

Conceptualising Clinical Legal Education In Legal Pedagogy Of India: Significance And Challenges

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Abstract: Legal pedagogy has evolved to produce more efficient and dynamic practitioners of law. The Bar Council of India (BCI) has been instrumental in regulating legal education standards and monitoring the law colleges that issue law degrees since adopting the Advocates Act of 1961. The legal profession demands more than mere traditional classroom teaching-learning methods. Clinical Legal Education is a concept that enables the students to learn through practical experience. It also disseminates the passion of public interest and social services amongst law students, and not just with the pedagogic method. Legal Aid, therefore, closely engages with Clinical Legal Education. The authors observe that a prevailing theory-practice gap in legal pedagogy can be bridged effectively through institutional mechanisms. This mission of producing justice-oriented legal professionals is paired with the massification of legal education.

Keywords: Clinical Legal Education, Bar Council of India, Legal Education, Legal Profession, Legal Aid, Legal Pedagogy.

1. Introduction

India is a democracy where the 'Rule of law' is the soul of the Constitution, and the legal profession is the primary stakeholder to uphold the ideals of the Constitution. The legal profession plays the most significant role in shaping and operating the legal system. Thus, legal education is instrumental in preparing legal professionals to perform such a fundamental role in society.

Furthermore, law students' grooming into competent legal professionals, sensitive to and capable of addressing socio-economic concerns, remains an integral part of legal pedagogy. In a democratic welfare state, the legal profession is not limited to professionals practicing before the Court of law. It is a broad and comprehensive concept instead. Individuals engaged in teaching, research, judicial work, or various administrative posts all come under the legal profession's purview (Jena, 2002).

In India, legal education is regulated by two bodies, viz. the Bar Council of India (BCI) as the primary regulatory body in furtherance of powers vested in it under the Advocates Act (1961) and the University Grants Commission (UGC). UGC has statutory powers to exercise control over the Universities and affiliated colleges for prescribing standards of education, including law (UGC, 2002). In addition to these two regulatory bodies, Universities have the autonomy to decide upon some issues for improving the standard of legal education. The BCI and State bar councils play a significant role in practical training and skill development programs, including court visits, moot court exercises, legal aid work, and other clinical programs (Jena, 2002).

The BCI constituted under the Advocates Act (1961) is the apex body regulating the legal profession's standards. Admissions, ethics, practice, and standards are managed by the BCI in line with state bar councils. The BCI functions related to legal education as envisaged under the 1961 Act are promoting and laying down formal standards of legal education (Advocates Act, 1961, s. 7(h), recognition and inspection of Universities (Advocates Act, 1961, s. 7(i)), and it may conduct seminars or talks by engaging eminent jurists as well as publish journals in topics of legal interest (Advocates Act, 1961, s. 7(ia)).

The BCI has powers to make rules for legal education & related matters. While honoring its functions, the BCI prescribes minimum qualifications required for admission to a degree in law in any recognized University (Advocates Act, 1961, s. 49 (af)). The BCI can also prescribe rules on legal education standards to be observed by Universities in India and inspect them to enforce those rules (Advocates Act, 1961, s. 49 (d)). By these powers, derived from the Advocates Act, the BCI has brought several reforms to Indian legal education from time to time.

Clinical education arose only recently in India. It was set when the regulating bodies of legal education realized that classroom teaching and learning were insufficient in producing good lawyers. Thus, Clinical legal education prepares law students to practice law effectively by involving pedagogy methods where students learn through practical experience. It has a larger goal of providing legal aid to the economically backward section of society and ensuring access to justice for all. Clinical Legal Education facilitates teaching methods by orienting the spirit and passion on public interest and social service amongst law students. Globalization has opened various opportunities for the growth of Legal education in general and Clinical Legal Education in particular. Its promotion should be done through institutional mechanisms so that Indian legal education is not left behind of the universal trend (Kashyap, 2016).

2. Methodology

This research is based on a qualitative methodology. The findings of this article have their roots on a systematic review of existing literature, Indian laws and regulations.

Declared aim of this research is the identification of challenges and current constraint that the Clinical Legal Education is facing in India. Benefits and opportunities are also disclosed, according to practitioners and regulators.

Prior grounding disclosure of the Legal education context in India is provided to the reader to better introduce the investigated challenges.

