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## What if the Black Dog Turns Out to be a Ginger Poodle? Winston Churchill and depression

Kiedy czarny pies jest w rzeczywistości rudym pudlem.  
Winston Churchill i depresja

### Abstract

The aim of this article is to analyse historical documents and biographical accounts relating to the clinical depression from which Winston Churchill, according to some sources, allegedly suffered all his life. He nicknamed his low moods “a black dog” and the phrase has become widely accepted in the English-speaking world as a personification of depression. We argue that there is scant solid evidence to prove Churchill was indeed mentally ill, even for a short period of time. He has been deliberately chosen to act as an anti-stigma icon due to his immense popularity and indisputable achievements. In an attempt to fight prejudice and lift the shame accompanying the illness, especially among males diagnosed with the disorder, Churchill’s biography has become falsified while his portrayals in film and fiction are often inaccurate.

### Abstrakt

Celem artykułu jest analiza dokumentów historycznych i tekstów biograficznych poświęconych depresji, na którą, według niektórych źródeł, miał rzekomo cierpieć przez całe życie Winston Churchill. Żartobliwie nazywał napady kiepskiego humoru „czarnym psem” i określenie to stało się rozpoznawalnym w świecie anglosaskim synonimem depresji. Autorki artykułu

utrzymują, iż nie ma prawie żadnych wiarygodnych dowodów świadczących o nawet krótkotrwałej chorobie psychicznej Churchilla. Ponieważ słynny Brytyjczyk darzony jest ogromnym szacunkiem, aktywiści działający na rzecz popularyzowania wiedzy o chorobach psychicznych i destygmatyzacji osób żyjących z diagnozą psychiatryczną, wybrali Churchilla na ikonę swoich kampanii społecznych. W tym, bez wątpienia chlubnym, celu biografia Churchilla została ostatnio zniekształcona, a jego przedstawienia w literaturze czy filmie odbiegają od rzeczywistości.

**Keywords:** black dog, depression, mental illness, Winston Churchill

**Słowa kluczowe:** choroba psychiczna, czarny pies, depresja, Winston Churchill

Posthumous diagnosing of famous people is an area of research that has achieved a permanent place in history, despite numerous protests. Putting moral issues aside, applying modern medical criteria to descriptions of symptoms is simply anachronistic. Though this critique can be fended off in the case of many physical diseases (as their symptoms remain stable across times and cultures), it is much more substantial if mental disorders are concerned. Psychiatry is, after all, a unique branch of medicine, in which cultural norms and expectations are essential in reaching a diagnosis. Though, obviously, people have always suffered from mood disorders, hallucinations or delusions, the way these complaints were voiced and treated by medical establishment varied considerably. Furthermore, organic causes such as neurosyphilis or brain tumours might give symptoms identical to what we now label as schizophrenia or paranoia – for instance, the madness of the British monarch King George III was probably caused by variegate porphyria<sup>1</sup>. Finally, the question whether a particular historical figure was really deranged or simply abusing power may appear academic if the tyrant in question is, let's say, Nero, Ivan the Terrible or Henry VIII. Recently, however, there has been a dispute about the mental condition of one of the greatest statesman and leaders Great Britain has probably ever had – Winston Churchill. The arguments used by both sides reveal hidden fears and prejudices towards mental disorders, give voice to gender disputes and cast light on the attitude to depression. Frequently, historical evidence plays a subservient role to the political and social agenda of both: those who believe Churchill suffered from depression and those who shudder at the very suggestion.

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<sup>1</sup> V. Green, *The Madness of Kings*, Phoenix Mill 2005, p. 215-216.

First of all, it is worth analysing what gave rise to the speculations that Churchill suffered from a mental disorder. Most of Churchill's contemporaries never found his mental health defective – he would not have been repeatedly entrusted with responsible positions otherwise. In his life, he was “a soldier, journalist, author, artist, sportsman, historian, orator, statesman, inventor, and a stonemason”<sup>2</sup> while people admired his “health and energy”<sup>3</sup>. Likewise, his official biographer, Martin Gilbert, hardly ever mentioned his moods. Obviously, he frequently referred to multiple hardships and professional stresses. For instance, when Churchill was a Home Secretary responsible for convicts awaiting death penalty, he considered his time there a “nightmare”, using adjectives like “distressing”, “painful” and “harassing”<sup>4</sup>. Likewise, it is widely known he was devastated after the unprecedented loss of human life during World War I, especially the Dardanelles campaign fiasco he helped to engineer. Nevertheless, it must be remembered, Churchill became the scapegoat for the failure. According to Gilbert, he was universally criticised, despite being

powerless to influence the course of events at the Dardanelles, watching and fretting and warning his colleagues, but without the executive authority to act. [...] Churchill's influence was virtually non-existent, his warnings to his colleagues seldom heeded. Again and again he spoke at the Dardanelles Committee against attacking the Turks with insufficient troops<sup>5</sup>.

