PROMOTING CLINICAL LEGAL EDUCATION AND DEMOCRACY IN INDIA

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Clinical legal education emerged in the United States in the 1960s to give valuable skill-based instructions to law students while providing legal services to people who could not otherwise afford them. This essay proposes another reason why both Indian and American law schools should support the development of law clinics. Drawing on the works of John Dewey and Martha Nussbaum, I argue that clinical legal education promotes democracy. Both elite American and Indian universities are largely unrepresentative of the respective population demographics of their countries. In clinics, law students bridge this divide by undertaking representation for people from different racial, caste, and income backgrounds than themselves. These exchanges generate empathy and knowledge among students about the challenges marginalised groups in the society face. Consequently, they learn to recognise other citizens as equals and to formulate policies that will enhance the welfare of society as a whole. There is an urgent need to formalise clinical legal education programs in Indian law schools both for purposes of enhancing the democracy as well as providing skill-based training to law students and much-needed legal services to the poor.

I. INTRODUCTION

Law schools in both India and the United States offer clinical education classes but the level of formality and supervision varies dramatically between the classes taught in the two countries. In law clinics, students gain valuable legal skills while delivering much-needed legal services to underprivileged communities. These twin goals are often cited to justify clinical legal education.¹ This essay proposes another value of clinical legal education—it can promote the functioning of democracy. In a typical law clinic setting, a law student will represent a person who cannot afford legal representation in a

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legal case in the court or some other matter. Students in clinical courses work alongside communities and people with whom they might not have any previous interactions. Such experiences promote empathy for persons unlike themselves and provide insight into a diversity of issues that do not necessarily affect the student’s own life circumstances. In clinics, students learn to think beyond their own concerns and determine means to enhance the welfare of society as a whole.

In Part II, I describe the relationship between education and democracy articulated by Dewey and Nussbaum. In Part III, I describe clinical legal education programs in India and the United States. In Part IV, I explain how clinical legal education can promote democracy by bridging the divide between communities and universities. In Part V, I give an in-depth example of how students in a transnational clinical collaboration gained empathy and knowledge of the plight of marginalized groups in India. In the concluding section, Part VI, I suggest that Indian law schools should formalise clinical legal education programs not only for the purposes of imparting legal skills to students and serving marginalized communities but also for promoting democracy.

II. RELATIONSHIP BETWEEN EDUCATION AND DEMOCRACY

John Dewey argued that education is essential to a democratic state. Dewey emphasised the need for democratic citizens to understand and consider the welfare of society as a whole. He argued that citizens should be able to balance their personal needs with the needs of others. In order to do this, he believed that citizens must understand and empathise with the lives and experiences of other citizens.

Martha Nussbaum, in “Not for Profit: Why Democracy Needs the Humanities,” further elaborated upon the connection between education and democracy. She critiqued the growing trend in global education to teach students technical skills for the purpose of enhancing national economic growth at the cost of a broader education that aims to instil critical thinking skills and to create citizens who can participate in the democracy. Nussbaum particularly strikes at the lack of emphasis and funding for the humanities and arts departments within education systems across the world. In contrast with recent trends in education policy, she points out that the goal of education should include the promotion of “a humane, people-sensitive democracy dedicated to


See MARTHA C. NUSBAUM, NOT FOR PROFIT: WHY DEMOCRACY NEEDS THE HUMANITIES (2010).

Id., 1-3.

Id., 2.
promoting opportunities of ‘life, liberty, and the pursuit of happiness’ to each and every person.”

To achieve this type of democracy, Nussbaum argues that the goal of education should be to instil a number of concrete abilities to students. First, students should gain the ability “to have concern for the lives of others, to grasp what polices ... mean for the opportunities and experiences of one’s fellow citizens.” Second, education should give students the ability “to think about the good of the nation as a whole, not just that of one’s own local group.” Third, students should have the ability to “recognize fellow citizens as people with equal rights, even though they may be different in race, religion, gender, and sexuality.” Fourth, education should also give students the ability to see one’s nation “as a part of a complicated world order in which issues of many kinds require intelligent transnational deliberation for their resolution.”

