How Much Clinic for How Many Students?:
Examining the Decision to Offer Clinics for One Semester or A Full Academic Year

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I. Introduction

Inspired (or indicted) by recent calls for reform of legal education, most notably in the Carnegie Report and Best Practices, many law schools are engaged in curricular reform. These reports conclude that traditional legal education’s emphasis on teaching students to think like a lawyer fails to adequately prepare students for all dimensions of law practice. Clinical education, in which students learn by working on real cases for real clients, has been proposed as one solution to the shortcoming in legal education. As schools seek to implement the recommendations of Carnegie and Best Practices, they are considering ways to improve and expand clinical opportunities. Within this context, the question of how much clinic for how many students is an important one.

Both Carnegie and Best Practices advocate more clinical opportunities for students. Due to resource constraints, schools have to make difficult choices about how to achieve that imperative. Should schools offer clinics for one semester in an effort to provide clinics to as many students as possible? Or should clinics be offered for a full academic year to increase the likelihood that a student who takes a clinic will be competent to practice when he or she graduates? While clinical scholars recognize that clinic length is a factor in clinic design, few have analyzed the advantages and

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3 Margaret Martin Barry et al, Clinical Education for this Millenium: The Third Wave, 7 CLINICAL L. REV. 1 (2000).
disadvantages of both, or how the duration of the clinic interacts with student learning, institutional and clinic goals, fiscal and political issues and other aspects of clinic design.\(^4\)

One goal of the article is to analyze the advantages to offering a clinic for either a full academic year or one semester so that, as schools develop clinical programs, they can be thoughtful and intentional about their reasons for choosing a particular approach. To help identify these trade-offs, I conducted an informal survey among clinicians on the clinic list-serve. I also considered my own experience offering a one-semester version of my full-year clinic. According to the Center for the Study of Applied Legal Education, 65.6% of clinics have a mandatory enrollment term of one semester.\(^5\) The obvious advantage is that more students can participate in a clinic if offered for only one semester. Because of the intensive nature of clinical supervision, clinic classes typically have low faculty-to-student ratios and a switch to one semester would double enrollment. Another advantage is that some students may not want to commit to an entire year, either for personal reasons or concerns about being able to take other courses or pursue other activities. There are other advantages detailed in Part III of the article. For full year clinics, the primary advantage is that students just don’t “get it” in one semester; they need an entire year to master the facts, law, interpersonal relationships and to begin exercising the independent professional judgment that lies at the heart of being a lawyer. Moreover, the type of cases that they can work on tend to be more complex and far-

\(^4\) Russell Engler, *The MacCrate Report Turns 10: Assessing Its Impact and Identifying Gaps We Should Seek to Narrow*, 8 CLINICAL L. REV. 109, 151 (2001) (noting that questions such as the number of semesters for clinics should be analyzed in terms of learning theory and impact on skills and values training).

reaching. Part II of the article examines these claim in light of learning theory, and considers several other advantages.

The other focus of the article is considering how to design a one semester clinic to maximize student learning. In response to ever increasing student demand for clinics at University of Miami School of Law, my colleague Bernard Perlmutter and I decided to allow some students to take our child advocacy clinic for only a semester. Having participated each year in a painful selection process during which we turn down numerous earnest students who would benefit from a clinic and contribute to our clients and class discussion, I agreed that we should try it despite my apprehensions about the logistics and impact on both students and clients. We offered the traditional year-long model to one group of students, and simultaneously ran a one-semester version for one group of students in the fall and another in the spring. This allowed us to increase clinic capacity by one-third.6 Since then, a new Dean committed to expanding the range of experiential opportunities at our large law school asked clinicians to seriously consider whether a one semester clinic would be feasible. Whether imposed by internal or external pressures, many clinicians have converted existing clinics from a one-year to one-semester model. For law schools developing new clinics, whether to offer the clinic for one semester or a full academic year is an important question in clinic design that may be influenced by the same pressures.7

6 Bernie and I previously supervised 9 students each for a total of 18 students in an academic year. During the 2008-2009 academic year when we offered the one-semester option, a total of 27 interns took the clinic. Full adoption of a one semester model would allow us to double capacity in the academic year.
7 Phillip Schrag, Constructing a Clinic, 3 CLINICAL L. REV. 175, 193 (1996).
I conclude that there are sufficiently significant benefits to having a full year of clinic that some year-long clinics should be part of a robust curriculum. In designing a coherent curriculum, law schools should be able to articulate the justifications for the particular mix in length and types of experiential opportunities. I suggest that, in offering clinics for one semester, we cannot do it all and instead must make conscious choices in clinic objectives and design to ensure that students maximize the identified learning goals.

Part I of the article reviews current efforts at curricular reforms, and discusses why the question of how much clinic for how many students is both important and timely. Part II provides advantages of offering clinic for a full academic year. Part III provides advantages of offering clinics for one semester. Notwithstanding my view that there are important benefits to offering clinics for an entire year and that my own clinic should continue to have a year-long version, as schools respond to demands that the better prepare students for practice, the impetus to make clinics available to more students is real and worthy. In writing this article, I have spoken to several wonderful clinical colleagues across the country who teach in one-semester clinics. They gave me a greater appreciation for the value in providing a clinical opportunity to as many students as possible and for the meaningful learning experience students can have in a semester.

There may also be some clinics, even when given a choice, that may be more appropriate as a one-semester clinic. Part IV considers how to design a one-semester clinic that maximizes student learning. I focus on five aspects of clinic design: (1) clinic goals; (2) case selection; (3) credits and hours; (4) beginning and transferring cases; and (5) the classroom component because those are the issues that will most directly be influenced

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8 Id. at 150.
by the length of the clinic term. Part V offers some reflections from the experiment of offering our child advocacy clinic for one semester, and reconstructs the clinic as a one-semester clinic applying some of the considerations suggested in earlier sections. Although we went back to a year-long model after the experiment, I imagine what our clinic might look like if it is offered for only one semester.

I. The Importance of Determining How Much Clinic for How Many Students in Curriculum Development

There has been recent focus within the academy on reforming legal education, and particular attention to the role of clinical education in that reform. These efforts at curricular change were spurred in part by two influential publications, the Carnegie Report and Best Practices. The Carnegie Report emphasizes that traditional legal education’s emphasis on teaching students to think like a lawyer fails to adequately prepare students for all dimensions of law practice. Carnegie advocates that law schools adopt a comprehensive and integrated approach to teaching doctrinal reasoning, lawyering skills and ethical engagement. As such, pedagogical approaches that teach lawyering and professional responsibility should assume as much primacy in the curriculum as currently occupied by legal analysis. Clinics are identified as one means to achieve that goal. The Carnegie report notes:

Law schools, we believe, need to give the teaching of practice a valued place in the legal curriculum so that formation of the students’ professional judgment is not abandoned to chance. The past several decades of progress in pedagogies for teaching lawyering, including well-organized clinical experiences with actual clients, hold the promise of rescuing this vital function of apprenticeship for

9 We were nonetheless able to expand clinic capacity the following year with the addition of a staff attorney, Carolina Guacci.
11 Carnegie Report, 121.
12 Id. Margaret Martin Barry et al., Clinical Education for This Millenium: The Third Wave, 7 Clinical L. Rev.
practice from the vagaries of curricular accident and establishing it as a basic part of legal preparation.\textsuperscript{13}

While the report cites examples from CUNY, NYU School of Law and others of efforts to better integrate experiential education into the curriculum, it acknowledges that there are a variety of ways schools can meet this demand and challenges the legal academy to think creatively about how to meet this imperative.