3. Clinical Legal Education: Meaning and Concept

The methodology aims to solve practical problems either by laboratory experiments or by conducting a field study acknowledged as significant skill development. This context is even more relevant in professional learning. In the framework of legal education, "Clinical Legal Education" offers such an opportunity to the students who aspire to become practitioners in the Court of law. The students can participate in such activities with faculty and practitioners supervising them. The concept of Clinical Legal Education has been a remarkable contribution towards legal pedagogy. It bridges theory and real-life practice gaps that have existed for an exceedingly long time in law study. It gives future lawyers the perspective of the environment they will operate, thus enabling them to understand how the law works in action.

In compliance with the BCI Regulations, Clinical Legal Education applies to law schools' courses where students engage in tasks that lawyers perform in the Court of Law, including consumer defense, drafting, prep leading, and law study. It gives the students the idea of the actual courtroom situation. However, Clinical Legal Education is not limited to litigation-related activities; rather, it exposes the students to complex dynamics of a situation influenced by social, economic, and political factors. This exercise will develop the intellectual skills of law students in making conscious choices in their professional careers.

The term "Clinical Legal Education" "refers to a non-profit law practice usually serving a public interest or a group in the society that are in an underprivileged or exposed situation and lack access to the legal system." (Kemp et al., 2016). It is through Clinical Legal Education that theoretical learning and practice can be brought together (Archana, 2013).

3.1. Evolution of Clinical Legal Education

The concept of Clinical Legal Education is one of the most remarkable developments to be introduced in legal pedagogy. However, there was no concept of Clinical Legal Education in the initial stages. Following the global trend of introducing clinical legal education, several committees and commissions were set up in India to formulate and develop Clinical Legal Education in the law school curriculum. Clinical Legal Education in India has evolved in many ways since it was first introduced. Initially, the efforts towards clinical learning were voluntary and self-motivated; however, it was formally introduced to the academic curriculum with numerous efforts of various bodies.

Clinical Legal Education was first incorporated in legal pedagogy only in the early 20th century. Alexander Lyublinsky, a Russian professor, for the first time in 1901 proposed Clinical education in law on a similar footing as in medicine (Wilson, 2004). However, it did not witness any significant development until the 1960s, when Clinical Legal Education started to be a substantial part of legal education. Clinical Legal Education started formally for the first time in the United Kingdom in 1970. In Australia, it was introduced in 1990.

Formal Legal Education started in India far back in 1855. However, it was only in 1949 that it became recommended by the Bombay Legal Education Committee. Hence, practical courses had to be made compulsory for those students who intended to take up law as a profession. The teaching method accompanied by practical training is essential for the students' healthy growth in any professional course (Knight, 2019).

In 1958, the 14th Report recognized the importance of professional training. The Law Commission added that professional training is significant in balancing academic and vocational training. It recommended the Universities company professional courses with practical knowledge. To materialize the recommendations, the Report discussed various teaching techniques like Mock Trials, Seminars, and Simulation Exercises and their importance in professional courses.

In India, the roots of Clinical Legal Education can be traced back to Legal Aid and Legal Education Reform Movements. With the legal aid movement gaining momentum in the 1960s, the Law Colleges also started to get involved in legal aid activities. It was assumed that Law Schools could play an instrumental role in providing legal services, and it could be done through Legal Aid Clinics set up in respective Law colleges. Consequently, in the late 1960s, clinical legal education made its place in India's legal education (Bloch and Ishar, 1990). In 1969 Delhi University established a Legal Service Clinic with the initiative of faculty and students. However, this service was a voluntary task, and no attempt was made to institutionalize and integrate the Clinics into the academic curriculum. The intention of setting up such a clinic was to make legal services available to prison inmates (Bloch and Prasad, 2006).

The National Seminar on Legal Education in Bombay by the BCI in 1977 issued a curricular the powers vested upon it by the Advocates Act, which directed the universities and law schools to revise their curriculums (Parveen, 2019). Following the direction given by the BCI, the National Law School of India University, Bangalore, introduced both compulsory and optional clinical courses. Other Colleges also made efforts towards introducing Clinical Legal Education by organizing legal literacy camps although Legal Aid Clinics were not established (MHRD, Govt. of India).

In the early 1970s, the first University to introduce a course on Clinical Legal Education was Banaras Hindu University. In the mid-1980s, a few Legal Aid Camps were organized in Aligarh Muslim University. The Faculty of Law, the University of Jodhpur, established a legal aid clinic between 1983 and 1984 which actively managed awareness programs about socio-legal issues and extended legal assistance in settling certain matrimonial and accident cases (MHRD, Govt. of India).

