

## Course Outline

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**COURSE:** LAWS 6002 / 5662W: Law, Regulation and Governance

**TERM:** Winter 2024

**Day & Time:** Tuesdays, 11.35 am – 2.25 pm

**CLASS:** **Room:** Please check Carleton Central for current class schedule. Weekly live (synchronous) seminars with the possibility of some online (a/synchronous) sessions, to be announced.

**INSTRUCTOR:** Dr. Nadine Ijaz

**CONTACT:** **Office Hrs:** Online, by appointment

**Email:** [Nadine.Ijaz@carleton.ca](mailto:Nadine.Ijaz@carleton.ca) (please include the course number, LAWS 6002/5662 in the email subject line)

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### CALENDAR COURSE DESCRIPTION

Historical and contemporary roles of law and regulation in processes, practices and discourses of governance. Law and state; domestic and global governance; diversity of law-governance relationships; law as a constituent force, enforcement mechanism and a distinctive product of governance.

### COURSE DESCRIPTION

While biomedicine—a therapeutic system with European cultural origins—remains a hegemonic form of healthcare, sanctioned by governments across the globe, a diverse range of healthcare approaches that the World Health Organization (WHO) terms ‘traditional and complementary medicine’ (T&CM) are widely practised worldwide. Such approaches, many of which have Indigenous and ethnomedical roots, range from acupuncture to Ayurveda, chiropractic and naturopathy. spiritual healing and meditation, herbal medicine, massage, homeopathy, and nutritional supplementation. In recent decades, some T&CM therapeutics have been increasingly taken up by conventional biomedical professionals and subject to placebo-controlled, randomized clinical trials.

In many jurisdictions, T&CM approaches are sought after—in particular by persons identifying as women—as sources of culturally-responsive healthcare that align with patients’ values; and, across much of the global South, represent the primary source of accessible healthcare. However, the governance of T&CM systems and practices—and their integration into state healthcare systems, as called for by the WHO—poses many epistemic, evidentiary and practical challenges, since the conceptual models underpinning many such approaches diverge considerably from dominant biomedical norms.

This course will engage with a series of theoretical constructs – including epistemic pluralism and justice, therapeutic subalternity, cultural misappropriation, safety, and evidence – to unpack the complexities of governing T&CM, with reference to a series of case studies, primarily from Canada and other parts of the Americas. Throughout the course, students will actively explore these theoretical ideas, which also hold considerable relevance to other domains of contemporary governance.

### REQUIRED & SUPPLEMENTARY MATERIALS

All required materials are available on Brightspace or Ares. All materials are **required** unless otherwise indicated. Please be sure to complete review of all materials **in advance** of the assigned class session. Timely review of materials is essential for a successful seminar (and important for your course grade).

## **EVALUATION**

Standing in a course is determined by the course instructor, subject to the approval of the Department and of the Faculty Dean. This means that grades submitted by the instructor may be subject to revision. No grades are final until they have been approved by the Department and the Dean.

Evaluation for this course will take the form of four primary components: Course Engagement (30%), a Group Project (15%), two Short Essays (20%), and a Take Home Exam (35%). All components include sub-components, as shown below, each of which has its own due date. **Instructions and marking criteria for graded course components will be posted to Brightspace.**

| <b>Component</b>                           | <b>Breakdown and Details</b>  | <b>%</b> |
|--|---|----------|
| <b>Course Engagement</b><br><br><b>55%</b> | <b>Short Weekly Critical Reading Reflections</b> (700 words +/- 10%), 8 of 9 at 3%=24%<br><b>Due weekly prior to start of class session at 11.35 am (3% each):</b><br>January 16, 30; February 6, 13, 27; March 5, 12, 19, 26 | 30%      |
|  | <b>Longer Critical Reflection on <i>Culture &amp; Health</i> Theme:</b> (1200 words, +/- 10%), 6%<br>January 23 (due 11.59 pm)  |          |
|  | → <i>No late submissions. Submissions must reflect the week's assigned materials.</i>   |          |
|  | <b>Seminar Co-Facilitation</b> (to be scheduled)  | 10%      |
|  | <b>In-Class Participation</b> (15%)<br>→ <i>You may be absent for one in-class session without penalty.</i>   | 15%      |
| <b>Final Essay</b><br><br><b>45%</b>       | <b>Abstract / short proposal</b> – 5% (due 11.59 pm, March 1)   | 45%      |
|  | <b>Oral presentation</b> - 10% (in class, April 2 and April 9)  |          |
|  | <b>Paper</b> (4000 words +/-10%) – 30% (due 11.59 pm, April 10)   |          |