At around the same time, the Clinical Legal Education Association published Best Practices for Legal Education (“Best Practices”) that reached similar conclusions.\textsuperscript{14}

The Carnegie Report and Best Practices have garnered considerable attention and created momentum to look closely at how we educate future attorneys. Since 2007, several conferences have been organized around implementation of the Carnegie recommendations. The report has also been the subject of numerous articles by legal scholars. Ten law schools have partnered with the Carnegie Foundation to form the Legal Education Analysis and Reform Network (“LEARN”). Their three working groups are focused on: (1) “looking at ways in which LEARN can help maintain and enhance the momentum for law schools across the country to consider whether their curricula reflect the needs for teaching a wider variety of subjects, creating a wider array of learning environments (such as simulations and clinical work), and integrating the teaching of the three apprenticeships”; (2) transmitting reform initiatives to individual faculty; and (3) examining the role of assessments in legal education.\textsuperscript{15}

Law graduates and students also want more opportunities to get practice skills while in law school. For law students, clinical education and legal jobs are viewed as the

\textsuperscript{13} Carnegie 115
\textsuperscript{14} Roy Stuckey
\textsuperscript{15} Legal Education Analysis and Reform Network, General Descriptions of Planned Projects 2009-2010 (2009).
most useful experiences in training them to become lawyers. According to the After the JD survey, new attorneys ranked clinical courses as more useful in making the transition to practice than other courses in the law school curriculum, including the first-year curriculum, upper-level and course concentrations. The only experiences ranked more useful than clinics is legal employment during summer and the school year.

While this is not the first time there has been an outcry to revamp legal education, the issues raised in this article are particularly relevant to contemporary reform efforts. The MacCrate report, published in 1992 by the ABA Task Force on Law Schools and the Profession, is probably the most well-known earlier indictment against legal education’s emphasis on Socratic method. The report concluded that law schools needed to more effectively prepare students to competently practice law, and identified ten fundamental lawyering skills and four fundamental values that law schools should teach. Although it received considerable attention (and criticism), the MacCrate Report did not itself inspire far-reaching changes in the law school curriculum. Due in part to the fact that law schools themselves are engaged in current curricular reform efforts, as well as changes in the global and legal economy, there is optimism that the current debates about legal education will lead to real changes. What this means is that law schools are more thoughtfully engaged, and critically examining, how to best educate future attorneys.

Another factor that makes the issues in this paper timely are the developments in clinical

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16 The After the JD study is an empirical survey that tracks the career outcomes of almost 5000 new lawyers. The study asked participants “How helpful were the following elements of your law school years in helping you make the transition to your early work assignments as a lawyer?” Ronit Dinovitzer et al., After the J.D.: First Results of a National Study of Legal Careers 81 (2004).
17 Id.
19 Id. at 31.
education. There has been significant growth in the number of clinics offered across the country. What this means is that we are ready to (or have the luxury) of asking more specific, nuanced and complicated questions about clinical education. Whereas the question in earlier days might have been whether to start a clinical program (and early clinical scholarship justified the very existence of clinics), the contemporary questions are how do we provide quality clinical programs and how do they fit with broader curriculum goals.

Within this context, questions about how much clinic for how many students become important. What precisely does it mean to provide more clinical opportunities to students? In a world with limited resources, there is a tension between being able to certify that each student who passes through an experiential program will leave law school ready to practice and ensuring that every student has some opportunity to gain practice skills. Carnegie recommends that law schools provide more clinical opportunities for students, and goes so far as to suggest a third year “cap stone” experience that would involve an opportunity to practice. At the same time, the report suggests that even three years is not enough to become truly proficient at practice:

Research validates the widespread belief that developing professional judgment takes a long time, as well as much experience. It cannot typically be achieved within three years of law school, no matter how well crafted the students’ experience. But those years in law school can give students a solid foundation and, as they begin their careers in the law, useful guidance on what they need to continue to develop-if the curriculum and teaching in law school are conceived and carried out with the intentional goal of promoting growth in expertise. Knowing the end is an essential step toward figuring out the best means for getting to it.”

Given the relatively small class sizes of clinic, it might be prohibitively expensive for a law school to provide every student with a deep enough clinical experience to be able to

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20 Carnegie, 116
confidently stamp “practice ready” on their foreheads. This paper grapples with these tensions.

Regardless of how law schools ultimately resolve these tensions, the most important thing is that law schools be able to articulate the justifications for the particular mix in length and types of clinical opportunities. While schools have made progress in providing students more experience and choices, “efforts to improve legal education have been more piecemeal than comprehensive. Few schools have made the overall practice and effects of their educational effort a subject of serious study. Too few have attempted to address these inadequacies on a systematic basis.”

II. Advantages of a Year-Long Clinic

A. Students Have a Longer Time and More Experience to Develop Legal Skills

Clinical scholars have anecdotally shared their sense that students cannot become proficient at the multi-faceted dimensions of practicing law in just one semester.

As Nancy Mourer laments, “[j]ust as their skills begin to emerge and their interest peaks, the semester winds down. Students who are not able to quickly master the file, absorb the case history, understand the client and grasp the necessary law and procedure, are too easily relegated to observer status.”

For those of us who have taught both, the difference in student growth is discernible. Having turned a one-semester

21 Carnegie, 190
22 James Stark, Preliminary Reflections on the Establishment of a Mediation Clinic, 2 CLINICAL L. REV. 457, 463 (Spring 1996) (noting that in his mediation clinic, “[e]ach semester, I have frontloaded more skills training into the first weeks of the semester. Nevertheless, students tell me that they barely begin to discover their sea legs . . . when the semester comes to an end.”); Hope Babcock, Environmental Justice Clinics: Visible Models of Justice, 14 STAN. ENVTL. L. J. 3, 39 (noting that structuring a one semester environmental clinic poses pedagogical challenges).
23 Nancy Maurer, Handling Big Cases in Law School Clinics, or Lessons from My Clinical Sabbatical, 9 CLINICAL L. R. 879, 892 (Spring 2003).
consumer and social security clinic into a year-long clinic, Phillip Shrag comments “[t]he result, predictably, was very satisfying to us and to our students, and entirely unsatisfactory to those on our waiting list. We served fewer students over the course of the year than [the one-semester clinic] would have served, but each student handles more than one case of each type and students could learn from experience (including mistakes) and observe their own improvement from one semester to the next.” For these reasons, several clinical scholars have recommended year-long clinics based on their own experience.

Adult learning theory, which provides a useful framework to assess and design clinical courses, confirms that there are legitimate reasons to extend the clinic experience beyond a semester. Adult learning theory draws primarily from clinical and social psychology to examine how adults learn. At its core, it is concerned with learning, instruction and transfer among adults. “Learning is a change in human disposition or capability, which persists over a period of time, and which is not simply ascribable to processes of growth.” By instruction, learning theorists generally mean “the deliberate

24 Schrag, supra note 4, at 198.
27 Adult learning theory draws on different strands of clinical psychology including behaviorism, cognitivism and constructivism. It is referred to as andragogy to distinguish it from pedagogy, which refers to helping children learn. The goal for instructional designers is not to identify which theory is correct, but rather to use learning theory to select the best approach in particular circumstances. Michael Hunter Schwartz, Teaching Law by Design: How Learning Theory and Instructional Design Can Inform and Reform Law Teaching, 38 San Diego L. Rev. 347, 366 (2001).
arrangement of learning conditions to promote the attainment of some intended goal.”