In 1993-1994 a Committee consisting of three eminent Judges recommended that certain reforms should be introduced in legal education so as to enable the law graduates to acquire the court experience before joining the Bar (Shuvro, et. al., 2014). Over the time, many Law Colleges started to indulge in clinical education. However, their programs remained isolated and voluntary as they faced constraints from many aspects such as financial resources, improper supervision, and lack of trained faculty. The initiatives undertaken were only oriented at serving the poor without giving due emphasis skill development of students. Nonetheless, these voluntary efforts in developing clinical legal education programs, although challenged by poor infrastructural conditions, sensitized the students on socio-economic issues that hitherto was an alien concept in classroom discussions methodology.

A significant development took place in Clinical Legal Education when the BCI introduced four mandatory practical papers in law schools commencing the 1998-99 academic year. Issued a circular making Clinical Legal Education mandatory, and at present many Law Schools offer legal services through Legal Aid Clinics with academic credit (K.,2013).

In the year 2002, the Law Commission of India suggested that the BCI and UGC work jointly to bring about constructive reform in legal education. The National Knowledge Commission (NKC), in its Report in 2007, suggested that education in the field of law should be justice-oriented and recommended the establishment of an independent regulatory body to look over all aspects of legal education. The Report stated, "...the vision of legal education is to provide justice-oriented education essential to the realization of values enshrined in the Constitution of India" (Kashyap,2013). This recommendation has been made to bring legal education in line with other professional courses in India, regulated by independent regulatory bodies like the National Medical Commission and All India Council for Technical Education.

In 2008, the BCI revised the curriculum for law degrees and issued Rules under "Standards of Legal Education and Recognition of Degrees in Law." The new Rules introduced Compulsory Clinical Courses and made internship, moot Court, and simulation a mandatory requirement for completing a law degree (BCI Rules). The

Rule also directed that every institution shall establish and run a Legal Aid Centre, which shall be supervised by a senior faculty member with final year students with legal aid authorities, voluntary lawyers, and NGOs. However, with regards to the academic credit for the legal aid work, the Rules are silent.

Clinical Legal Education in India was formally integrated in curriculum by the BCI to introduce four practical papers aiming to improve legal education standards. However, a careful study of clinical legal education suggests that existing “clinical or practical” learning is a mere extension of traditional classroom teaching, and efforts are not made to practical learning in the real sense of the term. Therefore, to include clinical legal education in the curriculum through institutional mechanisms is the need of the hour. Suppose efforts are made to interlink Clinical legal education, Courts and Legal Services Authorities. In that case, it can play an instrumental role in implementing Article 39A of the Constitution, Article 8 of UDHR, and section 4(k) of the Legal Services Authority Act.

More than 60% of the Indian population are entitled to free Legal Aid. The National Legal Service Authority has a statutory obligation to work in consultation with the BCI, which encourages clinical legal education, promotes instruction, and supervises legal aid clinics’ development and implementation in legal institutes across India. The challenges faced by the Judiciary in bringing the legal system in tune with Constitutional guarantees of socio-economic and political equality made legal education extremely important. Legal professionals are significant stakeholders in shaping the legal system of a nation. Therefore, legal education in India needed structural reform.

Many universities and law schools are opening legal aid clinics to cater to the local community’s needs through which law students may gain hands-on experience (Knight, 2019). The practical application of the law gives a better approach than any scenario-based assignment. Through competent and affordable legal services, a path for just society may be paved, which is possible when qualified, yet socially sensitive lawyers are produced. India has the highest number of Law Schools globally. Therefore, it has great potential in promoting access to justice for the marginalized section of the community. Professor Upendra Baxi profoundly observes, “What do generations signify? Growth in self-reflection and wisdom and capacity to serve the underprivileged.”

4. Clinical Legal Education in India

Clinical Legal Education is based upon a practical approach, which generates confidence in the students to apply their knowledge (K.,2013). Before Clinical Legal Education was made mandatory, practical skill development and social justice activities were voluntary. It was outside the purview of the legal education agenda. Legal doctrines dominated the syllabi of law schools, and courtroom exercises were also instructed through classroom courses. The textbooks were mainly appellate-court-oriented case books accompanied by traditional lectures. The classroom course’s emphasis was only on “the Law,” and practical training did not hold any precedence. Legal education was “Law School,” not “Lawyer School” (Bloch and Prasad).