So his profound grief was fully understandable – not only did he take part in one of the greatest British military mistakes but also he feared his political career would be forever marked by the failure for which he was solely, yet undeservedly, blamed. The period between 1940-45, when Churchill acted as a war-time Prime Minister, was obviously very stressful and affected his mental well-being. Roy Jenkins claims that in 1940, as soon as he accepted the premiership,

it is impossible to believe that Churchill did not in those next few weeks experience moments of almost crushing dismay, that there were not indeed mornings when he did not awake feeling that he must have been mistaken, nearly

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<sup>2</sup> J. C. Humes, *The Wit and Wisdom of Winston Churchill*, London 1994, p.16.

<sup>3</sup> P. Johnson, *Heroes. From Alexander the Great and Julius Caesar to Churchill and De Gaulle*, London 2007, p. 229.

<sup>4</sup> M. Gilbert, *Churchill. A Life*, London 2000, p. 216.

<sup>5</sup> *Ibidem*, p. 322.

insane, to have sought such a burden of supreme responsibility at a time when everything seemed more likely than not to go down into the abyss<sup>6</sup>.

He was working inhumanely long hours under enormous pressure and his co-workers initially complained of his being snappy and overbearing, which are frequent symptoms of a depressed mood. Yet, his wife gently drew his attention to “a deterioration in [his] manner” and urged him to return to his usual kindness and calm, the piece of advice Churchill took into his heart<sup>7</sup>. During the war Churchill applied himself to his duties with “boundless and frantic energy, working for more than 18 hours a day” – hardly a feat a person with severe depression would be able to perform<sup>8</sup>. He was also crestfallen when the Conservative Party lost the elections after the Second World War. He assumed the nation would choose the leader who won the war and saved Britain (and the world) from Nazism. His wife, Clementine (Clemmie), in a letter to her youngest daughter wrote that [Churchill] “is so unhappy & that makes him very difficult”<sup>9</sup>. Yet again, his deeply felt sense of injustice is easy to comprehend – there is nothing medically pathological about it.

Still, it must be kept in mind most biographers focus on Churchill the politician, statesman and soldier, not Churchill – the man. Gilbert devoted two lengthy chapters to the Gallipoli failure, and did not mention the miscarriage Clementine suffered in 1912, finding it perhaps irrelevant. It is undoubtedly a history, not herstory, to use a feminist phrase. Yet Churchill was a devoted husband, a dear friend and a tender father as well as an animal lover. These aspects of his personality not only help to perceive him as a much fuller figure, but also a more humane and likeable one. Even the biographers who focus on his non-political activities: such as writing, painting or sport seldom comment on his inner life. Undoubtedly, Churchill was not particularly analytical or prone to self-scrutiny. He was even critical of psychiatry as a quickly growing branch of science, believing thinking too much about what is in people’s heads is not

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<sup>6</sup> R. Jenkins, *Churchill*, London 2002, p. 592.

<sup>7</sup> M. Soames, ed. *Speaking for Themselves. The Personal Letters of Winston and Clementine Churchill*, London 1998, p. 454.

<sup>8</sup> E. Wakely and J. Carson, *Historical recovery heroes – Winston Churchill*, “Mental Health and Social Inclusion” 2010, v. 14, is. 4, p. 37.

<sup>9</sup> M. Soames, *op. cit.*, p. 804.

healthy<sup>10</sup>. His field was action, not pondering and hypothesising. Even his most intimate letters are filled with descriptions of meetings, actions and people – not thoughts and feelings<sup>11</sup>. Thus, it is not surprising the idea that he might have struggled with clinical depression did not occur to most biographers.

The landmark source suggesting the Greatest Briton might have had a mood disorder was the publication of Lord Moran's diaries entitled *Winston Churchill: The Struggle for Survival 1940-1965* in 1966, hardly a year after the Prime Minister's death at the ripe age of ninety-one. Charles Moran was Churchill's personal doctor so, needless to say, Churchill's family, among others, found the publication not only disturbing but also morally inappropriate. After all, it is a breach of professional etiquette and a violation of the Hippocratic Oath to reveal one's patient's secrets – whether the patient is a famous person or not is of secondary importance here. But it seems even more preposterous to do so in the case of a public figure, whose confidence the doctor gained, as it later turned out, undeservedly. Moran's defence was that he was contributing important information that would help later generations to understand fully Churchill's state of mind during the period of World War II. As he had first hand's knowledge about these matters it was even his duty to posterity to make it available. The doctor comfortably ignored to mention in the preface the generous fee he received for his diaries – and it was widely known his financial situation was not advantageous<sup>12</sup>. He received £30,000 from the *Sunday Times* for the serialised version of his book<sup>13</sup>. Needless to say, the financial gain could have been as big an incentive to publish it as his concern for accuracy of research of future history scholars.