**All components must be successfully completed in order to get a passing grade.**

## **LATE PENALTIES AND REQUESTS FOR EXTENSIONS**

There will be no late submissions accepted or extensions granted for critical reflections. Missed presentations will only be accommodated or re-scheduled for emergency reasons. For other deliverables, late submissions will be levied a penalty of 10% per day.

The granting of extensions is determined by the instructor, who will confirm whether an extension is granted and the length of the extension. For requests for short-term extensions, please complete the form at the following link and submit it to the instructor prior to the assignment due date:

<https://carleton.ca/registrar/wp-content/uploads/self-declaration.pdf>.

For more information regarding academic consideration for short-term incapacitation (illness, injury, or extraordinary circumstances beyond a student's control), please visit the following link:

<https://students.carleton.ca/course-outline/#academic-consideration-for-short-term-incapacitation>

**SCHEDULE**

| <b>Week, Date, Theme</b>  | <b>Required Readings / Materials</b>  |
|---|---|
| Week 1<br>January 9<br><br>INTRODUCTIONS                        | World Health Organization. WHO Traditional Medicine Strategy 2014-2023. READ ONLY: pp. 7 – 42.<br><br>WHO Traditional Medicine Global Summit 2023 meeting report: Gujarat Declaration. <a href="https://www.who.int/publications/m/item/who-traditional-medicine-summit-2023-meeting-report--gujarat-declaration">https://www.who.int/publications/m/item/who-traditional-medicine-summit-2023-meeting-report--gujarat-declaration</a>  |
| Week 2<br>January 16<br><br>VACCINATION                         | Mah C, Guttman A, McGeer A, Krahn M, Deber R. Compulsory School-Entry Vaccination Laws and Exemptions: Who Is Opting Out in Ontario and Why Does It Matter? <i>hcopol</i> . 2010 May 20;5(4):37–46.<br><br>Rus M, Groselj U. Ethics of Vaccination in Childhood—A Framework Based on the Four Principles of Biomedical Ethics. <i>Vaccines</i> . 2021;9(2):113. doi:10.3390/vaccines9020113<br><br>Navin MC, Largent MA. Improving Nonmedical Vaccine Exemption Policies: Three Case Studies. <i>Public Health Ethics</i> . 2017 Feb 14; 10(3):225-334.<br><br>Hoffman D, Stewart A, Breznay J, Simpson K, Crane J. Vaccine Hesitancy Narratives. <i>Voices Bioeth</i> . 2021;7. doi:10.52214/vib.v7i.8789  |
| Week 3<br>January 23<br><br>CULTURE<br><br>(Asynchronous class) | Allen, L., Hatala, A., Ijaz, S., Courchene, E. D., & Bushie, E. B. (2020). Indigenous-led health care partnerships in Canada. <i>Canadian Medical Association Journal</i> , 192(9), E208–E216. <a href="https://doi.org/10.1503/cmaj.190728">https://doi.org/10.1503/cmaj.190728</a><br><br>Ijaz, N., Steinberg, M., Flaherty, T., Neubauer, T., & Thompson-Lastad, A. (2021). Beyond Professional Licensure: A Statement of Principle on Culturally-Responsive Healthcare. <i>Global Advances in Health and Medicine</i> , 10, 216495612110430. <a href="https://doi.org/10.1177/21649561211043092">https://doi.org/10.1177/21649561211043092</a><br><br>Napier, A. D., et al (2014). Culture and health. <i>The Lancet</i> , 384(9954), 1607–1639. <a href="https://doi.org/10.1016/S0140-6736(14)61603-2">https://doi.org/10.1016/S0140-6736(14)61603-2</a><br><br>Steinberg, M. (Director). (2020). <i>A Place to Breathe</i> . Underexposed Films. |
| Week 4<br>January 30<br><br>EPISTEMOLOGY                        | de Sousa Santos, B., Nunes, J. A., & Meneses, M. P. (1996). Introduction: Opening up the canon of knowledge and recognition of difference. In <i>Another Knowledge is Possible: Beyond Northern Epistemologies</i> . Verso.<br><br>Ijaz, N., Boon, H., Muzzin, L., & Welsh, S. (2016). State risk discourse and the regulatory preservation of traditional medicine knowledge: The case of acupuncture in Ontario, Canada. <i>Social Science &amp; Medicine</i> , 170, 97–105.<br><br>Epistemologies of Ignorance. <i>Hypatia</i> . 2006;21(3):1-19. doi:10.1111/j.1527-2001.2006.tb01110.x   |

