

Foreword:
International Clinics and the Global Clinical
Movement

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This Symposium issue is about re-imagining international clinical law. The general topic of the Symposium points to an important phenomenon—the increasing internationalization of clinical legal education—that certainly needs to be re-imagined. As noted by the Symposium organizers, “law schools have yet to take up the challenge of ensuring that our future lawyers are equipped to work effectively in an increasingly globalized arena where interaction between domestic principles and rules and international treaties and customary law is increasingly complex and pivotal.”¹ But what do we mean exactly by “international clinical law”? While the term itself is not used in the clinical literature,² its pairing of “international” with “clinical” can point us in two quite different directions: international-to-clinical and clinical-to-international. If we think of international clinical law in the sense of first international and then clinical, the focus is on bringing international law to clinical education; if we think of clinical first and then international, the focus is on taking clinical education internationally. Understanding international clinical law from both directions and exploring how they may be coming together to enrich both international law and clinical legal education can provide a useful framework for re-imagination.

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1. *Conferences & Symposia: Re-imagining International Clinical Law*, U. MD. SCH. L., <http://www.law.umaryland.edu/faculty/conferences/detail.html?conf=103> (last visited Feb. 6, 2011) [hereinafter *Re-imagining International Clinical Law*].

2. At the time of this writing, a search for the term “international clinical law” in Westlaw’s law review database yielded no entries in which the term was used. By contrast, a search for the word “international” in the same sentence as “clinical legal education” yielded 113 entries; substituting the word “global” for “international” yielded fifty-two entries.

Bringing international law to clinical education serves to expand traditional international legal studies by including the study of international law practice. So-called “international clinics” do so by offering students an international clinical experience that places them in some form of international law practice. International clinics can, in theory, involve students in just about any type of international law practice. Students in these clinics have the opportunity to work with international lawyers and engage with various international legal institutions. International clinics also serve to “internationalize” the scope of clinical legal education by taking students across borders, although not necessarily physically. Taking clinical education internationally, by contrast, serves to internationalize the field of clinical legal education. Clinical programs operate, in one form or another, around the world. In what is becoming known as the “global clinical movement,” clinical law teachers and others working with law school-based clinical programs seek a global perspective on developing the clinical curriculum and improving the clinical methodology.³

Put more simply, bringing international law to clinical education expands the scope of clinical courses and clinical programs; taking clinical education internationally opens up the field of clinical legal education and extends its influence worldwide. “International clinical law” can thus be re-imagined as a pairing of “international” and “clinical” in both directions. If we look more closely at what are described as international clinics, including those discussed in the papers in this volume, most operate in both of these directions.

For the most part, international clinics bring international law to clinical education by focusing on international human rights, immigration (mostly asylum and refugee work), or other areas of public international law—either through an in-house clinic or in cooperation with an internationally based nongovernmental organization (NGO).⁴ International human rights clinics also help

3. See generally THE GLOBAL CLINICAL MOVEMENT: EDUCATING LAWYERS FOR SOCIAL JUSTICE (Frank S. Bloch ed., 2011).

4. See Diane Edelman, *Teaching International Law—The Visible College of International Law Clinicians: Making a Real Difference in Law School and in the World*, 95 AM. SOC'Y INT'L L. PROC. 188 (2001) (describing clinical work in human rights, immigration, and international development, as well as externship placements with various international institutions, such as the United Nations and the Inter-American Court).

take clinical education internationally. As Deena R. Hurwitz has noted,

[I]nternational human rights clinics offer enormous potential[] for students to experience the integration of law and policy, the dynamic nature of international law, and the possibilities for participating in its development and enforcement. Equally important, international human rights clinics give students an opportunity to help protect the rights of those with limited or no access to justice, and to strengthen the mechanisms of global justice. This is, after all, where clinical legal education has its roots.⁵

Yet these clinics tend to operate in their own world—not completely outside the clinical movement, but more separate than one would wish. International law and clinical legal education “are rarely mentioned in the same breath. But the respective trajectories of international law and clinical education overlap in at least one important domain: international human rights.”⁶ Re-imagining international clinical law as bridging that gap—particularly through international human rights clinics and other international clinics focusing on public international matters—may then result in a more prominent role for international clinics in the global clinical movement.