Even the subtitle of the book is telling. "The Struggle for Survival" might be interpreted more generally – as Britain's struggle to oppose Hitler but also more narrowly, as Churchill's fight against his own mental and physical disabilities. The second interpretation is more plausible, as the dates indicated are 1940 to 1965, not 1945. Moran, in his preface, uses very charged and judgmental vocabulary, such as "distaste for life," "weakness in moral fibre," "failing powers" and "apathy and indifference"<sup>14</sup>. Thus, the reader is left under a strong

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<sup>10</sup> J. C. Humes, *op. cit.*, p. 99.

<sup>11</sup> See M. Soames, ed. *op. cit.*

<sup>12</sup> M. Gilbert, *op. cit.*, p. 887. Churchill himself made a generous contribution to Moran's family, aware of his doctor's difficulties.

<sup>13</sup> C. Moran, *Winston Churchill: The Struggle for Survival 1940-1945*, London 1968, blurb.

<sup>14</sup> *Ibidem*, p. 15.

impression that the great statesman was indeed in the state of mental collapse. It is sufficient to compare these words with the choice of subtitle for Moran's earlier book, dealing with his experiences in the trenches of the Great War – *Anatomy of Courage* (1945). Ironically, it is the First World War that produced mass conversion neurosis in British soldiers, especially recruits from the upper classes, remembered as shell-shock<sup>15</sup>. Yet the title suggests WW I was a heroic feat while Churchill's condition was disastrous.

Moran repeatedly uses the term “black dog” – a nickname Churchill himself used to refer to his darker moods. His physician interprets the term as a personification of depression. As Peter Foley and Sheila Quail analyse, the phrase has its roots in British folklore, in which a dark canine figure was a harbinger of misery and death but can also be traced back to ancient mythology<sup>16</sup>. It was extensively used by Samuel Johnson, an 18<sup>th</sup> century English writer<sup>17</sup>. Yet, according to John Colville, Churchill's private secretary, the black dog for Churchill was synonymous with feeling grumpy, irritable and ill-humoured, not depressed<sup>18</sup>. It is an expression used to refer to a sulky child, not a person battling with suicidal thoughts and feelings of worthlessness. There are thus sound arguments to assume Moran misinterpreted Churchill's words.

Even if we accept Moran's account as accurate (and it may well not be the case as a few historians dispute its truthfulness and accuse the author of being dramatic and exaggerating his own importance)<sup>19</sup>, it has to be kept in mind that the doctor's opinion is, by definition, biased. Medical professionals see their patients only when they are ill so they may believe them to be in a much

<sup>15</sup> B. Shephard, *A War of Nerves. Soldiers and Psychiatrists. 1914-1994*, London 2000.

<sup>16</sup> J. Foley, ‘Black dog’ as a metaphor for depression: a brief history. [www.blackdoginstitute.org.au](http://www.blackdoginstitute.org.au). Accessed 15.01.2005 and S. Quail, ‘The black dog that worries you at home’: The Black Dog Motif in Modern English Folklore and Literary Culture, “The Great Lakes Journal of Undergraduate History” 2013, v. I, is. 1. Notable instances of the legacy of that tradition can be seen in Sir Arthur Conan Doyle's *Hound of the Baskervilles* (1902), H. P. Lovecraft's “The Hound” (1924) and, more recently, the Grim from the *Harry Potter* series by J. K. Rowling.

<sup>17</sup> *Ibidem*.

<sup>18</sup> J. Colville, quoted in *ibidem*.

<sup>19</sup> See: J. H. Mather, *Lord Moran's book is based on his diaries*, International Churchill Society, <https://winstonchurchill.org/resources/myths/lord-morans-book-is-based-on-his-diaries/> Accessed 4.09.2020. Also Richard Holmes is dismissive of Moran's book. Furthermore there is no surviving written record of Moran's diary, so the whole book seems to be a retrospective account (W. Attenborough, Wilfred. *Churchill and the ‘Black Dog’ of Depression. Reassessing the Biographical Evidence of Psychological Disorder*, London 2014, p. 187-188).

worse state that they really are. There were undoubtedly many moments when Churchill was fine – but on these occasions he did not require Moran’s company. Churchill, who needed to keep energetic and appear resilient to others, might have allowed himself to be more vulnerable to his physician. Furthermore, Moran does not make a sufficient cause-and-effect link between Churchill’s physical complaints (a few strokes and recurrent bouts of pneumonia), which made ordinary past activities, previously pleasurable, impossible, and his mental condition. He also fails to emphasise about his famous patient that “for a man in his late sixties [and later in early seventies], his energy and stamina were astounding”<sup>20</sup>.

