

## ***The Unconventional Career of Dr Muriel Bell, Diana Brown (2018)***

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An 'unconventional career'? I would question the description of Dr Muriel Bell's career as unconventional – stellar, outstanding, exceptional even, but not unconventional. Bell graduated in medicine in 1922 following the First World War, when the number of female students was on the rise. She worked hard, as did other female students who felt they had something to prove, and she had a strong (male) mentor in Professor John Malcolm at the University of Otago. Like other female students she joined the New Zealand Federation of University Women and the New Zealand Medical Women's Association. But most significantly she chose to devote her career to the health and well-being of women and children, which was a path not only expected of medical women but one to which they seemed to gravitate. Finally, she was drawn to public service along with other medical women of her generation. There are many parallels here with other medical women, such as Agnes Bennett, Emily Siedeberg-McKinnon, Doris Gordon, Muriel Helen Deem, Elizabeth Gunn and Alice Bush, all local examples of outstanding medical women who chose a similar path relating to women and children and public service.

While author Diana Brown mentions other medical women, she does not make these connections. One outstanding woman who does feature in Brown's narrative (but with no comment on whether her career path was conventional or not) is Elizabeth Gregory, a Home Science student who completed her Ph.D. in biochemistry and became professor and dean of home science at the University of Otago and a fellow member with Bell of the Medical Research Council's Nutrition Research Committee. She collaborated with Bell on publishing health promotion materials.

Brown tells us that despite Bell's commitment to women's health issues, 'it is problematic to label her views as feminist' (64). By that, she means that Bell was not a second-wave feminist of the variety familiar in the late twentieth century with its denigration of home and family. She does go on to say that Bell's views aligned to welfare feminism, but the implication is that this is not real feminism. I would argue that welfare feminism, which could also be described as first-wave feminism, is just as valid a form of feminism as the later versions. This form of feminism, which Brown notes that Bell

shared with other medical women, also strove to promote the interests, rights and well-being of women. They should be seen in the context of their times. An indication that Bell herself aligned with the feminist cause was that she agreed to serve on the advisory board of the feminist magazine, *Woman Today*, and was a regular contributor.

Curiously, Brown also tells us that, while Bell applauded the first Labour Government's vision of nutrition, she 'had never had a strong interest in politics' (60). Earlier she tells us that as a student Bell was a Christian socialist, interested in the writings of the Fabian socialists, and a life-long pacifist along with her first husband (and I would add, the Labour Party when it was first founded in 1916). At university she formed a junior discussion club with Douglas Robb, whose future career lay in medical politics. She was friends with Peter Fraser (later Prime Minister under the first Labour Government), and she was a founding member of the left-wing Progressive Publishing Society. There is a strange disjuncture, given that Brown claims that Bell was not interested in politics and yet constantly alludes to Bell's strong connections with the political left.

At this point the reader might conclude that I am unimpressed by this biography of Muriel Bell. This is not in fact the case. Brown has researched the life and career of Bell very conscientiously and presented it in an engaging and lucid manner. Bell's career, with her involvement in important nutritional issues of the time such as milk in schools, iodized salt and water fluoridation, makes for a good story and Brown does it well. I heartily recommend this book to anyone interested in the history of public health and nutrition in the twentieth century and New Zealand's contribution to the international arena. Overseas readers will find this a useful source to learn about New Zealand's milk in schools scheme that Bell worked so hard to perfect and her engagement with the dairy industry and powdered skim milk exports. They will also learn of the history of physiology and biochemistry and the work of Professor Malcolm at the University of Otago. Bell's experiences inform readers about what was happening under Jack Drummond in the Biochemistry Department at University College London, where Bell worked for three years in the early 1930s. Through his work Drummond helped to bring the problems of malnutrition amongst the working classes to the attention of politicians and later became advisor on nutrition to the Ministry of Health.

Experiencing economic depression with its concomitant malnutrition had an influence on Bell and her work when she returned to New Zealand in 1935. As State Nutritionist from 1940 to 1964, she sought to translate scientific research into practical advice for mothers in particular. As Brown tells us, with the shortage of oranges in World War II, '[e]ver one to encourage resourcefulness, Muriel encouraged mothers to make rosehip syrup and preserve blackcurrants', which led to rosehip syrup becoming 'her trademark home remedy' (85). Bell also believed that New Zealand had a role to play in the world food crisis, and particularly Britain, after World War II. Here we learn of the Barling fat scheme,

through which New Zealand sent hundreds of 40-pound (18kg) tins of finest quality fat to Britain – fat that was otherwise 'being wasted on the farms and in the homes of Otago and Southland' (90).

In 1959 Bell was appointed Commander of the Order of the British Empire in recognition of her lifetime service to the field of public nutrition and public education on health. Reflecting on her own contributions in an interview, Bell explained that she gave herself the nickname 'Battle-axe Bell' because of the years she had spent 'battling for all sorts of food items in the course of trying to promote the health of women and children' (113). It is clear that hers was an outstanding career albeit not unconventional, and she should be applauded as such.