5. The Significance

Clinical Legal Education offers a meeting ground to the theory and practice of law. Through various activities undertaken while dispensing clinical legal education in law schools, the students come across various human rights issues. Therefore, the students become more aware of the importance of social justice, which encourages them to take up pro-bono cases when they become professionals after completing their law degree. This condition is an internal aspect of the contribution of clinical legal education. On the technical side, the students are well acquainted with drafting and pleading as well. Overall understanding of the professional skills required in practice is provided by clinical legal education.

In a typical legal aid clinic, the students represent clients in cases and assist on projects on behalf of them. During this process, they thoroughly interact with individuals who are facing real-life legal issues. They learn to communicate more efficiently with people from diverse economic, religious, or social backgrounds. The section of people seeking legal Aid mainly comes from marginalized and poor communities. In the profession of attorneys and positions as judges or lawmakers, this training offers law students the opportunity to devise and facilitate more equitable policies (Kalantry, 2015). This way, Clinical legal education can play a crucial role in facilitating access to justice for the poor and marginalized section of the community

Legal aid clinics established in law school serve two-fold purposes. Firstly, it facilitates a better legal education to students, and secondly, it provides access to justice in the community. Through Clinical Legal Education,

students learn analytical skills, recognize substantive legal material through research exercises, and learn the ethical importance of providing access to justice (Tushaus *et al* , 2015).

Clinical legal education is instrumental in embedding the perception, approach, skills, attitude, and sense of responsibilities amongst the law students, which are the traits the lawyers should assume. When the students complete their professional education, they already enjoy these qualities and are ready to perform their roles. The goals of Clinical Legal Education are wide-ranging. Law students to consolidate the due obligations required as members of the public service in law enforcement, law reform, the equal distribution of legal resources in society, human rights, and the public interest, along with upholding the fundamental ethics of professionalism (Kumar, 2020).

Under the following headings, some of the programs undertaken by Law schools under Clinical Legal Education are discussed however, the list is not exhaustive. These programs educate the students on practical aspects of law and how it operates in society and the courtroom. (MHRD, Govt. of India)

(i) Legal Literacy Camps/Street Law Programs: As per the Rangarajan Committee Report (2014), India had about 363 million people (29.5 % of the total population) living below the poverty line in the year 2011/2012, which means 3 out of 10 persons live below the poverty line in India (). Through legal literacy programs, the public can be sensitized about their legal rights and duties. Legal literacy camps are a viable option in a country like India, as it does not require significant financial resources. Even after the government's tremendous efforts, India's average literacy rate, according to the National Statistics Office, is 77.7% (); therefore, literacy campaigns will be fruitful in India considering the socio-economic position.

(ii) Theatre Art: The students in Law schools may engage in various forms of theatre art like street plays, skits, and public performances on subjects such as gender and caste discrimination, domestic violence, sexual harassment, children rights, and environmental issues and right to information which educates law students on socially desirable matters and at the same time it will spread legal literacy amongst the public. This sort of program can be organized for schoolchildren as well as on topics related to them.

(iii) Legal Entitlement Programs: Many families live below the poverty line in India, and for their welfare, the State and Central governments frame various schemes from time to time. Poverty and illiteracy are causally linked with one another; the poor candidates are not aware of the benefits they could enjoy. Through Clinical Legal Education, students can conduct legal research on welfare benefits schemes and policies launched by the government and thereafter hold camps to help the beneficiaries submit their applications under those schemes. A sense of social responsibility is induced in students by engaging them in this kind of activity. It exposes them to the plight of marginalized sections of their society and country.

(iv) Free Legal Aid Clinics: In Legal Aid Clinics established in law colleges or Universities, the students and teachers can give legal advice to the people in trouble by identifying the legal issue and educating them with available remedies. More so, these services are critical in a country like India, where the Judiciary is overburdened with litigation. It saves time and money the prospective clients and may also unnecessary litigation.

(v) Paralegal Services: Although there is a limitation to the students in performing roles as a practicing advocate, students can engage and assist in services are paralegal in nature such as drafting affidavits, helping in the registration of marriages, births, and deaths, etc. This target can be achieved by the Law schools coordinating with the Bar Association, Panchayats, or Municipalities of their respective area. Paralegals' services facilitate great help to the public and give the students hands-on experience in the legal field.