Both Dewey and Nussbaum favour a model of active learning instead of a desk learning model where students merely memorise information. Similarly, the foundation of clinical legal education is experiential learning or “learning by doing.” In a typical legal clinic, students actively represent clients in cases or work on projects on behalf of clients. Through this process they interact deeply with individuals. They learn to communicate with people who may not share their racial, caste, ethnic, religious, or class backgrounds. Through their legal representation of people from diverse communities, law students learn about those people’s struggles. This window into the lives of marginalised and poor communities gives law students the ability to formulate and promote more inclusive policies in their own practice as lawyers as well as in their roles as judges or legislators. In the following part of the paper, I describe clinical legal education in India and the United States in broad terms and provide a case study of how the interactions between law students and communities in one transnational law school collaboration furthered the goals of a democratic state.

III. CLINICAL LEGAL EDUCATION IN THE UNITED STATES AND INDIA

In most American and Indian law schools, students have opportunities to interact with poor and marginalised communities through clinics or legal aid cells. However, by and large, clinical programs in the United States

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7 Id., 25.
9 Id., 26.
10 Id., 25.
11 Id., 26.
are more formalised and integrated into law school curriculums than programs in Indian law schools. Below I describe clinical programs in both countries in greater detail before discussing how legal clinics facilitate the promotion of democracy.

A. CLINICAL PROGRAMS IN AMERICAN LAW SCHOOLS

In the United States, clinics are generally small law school classes taught by full-time faculty where students learn lawyering skills through undertaking legal services, typically on behalf of poor or marginalised people and communities. Clinical programs in American law schools burgeoned in the 1960s alongside the civil rights movement and the national focus on eliminating poverty. Most clinics at the time engaged students in providing routine legal services to local community members who could not otherwise afford them. Today, many law schools in the United States offer clinics as part of their curriculum in multiple other subject areas of law such as small business law and human rights law.

In today’s increasingly challenging U.S. legal market for law graduates, some law schools have renewed their focus on clinical legal education. To give their law graduates better tools to succeed in practice, some law schools require students to participate in clinics or allow clinics to satisfy certain graduation requirements (e.g., Harvard Law School, University of Washington, and the University of New Mexico). Bar associations and other regulatory bodies are also pushing law schools to provide more opportunities for experiential learning. The New York State Bar Association mandated that anyone who wishes to gain admission to the New York Bar, which is necessary to practice law in New York State, must have performed at least 50 hours of pro bono services. Starting in 2017, to be admitted to the California Bar, students must have completed 15 units of practice based, experiential course work or an apprenticeship equivalent during law school.

13 See C.E. Ares, Legal Education and the Problem of the Poor, 17 J. LEGAL EDUC. (1965).
14 Id., 9.
16 University of Washington Law School, Graduation Requirements, available at http://www.law.washington.edu/students/academics/graduation.aspx (Last visited on September 4, 2015) (Must take an experiential course (simulation, externship or clinic)).
17 University of New Mexico School of Law, Clinical Program, available at http://lawschool.unm.edu/clinic/ (Last visited on January 16, 2016).
19 The State Bar of California, Task Force on Admission Regulation Reform Phase I Final Proposals- Authorize Creation on Implementation Committee, October 12, 2013, available at
Although clinics vary a great deal, there are a few key features common to most law school clinics in the United States. First, they typically have low student to teacher ratios. This is to ensure that students are closely supervised in the legal work they perform and given appropriate feedback. Second, most law schools employ faculty who teach exclusively in the clinical program and have extensive practical experience. In some schools, these professors are on the same tenure track as non-clinical professors. But in many other schools, they work on long-term or short-term contracts. Third, virtually all clinics are offered to students for law school credit. This allows students to participate in clinics while simultaneously working towards their requirements for graduation. Thus, in most law schools, clinical legal education in the United States is supervised and formally incorporated into the law school curriculum.

B. CLINICAL PROGRAMS IN INDIAN LAW SCHOOLS

Most Indian law schools do not have formal clinical legal education programs. Many schools have “legal aid cells” that are neither directly supervised nor formally incorporated into the curriculum and are often voluntary student-run organizations. Law students do not tend to receive course credit for their work in the legal aid cell. For example, like in many other law schools in India, Amity Law School also offers a “legal aid cell” supervised by a faculty member, which has many other responsibilities, and where students do not receive any credit for participation.