The third central aim in designing education based on learning theory is transfer, which means that learners can apply what was learned to a new situation or context.

There are two characteristics of adult learners with implications for the length of the clinic. First, adults have accumulated a range of experiences that they draw upon when learning new information. Second, in contrast to children’s subject-centered orientation to learning, adults are life-centered or problem-centered in their orientation to learning.

Adult learning theory, with its focus on experiential learning, supports the use of clinical methodology as an effective way to teach law students. One school of learning theorists emphasize the need for learners to be situated in real world settings in which they encounter the complex, multilayered, ill-structured, and ill-defined problems

29 Id. (quoting Marcy Perkins Driscoll, Psychology of Learning for Instruction 332 (1994)).
31 Knowles is credited with introducing in the United States the concept that adults and children learn differently and establishing andragagy as a distinct discipline. His early works identified four characteristics that distinguish adult learners, but added two additional characteristics in later work. Drawing on the work of clinical psychologists, Malcolm Knowles identifies six characteristics of adult learners that have related implications for the education of adults. First, adults “need to know” how learning will be conducted, what learning will occur and why learning is important before they can engage in learning. Second, adults view themselves as self-directing, in contrast with children who view themselves as wholly dependent on the instructor. Third, adults have accumulated a range of experiences that they draw upon when learning new information. Fourth, adults are most ready to learn a particular task if it is relevant to their social role and needed to cope with a real-life situation. Fifth, in contrast to children’s subject-centered orientation to learning, adults are life-centered or problem-centered in their orientation to learning. Sixth, adults are responsive to some external motivators (e.g. promotions and higher salaries), but the most powerful motivations are internal factors (job satisfaction, self-esteem, quality of life). Malcolm Knowles, et al., THE ADULT LEARNER: THE DEFINITIVE CLASSIC IN ADULT EDUCATION AND HUMAN RESOURCE DEVELOPMENT 183-184 (6th ed. 2005); Frank S. Bloch, The Andragogical Basis of Clinical Legal Education, 35 VAND. L. REV. 321, 333 (1982); Malcolm Knowles, THE MODERN PRACTICE OF ADULT EDUCATION 39-40 (1970).
32 Id. at 67: “Adults are motivated to learn to the extent that they perceive that learning will help them perform tasks or deal with problems that they confront in their life situations. Furthermore, they learn new knowledge, understandings, skills, values, and attitudes most effectively when they are presented in the context of application to real-life situations.” Adults seek to apply learning immediately, as opposed to children’s view that learning is for some future benefit. Id.
that arise in real life. Clinical education is experiential learning both in the sense that law students, especially second and third year law students, have life and law-related experiences that they bring to the clinic and the experience of actual representation in the clinic is a basis for learning. While law students are generally ready to learn about the law and thus open to all methods of instruction, “optimal compliance with the andragogically dictated sensitivity to the students’ readiness to learn is attained” when a law student is taught through representation of a real client in an active legal dispute. The “class material” for clinics is the client’s real world problems capitalizing on adult learners’ orientation to problem solving. The learning is immediate as students must learn to solve the problems or face real consequences for themselves and the client.

More time in a clinic allows students to accumulate more experience upon which to learn. Clinical education allows law students to relate their own experience, as well as the new experiences gained in the clinic, to whatever is being taught in the clinic. “Gary Bellow and Earl Johnson found that students handling cases in their clinic began to be far more interested in their own experiences as a source of theoretical generalization, and far more concerned with theory as a tool for defining and understanding experience, than they were when they first started.” In order for students to use their experiences in the clinic as a tool for learning, they must first accumulate a body of their own experience that they can apply to new situations and compare to faculty or course material’s

34 Schwartz, supra note 39, at 380.
36 Id. at 343.
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assertions about the situation. It is more likely that process will take place if students can take the clinic for a longer period.

B. A Longer Time in the Clinic May Promote Transfer

More time in the clinic may also be necessary for far transfer – the application of learning to new and varied situations that require problem-solving. Far transfer tasks would include applying general principles of lawyering skills such as interviewing, counseling and negotiation to concrete interpersonal interactions. To encode experience in students’ long-term memory in a way that will allow them to apply it in a variety of practice situations, among other things, students must have several opportunities to practice using the skills, along with meaningful feedback. “For example, if an instructor wants to develop students’ competency in determining what evidence to look for during discovery, students should have a number of opportunities to try their hand at this task.” In a one-semester course, where students handle only one or two cases, it is unlikely that students will get repeated opportunities to practice a skill, learn from the experience, and then get to practice the same skill repeatedly.

For far transfer, David Binder and Paul Bergman also recommend that: students encounter the same type of problem in different contexts; students’ practice experience is

38 Anthony Marini and Randy Genereux, The Challenge of Teaching for Transfer In Teaching for Transfer at 5-6 (Anne McKeough et al. eds 1995) Near transfer, in contrast, involves the application of learning to tasks that are relatively routine and repetitive. David A. Binder & Paul Bergman, Taking Lawyering Skills Training Seriously, 10 CLINICAL L. REV. 191, 198 (Fall 2003) (citing Ruth Clark & Merlin C. Wittrock, Psychological Principles of Training, in Training and Retraining at 77 (Sigmund Tobias & J.D. Fletcher eds., 2000)).
39 Id. at 201.
40 Id. at 201.
41 Id. at 201.
spread out over time; and students are given adequate time to learn. Over the course of an academic year, it is more likely that the same type of problem will arise in different ways. For example, students get multiple opportunities to do client interviews in different types of cases and with clients who have very different personalities or challenges. Each interview may present an opportunity to learn and practice time line questioning. “It is important to be realistic about how much time it takes to learn complex subject matter . . . In all domains of learning, the development of expertise occurs only with major investments of time.”

Given the complex nature of lawyering, a full academic year provides more time for students to acquire transferable skills.

A year-long clinic allows the sequencing of instruction in a way conducive to learning. Learning theory suggests “that instruction should be sequenced so that students can master early steps and easier problems early in instruction. Only later should students progress to more difficult steps and problems.” In order for learners to actively store learning in an organized, meaningful, and useable manner in long-term memory, psychologists recommend creating learning experiences to allow and encourage students to make connections between previously learned material and new material. Some learning theorists emphasize structuring, organizing and sequencing information to facilitate optimal processing. In the course of a year-long clinic, faculty have the flexibility to do just that. For example, sessions on interviewing might focus on basic interview techniques during the first semester, while, richer more nuanced learning about

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43 Id. at 201-202.
45 Schwartz, supra note 39, at 368.
46 National Research Council, supra note 66, at 239.
47 Id. at 96.
facts not being “black and white” may happen in the second semester. Or a student may have to develop a theory of the case for a written pleading or motion in the first semester, and then subsequently refine and use the case theory to prepare the case for trial. A year-long clinic offers greater opportunities to build interns’ knowledge incrementally.

C. More Time in the Clinic May Leave More Time for Reflection

A year-long clinic allows more time for reflection. “Adults’ capacity for self-direction is dependent on their ability to be self-aware and to reflect on the implications of their actions for future action.”

A key advantage – and central tenet – of learning in a clinical setting as opposed to a practice setting is the ability to engage in guided reflection with an expert on the lessons learned from the experience. This reflection takes many forms including journals, rounds, conversations in individual supervision and written self evaluations. Reflection is necessary because students’ understandings of how and why they took, or should take, certain actions are often latent. Unless students’ decision-making theories are made explicit, they are likely to repeat mistakes. In this way, students learn not only the lesson from the experience but an approach to future decisions. In a one-semester clinic, the pressure to accomplish more in the classroom and in individual supervision may leave less room for this critical reflection.