(vi) Open Forums: Another program Law Schools may adopt to collaborate with local school students to identify immediate problems faced by the people of that area. After the survey, the students can approach the concerned authorities and arrange a public forum to redress those problems. The grievance can be settled in public in an open meeting in the concerned authority's presence and the villagers' participation. Students can play an instrumental role in the smooth functioning of the entire program. These types of programs are effective because the concerned Officer, or authority, publicly gives assurance in the presence of all the villagers and the Legal aid team from the respective Law school. With this sort of activity, the students gather first-hand knowledge on how public administration works.

(vii) Pro bono Representation in Quasi-Judicial Bodies: The development of Clinical Legal Education in India faces restriction on the aspect of client representation by the students. Therefore, clinical movement during law courses in India is confined to legal literacy camps and paralegal services. However, quasi-judicial bodies such as

the Consumer Dispute Redressal Forums provide an opportunity to develop live client clinics in colleges. As the Consumer Forums allow any person to represent the parties in resolving consumer disputes, the Consumer Clinics can offer all the skills that a lawyer requires in the profession.

(viii) Public Interest Litigation: Under the guidance of faculty, the students may conduct legal research on public importance issues. This opportunity improves students' research skills and, at the same time, serves the community, as if the findings show any discrepancies, they can approach the concerned authority. If the Officer concerned fails to cater the grievance, the students may approach either the High Court or the Supreme Court for redressal in the form of Public Interest Litigation. PIL inculcates a sense of public spirit amongst the students.

Any of the above-discussed approaches may be adopted by Law schools in their Clinical Legal Education programs. It will offer skills to the students who are required as legal professionals and provide services to society. The students will get acquainted with the socio-economic dynamics in which the law learned in the classroom operates. Although India's opportunities are limited, sincere and honest attempts will improve clinical education quality, which will promote and enable access to justice.

6. The Challenges

The advent of globalization has brought a paradigm shift in polity and society (Rai,2002), and the legal profession is no exception. Since the beginning of the Twenty-First-century-law-as-a-career, the option has gained spectacular potential. However, the ratio of lawyers to the population of India is not yet adequate (). With the growing pace, universal trend, and globalization, legal education in India has gone through a phenomenal transformation. It would not be wrong to state that it is still going through a transformation phase.

India is a developing nation. In terms of financial resources being allotted for the development of Clinical Legal Education, they are inadequate to explore all the possibilities and serve as a significant disadvantage. Moreover, it results in infrastructural inadequacy. Clinical Legal Education, by nature, demands technical requirements that are not sufficiently provided by all Law schools leaving the teaching faculty with no option but to subsume the standard of teaching. Clinical Legal Education is challenged with a lack of both human and material resources. Inadequacy of human resources includes an insufficient number of trained faculty and support staff, lack of guidance, lack of expertise, failure of the BCI to involve the local Bar and Judiciary. Lack of material resources has resulted from financial resources because there is low access to computers and communication infrastructure and low pay to the part-time faculty. Other factors contributing are practical difficulties faced by students commuting to the rural areas and inadequacy of quality books on Clinical Legal Education, lack of training manuals, etc. (MHRD, Govt. of India).

Menon has rightly pointed out that "The law curriculum does not adequately reflect the changing role of law in a developing society, and law teaching does not take account of the new skills of social engineering required from the future lawyers." (Sharma, 2017)

Kenneth L. Penegar observes that "the challenge of Clinical Legal Education in India is not only limited to the amalgamation of theory with practice or giving service to poor, but it is to address the complexities that legal system faces at the present age." (Sharma, 2017).

Professor Upendra Baxi expressed his concern regarding the state of legal education affairs in India in an interview about legal education reform. He observes "that a new generation of lawyers are not coming up in India who are willing to work to help the underprivileged section get access to justice. This condition might be attributed to the failure of the law school curriculum to teach the values of public service and social justice; instead, inclination towards corporate culture is increasing in law schools." (Sarker, 2017).

A three Member "Committee on Reform of Legal Education" constituted in 2009, to the Supreme Court's orders (Bar Council of India v. Bonnie FOI Law College & Ors.), discussed various challenges faced by legal education in India. The Committee submitted its Report to the BCI. Also, it underscored the significant challenges encountered by legal education in India, like the role of the BCI to reform legal education to meet the new requirements of Information Technology and biological and scientific developments. Secondly, lack of funding has resulted in infrastructural inadequacy, low payment to faculties, and compromised technical requirements. The Committee also highlighted the BCI's loopholes in inspection and recognition of law colleges and recommended separate accreditation or rating system for legal institutions.