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| <p>Week 5 February 6</p> <p>SUBALTERNITY</p>      | <p>Ijaz, N. The reluctant and the envious: Therapeutic subalternity and the practice of homeopathy in North America. <i>Soc. Sci. Med.</i> 311, 115310 (2022).</p> <p>Caulfield, T. Don't legitimize the witch doctors. <i>National Post</i> (2013).</p> <p>Gray, B. How Should We Respond to Non-Dominant Healing Practices, the Example of Homeopathy. <i>J. Bioethical Inq.</i> 14, 87–96 (2017).</p> <p>Gray, B. How Should We Respond to Non-Dominant Healing Practices, the Example of Homeopathy. <i>J. Bioethical Inq.</i> 14, 87–96 (2017).</p>   |
| <p>Week 6 February 13</p> <p>MISAPPROPRIATION</p> | <p>Rogers, R. A. (2006). From Cultural Exchange to Transculturation: A Review and Reconceptualization of Cultural Appropriation. <i>Communication Theory</i>, 16(4), 474–503. <a href="https://doi.org/10.1111/j.1468-2885.2006.00277.x">https://doi.org/10.1111/j.1468-2885.2006.00277.x</a></p> <p>Hollenberg, D. &amp; Muzzin, L. Epistemological challenges to integrative medicine: An anti-colonial perspective on the combination of complementary/alternative medicine with biomedicine. <i>Health Sociol. Rev.</i> 19, 34–56 (2010).</p> <p>Singh, R. B. (2022). Yoga as Property: A century of United States yoga copyrights, 1937-2021. <i>Denver Law Review</i>, 99(4), 725–762.</p>   |
| <p>READING BREAK</p>                              |  |
| <p>Week 7 February 27</p> <p>EVIDENCE</p>         | <p>Adams, V. (2002). Randomized Controlled Crime: Postcolonial Sciences in Alternative Medicine Research. <i>Social Studies of Science</i>, 32(5), 650–690.</p> <p>Verhoef, M., Lewith, G., Ritenbaugh, C., Boon, H., Fleishman, S., &amp; Leis, A. (2005). Complementary and alternative medicine whole systems research: Beyond identification of inadequacies of the RCT. <i>Complement Ther Med</i>, 13(3), 206–212.</p> <p>Greenhalgh, T., Fisman, D., Cane, D. J., Oliver, M., &amp; Macintyre, C. R. (2022). Adapt or die: How the pandemic made the shift from EBM to EBM+ more urgent. <i>BMJ Evidence-Based Medicine</i>, 27(5), 253–260. <a href="https://doi.org/10.1136/bmjebm-2022-111952">https://doi.org/10.1136/bmjebm-2022-111952</a></p>  |
| <p>Week 8 March 5</p> <p>SAFETY</p>               | <p>Ijaz, N. &amp; Boon, H. Safety as 'Boundary Object': The Case of Acupuncture and Chinese Medicine Regulation in Ontario, Canada. in <i>Complementary and Alternative Medicine</i> (eds. Brosnan, C., Vuolanto, P. &amp; Danell, J.-A. B.) 193–213 (Springer International Publishing, 2018).</p> <p>Ijaz, N. (2020). Paradigm-Specific Risk Conceptions, Patient Safety, and the Regulation of Traditional and Complementary Medicine Practitioners: The Case of Homeopathy in Ontario, Canada. <i>Frontiers in Sociology</i>, 4, 89. <a href="https://doi.org/10.3389/fsoc.2019.00089">https://doi.org/10.3389/fsoc.2019.00089</a></p> <p>Churchill, M. E. et al. Conceptualising cultural safety at an Indigenous-focused midwifery practice in Toronto, Canada: qualitative interviews with Indigenous and non-Indigenous clients. <i>BMJ Open</i> 10, e038168 (2020).</p> |