International clinics are most obviously part of the global clinical movement in that a “global” movement must have a broadly international dimension. There can be no doubt that clinical legal education today has a global reach, even without considering international clinics; as mentioned earlier, there are law school clinical programs in every region of the world. But the global clinical movement aspires to more than a global reach, and clinics that are themselves international—that is, international clinics—add depth to the international dimension of clinical education. Not much re-imagination is needed here. All that is required is for more clinicians teaching in international clinics to consider themselves as part of the global clinical movement.

5. Deena R. Hurwitz, *Lawyering for Justice and the Inevitability of International Human Rights Clinics*, 28 YALE J. INT'L L. 505, 548 (2003); see also Johanna Bond, *The Global Classroom: International Human Rights Fact-Finding as Clinical Method*, 28 WM. MITCHELL L. REV. 317 (2001) (arguing that fact-finding in human rights cases constitutes an innovative clinical methodology).

6. Arturo J. Carrillo, *Bringing International Law Home: The Innovative Role of Human Rights Clinics in the Transnational Legal Process*, 35 COLUM. HUM. RTS. L. REV. 527, 527 (2004).

The more challenging task in re-imagining international clinical law and its role in the global clinical movement has to do with the “clinical” dimension of the movement. While clinical programs around the world differ substantially in their form and methods, there are important commonalities that unite clinicians in a coherent global movement. As I have noted elsewhere, “three elements stand out as constituting the most important commonly conceived notions of clinical legal education around the world: professional skills training, experiential learning, and instilling professional values of public responsibility and social justice.”⁷ International clinics are certainly clinical in this international sense, but by being more identified with international-to-clinical than with clinical-to-international they have remained somewhat apart from the global clinical movement. Of course, a movement must have a purpose beyond joining together a like-minded group; it must have a vision or set of goals that motivate its membership. Re-imagining international clinical law as a force in the global clinical movement will result not only in international clinics benefiting from various perspectives on clinical education from around the world, but also in their contributing to the enhancement and expansion of clinical legal education worldwide.

Examining all of these opportunities and benefits is well beyond the scope of this foreword. Instead, let me look at one particularly robust possibility for international clinics’ engagement in the global clinical movement that was examined in one of the Symposium panels: international partnerships. The full topic of that panel was *Global Clinical Legal Education and International Partnerships*.⁸ A brief look at a key institutional actor in international clinical partnerships—the Global Alliance for Justice Education (GAJE)—will help set the stage.⁹

The Global Alliance for Justice Education is a free membership organization, consisting of law teachers, law students, and others

7. Frank S. Bloch, *Access to Justice and the Global Clinical Movement*, 28 WASH. U. J.L. & POL’Y 111, 121 (2008).

8. *Re-imagining International Clinical Law*, *supra* note 1.

9. See Peggy Maisel, *The Role of U.S. Law Faculty in Developing Countries: Striving for Effective Cross-Cultural Collaboration*, 14 CLINICAL L. REV. 465, 467 n.6 (2008) (describing GAJE as “an organization that brings together clinical law faculty and others involved with justice education, in one global organization”); see also Elizabeth B. Cooper, *Global Collaboration in Law Schools: Lessons to Learn*, 30 FORDHAM INT’L L.J. 346, 346 (2007).

interested in promoting social justice through legal education.¹⁰ While clinical education of law students is a key component of justice education, GAJE also seeks to advance other forms of socially relevant legal education by working with practicing lawyers, judges, NGOs, and the lay public. As a result, international partnerships—in particular, partnerships with NGOs—are a prominent fixture of many projects featured at GAJE conferences and carried out through its members' various collaborations and exchanges.

