergraduate students that lower scores on the General Mattering Scale were correlated strongly with loneliness scores. Moreover, feelings of not mattering still predicted lower levels of loneliness after controlling statistically for personality trait correlates of mattering and the links that loneliness has with introversion and neuroticism. More recent research shows that feelings of not mattering are not only associated with an unmet need
for connecting with others, feelings of not mattering predict significant unique variance in levels of loneliness after also controlling statistically for the associations that unmet core psychological needs have with loneliness (see Flett, Nepon, Goldberg, Rose, Atkey, & Zaki-Azat, 2020).

Collectively, these data show us that for many people, feelings of loneliness and feelings of personal insignificance to others are linked inextricably and there are far too many people who feel both alone and unimportant to others. Given the strength of the association of feelings of loneliness and not mattering (r’s of .60 or greater), there can be little doubt that efforts to enhance a person’s sense of mattering to others will, in many instances, also help alleviate feelings of being alone, disconnected, and isolated from other people.

The primary focus thus far in published research on mattering and psychological distress is the link that a diminished sense of mattering has with depression (e.g., Deforge et al., 2008; Flett, Burdo, & Nepon, in press; Flett, Su, Ma, & Guo, 2016; Ueno, 2010; Wight, LeBlanc, Meyer, & Horic, 2015). Initial research indicates that mattering is linked consistently with reduced depression in cross-sectional research, but it also protects individuals from developing depression over time (see Taylor & Turner, 2001). Innovative research is now being conducted on the role of mattering in protecting people from physical health problems. At present, the most revealing study is one reported by Taylor and associates. Their longitudinal study based on data from the Nashville Stress and Health Study showed that elevated levels of mattering are protective in that they buffer the link between allostatic load and age among older adults (see Taylor, McFarland, & Carr, 2019) and the authors concluded that mattering may be a better protector of health and well-being than other ways of conceptualizing social relationships. Allostatic load is essentially an indicator of the cumulative “wear and tear” and stress that impacts the body and it is generally accepted that the reduced health status of people as they age is substantially due to the greater allostatic load that accumulates as a part of life experience. There are profound implications that follow from evidence that mattering is a resource that promotes resilience and physiological adaptation to stress. By extrapolation, it follows that people with an elevated sense of mattering will be better able to withstand the physical challenges of contracting the virus, especially when the focus is on older adults who have maintained a high degree of perceived mattering to others. Conversely, people who feel like they don’t matter to others will have a reduced ability to withstand the virus. Moreover, these individuals are likely to be over-represented among people who did not engage in appropriate self-care and this is likely due to having internalized the message of not mattering to others to the point that these people no longer matter to themselves. Such individuals should be distinguishable from other people who acted impulsively and recklessly due to a false sense of invulnerability and their own naïve optimism.

**Mattering Among Workers and Medical Personnel Responding to the Pandemic**

Much of our commentary focuses on mattering to others as a general construct. However, given the body of
work that emerged on the stress and coping of healthcare workers during the 2003 SARS outbreak, the work-related implications of mattering seem particularly relevant. Schultheiss (2007) stated that “Mattering is an essential component of worklife” (p. 194), and qualitative research has established that workers need to feel like they matter (e.g., Curry & Bickmore, 2012; Lee, Lee, & Armour, 2016). Jung (2015) provided a review of interpersonal and societal mattering at work and its importance to a wide range of positive work outcomes, but in reality, research on mattering at work is still in its infancy. An impressive new measure of mattering at work has been developed (Jung & Heppner, 2017) and the existence of this measure should be a catalyst for much more research on mattering in the field of organizational psychology.

One indication that mattering is needed as a resource was provided by accounts from frontline health care providers who described their sense of becoming disconnected from others, including colleagues and family members, during the SARS outbreak (see Bournes & Ferguson-Paré, 2005). Such feelings could be buffered or blunted by reminders of how much these health care providers mattered to their colleagues, patients, family members, and the general public.