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| <p>Week 9<br/>March 12</p> <p>GENDER</p>            | <p>Keshet, Y. &amp; Simchai, D. The 'gender puzzle' of alternative medicine and holistic spirituality: A literature review. <i>Soc. Sci. Med.</i> 113, 77–86 (2014).</p> <p>Paterson, S. Feminizing obstetrics or medicalizing midwifery? The discursive constitution of midwifery in Ontario, Canada. <i>Crit. Policy Stud.</i> 4, 127–145 (2010).</p> <p>Nestel, S. Delivering Subjects: Race, Space, and the Emergence of Legalized Midwifery in Ontario. <i>Can J Law Soc</i> 15, 187–216. (2000)</p>  |
| <p>Week 10<br/>March 19</p> <p>INTERCULTURALITY</p> | <p>Torri, M. C., &amp; Hollenberg, D. (2013). Indigenous Traditional Medicine and Intercultural Healthcare in Bolivia: A Case Study From the Potosi Region. <i>Journal of Community Health Nursing</i>, 30(4), 216–229. <a href="https://doi.org/10.1080/07370016.2013.838495">https://doi.org/10.1080/07370016.2013.838495</a></p> <p>Ijaz, N. &amp; Boon, H. Statutory Regulation of Traditional Medicine Practitioners and Practices: The Need for Distinct Policy Making Guidelines. <i>J. Altern. Complement. Med.</i> 24, 307–313 (2018).</p> <p>Celidwen, Y., Redvers, N., Githaiga, C., Calambás, J., Añaños, K., Chindoy, M. E., Vitale, R., Rojas, J. N., Mondragón, D., Rosalío, Y. V., &amp; Sacbajá, A. (2023). Ethical principles of traditional Indigenous medicine to guide western psychedelic research and practice. <i>The Lancet Regional Health - Americas</i>, 18, 100410. <a href="https://doi.org/10.1016/j.lana.2022.10041">https://doi.org/10.1016/j.lana.2022.10041</a></p>   |
| <p>Week 11<br/>March 26</p> <p>DECISION-MAKING</p>  | <p>Hanrahan, M. &amp; Wills, B. Makayla's Decision: The exercise of Indigenous rights and the primacy of allopathic medicine in Canada. <i>Can. J. Native Stud.</i> 35, 207–223 (2015).</p> <p>Gray, B. &amp; Brunger, F. (Mis)understandings and uses of 'culture' in bioethics deliberations over parental refusal of treatment: Children with cancer. <i>Clin. Ethics</i> 13, 55–66 (2018).</p> <p>Thomas, A., Kuper, A., Chin-Yee, B., &amp; Park, M. (2020). What is "shared" in shared decision-making? Philosophical perspectives, epistemic justice, and implications for health professions education. <i>Journal of Evaluation in Clinical Practice</i>, 26(2), 409–418. <a href="https://doi.org/10.1111/jep.13370">https://doi.org/10.1111/jep.13370</a></p> <p>Ijaz, N., Wieland, L. S., &amp; Gallego-Pérez, D. F. (2023). Correspondence on 'The limits of shared decision making' by Elwyn et al: We call for a more nuanced approach. <i>BMJ Evidence-Based Medicine</i>, bmjebm-2023-112343. <a href="https://doi.org/10.1136/bmjebm-2023-112343">https://doi.org/10.1136/bmjebm-2023-112343</a></p> |
| <p>Week 12<br/>April 2<br/>Essay Presentations</p>  | <p>To be scheduled</p>   |
| <p>Week 13<br/>April 9<br/>Essay Presentations</p>  | <p>To be scheduled</p>   |