Another contributor to the theory that Churchill was struggling with depression was Anthony Storr, a notable British psychoanalyst and writer. Storr created, or rather invented, a psychobiography of a tormented individual, whose depression was apparently caused by premature birth and parental neglect<sup>21</sup>. He also claimed that Churchill’s hyperactivity and youthful bravado were all meant to mask his deeply hidden insecurities, fear and shyness. “His aggressiveness, his courage, and his dominance were not rooted in his inheritance,” Storr argues “but were the product of deliberate decision and iron will”<sup>22</sup>. In other words, Churchill was naturally lazy, gloomy and fearful yet forced himself to appear otherwise to avoid shame. Such a statement suggests that depression is not a real illness but a matter of willpower and determination. Storr also argues that the multiple hobbies Churchill enjoyed, such as painting or redecorating his country house at Chartwell in Kent, were also desperate measures to mask the ingrained despair and emptiness. In fact, many people would argue that the ability to enjoy life’s daily pleasures and exhibiting interest in various activities

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<sup>20</sup> P. Addison, *Churchill. The Unexpected Hero*, Oxford 2005, p. 203.

<sup>21</sup> A. Storr, *Churchill’s Black Dog and Other Phenomena of the Human Mind*, London 1998, p. 22. The psychoanalyst supports his presumptions with a controversial opinion that “a premature child is unexpected and, therefore, something of an embarrassment.” Obviously, children born too soon after their parents’ wedding may be suspected of being conceived illegitimately and only passed as premature. Yet it was never an issue in the case of Winston’s birth. Storr, like a few other biographers, exaggerate the neglect Winston apparently suffered as a child. His parents indeed did not look after him personally and sent him off to a boarding school at an early age – yet their behaviour was absolutely typical for British aristocrats of the 19<sup>th</sup>, and even 20<sup>th</sup> century – see R. Holmes, *In the Footsteps of Churchill*, London 2005, p. 27. Young Churchill received a lot of affection from his nanny, Mrs Everest. Also, his letters home suggest he was a needy child, prone to manipulative behaviour.

<sup>22</sup> A. Storr, *op. cit.*, p. 11.

is a sign of mental health. The loss of interest in them is listed as a symptom of depression. Churchill remained an active painter, avid reader of novels and frequent traveller till his death.

Storr is also responsible for starting the theory that Churchill's melancholic disposition should be seen as his asset, not weakness, an idea that will be later elaborated on by many scholars and mental health advocates.

Only a man who had known and faced despair within himself could carry conviction at such a moment [Battle of Britain]. Only a man who knew what it was to discern a gleam of hope in a hopeless situation, whose courage was beyond reason, and whose aggressive spirit burnt, at its fiercest when he was hemmed in and surrounded by enemies, could have given emotional reality to the words of defiance which rallied and sustained us [the British and their allies] in the menacing summer of 1940. Churchill was such a man: and it was because all his life, he had conducted a battle with his own despair that he could convey to other that despair can be overcome<sup>23</sup>.

Again, people diagnosed with depression are not known for their resilience and optimism. The fact that Churchill believed in victory despite the overwhelming evidence against it and could instil hope in others is yet another proof against his depression.

The fact remains Churchill's last years were indeed relatively bleak. Yet it must be remembered that he was in an advanced age, had multiple physical complaints as well as genuine reasons to worry. Three out of his four surviving children had serious personal problems, which involved alcoholism, mental illness and turbulent love lives. His second daughter Sarah was arrested for unruly behaviour while intoxicated and the news of the scandal leaked to the newspapers<sup>24</sup> while his eldest, Diana, committed suicide in 1963<sup>25</sup>. He was also saddened by the political situation in the world as well as the fall of the British Empire. Like many professionally active individuals, he did not enjoy retirement. Thus, Vivian Green's account of the last decade of the Prime Minister's life seems to be both unfair and unkind. He writes that

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<sup>23</sup> *Ibidem*, p. 5.

<sup>24</sup> M. Soames, *op. cit.*, p. 629.

<sup>25</sup> R. Holmes, *op. cit.*, p. 85.

Behind a façade he was a shadow of his former self. His speech was slurred and he walked with difficulty. He read little but novels, spent much of his time playing bezique, found it difficult to concentrate and was increasingly forgetful of names and occasions<sup>26</sup>.

Keeping in mind it is a description of an octogenarian who has had several strokes, most people would probably still envy Churchill his ability to walk, talk and read at all. He might have been a shadow of his former self, but his agility and intellectual curiosity were still impressive. That is why, his disappointment and frustration caused by aging can be labelled as clinical depression remains disputable.

Moreover, irrespective of the medical problems mentioned above, the last two decades of Churchill's life proved that he was able, even in the advanced age, to indulge in old pastimes (such as painting) and find new hobbies. All his life he was an avid reader, but he discovered the pleasures of reading novels and acquainted himself with many canonical works of Victorian literature. His youngest daughter's husband, Christopher Soames, introduced him to his last great passion – breeding race horses and horse racing<sup>27</sup>. He also made new friends and enjoyed their company. One of them was Aristotle Onassis and his first wife Tina, on whose yacht *Christina* Churchill was a frequent guest<sup>28</sup>. These are hardly the exploits of a man disabled by the grips of crippling depression.