One clear finding that emerged from other research on healthcare workers coping with the SARS outbreak is that perceived organizational support was a key factor that facilitated more adaptive coping and emotional responses and less burnout (see Fiksenbaum, Marjanovic, Greenglass, & Coffey, 2006; Marjanovic, Greenglass, & Coffey, 2007). It can be extrapolated from this programmatic research that medical personnel who have been made to feel like they matter because they are truly valued will be better able to cope with the challenges of a public health crisis. Indeed, an emphasis on mattering qualifies previous conclusions and recommendations. For instance, Greenglass and associates (2016) observed that in times of crisis, hospitals should implement interventions that promote a supportive and collegial environment by providing positive feedback to their staff members. Our analysis suggests that feedback and positive actions will be especially effective if they convey a sense of mattering focused specifically on the need to feel valued, while care is also taken to not engage in “anti-mattering” actions that further add to stress and undermine morale.

While personnel need to know that they are valued as people by their employers at all times, this seems most essential during times of crisis such as the current pandemic. At present, there are many contemporary reports of employers and organizations showing consideration in ways that send the clear message that they value the health and well-being of their workers. Workers who are shown they matter and treated in a kind, sensitive manner will be loyal and committed. However, those who are treated as if they don’t matter will seek out other job options at the first available opportunity. This extends to heroic frontline personnel who do not have access to protective equipment and there is a pervasive sense among them that thoughtful planning and prevention did not take place. Unfortunately, in
contrast to the inspiring accounts of words and deeds that have let heroic workers know they matter, there are also examples of workers who have been exposed needlessly to risk in ways that send a clear message that they are not valued as much as they should be valued. Here is another context in which mattering matters but it matters more during times of crisis in risky job situations.

Community Mattering and Response to the Pandemic

We have emphasized throughout our commentary that people need to feel cared for and cared about in ways that extend beyond their families and their homes and this is especially the case during times of crisis and in situations in which it is natural to feel isolated. Schlossberg (1989) concluded that a community is a community only to the extent that individuals feel a sense of mattering in the community context. She underscored everyone’s needs here by noting that among her sample of family caregivers, the participants clearly indicated that they had a need to matter in family relationships and at work, but also be valued in their community. Schlossberg (1989) further emphasized how abjectly alone someone could feel if they lived in a place where there is a sense of not really knowing anyone or being known to anyone to the extent that no one would really notice if they weren’t out in public. This very possibility must be weighing on the minds of people who have been self-isolating in accordance with requests to do so as a way of limiting the spread of COVID-19. Some of these people may have the nagging feeling that no one would really notice or care if they never turned up in public again.

Unfortunately, research on adolescents from North America suggests that there is a pervasive sense of not mattering in the community and it is far too prevalent among young people. Perhaps this is one of the most defining and damning features of highly individualistic societies. Flett (2018) summarized data from various jurisdictions in the United States and Canada that suggest that fewer than half of the adolescents surveyed felt like they mattered in their community. A clear pattern has emerged in this research despite investigators relying on a single survey item. Typically, respondents are asked, “To what extent do you feel like you matter in your community or town?” Flett (2018) provided a summary of the specific responses of adolescents from 10 communities and found across jurisdictions that levels of community mattering ranged from a high of 66% to a low of 17% with the percentage being greater than 50% in only three samples. Other research has shown that this one-item of community mattering is a key metric that is quite revealing about levels of functioning among adolescents. Collectively, the results indicate that feelings of not mattering in the community are associated with a host of negative indicators including depression and suicide ideation and plans, but also a greater likelihood of being engaged in bullying and dating violence (see Chiodo, Crooks, Wolfe, McIsaac, Hughes, & Jaffe, 2012; Edwards & Neal, 2017; Murphey, Lamonda, Carney, & Duncan, 2004; Olcon, Kim, & Gulbas, 2017).
Although pandemics are devastating in so many respects, when viewed through a community mattering lens, crises such as pandemics can actually be perceived as opportunities to show people in the community just how much they actually do matter. This basic premise accords with accounts of the benefits of shared threatening events that bring people closer together. Community mattering is a source of psychological and physical strength that can provide a key sense of integration and connection. Flett (2018) observed that, “… people have a need for community mattering and they will have a valuable asset in their repertoire if they can capture the feeling of belonging in their community but they have also come to feel important and have a role to play in their community” (p. 265).