| <b>Winter 2024 Sessional Dates and University Closures</b>  |  |
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| <i>Please find a full list of important academic dates on the calendar website:<br/><a href="https://calendar.carleton.ca/academicyear/">https://calendar.carleton.ca/academicyear/</a></i> |  |
| <b>January 8, 2024</b>  | Winter term begins.  |
| <b>January 19, 2024</b>   | Last day for registration and course changes (including auditing) in full winter and late winter courses.  |
| <b>January 31, 2024</b>   | Last day to withdraw from full winter and the winter portion of fall/winter courses with a full fee adjustment.  |
| <b>February 19, 2024</b>  | Statutory holiday. University closed.  |
| <b>February 19-23, 2024</b>   | Winter break. No classes.  |
| <b>March 15, 2024</b>   | Last day for academic withdrawal from full winter, late winter, and fall/winter courses.   |
| <b>March 27, 2024</b>   | Last day for summative tests or examinations, or formative tests or examinations totaling more than 15% of the final grade, in full winter term or fall/winter undergraduate courses, before the official April final examination period (see examination regulations in the Academic Regulations of the University section of the Undergraduate Calendar/General Regulations of the Graduate Calendar). |
| <b>March 29, 2024</b>   | Statutory holiday. University closed.  |
| <b>April 10, 2024</b>   | Winter term ends.  |
|   | Last day of full winter, late winter and fall/winter term classes.   |
|   | Classes follow a Friday schedule (full winter and later winter courses).   |
|   | Last day for handing in term work and the last day that can be specified by a course instructor as a due date for term work for full winter term and late winter courses.  |
|   | Last day for take home examinations to be assigned.  |
| <b>April 13-25, 2024</b>  | Final examinations in full winter, late winter and fall/winter term courses will be held. Examinations are normally held all seven days of the week.   |
| <b>April 25, 2024</b>   | All final take-home examinations are due on this day, with the exception of those conforming to the examination regulations in the Academic Regulations of the University section of the Undergraduate Calendar/General Regulations of the Graduate Calendar.  |

## **University and Departmental Policies**

### **DEPARTMENT POLICIES AND REGULATIONS**

Please review the following webpage to ensure that your practices meet our Department's expectations, particularly regarding standard departmental protocols and academic integrity requirements: <https://carleton.ca/law/student-experience-resources/>.

### **PLAGIARISM**

The University Academic Integrity Policy defines plagiarism as "*presenting, whether intentionally or not, the ideas, expression of ideas or work of others as one's own.*" This includes reproducing or paraphrasing portions of someone else's published or unpublished material, regardless of the source, and presenting these as one's own without proper citation or reference to the original source. Examples of sources from which the ideas, expressions of ideas or works of others may be drawn from include but are not limited to: books, articles, papers, literary compositions and phrases, performance compositions, chemical compounds, artworks, laboratory reports, research results, calculations and the results of calculations, diagrams, constructions, computer reports, computer code/software, material on the internet and/or conversations.

Examples of plagiarism include, but are not limited to:

- any submission prepared in whole or in part, by someone else, including the unauthorized use of generative AI tools (e.g., ChatGPT);
- using ideas or direct, verbatim quotations, paraphrased material, algorithms, formulae, scientific or mathematical concepts, or ideas without appropriate acknowledgment in any academic assignment;
- using another's data or research findings without appropriate acknowledgement;
- submitting a computer program developed in whole or in part by someone else, with or without modifications, as one's own; and
- failing to acknowledge sources through the use of proper citations when using another's work and/or failing to use quotations marks.

Plagiarism is a serious offence that cannot be resolved directly by the course's instructor. The Associate Dean of the Faculty conducts a rigorous investigation, including an interview with the student, when an instructor suspects a piece of work has been plagiarized. Penalties are not trivial. They can include a final grade of "F" for the course.