Despite relatively scant solid historical evidence for Churchill's mood disorder, there is a growing tendency to perceive him as depressed. Encouraged by the medical account of Moran and psychoanalytic study of Storr, a few historians as well as mental health activists interpret Churchill's life through the prisms of depression. The most important of them is an American psychiatrist Nassir Ghaemi, who in his book, *A First-rate Madness. Uncovering the Links between Leadership and Mental Illness*, argued not only that the famous Briton was depressed but went further trying to convince his readers Churchill's depression was actually advantageous. His thesis, undoubtedly a highly disputable one, is that ordinary times need mentally healthy leaders while the experience of mental illness might be an asset in leaders during periods of exceptional turmoil – “in at least one vitally important circumstance insanity produces good results

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<sup>26</sup> V. Green, *op. cit.*, p. 281.

<sup>27</sup> R. Jenkins, *op. cit.*, p. 30.

<sup>28</sup> *Ibidem*, p. 906-910.

and sanity is a problem. In times of crisis, we are better of being led by mentally ill leaders than by mentally normal ones”<sup>29</sup>. Ghaemi believes “realism, resilience, empathy and creativity” are consequences of depression – though for most people these features characterise rather emotionally mature and stable individuals<sup>30</sup>. The author argues that Churchill was able not to underestimate the threat Germany posed in the 1930s because he assessed reality much more objectively as a result of his depressive episodes<sup>31</sup>. There might have been, however, other reasons for his perceptiveness – profound knowledge of history, understanding of nationalism and imperial ambitions, even sheer luck or anti-Hun prejudice, a souvenir of his few months spent in the trenches during World War I.

Arguing in favour of Churchill’s illness, many researchers draw attention to his heredity. Indeed, there have been many individuals with obvious mental health issues among both his close and distant relatives. Also three out of four of his surviving children displayed symptoms of mental illness, notably depression and alcoholism. Yet, it must be remembered that Churchill’s wife, Clementine was of weak health herself – she frequently suffered from nervous exhaustion and needed a lot of rest. She was even hospitalised because of her nerves, a euphemism which might suggest a depressive episode<sup>32</sup>. Her own mother was a gambler while her brother, also a gambler, committed suicide for no apparent reason in 1922. Thus, it is difficult to say from which parent Winston and Clemmie’s children inherited their disposition towards mental illness.

Many biographers argue that Churchill’s drinking was connected with his depressed mood and alcohol acted as self-administered medication. Obviously, Churchill was far from being an abstinent and his habit of drinking spirits at breakfast found its place in many anecdotes. Nevertheless, those who are less sensation-seeking observe that “no credible testimony of Churchill’s being drunk” exists<sup>33</sup>. He was more of a sipper than gulper, to resort to a common phrase and though he did indeed drink daily, from early hours, his whiskey and sodas were heavily diluted<sup>34</sup>. As Holmes claims “he required a steady but seldom excessive intake [...] to feel fully functional”<sup>35</sup>.

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<sup>29</sup> N. Ghaemi, *A First-rate Madness. Uncovering the Links between Leadership and Mental Illness*, New York 2011, p. 2.

<sup>30</sup> *Ibidem*, p. 3.

<sup>31</sup> *Ibidem*, p. 57.

<sup>32</sup> R. Holmes, *op. cit.*, p. 85.

<sup>33</sup> P. Addison, *op. cit.*, p. 184.

<sup>34</sup> P. Johnson, *op. cit.*, p. 216.

<sup>35</sup> R. Holmes, *op. cit.*, p. 16.

The most outspoken opponent of the theory about Churchill's depression is Wilfred Attenborough. His book, *Churchill and the 'Black Dog' of Depression. Reassessing the Biographical Evidence of Psychological Disorder*, meticulously compares historical documents with claims made by Moran, Storr and Ghaemi and finds them unfounded or even deliberately fraudulent. His main argument is that Moran mistook Churchill's occasional emotional difficulties and moral dilemmas for mental illness. For Attenborough, the black dog was a "metaphor for transient worries, anxieties and low moods consequent upon the difficulties, disappointments and setbacks inescapable in the working life of a major political figure"<sup>36</sup>. One could only add here that these are unavoidable in the life of any responsible, mature adult. He also notes that Churchill's low moods never affected his professional performance as they never led to any lasting disability. "Any mental health problem Churchill may have had," he soundly argues, "was to do with strain and worry rather than with deep depression impairing general personal and social functioning"<sup>37</sup>.

Probably the most concise text defending Churchill's sanity— but still effective in its simplicity — is the short article published on International Churchill Society website by a therapist Carol Breckenridge. She simply lists all the symptoms of depression (as well as bipolar disorder, as some historians assume it might be a better diagnosis) enumerated in *The Diagnostic and Statistical Manual of Mental Disorders*, a universally recognised diagnostic tool, in order to dismiss all of them flatly, one by one.