There have been waves of national level reform efforts in India concentrating on the development of a skill-based curriculum. For example, the Bar Council of India issued a directive in 1997 that requires law schools to include certain classes focused on practical training. However, it is common for more than eighty students to be enrolled in a single class which makes it difficult for instructors to provide sufficient supervision to students undertaking...
legal work. In a 2002 report, the Law Commission of India suggested that clinical legal education be mandatory.\(^\text{24}\) However, most law schools have not adopted this recommendation.

Another barrier to legal education is the Advocates’ Act of 1961 and rules issued pursuant thereto which prohibit students and full-time law professors from practicing as advocates, except in limited circumstances (such as filing public interest litigation).\(^\text{25}\)

A recent UNDP report surveying 39 law schools with legal aid cells found that although 82% of those schools had faculty designated to supervise legal aid cells, 63% of those schools did not give academic credit to students.\(^\text{26}\) The study further pointed out that there is no workload reduction given to faculty who are designated to supervise legal aid cells and sometimes communities are not even aware that the law schools provide free legal services.\(^\text{27}\) Consequently, clinical legal education in India has not reached its full potential.

IV. CLINICAL LEGAL EDUCATION AND DEMOCRACY

Clinical legal education offers the opportunity for students and faculty to engage with communities around them. Often, both within India and the United States, there is a divide between the university population and the general population of the respective country. Below, I discuss the gap between universities and communities and how clinical legal education can promote democracy by bridging this divide.

A. THE DIVIDE BETWEEN UNIVERSITIES AND COMMUNITIES

Many of the quality higher education institutions in India and the United States are not representative of the economic, social, and geographic diversity of their respective countries as a whole.\(^\text{28}\) To get admitted to the best higher education institutions in India, many of which are public or government


\(^{25}\) See generally Advocates Act, 1961.

\(^{26}\) UNDP Study, supra note 21, 16, 20.

\(^{27}\) Id., 33-44.

supported,29 students must take competitive exams such as the National Entrance Screening Test, Joint Entrance Examination, or Common Law Admission Test. Performance on these exams hinges on the level of preparation and the quality of primary and secondary education that a student has received.

Despite great efforts made by the government to improve the education system, including the adoption of the Right to Education Act, 2009, many primary and secondary government schools lack the quality of education that enables their students to secure admission to the most competitive higher education institutions. The wealthy classes in India send their children to private schools, which tend to have superior teachers, materials, and infrastructure. Thus, students from wealthier families are typically better prepared to gain admittance into the elite institutions of higher education.

The situation is similar in the United States, albeit less acute. Unlike in India, most middle-class and upper middle-class American children attend government schools.30 However, the quality of government schools varies considerably across the United States. Schools are largely funded by property taxes.31 As a result, schools in poor communities have less funding to pay teachers, maintain infrastructure, and afford other such expenses needed to provide high quality education. Some have noted that there is an “achievement gap” between white people and minorities in the United States.32 Due to the achievement gap and other factors like disparate social-emotional factors influencing achievement33 and unequal educational opportunities,34 the population of students who enter the top universities in the United States is not representative of the population of United States as a whole.

Historically, universities have not engaged with the communities around them. Instead, they have often erected physical barriers to separate the communities from the university, such as gates or fences around the university. Where there may be no physical barriers, private security forces are hired to protect people within a university campus. In order to break these barriers that further deepen the divide between universities and their communities, it

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is imperative for schools and universities to develop a curriculum that requires students to engage with the communities around them.

Many universities in the United States have begun to recognise the need for engaging with the local communities. As a result, “civic engagement” departments and initiatives have emerged in institutions across the country. There are a number of ways in which civic engagement takes place. Universities may establish programs focused particularly on seeking input from the community on matters that impact them, such as large-scale construction projects. In addition, civic engagement departments organise and coordinate service learning and community-focused programs. Universities can also encourage faculty to conduct research on issues affecting the local community. Finally, some universities have begun to invest resources to economically develop their neighbourhoods and communities. For example, University of Pennsylvania has invested millions in retail development in the surrounding areas.