### **STATEMENT ON STUDENT MENTAL HEALTH**

As a University student you may experience a range of mental health challenges that significantly impact your academic success and overall well-being. If you need help, please speak to someone. There are numerous resources available both on- and off-campus to support you.

Emergency Resources (on and off campus):

- <https://carleton.ca/health/emergencies-and-crisis/emergency-numbers/>

Carleton Resources:

- Mental Health and Wellbeing: <https://carleton.ca/wellness/>
- Health & Counselling Services: <https://carleton.ca/health/>
- Paul Menton Centre: <https://carleton.ca/pmc/>
- Academic Advising Centre (AAC): <https://carleton.ca/academicadvising/>
- Centre for Student Academic Support (CSAS): <https://carleton.ca/csas/>
- Equity & Inclusivity Communities: <https://carleton.ca/equity/>

Off Campus Resources:

- Distress Centre of Ottawa and Region: (613) 238-3311 or TEXT: 343-306-5550, <https://www.dcottawa.on.ca/>
- Mental Health Crisis Service: (613) 722-6914, 1-866-996-0991, <http://www.crisisline.ca/>
- Empower Me: 1-844-741-6389, <https://students.carleton.ca/services/empower-me-counselling-services>
- Good2Talk: 1-866-925-5454, <https://good2talk.ca/>
- The Walk-In Counselling Clinic: <https://walkincounselling.com>

### **ACADEMIC ACCOMMODATIONS**

You may need special arrangements to meet your academic obligations during the term. For an accommodation request the processes are as follows.

#### **Pregnancy Obligation**

Write to me with any requests for academic accommodation during the first two weeks of class, or as soon as possible after the need for accommodation is known to exist. For more details about the accommodation policy, visit the [Equity and Inclusive Communities \(EIC\)](#) website.



**Religious Obligation**

Write to me with any requests for academic accommodation during the first two weeks of class, or as soon as possible after the need for accommodation is known to exist. For more details, please go to: <https://carleton.ca/equity/focus/discrimination-harassment/religious-spiritual-observances/>

**Academic Accommodations for Students with Disabilities**

The Paul Menton Centre for Students with Disabilities (PMC) provides services to students with Learning Disabilities (LD), psychiatric/mental health disabilities, Attention Deficit Hyperactivity Disorder (ADHD), Autism Spectrum Disorders (ASD), chronic medical conditions, and impairments in mobility, hearing, and vision. If you have a disability requiring academic accommodations in this course, please contact PMC at 613-520-6608 or [pmc@carleton.ca](mailto:pmc@carleton.ca) for a formal evaluation. You can find the Paul Menton Centre online at: <https://carleton.ca/pmc/>

If you are already registered with the PMC, contact your PMC coordinator to send me your Letter of Accommodation at the beginning of the term, and no later than two weeks before the first in-class scheduled test or exam requiring accommodation (if applicable). After requesting accommodation from PMC, meet with me to ensure accommodation arrangements are made. Please consult the PMC website for the deadline to request accommodations for the formally-scheduled exam (if applicable).

**Survivors of Sexual Violence**

As a community, Carleton University is committed to maintaining a positive learning, working and living environment where sexual violence will not be tolerated, and where survivors are supported through academic accommodations as per Carleton's Sexual Violence Policy. For more information about the services available at the university and to obtain information about sexual violence and/or support, visit: <https://carleton.ca/equity/sexual-assault-support-services>

**Accommodation for Student Activities**

Carleton University recognizes the substantial benefits, both to the individual student and for the university, that result from a student participating in activities beyond the classroom experience. Reasonable accommodation must be provided to students who compete or perform at the national or international level. Please contact your instructor with any requests for academic accommodation during the first two weeks of class, or as soon as possible after the need for accommodation is known to exist. Read more here: <https://carleton.ca/senate/wp-content/uploads/Accommodation-for-Student-Activities-1.pdf>.

For more information on academic accommodation, please visit: <https://students.carleton.ca/services/accommodation/>.