Despite the unresolved historical controversy, the public perception of Winston Churchill as depression sufferer has been strengthened by several things. One of them is the famous sculpture presenting Churchill in a straight-jacket commissioned by Rethink Mental Illness, a large British charity in March 2006. The statue was initially to be displayed in Trafalgar Square but it came across a public outcry. It was accused of being too offensive and ended up in The Forum, a community building in Norwich, a much less spectacular location from the originally intended. Rethink argued their intentions were "to demonstrate that mental illness is not a barrier to leadership, historic significance and popularity"<sup>38</sup>. A year later, in 2007, Rethink and Mind, another

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<sup>36</sup> W. Attenborough, *op. cit.*, p. 3.

<sup>37</sup> *Ibidem*, p. 24.

<sup>38</sup> C. London, A. Scriven and N. Lalani, *Sir Winston Churchill: Greatest Briton used as an anti-stigma icon*, "The Journal of the Royal Society for the Promotion of Health" 2006, v. 126, No 4, p. 164.

charity organisation, founded a campaign called Time to Change. They chose five famous historical figures who, allegedly, battled with mental health issues to persuade employers discrimination against people with psychiatric diagnoses is unfounded. Obviously, Churchill was included in that group, alongside Abraham Lincoln and Marie Curie<sup>39</sup>. In 2012, during Channel 4 programme, *4 Goes Mad*, a straightjacket with the words depression in block capitals was put on the statue of Churchill in Parliament Square<sup>40</sup>. Other famous Britons, such as the naturalist Charles Darwin and pioneer of modern nursing, Florence Nightingale, were also fitted with straightjacket with the names of disorders from which they had allegedly suffered. In 2011, Rebecca Hunt published her highly acclaimed debut novel entitled *Mr Chartwell*. Set in 1964, at the time when Winston resigned his membership in the Parliament, it tells a story of Mr Chartwell, a gigantic black dog, who is invisible to most people but can be clearly seen by those suffering from depression. With them he is able to engage in long discussions and they feel his physical presence and sense the odour of “an ancient thing that had been kept permanently damp; a smell of cave soil”<sup>41</sup>. The dog rents a room close to Churchill’s beloved Chartwell country house, as he wishes to live close to work – he is a freelancer and needs to visit his clients, especially Churchill, on a regular basis. The immense success of the novel can be easily explained by its ingenuity, “a marvellously subtle sense of humour” and ability to tackle difficult themes with both accuracy and tenderness<sup>42</sup>. Yet, it strengthened the myth of Churchill as a severely depressed, gloomy and irritable person even further. The assumption that Churchill lived nearly all of his adult life accompanied by acute fits of clinical depression is now generally accepted without reservation – it has been repeated so many times on so many occasions, by historians and psychiatrists alike.

Members of the general public who are not academics or mental health professionals may not be familiar with the current trends in Churchill research or agendas of health charities. Their perception of Churchill would be predomi-

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<sup>39</sup> A. Campbell and N. Jones, *A World Without: The Fantastic Five* <https://www.time-to-change.org.uk/sites/default/files/World%20Without%20report.pdf> Accessed 6.09.2020.

<sup>40</sup> E. Allen, *Outrage as Channel 4 strap a straitjacket on Winston Churchill statue to ‘highlight mental health issues’*, “Mail Online” 20<sup>th</sup> July 2012, <https://www.dailymail.co.uk/news/article-2176397/Outrage-Channel-4-strap-straitjacket-Winston-Churchill-statue-highlight-mental-health-issues.html>. Accessed 5.09.2020.

<sup>41</sup> R. Hunt, *Mr Chartwell*, London 2011, p. 7.

<sup>42</sup> S. Bissell, *Review of R. Hunt’s Mr. Chartwell*, “Library Journal” 2010, November, p. 55.

nantly influenced by popular culture portrayals, such as films or TV series – and there have been countless of films in which the famous Briton appeared as an episodic, supporting or even main character. The most recent ones include Netflix original series *The Crown* (2016-2021) with John Lithgow as Churchill and two biographical films made in 2017: *Darkest Hour* and *Churchill*.

The most inaccurate and harmful is undoubtedly *Churchill* directed by Jonathan Teplitzky. In a humorous travesty of Churchill's words about the Battle of Britain, Andrew Roberts dismisses the innumerable factual errors deliberately committed by the filmmakers: "Never in the course of movie-making have so many specious errors been made in so long a film by so few writers"<sup>43</sup>. In the film, the Prime Minister is a "petulant, ill-tempered, sarcastic, unpleasant, decrepit, oafish drunken has-been"<sup>44</sup>. He is a truly detestable, deluded character, out of touch with reality, haunted by guilt over the failure of the Gallipoli campaign – the film opens with a scene of a hallucination in which Churchill on the beach sees waves of human blood. It strengthens the misconception that Churchill was and felt responsible for that bloodshed – a double mistake. Moreover, his relationship with Clemmie is tense and devoid of tenderness – she has little patience, support and warmth towards her husband. Furthermore, the choice of Brian Cox also raises several controversies. The first association most viewers have seeing the actor is with his previous roles in which he played a Marvel arch villain in the *X-men* series or the dishonest CIA official in the *Bourne* series. Thus, the atmosphere of corruption and deceit surround him, casting a shadow on the character of Churchill he impersonates.