Learning theory also suggests that students simply cannot get everything we expect them to in the course of a semester. The research on cognitive load demonstrates the limits that a student can learn at any given time. In thinking specifically about that elusive but ever important skill of problem solving, Stefan Krieger observes “[g]iven the

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49 Brook Baker, Learning to Fish, Fishing to Learn: Guided Participation in the Interpersonal Ecology of Practice, 6 Clinical L. Rev. 1, 21-22 (Fall 1999).
50
cognitive demands of learning how to structure true practical knowledge with domain knowledge, it is questionable whether a student handling a particular client’s case have the ability – at least initially – to engage in problem solving the legal issues and, at the same time, reflect extensively on the non-legal context of the case."51 Among his suggestions on how to overcome this challenge is to extend the clinic term beyond a semester.52

D. Year-Long Clinics Allow Students to Work on More Complex Cases and Law Reform Projects

Having a year-long clinic makes it possible to work on more complex cases that typically span multiple years. “A good many lawyering abilities required in the context of small cases simply do not ‘scale up’ to work on larger problems involving multiple parties, many attorneys and other legal workers, and large quantities of information.”53 Scholars who favor hard cases argue that they offer more opportunities to explore strategies for dealing with the more complex, open ended problems students will encounter in practice.54 Students must find creative solutions to client problems and develop more sophisticated research skills.55 More complex cases tend to have significance beyond individual clients, making them an effective tool to benefit client communities and for students to learn about social justice issues. Thus, if our goal is to instill in students a moral and professional responsibility to ensure justice for all, then it is essential that there be some clinics where student can solve larger, structural problems.56

51 Stefan Krieger, Domain Knowledge and the Teaching of Creative Legal Problem Solving 202-203.
52 Id.
54 Katherine R. Kruse, Biting Off What They Can Chew: Strategies for Involving Students in Problem-Solving Beyond Individual Client Representation, 8 CLINICAL L. REV. 405, 410 (Spring 2002).
56 Kruse, supra note 76, at 433.
It is not feasible for students to work on these cases in one semester. For this reason, clinicians who favor working on these large cases recommend increasing the commitment to a full year.  

Even in clinics that do a mix of individual representation and law reform, it is helpful to have a second semester. Clinicians have noted that students’ ability to engage in meaningful big picture problem solving increases once they have some experience with direct representation. For example, Kate Kruse describes an experience where students were confused and frustrated when they started their projects right away without much individual casework under their belt. In contrast, in another academic year, when students engaged in their problem solving projects in the second semester, they were better equipped to handle the representation. In my own clinic where we do both individual representation and law reform work, the systemic work typically gains more traction in the second semester. It is difficult for students to master their individual representation, while at the same time identifying and strategizing about systemic issues. Many of our “know your rights” presentations to foster youth and social workers happen in the Spring semester. We consistently get feedback from these constituents about how valuable this work is in helping them understand the laws impacting foster children. Youth gain a better understanding of their rights and options, while social workers gain valuable information to advocate for the children under their supervision. Even when we do not carefully plan the timeline on policy projects, students organically raise systemic issues, make richer contributions to strategic discussion and produce better law reform work in the second semester.

57 Maurer, supra note 34, at 895.
58 Blasi, supra note 66, at 315; Kruse, supra note 76, at 437.
59 Kruse, supra note 76, at 437.
E. Year-Long Clinics Promote Strong Attorney-Client Relationships

Having the same student attorney for the year fosters strong attorney-client relationships. Responsibility to clients and accountability for one’s actions are at the center of clinical experience.\(^{60}\) Central to client-centeredness is the idea that “the lawyer must work with care to build a relationship with the client that will help sustain the client as he or she deals with questions, sometimes very painful questions, that must be resolved in handling the legal matter.”\(^{61}\) Lawyers work hard to earn their client’s trust and build connections with their clients. This is essential for the attorney to understand the client’s perspective, make the client feel comfortable enough to reveal information relevant to the case, influence the client’s choices, and develop a theory of the case that is faithful to the client’s own understanding of herself and the problem. Developing an attorney-client relationship is complicated, requiring attention and processing of important information about the client’s feelings, goals and values, in addition to facts relevant to the case.\(^{62}\) Dinerstein, Ellman, Gunning and Shalleck emphasize that building connections with the client is a continual process that “goes on at every stage and in every aspect of the lawyer’s interaction with the client.”\(^{63}\) It takes time, and genuine trust probably only develops after the client has an opportunity to see the attorney in action working on her behalf. Constant turnover of students makes it harder to win the client’s trust.\(^{64}\) Just as one intern is able to make a solid connection, the semester ends and the process must begin again with a new intern.

\(^{60}\) Carnegie Report, 121


\(^{62}\) Id. at 19, 23.

\(^{63}\) Robert Dinerstein et al., Connection, Capacity and Morality in Lawyer-Client Relationships: Dialogues and Commentary, 10 CLINICAL L. REV. 755, 778 (Spring 2004).

\(^{64}\) Hope Babcock, Environmental Justice Clinics: Visible Models of Justice, 14 STAN. ENVTL. L.J. 3, 42.
Client counseling -- helping clients to identify, evaluate and choose among competing choices for resolving problems -- typically does not happen in a single moment, but is a continual process during which the client and lawyer must constantly integrate new information and respond to the client’s evolving understanding.

Having the same student for the year leads to more efficient handling of the client’s case. At the beginning of the semester, students frequently report feeling lost and overwhelmed. It takes them several weeks to understand the facts and the legal context, and to feel comfortable doing even simple tasks like calling a social worker. Students typically begin by reviewing the client’s files. Their first interactions with the client often involve re-soliciting facts a previous intern already gathered. Although legal research may have been done by a prior intern, the new intern often has to repeat the same research to truly understand the law. Every time a case changes legal interns, the client loses precious time while that intern gets sufficiently up to speed to take the next step on the case.

F. Clinical Faculty May Have More Time for Scholarship, Other Courses and Contributions to the Law School and Community

The more measured pace of a full-year Clinic may reduce burnout among clinicians and allow clinical faculty to produce scholarship, participate in faculty governance and make other contributions to the law school and community. While finding time to write is a real challenge for those teaching a full-year clinic, it may be possible to regularly carve out small blocks of times to write. Chavkin, supra note 3, at 247. There may also be more opportunities to reflect on both clinical teaching and substantive issues, which may inspire an article. As clinical faculty gain equality within the legal academy, the less
frenzied pace of a full-year clinic may allow time to serve on faculty committees, participate in faculty talks and be a more engaged member of the faculty. Clinical faculty may also have more opportunities to be fully engaged in the advocacy community. My colleagues and I serve on multiple local, statewide and national committees and boards of organizations. With our academic background, we are able to bring a unique perspective to this work. In a one-semester clinic, clinicians may have less time to do this work, or the clinic caseload may not lend itself to wider community involvement.

