your actions. The activity will feed back on the boredom, reducing its intensity.

- Use your intelligence. It is possible that you have used your mind destructively to throw yourself into a psychological pit. The intelligent thing to do is certainly not to passively accept the pit as a trap. If your intelligence got you in, it can get you out. The really bright person realises that the trap of boredom is a self-made one, and it can be dismantled with intelligence just as it was constructed by intelligence. Brainstorm the problem. Make your own list of coping strategies that are likely to work for you.

Professional Help

If you find that you cannot cope adequately with boredom, there are a number of ways in which the professions of psychiatry and clinical psychology can help you.

In the first place, it should be realised that very few people come to a psychiatrist or a psychologist offering boredom as their principal psychological symptom. It is much more likely that the chronically bored person will complain of depression. The therapist needs to ascertain to what extent boredom does or does not play a role in a particular client's complaint of depression. If boredom plays a major role, then it needs to be addressed.

There is no categorical advice that will cure boredom. The kinds of coping strategies outlined in the prior section may or may not be received with interest. Some individuals will resist them completely, discount all of them, and go right on being bored. When this happens, the therapist has to take a more general, less directive approach.

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In stubborn cases of chronic boredom, many therapists make use of the humanistic viewpoint. The client is seen as a whole person functioning poorly in a complex life situation. Therapeutic discussions deal with the problem of boredom indirectly. The client is helped to re-evaluate his or her philosophy of life. The meaning that life holds is explored. Attempts are made to help the troubled person rediscover lost meanings. A life of work and activity without meaning is, without question, boring.

The approach described in the above paragraph, when it is the principal treatment modality, is called logotherapy. Logotherapy is based on the premise that human beings have an inborn will to meaning. As a kind of therapy, it was pioneered by the psychiatrist Viktor Frankl.

An important theme in the humanistic viewpoint is self-actualisation. Self-actualisation refers to an inborn need to maximise one's talents and potentialities. According to Abraham Maslow, a principal founder of humanistic psychology, people have "whisperings within" that suggest what direction they need to take in life in order to make the most of their abilities. Self-actualising individuals, individuals who are deeply involved in a process of personal growth, tend at some times to have spontaneous peak experiences. Peak experiences are moments of genuine joy or ecstasy. A life with few or no peak experiences is gray and dull. In order to help a client overcome boredom, the therapist will explore ways for the client to become more self-actualising.

Taking an approach advocated by Alfred Adler, a principal founder of early psychoanalysis, the therapist may focus on the importance of social interest and the creative self. Social interest is asserted by Adler to be an inborn tendency in human beings. It is a need to care not only for themselves, but also for their fellow human beings. Expressions of social interest can be seen in raising children, in providing a service of value for others, and in having a concern for the welfare and future of humankind. As earlier indicated, bored people often lack social interest and instead are vain and self-absorbed. How can lost social interest be rediscovered? Adler argues that each individual has a creative self, an inborn ability to take charge of life and become autonomous. Through the use of the creative self, it is possible to reaffirm and rediscover social interest. The therapist can work with the client in an attempt to bring the creative self into play.

Boredom in and of itself does not call for the prescription of a drug. There is no such thing as antiboredom medication. However, it is true that there are antidepressant drugs; and if boredom is a secondary complaint associated with a major complaint of depression, then one of these drugs may be prescribed and in turn may be helpful.

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