However, it must be noted, that the film portrayal of Churchill in Joe Wright's Oscar-winning *Darkest Hour* (2017) might have positively affected the public perception of the Prime Minister's mental stability. The British statesman is presented as an eccentric often ignoring good manners or social norms. He is also often vulnerable and overwhelmed by his enormous responsibility yet the features that are highlighted are his wit, courage, determination and compassion. There is no hint in the film that Churchill might have been an alcoholic or depressive. The choice of Gary Oldman for the leading role also contributed to the warm reception of Churchill as a character as the actor's boyish charm can be still noticed despite the heavy make-up and silicon rubber.

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<sup>43</sup> A. Roberts, *Fake History in Churchill starring Brian Cox*. The Churchill Project. Hillsdale College. <https://winstonchurchill.hillsdale.edu/fake-history-in-churchill-starring-brian-cox/> Accessed 8.09.2020.

<sup>44</sup> *Ibidem*.

Since Churchill, in his youth, used to be a slender man with very delicate facial features, it was a good casting decision. Moreover, a lot of attention in the film was placed on the presentation of Churchill's marriage. His relationship with his wife, which lasted over half a century, was indeed his source of strength. Clementine was a woman of great intelligence and wisdom and was immensely supportive of her husband. The inclusion in the film of his intimate conversations with Clemmie makes the audience familiar with the Prime Minister's private persona, not just the official resilient bulldog image.

In *The Crown* Churchill is, obviously, not one of the main characters and he appears mainly in the first series. Although worn by advanced age, he retains his wit and political shrewdness. He is presented, on the whole, as a likeable character and a great statesman. His relationship with his wife, close co-workers as well as the constant company of Rufus II (his second ginger poodle) make him come across as a warm human being.

The agenda between establishing Churchill as an anti-stigma hero is fuelled by the common perception of depression as a female malady, magnifying traits traditionally seen as feminine: moodiness, dependency, vulnerability. Indeed, the great majority of individuals diagnosed with depression are women, yet the reasons behind it are complex and caused, probably, a mixture of biological factors and cultural/social/economic ones<sup>45</sup>. Also, many scholars assume depression goes undiagnosed in males as it is differently channelled and masked by substance abuse, especially alcoholism<sup>46</sup>. Still, receiving the diagnosis of depression is damaging to male identity, which is based on independence, strength, rationality and agency<sup>47</sup> – battling depression is synonymous with restoration of masculinity<sup>48</sup>. Thus, arguing Churchill suffered from depression yet was a great statesman, successful politician and fearless leader acts as a proof that there is nothing effeminate about the illness and one can lead a fulfilling, active life with it.

Churchill's name for his affliction, the black dog, is also meaningful in the context of masculinisation of depression. As Kimberly Emmons observes, "domestic pets suggest resilience rather than dominance" – a dog should be muz-

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<sup>45</sup> P. Prior, *Gender and Mental Health*, New York 1999.

<sup>46</sup> *Ibidem*.

<sup>47</sup> D. Galasiński, *Men's Discourses of Depression*, London 2008.

<sup>48</sup> K. Emmons, *Black Dogs and Blue Words. Depression and Gender in the Age of Self-Care*, New Brunswick 2014, p. 88.

zled, obedient to its master, domesticated<sup>49</sup>. It brings to mind a tough masculine image of a macho Cesar Millan-type character, whose dominant personality brings the canine companion to helpless submission as it recognises the leader of the pack and yields to his will. This connotation is evoked, for instance, in an online self-help book *Leashing the Black Dog: A Guidebook to Understanding and Managing Male Depression* by Brett McKay, which promises the prospective male buyers they will learn how to master their illness<sup>50</sup>.

Following the arguments of both sides, one may get the uncanny impression that factual evidence, both medical and historical accuracy, are completely irrelevant to them. What matters most is the potential application of their theories to the common perception of depression as an illness, especially its gender connotations. The motivation of the believers in Churchill's depression is undeniably noble. Obviously, no mental illness should be seen as shameful and making the public aware that many of the most cherished members of the community, great leaders, artists and thinkers suffered from mental disorders helps to lift the stigma. Furthermore, de-gendering depression and questioning the debilitating effects of narrow gender roles that negatively influence men's and women's psychological welfare is also a worthwhile task. Yet, the question whether a lie should be propagated because it serves the right cause cannot be avoided here.