To some extent, structuring a law school clinic around a partnership with another institution has been disfavored in the United States, as falling on the wrong side of the in-house/out-of-house debate.¹¹ That makes sense in the United States, where law teachers can also be practicing lawyers and law students can be certified to practice under state student practice rules. But that is not the case in most countries, and within GAJE there is much support for the kind of interactive partnerships that form the basis for many international clinics. Moreover, partnerships within clinics can serve to expand the scope of the clinical experience when the clinic works with an NGO as a client, as is the case with many international clinics.¹² International clinics can thus serve as the basis for a new model of interactive collaboration in clinical legal education. Not only have the partnerships described in this Symposium enhanced the students' clinical experiences, they have also helped expand the global reach of

10. GLOBAL ALLIANCE FOR JUST. EDUC., <http://www.gaje.org> (last visited Feb. 6, 2011).

11. See Elliott S. Milstein, *Clinical Legal Education in the United States: In-House Clinics, Externships, and Simulations*, 51 J. LEGAL EDUC. 375, 376 (2001) ("Most references to clinical legal education in the U.S. are to the in-house model. The advantage of this model is that the primary purpose of the law office in which students work is education. In these clinics, students' first professional experiences are undertaken under the supervision of faculty. The pedagogy is designed to engender appropriate professional values while also teaching students the theory and practice of lawyering."). See generally Robert Dinerstein, *Report of the Committee on the Future of the In-House Clinic*, 42 J. LEGAL EDUC. 508 (1992).

12. See, e.g., Melissa E. Crow, *From Dyad to Triad: Reconceptualizing the Lawyer-Client Relationship for Litigation in Regional Human Rights Commissions*, 26 MICH. J. INT'L L. 1097, 1111–12 (2005) (describing the experience of students with American University's International Human Rights Law Clinic representing the Institute for Human Rights and Development in Africa before the African Commission). For an analysis of how different relationships with NGOs can affect the curricular goals of law school clinics, see Dina Francesca Haynes, *Client-Centered Human Rights Advocacy*, 13 CLINICAL L. REV. 379 (2007) (arguing that clinics teaching client-centered human rights advocacy require a human rights practice context focused on the real needs of an actual client).

clinical education by creating clinical-friendly relationships with real-world legal activists at the many law schools around the world with traditionally insulated law faculties.

The international clinics described in this Symposium have also highlighted the role of collaboration with various international institutions. Clinical work in that context offers students a valuable opportunity to engage in international practice, whether they come from within the particular country or from abroad. At the same time, clinics working closely with important international institutions offer a model of collaborative interaction that can greatly benefit the global clinical community. Clinical programs focusing on various international human rights conventions and institutions, such as those described by Professor Espejo, for example, have played a key role in establishing viable clinical program models in a number of countries in Latin America.¹³

Finally, many international clinics rely heavily on various personal partnerships. A number of the programs described in this Symposium owe their international character to cross-national relationships between clinicians. Others operate by getting students together in cross-national video conferences. These types of partnerships have been featured at GAJE conferences since its inaugural conference in 1999, where there was a session on an international human rights clinic at Georgetown University Law School in the United States that linked students and faculty with staff and students working with the Law and Advocacy Project for Women in Ghana.¹⁴ Other GAJE conference sessions have featured clinics in various parts of the world where students and clients would talk across borders and work collaboratively on the project at hand. Bringing these clinics into the global clinical community encourages regular discussion among the students' supervisors as well, leading to new insights about clinical programs and methods. Moreover, international clinical colleagues typically find much common ground, which they can draw on in various ways when framing and supervising their students' clinical experience.

Together with these opportunities for international partnerships, important questions remain. With whom do you partner? And to what

13. Nicolás Espejo, *Clinical Legal Education in Latin America* (Nov. 2010) (unpublished manuscript) (on file with the Maryland Journal of International Law).

14. See *1999-conference-agenda*, GLOBAL ALLIANCE FOR JUST. EDUC., <http://www.gaje.org/1999-conference-agenda/> (last visited Feb. 8, 2011).

end? As we seek to establish international clinical partnerships, we should think not only about our own clinics but also about the global clinical movement. Quite naturally, we tend to frame partnerships with ourselves at the center of the partnership—whoever we may be—but from a more open global movement perspective, it is the substance of the partnership that counts. We may not even be involved in the partnership, but we can gain from the partnership. The important global partnerships in clinical education are those that have as their ultimate goal the advancement of the global clinical movement. International clinical law re-imagined should take clinicians beyond their local understanding of “clinical” to a global understanding of clinical education that will both enhance the international dimension of their clinics and—as a part of a global movement—help make the case for the establishment of clinical legal education around the world.