B. CLINICAL LEGAL EDUCATION AS COMMUNITY ENGAGEMENT

Law school clinical education programs are another important way universities can engage with poor and marginalised groups. In clinics, students act as advocates for a person or client, who is typically from a different and often disenfranchised community. Sometimes that representation may involve more than one individual or, in other cases, a community. During the course of their clinical experience, law students often meet with their client in order to form a professional relationship. This interaction may require the student to go into neighbourhoods or places that they do not normally travel to, thus, exposing the student to different life experiences and barriers which members of the society face. Consequently, the student must advocate in favour of certain issues that may not have direct significance to their own personal lives.

Although much of the conversation between the student and client involves gathering facts and developing a legal strategy, discussions often move beyond that. During the ice breaking or introductory stage, students establish common ground with the client to facilitate open discussion and trust. This relationship can mature and deepen over the course of time and multiple meetings. Through these interactions, the student often develops a personal

35 Id.
relationship with the client. The student may learn about the difficulties people who do not have a stable place to live or regular phone or Internet access face. They also may learn that they have a lot more in common with their clients than they would have otherwise expected.

Through the processes of experiential learning students also garner key skills for examining policies, laws, and circumstances from the perspectives of multiple stakeholders and communities. They develop empathy towards persons in oppressed positions and advocate for the equal needs of their clients. By working with clients who are from marginalised groups, students learn to identify the inequalities in the legal system and political structure so they can work towards solving them as law students and also as lawyers.

V. CASE STUDY OF THE CROSS-NATIONAL CLINIC: DEMOCRACY AND CLINICAL LEGAL EDUCATION

The Cross-National Human Rights and Rural Governance Clinic (“Cross-National Clinic”) was a unique collaboration between the Good Rural Governance and Citizen Participation Clinic (“Citizen Participation Clinic”) at Jindal Global Law School and the Cornell International Human Rights Clinic (“Human Rights Clinic”) at Cornell Law School. Developed by Professor Ajay Pandey, the Citizen Participation Clinic aims to address the disconnect between the Indian Constitution’s promise of a dignified life for every citizen and the reality that the majority of the population is subjected to an undignified human existence, particularly in rural India. The Human Rights Clinic works with organisations and individuals around the world to promote human rights through a multi-faceted approach, including through litigation, human rights education, and law reform.

The Cross-National Clinic was taught through video conference to students based both at Cornell Law School and Jindal Global Law School over the course of a semester in 2012. Students from Jindal Global Law School and Cornell Law School participated in class discussions and exercises, which involved intensive interactions among the students on both sides of the video conference screen. Students gained substantive exposure to principles of clinical legal education; international human rights law and its implementation; and the theory and practice of good rural governance and citizen participation. Through simulation activities, students developed skills in investigation and interviewing, explored strategies for the enforcement of human rights, and reflected critically on difficult questions of ethics and professional responsibility in human rights lawyering. Other sessions offered students an opportunity to present, discuss, and receive feedback on their clinical project work.
In addition to the seminar component of the course, the students worked on clinical projects that aimed to promote good governance and citizen participation in India. At Jindal, students furthered the Citizen Participation Clinic’s mission by supporting the effective participation of rural communities in bringing good governance to their villages. They consulted with community members about their concerns, advised them on potential avenues for redress, and assisted clients in filing complaints and petitions under the Right to Information Act, 2005. During the course of the semester, the Jindal students attended weekly sabhas (meetings) with community members and shared their work and experiences with the Cornell students through the video conference format. The Cornell students conducted legal and factual desk research on the Citizen Participation Clinic’s model of clinical legal education and its contributions to the advancement of human rights. They also prepared sample interview questions to guide their subsequent field research.

In March 2012, the Cornell students travelled to Sonipat, India to engage in person with the Jindal students, to get first-hand experience about the implementation of India’s human rights obligations, and to gain an understanding of the mechanics of the Citizen Participation Clinic. Jindal and Cornell students interviewed community members, teachers, employees of non-governmental organisations, and policymakers. They conducted site visits of government-run day care centres (aganwadi), ration distribution centres, and government schools in two villages in the state of Haryana.