In conclusion, Winston Churchill's long life was indeed filled with moments of profound sadness or even despair but never without tangible, external reasons. He carried on his shoulders a tremendous responsibility and was aware that his mistakes may cause, with no exaggeration, the fall of the Western world. He also had more than a fair share of personal problems. Nevertheless, the slightly humorous phrase he gave to his darker moods, the black dog, in all likelihood refer to "worry and mental overstrain", not clinical depression<sup>51</sup>. Thus, the notorious black dog, the beast that only the bravest can leash and subordinate, turns out to be a benign ginger poodle, Rufus. Churchill was an ardent animal lover and innumerable dogs and cats accompanied him, often living in Downing Street. Rufus had the honour of being his loyal companion during the tempestuous period of World War II. Much can probably be said about him, but he was definitely not black and not at all ferocious.

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<sup>49</sup> *Ibidem*, p. 106.

<sup>50</sup> <https://store.artofmanliness.com/products/leashing-the-black-dog-a-guidebook-to-understanding-and-managing-male-depression> Accessed 5.09.2020.

<sup>51</sup> W. Attenborough, *op. cit.*, p. 74.

### References

- Addison P., *Churchill. The Unexpected Hero*, Oxford 2005.
- Allen E., *Outrage as Channel 4 strap a straitjacket on Winston Churchill statue to 'highlight mental health issues'* "Mail Online", 20<sup>th</sup> July 2012, <https://www.dailymail.co.uk/news/article-2176397/Outrage-Channel-4-strap-strait-jacket-Winston-Churchill-statue-highlight-mental-health-issues.html>. Accessed 5.09.2020.
- Attenborough W., *Churchill and the 'Black Dog' of Depression. Reassessing the Biographical Evidence of Psychological Disorder*, London 2014.
- Breckenridge C., *Leading Churchill Myths – The Myth of the "Black Dog"* International Churchill Society <https://winstonchurchill.org/publications/finest-hour/finest-hour-155/the-myth-of-the-black-dog/> Accessed 6.09.2020
- Bissell S., *Review of R. Hunt's Mr. Chartwell*, "Library Journal" November 2010.
- Campbell A., Jones N., *A World Without: The Fantastic Five* <https://www.time-to-change.org.uk/sites/default/files/World%20Without%20report.pdf> Accessed 6.09.2020.
- Emmons K.K., *Black Dogs and Blue Words. Depression and Gender in the Age of Self-Care*, New Brunswick 2014
- Foley P., *'Black dog' as a metaphor for depression: a brief history*. [www.black-doginstitute.org.au](http://www.black-doginstitute.org.au) Accessed 15.01.2005
- Galasiński D., *Men's Discourses of Depression*, London 2008.
- Ghaemi N., *A First-rate Madness. Uncovering the Links between Leadership and Mental Illness*, New York 2011.
- Gilbert M., *Churchill. A Life*, London 2000.
- Green V., *The Madness of Kings*, Phoenix Mill 2005.
- Holmes R., *In the Footsteps of Churchill*, London 2005.
- Humes J.C., *The Wit and Wisdom of Winston Churchill*, London 2007.
- Hunt R., *Mr Chartwell*, London 2011.
- Jenkins R., *Churchill*, London 2002.
- Johnson P., *Heroes. From Alexander the Great and Julius Caesar to Churchill and De Gaulle*, London 2007.
- London C., Scriven A., Lalani N., *Sir Winston Churchill: Greatest Briton used as an anti-stigma icon*, "The Journal of the Royal Society for the Promotion of Health" 2006, v. 126, no. 4.
- Mather J.C., *Lord Moran's book is based on his diaries*, International Churchill Society, <https://winstonchurchill.org/resources/myths/lord-morans-book-is-based-on-his-diaries/> Accessed 4.09.2020

McKay B., *Leashing the Black Dog: A Guidebook to Understanding and Managing Male Depression*.

<https://store.artofmanliness.com/products/leashing-the-black-dog-a-guidebook-to-understanding-and-managing-male-depression> Accessed 5.09.2020.

Moran Ch., *Winston Churchill: The Struggle for Survival 1940-1945*, London 1968.

Morgan P., *The Crown*, UK/USA, 2016-2021.

Prior P., *Gender and Mental Health*, New York 1999.

Roberts A., *Fake History in Churchill starring Brian Cox*. The Churchill Project. Hillsdale College. <https://winstonchurchill.hillsdale.edu/fake-history-in-churchill-starring-brian-cox/> Accessed 8.09.2020.

Shephard B., *A War of Nerves. Soldiers and Psychiatrists. 1914-1994*, London 2000.

Soames, Mary, ed. *Speaking for Themselves. The Personal Letters of Winston and Clementine Churchill*, London 1998.

Storr A. *Churchill's Black Dog and Other Phenomena of the Human Mind*, London 1989.

Teplitzky J., dir., *Churchill*, UK, 2017.

Wakely E., Carson J., *Historical recovery heroes – Winston Churchill*, "Mental Health and Social Inclusion", November 2010, v. 14, is. 4.

Wright J., dir., *Darkest Hour*, UK/USA, 2017.

Quaile Sh., "*The black dog that worries you at home*": *The Black Dog Motif in Modern English Folklore and Literary Culture*, "The Great Lakes Journal of Undergraduate History" 2013, v. I, is. 1.