G. Year-Long Clinics May Enhance Institutional Reputation

There are several other institutional reasons to offer some year-long clinical options. The bigger cases and projects that require a year-long commitment are typically more “glamorous” cases that garner headlines and public attention. In addition, providing such a critical service to the community enhances the law school’s reputation among the bar, bench and broader community.66

III. Advantages of One-Semester Clinics

A. More Students Can Take Clinics

The most compelling reason to offer clinics for one semester is to increase the number of students at a law school that can take clinics. For some clinicians, the imperative to offer clinical opportunities to as many students as possible cannot justify any perceived or real benefits that might come from offering longer clinics to fewer students. In order to competently handle cases and effectively supervise students, clinic classes must be small. The average class size for live-client clinics is 8 to 11 students,

66 Mauer, supra note 34, at 892.
while the most common student:faculty ratio is 8:1. By moving to a one-semester model, a clinic can double enrollment without investing additional resources. This is a trade off that cannot be taken lightly as schools grapple with curricular reform aimed at better preparing graduates for the practice of law.

The recent calls for legal reform require that schools think seriously, not just about broadening the array of clinical offerings, but making these courses available to all or a majority of the student population. The Carnegie Report identifies clinics as a “key setting” for integrating all three areas of expertise law schools must teach to adequately prepare students for practice: doctrinal reasoning, lawyering skills, and ethical engagement. According to the Carnegie Report, “[i]f one were to search for a single term to describe the ability [clinics] hone best, it is probably legal judgment.” The Carnegie Report also notes that the relative marginality of clinical training in law school is striking, when one considers the central role of supervised practice in the education of physicians, nurses, teachers and social workers. Carnegie points out that law schools provide extensive direct mentorship for the small number of academic stars who go on to become law teachers, but this kind of apprenticeship in the competencies that will be central to practice is unavailable to the vast majority of students who become future lawyers. As law schools think about the range of options that might use apprenticeship pedagogy, they must also think about making live-client clinics available to a broad

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68 Schrag, supra note 6, at 193.
69 Carnegie, 121
70 Carnegie, 24.
71 Carnegie, 95, 98
cross-section of the clinical population. Offering clinics for one semester may be one way to make that possible.

It is particularly appealing to consider making clinics available to all third-year law students. As Carnegie notes:

It is very important, then, to bring these experiences into the educational program in intentional ways. One way would be to give new emphasis to the third year as a kind of “capstone” opportunity for students to develop specialized knowledge, engage in advanced clinical training, and work with faculty and peers in serious, comprehensive reflection on their educational experience and their strategies for career and future professional growth.72

Several schools with mandatory clinical requirements offer exclusively or primarily one semester clinics. CUNY requires all third-year law students to take a clinic or 12 clinical credits for graduation. Of the six in-house clinics that satisfy the graduation requirement, [all] are offered for one semester and 12 credits. Some clinics offer students the option to enroll for a second semester for more credits. Similarly, at University of New Mexico Law School, where students must take 6 credits of clinic to graduate, all clinics are one semester to guarantee a slot for every student. To offer semester-long clinics to all students requires that law schools hire a significant number of full-time clinical faculty, with an even more substantial commitment to offer year-long clinics.73

B. One Semester Clinics Afford Students More Flexibility in Taking Other Classes or Getting Work Experience

Concentrating clinic in one semester leaves students flexibility to meet graduation requirements and pursue a range of other opportunities during their upper level years. Some students would not or cannot take a clinic that requires a year-

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72 Carnegie, 195
73 Erwin Chemerinsky, Why Not Clinical Education, 16 Clinical L. Rev. 35, 38 (Fall 2009).
Depending on the graduation requirements at a school, a year-long clinic may make it difficult or provide less flexibility for students to meet their graduation requirements. For example, until recently, students at University of Miami School of Law were required to take 36 out of 59 upper-level credits from a specified list of classes. Clinics and externships were not included on that list. While students could meet the requirements and take a clinic or externship, it required a significant amount of planning to ensure that a student could take the clinic for the entire year and get all of the other classes required.

In addition, students may not be able to work outside or engage in other law school activities. In Beyond the JD, students noted that job opportunities during the summer or academic year most prepared them for law practice. Students also value other law school activities such as moot court and trial competitions, law review and student leadership positions that may enhance their resumes. In schools that allow students to take multiple clinics, students may want to get different clinical experiences. This is particularly true if there is also a cap on the number of clinical credits.

**C. A More Intensive One Semester Clinic Allows Students to Focus Exclusively on Clinic**

If students in a one-semester clinic are allowed to take a full-time credit load (or a significant number of credits), students are able to focus more time on the clinic and are less likely to struggle with balancing all of their commitments. Many year-long clinics are offered for less than 12 credits each semester. This means that clinic students are taking other courses while working in the clinic. For example, my child advocacy clinic

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74 James Stark, *Preliminary Reflections on the Establishment of a Mediation Clinic*, 2 CLINICAL L. REV. 457, 463 (Spring 1996) (reporting that many students have said they would not have taken the mediation clinic if it were longer than one semester).

75 Selbin, The Clinic Effect at __.
is offered for 4 credits per semester and students are expected to spend around 10 hours per week on clinic cases in addition to approximately 3 hours in the classroom. Students must still take another 8 credits to have a full-time class schedule. As reported by students in response to my email questions, some students may feel as though the demands of clinic forces them to neglect other school work. At schools where students receive significantly more credits for a semester of clinic, they do not have to take (and balance) as many other classes. My students also suggested that some students would prefer to take Clinic for only one semester because of how demanding it is both emotionally and in terms of workload.

D. There is Less “Dead” Time in a One Semester Clinic

In response to my informal survey on the clinic list-serve, some clinicians who have taught in both one-semester and year-long clinics report that they prefer the faster pace of a one-semester clinic. As Michele Gilman of University of Baltimore School of Law wrote: “There is less wasted or down-time. Because we have to pack a lot of learning into 14 weeks, we hit the ground running and so do the students. In the two semester clinic, I felt some weeks were sort of lost as students dawdled over their work.”76

E. There is More Flexibility for Faculty to Take a Semester Off from Clinic to Write and Make Other Contributions to the Law School

A one-semester clinic affords the flexibility to switch faculty in and out of the clinic, or shut down the clinic altogether, in order to allow clinical faculty to teach other courses or write. At University of New Mexico law school, where clinics are mandatory

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76 Email dated December 9, 2010 from Michele Gilman on file with author.
and offered for one semester, clinical faculty rotate out of the clinic every few semesters to teach a doctrinal course while also focusing on scholarship.

F. Both Students and Faculty May Be Relieved to End the Experience After a Semester

Clinical faculty reported that it is refreshing to have students turn over at the end of the semester, particularly in those instances where a student is challenging to deal with or simply not working out in the Clinic. In the case of a student who is not having a positive clinic experience, it is probably beneficial to both the student and the faculty that the student is able to leave the clinic at the end of the semester.

IV. Considerations for Design and Pedagogy in a One Semester Clinic

In his seminal article, *Constructing a Clinic*, Phillip Shrag provides a comprehensive inventory of considerations in designing a live-client clinic. He addresses structural issues, case handling systems and the classroom component, providing examples from his experience redesigning the Center for Applied Legal Studies clinic at Georgetown. He identifies the duration of the clinic as a “real” question in clinic design, and recognizes that the tradeoffs stemming from the decision are “worthy of serious consideration” but does not go into depth about those considerations. This article is an effort to take that consideration seriously. In this section, I discuss how five aspects of clinic design might be implicated by the fact that the clinic lasts one semester. I discuss (1) clinic goals; (2) areas of clinic practice; (3) credits and hours; (4) beginning, transferring and closing; and (5) the classroom component. My goal is to address how to design a one-semester clinic to maximize student learning. I recognize that there is a chicken and egg problem with that approach because the different

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77 See generally Schrag, supra note 4.
considerations in clinic design are interrelated and clinic length may not (and perhaps should not) be the first decision. Nonetheless, by using time constraints as the framework, this analysis hopefully allows us to look at clinic design from a fresh perspective.