The Citizen Participation Clinic is a community-based clinical program that relies on a continuous dialogue with communities in order to learn from them and to secure their effective participation in the political processes. In addition to formulating their own goals and articulating their needs, participants take action on their own behalf to the furthest extent possible. In this way, community members gain skills they can use in the future, gain the knowledge to teach those skills to other villagers, and develop confidence and self-sufficiency. To the extent community members needed their assistance; students assisted them in writing letters and other petitions.

Several students in the Cross-National Clinic were impacted greatly by their experience. One student, Meher Dev, described how the work she did in the Cross-National Clinic instilled a sense of duty in her:

An [elderly] lady gave a hand written letter to me, which stated all her grievances with regard to the management of the village, expressing her hope and faith that I, as a law student, should on her behalf make her letter reach the appropriate authorities who will take the required steps to address her grievances. This was very touching, and I felt that I owe an obligation to the society members and should put my legal knowledge or resources to fruitful use and betterment of fellow citizens, especially those who cannot voice their
opinions before the government, policy makers and other stakeholders. It is my
duty to become the bridge between these two ends with the State on one end
and the marginalised on the other.\textsuperscript{38}

During the course of teaching the Cross-National Clinic, I ob-
served many other ways in which students gained the abilities which Nussbaum
suggests should flow from an education that promotes democracy. For many
students, the clinic was the first time that they interacted directly with people
from poor villages. They went to visit the villagers in their own communities
and observed their daily living conditions. Some of these villagers are from
the same class as people who as work as domestic workers in the homes of
the students. The roles were reversed, however, as the students were providing
services to the villagers.

The clinic students demonstrated sensitivity to the plight of the
poor and expressed a desire to use their privileged position as lawyers to im-
prove the lives of disadvantaged populations. One second-year student noted
that the clinic has provided him with a deeper understanding of the lives of
persons facing layers of marginalisation. Numerous students remarked on the
importance of equality before the law regardless of socio-economic status.
By meeting and interacting with villagers on a weekly basis, students formed
relationships with them and became familiar with the serious problems they
face. One student observed the importance of the weekly meetings in creating
equality amongst all stakeholders, which included clients, law students, and
employees of the non-governmental organization. Students worked on a pro-
ject that required them to investigate the conditions of government child care
centres and primary schools and witnessed the low quality care and education
provided.

Through the course of the semester students witnessed the daily
daily lives of poor villagers in rural communities outside their law school. They
learned about the issues faced by India’s villagers, including lack of access to
educational opportunities, poverty, and violence in their communities. Students
humanised individuals and came to appreciate how much in common they had
with people from different backgrounds. These interactions will enable stu-
dents, in their own professions and careers, to work towards the promotion of a
democracy that values and considers the perspectives of all citizens.

VI. CONCLUSION

Clinical legal education offers students the opportunity to gain
practical legal skills, and trains and facilitates the delivery of legal services

\textsuperscript{38} Global Alliance for Justice Education, Promoting Clinical Legal Education in India: A Case
for poor communities who may otherwise be unable to afford legal representation. In this essay, I have offered another justification for clinical legal education -- it serves to bridge the divide between universities and communities. Through their work as part of law clinics, students begin to humanise people from backgrounds dissimilar to their own. Many law students will become legislators, judges, and prosecutors. They will draw upon their law school clinic experiences in their work to create fairer laws and draft more effective policies that consider the welfare of the nation as a whole. Their experience in a clinic can even impact the career choices they make. Through their engagement in a clinic, some students may decide to devote their lives to addressing inequities, and others will undertake pro bono services for the poor. Regardless of the career route these students take, their experiences with diverse and oppressed communities will influence how they participate within the nation's democracy. Students who represent and advocate for poor and marginalised people will learn the challenges faced by others outside of their social classes, they will learn to treat all people as equals, and will gain the ability to develop policies that benefit the nation as a whole. Indian law schools should strengthen their clinical engagement by formalising those programs and integrating them into their curriculum.