As the primary body to regulate legal education, the BCI was constituted back in 1961 and, in many areas, it

resulted unable to meet the changing demands of the legal profession. To address such issue, Justice Ahmadi Committee Report in 1994 had suggested reconstitution of the legal education committee of the BCI with a ten-member committee comprising of five Bar Councillors, plus two from the higher Judiciary, one from among academicians, and the remaining two should be the Secretary, UGC, and the Secretary, Ministry of Law, Government of India (Law Commission of India, 184th Report).

In addition to the above-discussed problems, Clinical Legal Education in India also faces the challenges of low involvement of other faculty in the clinical program, lack of proper evaluation of clinical programs, barrier resulting from language cultural differences, lack of training facilities to faculty, faculty members restricted to practicing in Court of law, legal aid activities not inclusive of the workload for faculty, absence of designated full-time faculty, lack of clear guidance from the BCI, lack of involvement of Judiciary, etc.

Several challenges impede upon the full-fledged development of Clinical Legal Education; Law schools could adopt clinical programs conducive to their available resources.

7. Conclusion

Legal education offers professional learning, which ideally aims at providing social-justice-oriented education. The mission of legal education is to produce legal professionals who are justice-oriented and socially sensitive, who will endeavor to facilitate an accessible legal system to all. However, this legal education in India is withering away with the commercialization of education. The concerned authorities have been making continuous efforts to improve the standard of legal education in India, keeping pace with developments across the world. Clinical Legal Education is one such component introduced by the BCI in the law school curriculum to improve the quality of Legal Education in India. Law school can effectively indulge in enhancing Clinical Legal Education with four mandatory Practical Papers introduced by the BCI. Although these practical compulsory Papers were presented in the curriculum back in 1977, most law schools are limited to fulfilling the academic requirement and make no effort in achieving the larger goal of securing the social justice mission of legal education.

Legislators, judges, and prosecutors begin their journey from a law school. While delivering their duty, the experiences they gathered in law school clinics will help make conscious decisions in their respective field to implementing fair law or delivering justice in the Court of law. Clinical Legal Education may also influence many career choices, and some may decide to work on pro bono cases for the underprivileged section of society who cannot afford legal representation, or some may work on Public Interest Litigation on various issues addressing inequalities. Regardless of the career choices they make, all of them will gain experience that will make them conscious legal professionals participating actively in the democratic framework of the nation. Clinical Legal Education gives the students the experience beyond their social and economic class. It will bridge the gap between the institution and the community.

Social-justice-oriented Clinical Legal Education should be institutionalized, and the Legal Aid Clinics established in law schools should be fully utilized by actively engaging in different clinical programs. Materialize this goal; law schools need financial and intellectual support from the Bar, Bench, and the Government. The starting point of any legal profession is law school. Therefore, the Bench and Bar should extend all possible support by allowing internships and monitoring the Law schools' clinical programs.

The nature of Clinical Legal Education in India aims at securing social justice by working for the empowerment of underprivileged sections in Indian society. It should enable law students to understand the legal profession's fundamental values and the skills necessary to achieve them. The Law schools should update their curriculum and programs in consensus with the BCI, UGC, or National Legal Services Authority's reforms. In a country like India, where the human rights movement has still not achieved laurels, providing learning experiences that are socially and politically relevant is of utmost importance.

India's significant setback is that most law schools have not taken Clinical Legal Education in its true spirit. The students fail to benefit from clinical experience. Therefore, effective and precise measures need to be implemented so that no student loses on clinical legal education's merits. In addition to new initiatives, some existing frameworks also need reformation to warrant proper development of Clinical Legal Education. Law schools in India should formalize clinical programs and integrate them into their curriculum to strengthen their clinical engagement. There should be a full-time engagement of law teachers, and final year students should be allowed to practice in the Court of law in pro bono cases or matters of Public Interest Litigation. A separate faculty who has expertise in practical training should be hired, or arrangements for existing faculty training in providing clinical education should be made. Such faculty should run clinical programs so that quality clinical education is

assured in a legal institution. Law schools may also collaborate with local NGOs to provide them legal expertise and work for the community. Lastly, the students should be offered academic credit for their engagement in clinical activities so that they have the motivation to excel in clinical activities.

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