A. Goals

Clinical scholars have articulated many possible goals for live-client clinics. The American Bar Association Committee on the Future of the In-House Clinic identified nine that are commonly set for live-client clinics. First, clinics seek to develop modes of planning and analysis for dealing with unstructured situations. Second, clinics teach students lawyering skills such as interviewing and counseling, fact investigation, negotiation and litigation advocacy. Third, clinics give students tools to learn from experience. Fourth, clinics attempt to develop enhanced ethical and professional responsibility in students. Fifth, clinics aim to assist students in analyzing and defining their role as lawyers. Sixth, clinicians seek to teach students how to collaborate effectively. Seventh, clinicians attempt to impart the obligation of service for clients and

78 David F. Chavkin, *Training the Ed Sparers of Tomorrow: Integrating Health Law Theory and Practice*, 60 BROOK. L. REV. 303, 313-316 (1994) (noting that the following six goals appear to be the most common: (1) develop reflective practitioners; (2) teach lawyering skills; (3) teach substantive law in context; (4) develop enhanced professional responsibility; (5) develop student personas as lawyers; and (6) provide legal services to unrepresented parties); *Constructing a Clinic*, 3 Clinical L. Rev. 175, ___ (Fall 1996) (identifying the following 15 goals: (1) responsibility; (2) doctrine and institutions; (3) service; (4) problem-solving; (5) collaboration; (6) Cross-cultural awareness; (7) the role of emotions; (8) coping with facts; (9) values; (10) ethics; (11) creativity; (12) authority; (13) learning to learn; (14) traditional skills; and (15) students’ goals.


80 The McCrate report identified ten skills central to the legal profession: problem solving, legal analysis and reasoning, legal research, factual investigation, communication, counseling, negotiation, litigation and alternative dispute resolution procedures, organization and management of legal work and recognizing and resolving ethical dilemmas.
teach about the impact of the legal system on poor people.\textsuperscript{81} Eighth, clinics analyze substantive law and examine the impact of doctrine and legal institutions in individual lives. Ninth, clinics critique the capacities and limitations of lawyers and the legal system.

As a practical matter, it is impossible to accomplish all of these goals in one semester. As Mark Aaronson notes:

Within the time frame of a semester or even a year, one has to pick and choose selectively the kinds of inquiries to be raised with students if an objective is to maintain their attention. Moreover, as a responsible attorney, a clinical teacher has to give priority to the interests of the clients over student learning to the extent that the two may conflict. The bottom line is that live client clinical settings, student educational goals often have to be pared back. The depth of exploration for which one might hope may not be feasible.\textsuperscript{82}

By trying to do too much, we decrease the likelihood that students will become proficient in any single goal.\textsuperscript{83} Research on cognitive functioning shows that student have cognitive overload if we try to teach too many things at the same time. Research also suggests that transfer – the ability to use information learned in one context in another context – is diminished in a setting where too little time is devoted to too many tasks.\textsuperscript{84}

\[T\]he repeated opportunities for practice in varied contexts that transfer seems to require and the complexity of such lawyering tasks as counseling, negotiation, mediation and advocacy means that clinicians are unlikely to have nearly enough teaching time to promote the transfer of all the strategies and skills relating to such tasks.\textsuperscript{85}

\textsuperscript{81} John C. Dubin, \textit{Clinical Design for Social Justice Imperatives}, 51 SMU L. Rev. 1461, 1483 (1998) (arguing that social justice should be the central mission of clinical education); see also Quigley, supra note 61.
\textsuperscript{82} Mark Neal Aaronson, \textit{We ask you to Consider: Learning about Practical Judgment in Lawyering}, 4 Clinical L. Rev. 247, 286 (1998).
\textsuperscript{83} Krieger, supra note 73, at 198 (suggests Mark Aronson’s focus on four organizing themes in his clinic, in addition to traditional lawyering skills, is too much for one semester).
\textsuperscript{84} Binder & Bergman, supra note 62, at 205.
\textsuperscript{85} \textit{Id.}
Students may end up learning “a little about a lot” of the things we want them to learn, as opposed to gaining a deeper experience that is transferrable once they begin practice. Accordingly, it is important that clinicians prioritize the learning goals in a one-semester clinic.

Roy Stuckey suggests that clinicians should focus on those educational goals that can be achieved more effectively and efficiently through experiential education than through other methods of instruction. While he contends that all clinics should do this, regardless of their duration, his proposal suggests a useful way to prioritize in a one-semester clinic. Stuckey identifies the four goals best taught through experiential education as helping students to: (1) adjust to their roles as professionals; (2) become better legal problem-solvers; (3) develop interpersonal and professional skills; and (4) learn how to learn from experience. He notes that the key feature distinguishing live-client clinics from other experiential opportunities is the students’ responsibility to clients and accountability for their actions. Because of the limited time available in a semester, it makes sense to focus on the lessons that can be uniquely taught in a live-client clinic. Some of the other goals often identified by clinicians are also taught in other types of courses in the curriculum. For example, students may learn substantive law relevant to the clinic’s practice area in a doctrinal course or technical aspects of trial skills in a simulation based course. To carry out our representation in a live-client clinic, we undoubtedly have to teach students other important topics such as the law, office and court procedures, and specific lawyering skills needed for the type of cases being

86 Roy Stuckey, Teaching with Purpose: Defining and Achieving Desired Outcomes in Clinical Law Courses, 13 CLINICAL L. REV. 807, 809 (Spring 2007).
87 Id. at 815-816.
88 Id. at 832.
handled. These could, however, be taught as efficiently as possible through use of reference material, student manuals and well-organized office systems. 89 “If we can help students process the legal work efficiently, we will have more time to help them learn the really important lessons that supervised practice teach.” 90

Clinicians may choose to prioritize in other ways. For example, many clinicians argue that the social justice mission of clinics should always be a primary focus. 91 It is unclear whether social justice missions can fully be achieved in one semester. Binder and Bergman suggest that one way to prioritize might be to ask questions such as “What are the important and complex problems that commonly confront lawyers as to which my students are unlikely to receive adequate training once they enter law practice? There is no “right” answer as to how to prioritize. The point is that clinicians should recognize that we cannot do it all in one semester, and be self-conscious about our objectives.

Explaining our goals to students and allowing them to identify personal goals will increase the likelihood that they achieve those goals by the end of the semester. 92 Adult learning theory teaches that students generally learn better when they understand what they are supposed to be learning and how it will help them achieve their personal goals. 93 “Rather than hiding the ball, telling students what the objectives of the course are and how the assignment at hand furthers those objectives allows them to recognize that they are not wasting their time or energy, but are engaging in exactly what they enrolled in

89 Id.
90 Id.
91 See Dubin, supra note 87 (arguing that social justice should be the primary mission of clinical legal education).
law school to do – to learn the skills and knowledge necessary to enter the legal profession.94 Once students understand the relevance of a task, they are more likely to fully engage in the assignment.95 Because adults view themselves as self-determining, it is also important to allow clinic students to select the professional goals they most want to accomplish. The professor should then select cases and construct the clinical experience to emphasize the goals chosen by the student. By clearly articulating goals and allowing students to prioritize those goals most relevant to them, we can help students to learn more in the course of a semester.