It is generally accepted that a supportive community is most essential among people who feel marginalized. Extra steps must be taken by individuals, communities, organizations, and governments to ensure that instead of feeling overlooked, people in more challenging circumstances truly feel that people are seeing them and hearing them and are looking out for them. People who typically feel like they are expendable in the eyes of other people or if they are regarded at all, they are seen as a number rather than as a person, are especially in need messages and deeds that suggest otherwise. Schlossberg (1989) made the important point, albeit in a different context, that it is vital to make certain that programs, policies, and practices are helping people to feel like they matter. Overall, this seems like a key criterion when difficult decisions need to be made about where scarce resources will be allocated.

We maintain that everyone needs to have a sense of mattering and this should be reflected in messaging (i.e., everyone counts, we are all in it together, everyone has a role to play, etc.) but there must also be a specific focus on people who likely have already developed a sense of being marginalized and treated as if they don’t count (e.g., at-risk youth, people with physical disabilities and mental health challenges, homeless people, and newcomers to a community such as immigrants). People who have long felt the sting of being marginalized will be highly sensitized to overt acts of prejudice, stigma, or exclusion as well as a lack of attention that exacerbates existing feelings of being neglected. However, they should also be responsive to any message or policy that counters this feeling.

Regarding the pandemic, one essential focus that merits specific mention is boosting the sense of mattering among elderly people. Rosenberg and McCullough (1981) observed in their introductory work that two groups of people in particular are prone to feelings of not mattering—older adults and adolescents. Fazio (2009) also emphasized the need for older people to maintain a sense of mattering and how difficult this can be for older people who may have lost significant people in their lives or who lack the mobility to be able to interact frequently with other people and generate mattering experiences for themselves. It remains to be determined through empirical research, but it is quite plausible that a feeling of not mattering to specific other people or to society in general may underscore the high prevalence of loneliness among older people and the psychological pain that tends to
accompany it. Unfortunately, throughout the COVID-19 pandemic, there has been a plethora of crass statements from some people in positions of power about how the health risks to certain people with higher vulnerability (e.g., the elderly) must be weighed against the economic consequences of prolonged physical distancing and isolation. In essence, this is a message of “anti-mattering” that, if accepted at face value, would naturally detract from a person’s ability to feel significant and important to others. Actions and statements that convey a sense of not mattering are acutely felt by anyone but especially people who have already questioning their personal significance and importance.

What can be done in communities to promote someone’s sense of mattering? There is a wide range of possibilities. A partial list is provided in Table 1. One factor that is common to the 10 actions proposed in Table 1 is that they remind a person in need that someone cares and someone is taking special interest in them without hesitation or reservation.

Table 1

| 10 Ways to Build an Individual’s Sense of Community Mattering |
|---------------------------------------------------------------|
| Inquiring often about what someone needs, wants or thinks     |
| Telling someone you know how much they are needed and relied upon |
| Checking in on people, finding unique ways to stay connected with them |
| Going out of one’s way and taking the time to enhance someone’s well-being |
| Sharing narrative accounts of people helping people to build a shared sense of connection |
| Asking directly about someone’s fears, hopes, and interests and sharing your own |
| Acknowledging selfless efforts on behalf of others |
| Expressing gratitude as a form of appreciation to people helping and protecting others |
| Sharing your own resources in a selfless, generous manner |
| Reminding people who are isolated and alone that other people are still with them |

Note: Adapted from Table 3.2, page 35 in Flett (2018).

We have focused above on individual actions that promote a sense of mattering. However, it is important to examine mattering at a broader, systems level; that is, are systems seen as fair and responsive to an individual’s needs? When publicly available aid seems inadequate or allocated in arbitrary ways, it can exacerbate already existing feelings of not mattering among vulnerable people and vulnerable groups.

Unfortunately, given the need for information about the pandemic, it is far too easy to become obsessed with media accounts that will heighten anxiety and apprehension. It is sound advice to limit the extent that people expose themselves to these accounts. However, on a more positive note, media accounts of acts of
kindness and selflessness that convey mattering are highly inspiring; stories of displays of mattering resonate with the general public and spread positivity and a sense of hope that is needed to get through such difficult times.

We will conclude with an observation that public health officials and leaders at all levels of government should keep in mind. When it is all said and done, people will remember those people who showed them they mattered, but they will even more so remember anyone who made them feel, through action and inaction, like they didn’t matter. A metric for judging any community and society is the extent to which it let their people know that they mattered, especially during times of crisis. Mattering should be at the core of public health initiatives designed to help people through very challenging times.

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