
BOOK REVIEW

Susan Lamb, PhD

Regulating Professions: The Emergence of Professional Self-Regulation in Four Canadian Provinces

Tracey L. Adams

University of Toronto Press, 2018

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Through legislation, states have granted prominent professions such as medicine and law powers of self-regulation—a type of regulation that gives medicine the authority to govern itself by means of a body constituted mainly of professionals. These powers include regulating entry to practice; ensuring conformation to standards of practice; and governing practitioner behavior in terms of ethical and social responsibilities. Current research on professional regulation, however, tends to center on the origins of professions or recent changes. Far less attention has been devoted to historical trends and patterns—something remediated by Tracey Adams in *Regulating Professions: The Emergence of Professional Self-Regulation in Four Canadian Provinces*.

Adams, a sociologist who specializes in sociologies of work, occupations, and professions, argues that developments in Canada illuminate self-regulation broadly, particularly in Anglo-American settings such as the United States and United Kingdom, where professional regulatory patterns developed similarly. Importantly, however, “self-regulating professions in medicine and law were legislated in Canada before other nations followed suit” (p. 258). Her original and exhaustive comparative research shows, furthermore, why Canada is a worthwhile case study to analyze issues and processes around professional self-regulation. Medicine and law, for example, have been self-regulating, continuously, for two centuries in Canada; and, significantly, according to Adams, it persists despite efforts to dismantle or undermine it elsewhere in the world. Adams also makes a strong case that her findings will help sociologists refine and expand their theoretical tools for understanding all professions and how they operate in society.

As a foundation for these arguments, Adams skillfully defines self-regulation, contextualizes it historically for North America, and summarizes existing scholarship and sociological conclusions on professional self-regulation. Then, she examines professional self-regulation in four Canadian provinces (Ontario, Quebec, Nova Scotia, and British Columbia). She shows in Chapter 2 that, while the processes in each province that resulted in self-regulation in the 19th-century were distinct, common regulatory forms and institutions emerged; and, in a case study of the medical profession, she compares developments in Ontario and Quebec to those in the United Kingdom and United States to conclude that even though all 3 countries share an “Anglo-American” model of regulation, there are consequential differences (eg: the colonial state’s elimination of British distinctions between physicians and surgeons in response to a tiny population; and the heavy involvement of physicians in colonial politics and provincial legislatures). Chapter 3 examines what was regulated and how by scrutinizing legislative debates and preambles, and by considering who won professional self-regulation and why. Through systematic study of legislative records to glean the motivations and power of state actors, Adams identifies the importance of professional expertise and social capital to regulatory outcomes.

Chapter 4 focuses on the professional projects pursued by medicine, dentistry, and land surveying. These case studies demonstrate that, while most theories of professionalization emphasize how groups win occupational privileges in contests with the state, such campaigns did not figure in the Canadian context. More significant, Adams finds, were state-profession relations, social capital, and professionals’ widespread involvement in provincial governments.

Chapter 5 documents regulatory activity between 1900 and 1940, especially controversies pertaining to 3 new professional groups: nurses, optometrists, and engineers.

A detailed case study in Chapter 6 on the regulation of “drugless healers” such as chiropractors,



osteopaths, and naturopaths illuminates not only the strategies used by these occupational groups that sought professional status in the twentieth century, but also the tactics employed by the medical profession to thwart their aspirations.

Of particular interest to *JMR* readers, Adams expertly lays out in a final chapter the theoretical consequences of her findings for our general understanding of professional self-regulation today. Whereas she emphasizes the centrality of the state to self-regulation throughout the study, here she offers novel insights into common theoretical approaches to professional regulation—namely, neo-Weberian, Foucauldian, and ecological (Abbott)—that promise to inform future research and thinking on medical regulation globally.

Regulating Professions represents an important and useful contribution to the field of research on medical licensing and regulation. It is the first comparative history of self-regulating professions across early French and British colonies, and across several Canadian provinces. Most of the sizable literature on the medical and law professions in North America examines factors around the emergence of those groups, with scant focus on change over time—especially around how and why professional regulation gets modified in response to debates and controversies and to new professional standards, ethical issues, or social responsibilities—a scarcity successfully remedied by this book. A focus on the explanatory power of state actors in processes around self-regulation, moreover, also makes Adams' methods and findings stand out within the scholarship on medical professionalization and regulation.

This is a deeply-researched and readable historical study filled with relevant insights for medical regulation today. Its findings will certainly be useful and interesting to researchers and regulators alike. It overviews developments around self-regulation comparatively across Canadian (English and French), American, and British contexts—demonstrating with sound and captivating historical evidence that the picture in Canada is at once unique, divergent,

similar, and instructive. Especially helpful is Table 2.1 (pp. 66-67), which graphically compares nineteenth-century developments around self-regulation in all three settings. It is worth noting that Dr. Adams is also co-editor of the 2019 multi-author volume *Gender, Age and Inequality in the Professions*, which examines experiences of professional work and careers, including in the health professions, through an intersectional lens at the intersection of gender and age. ■

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