B. Case Selection

In designing a one-semester clinic, there are three questions related to the practice area. The first has to do with the size and complexity of the cases. The second related question is the duration of the cases. The third is whether to specialize or have a more general practice area.96 There is no right way to resolve any of these questions, but in designing a clinic, faculty should be mindful that the type of cases worked on in the clinic will significantly impact the kind of learning experience students have in a semester.

During a semester, students should have the opportunity to work on a matter from beginning to end.97 Domestic violence and landlord tenant are prototypical cases that can be completed in a semester, but there are a range of other matters that may also be appropriate.98 Students not only get to experience every phase of the legal process, from the initial interview to the final disposition, but they can reflect on how choices they made during the process impacted their learning.

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95 *Id.* at 143.
96 Reingold, supra note 77, at 546 (noting that the choice of a specialty clinic versus a general clinic is an important one because a clinic’s structure will determine what values and skills it will teach).
97 *Id.* at 548-549.
early in the case impacted the process and outcome. Feedback, which can be provided in many forms, is a critical element in adult learning. Clinical supervisors provide immediate feedback about every performance, but students also get feedback in other important ways. For example, when conducting research, students “either find relevant information or they find themselves struggling with dead ends and detours. The results cause them to make adjustments in their strategies and learning occurs.”

99 In a clinical setting, one of the most meaningful opportunities for feedback arises from the students’ reflection on how well they achieved their clients’ goals. A student who only conducts fact investigation during a semester will certainly learn what that task entails. The supervisor might, for example, suggest that the student explore more avenues to uncover facts. If that student also has the opportunity to negotiate a settlement or conduct a trial, a lesson about how the students’ fact investigation may have unwittingly narrowed the facts becomes that much more palpable.

Another reason that a one-semester clinic should allow students to work on a matter from start to finish is to promote student autonomy. Most clinicians firmly believe that allowing students to assume full responsibility for all decisions in their cases is central to effective clinical education. The primary role assumed by the student, capitalizes on the adult learner’s need for self-direction and ensures that law students are responsible for planning and executing their clinical experience. 100 Students are forced to develop the attorney-client relationship themselves, thereby figuring out how they will respond to the multitude of emotional and interpersonal complexities inherent in that relationship. Having cases extend over multiple semesters undermines student autonomy.

99 Anderson, supra note 112, at 145.  
New students inherit and are either influenced by or forced to adopt client information and legal strategies developed by predecessors. In addition, continuity of representation is necessarily provided by faculty who supervise the case during breaks and provide background information to get new students up to speed. Some argue that this gives the faculty member too active a role with the client and in case strategy.

The cases selected for a one-semester clinic should not be too complex for a student to handle all aspects of the case. Proponents of small cases in live-client clinics argue that they give students the opportunity to assume full responsibility for every aspect of the case. These arguments are particularly persuasive when the clinic term is limited to one semester. As already discussed, the argument is premised on the “belie[f] that student ownership is a critical element of effective clinical education and that student ownership is not possible in big cases that extend over protracted periods.” In more complex cases, such as class actions or other litigation seeking systemic change, students may work on discrete parts of a case that may span multiple years and involve successive teams of students. Although students get the opportunity to do a range of lawyering tasks, the high stakes and multiple co-counsel that often accompany these cases may create pressure for an experienced lawyer to do critical performance tasks (argument, negotiation, trial), rather than the students. For students who have never practiced before, smaller

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101 Chavkin, supra note 3, at 263; see n. 57.
102 Id. at 262.
103 Id.
104 See Reingold, supra note 77, at 566-567. The author defines hard cases as those that (1) pose a risk of taxing the program’s resources; (2) may be controversial either in the public eye or to some constituent group of the law school; (3) is likely to last longer or have significance beyond the students; (4) presents legal issues of a scope, scale, character or complexity not ordinarily handled by the clinic. He describes one “hard” prisoner’s rights case in which the clinic spent 400 billable hours of faculty supervisory time, more than that in student time, and the case spanned more than four semesters and two summers with successive teams of students.
105 Id. at 569.
cases provide challenging yet manageable problems, as well as their first sense of personal and professional responsibility. At the same time, cases should not be so routine that they do not require mutual engagement by professor and student.

Small cases, usually involving an individual client for whom the outcome has enormous personal significance, are a particularly valuable vehicle for students to acquire the skills associated with developing an attorney-client relationship. As discussed, infra, if we seek to prioritize those learning goals uniquely suited to a live-client clinic, it makes sense to emphasize the opportunities for client interaction as these are unlikely to be available elsewhere in the curriculum. Small cases are also appropriate in one-semester clinics because clinical faculty are more likely to understand the issues and range of possible solutions, thus providing more effective supervision. An attempt to do larger, more complex cases in one semester means that the supervisor may have to devote precious time to understanding and researching the issues themselves.

Another important consideration in selecting cases is whether the clinic should focus on one practice area or serve a wide range of client needs. If you have only one semester to accomplish a myriad of objectives, there are compelling reasons to specialize. Specialization increases the likelihood that students will become knowledgeable about a practice area by the end of the course. Because practice area clinics require knowledge

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107 Bloch, supra note 43, at 353.
108 Weinstein, supra note 124, at 598.
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110 Weinstein, supra note 124, at 577.
111 Weinstein, supra note 124, at 583-584: “Much as we work to make our clients stand out as individuals with particular stories to tell, our cases move through the system in a predictable way, presenting different versions of a relatively limited set of substantive and procedural problems. That relatively small universe of problems enables most of my students to learn enough in the course of one semester clinic to begin to develop real expertise in this corner of criminal defense work.”
of a clearly defined set of substantive and procedural rules, the experience is more predictable and students gain deeper understanding of the relevant law. A clinical supervisor, who is herself an expert in the area, can provide more helpful guidance.\textsuperscript{112}

Learning through case rounds and class discussion is also enhanced as other students in the class are themselves becoming experts in the field. If students have more than one case of the same type, they are able to both learn the law and hone their legal skills through repetition. This expertise empowers students by giving them concrete experience on what becoming an expert requires and feels like. In addition, by making it easier to master the relevant substantive law, students can focus on other aspects of the representation thereby maximizing those educational goals that can only be learned through a real-life experience.\textsuperscript{113}

It is important, however, to understand what is sacrificed when we too narrowly confine the scope of our work. Subject matter specialization conflicts with the holistic approach that is in the current configuration of my clinic. “Holistic lawyering, or client-centered lawyering, focuses on the goal of improving the overall legal health of the client with a focus on the expertise that a lawyer can bring to the table.”\textsuperscript{114} Students working in a narrow subject matter clinic may fail to see the client as a whole person with a range of legal and other problems that are inextricably linked to the problem that is the subject of the representation.\textsuperscript{115} David Chavkin critiques specialty clinics:

\begin{quote}
Subject-matter clinics essentially stamp on the client’s forehead the words ‘disability law case’ or ‘family law case.’ Instead of recognizing that the problem
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\textsuperscript{112} Schrag, supra note 4, at 191.
\textsuperscript{113} Reingold, supra note 77, at 545; see fn. 2.
\textsuperscript{114} Chavkin, supra note 3, at 267-268.
that draws the client to the clinic needs to be addressed in a broader context, our clinic structures often prevent students from considering the broader context in fashioning a solution.\footnote{116 Chavkin, supra note 3, at 268.}

By contrast, general practice clinics and clinics serving specific populations provide at least the opportunity to reinforce the client-centered lawyering that has become a central tenet of clinical legal education.\footnote{117 JoNel Newman, \textit{Re-Conceptualizing Poverty Law Clinical Curriculum and Legal Services Practice: The Need for Generalists}, 34 FORDHAM URB. L.J. 1303, 1318 (2007); Chavkin, supra note 3, at 268: Chavkin uses client-centered representation to mean, recognizing the uniqueness of the individual being represented and understanding that the legal problems for which the individual is seeking assistance occur within a constellation of unique goals and needs. In this setting, the goal of client-centered representation is to maximize the ability of the client to make informed decisions among a range of options and to develop a theory of the client designed to maximize the likelihood (but not guarantee) that the client’s goals can be achieved. I use the term theory of the client rather than theory of the case to remind students that clients are not cases but rather unique individuals with a range of legal and non-legal problems, needs and goals.} In addition, if a clinic fails to address a client’s problem holistically, the poor and marginalized clients served by the clinic are unlikely to get legal services elsewhere.\footnote{118 Antoinette Sedillo Lopez argues that the social justice mission of law clinics is undermined by specialization.\footnote{119 She contends it is the understanding of clients’ lives and the struggle to respond that helps students grasp the inequities of the legal system. Students may also develop a more open-minded and creative approach to law by attempting to address a wide range of client problems.\footnote{120 Also, the challenge and variety of a general practice clinic may be more interesting to teachers and students alike.}}

Antoinette Sedillo Lopez argues that the social justice mission of law clinics is undermined by specialization.\footnote{119} She contends it is the understanding of clients’ lives and the struggle to respond that helps students grasp the inequities of the legal system. Students may also develop a more open-minded and creative approach to law by attempting to address a wide range of client problems.\footnote{120}

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\begin{footnotes}
\item[116] Chavkin, supra note 3, at 268.
\item[117] JoNel Newman, \textit{Re-Conceptualizing Poverty Law Clinical Curriculum and Legal Services Practice: The Need for Generalists}, 34 FORDHAM URB. L.J. 1303, 1318 (2007); Chavkin, supra note 3, at 268: Chavkin uses client-centered representation to mean, recognizing the uniqueness of the individual being represented and understanding that the legal problems for which the individual is seeking assistance occur within a constellation of unique goals and needs. In this setting, the goal of client-centered representation is to maximize the ability of the client to make informed decisions among a range of options and to develop a theory of the client designed to maximize the likelihood (but not guarantee) that the client’s goals can be achieved. I use the term theory of the client rather than theory of the case to remind students that clients are not cases but rather unique individuals with a range of legal and non-legal problems, needs and goals.
\item[119] In addition to leaving certain legal needs unmet, she argues:
\item[120] Reingold, supra note 77, at 545-546.
\end{footnotes}
If a clinic chooses to specialize by practice area, then special care should be taken to ensure that interviewing and counseling is still done in a truly client-centered manner. Moreover, students should identify all of the clients’ legal needs and, if necessary, refer the client elsewhere for services. Because poor and marginalized clients are often unable to access legal services, the clinic should take special measures to ensure that the client actually receives the needed services. Ideally, the issue should be handled and given priority at another clinic within the law school to ensure seamless and coordinated provision of services. If that is not possible, then clinics should develop working relationships with other legal services providers and community organizations, and help clients short-circuit the sometimes byzantine intake process. Finally, where social justice is a central mission, attention must be paid to explicitly teaching students to see the interconnectedness and complexity of the problems faced by the poor.

C. Credits, Caseload and Pre- or Co-Requisites

If students are taking the clinic for only one semester, there should be enough credits and required hours of work for students to immerse themselves in practice. Students will get a chance to do (and learn) more in a shorter space of time. Clinics vary widely in terms of the number of credit hours. The most common number of credits for the field work component of the clinic is 3 credits, while the most common credit allotment for seminar component is 1 credit. The University of Michigan Law School Child Advocacy Clinic, which has served as a model for child advocacy clinics across the

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121 Chavkin, supra note 3, at 268.
122 Newman, supra note 135, at 1312.
country, is a one semester course for seven academic credits. One clinician describes the challenges of trying to accomplish all of her goals in a one-semester six-credit federal legislation clinic. The subsequent increase to 8 and then 10 credits “relie[d] some of the academic stress” by providing more time for coverage of material in clinic classes and for students to their clinic work. In determining how many hours students must work to earn a specific number of credits, a common formula used by clinicians, based on a Georgetown memo, is 1 credit for 3.5 hours of structured interaction time.

Careful attention should also be paid to the student case load (both in terms of number and case type) to ensure that students get the most out of their time in the clinic. A typical semester caseload for a team of two students in the University of Michigan child advocacy clinic includes one termination of parental rights case in which the students represent the agency, one case in which students represent parents accused of child maltreatment, and three cases in which students represents children in child protection or guardianship matters.

Many clinical programs require simulation, substantive or other courses in advance of taking a clinic, or co-requisites. This sequencing may allow students to have some foundation in substantive law, trial skills, evidence, professional responsibility or some other course deemed important, while freeing up time in the clinic that may other wise need to be devoted to these topics. The downside is that the more sequencing and co-requisites required, the more likely students will take clinic later in law school.

126 Id. at 823.
127 Duquette, supra note 142, at 8.
128 Engler, supra note 6, at 154.
D. Beginning and Transferring Cases

To increase the likelihood that students can work on particular aspects of a case, clinicians may consider taking cases at a specific procedural phase. While this may not be at the very beginning of the case, it may be at a point that increases the likelihood a student will get certain experiences in a semester. For example, our clinic is sometimes asked to handle Medicaid waiver cases from the initial application. While there are advantages to having a lawyer involved from the beginning, this initial application is essentially a paper process after which we wait anywhere from 30-60 days for a response. This may provide limited opportunities for students to learn legal skills. By accepting these appeals after the application is denied, it increases the likelihood that students will conduct fact investigation and a negotiation or trial before the end of the semester. Even if cases are carefully selected to span the semester, it is inevitable that some cases will not actually be completed by the end of the semester. Transfer issues arise every time a case extends beyond the clinic term, but may be more disruptive if the term is one-semester because there are twice as many case handlers and points for disruption. Clinicians should try as much as possible to ensure continuity for the client and case, while ensuring that each new student has an opportunity to significantly advance the case and develop a meaningful relationship with the client. While documentation is always important, there is a heightened need for strict record keeping throughout the semester. This can be enforced through periodic audits of clinic files.

During the transfer, it important that there be a thorough transfer memo that documents everything that happened in the case and provides a strategic plan for what

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129 Schrag, supra note 4, at 235.  
130 Babcock, supra note 85, at 40.
should happen next. At the same time, clinics should be mindful of students passing along the type of information that is likely to influence the new students’ opportunity to build an independent relationship with the client. While it is important to provide an assessment of the relationship with the client, a student should not include the type of information that may unfairly influence the new student’s attorney-client relationship. One helpful way to allow students to make this judgment might be to remind them that the client is always entitled to read their file, so the student should never include anything they would not want a client to read. Cahn and Schneider recommend conveying “interpersonal and idiosyncratic details of the case which might be inappropriate for a public file memo, to a separate memo to the supervisor. The supervisor can then make the decision whether to share the information with the new student.

Transfer issues also arise when dealing with law reform projects. To deal with the challenge of turnover when working on policy projects, it is important to create “feedback loops” so that a new set of students can get feedback from the community or client base to help evaluate the strategy. In addition, there must be a structure for creating institutional memory so that the lessons from one semester will be passed along to the next set of students. Kate Kruse suggests compartmentalization where the problem is broken down into finite tasks that students can accomplish in the course of a semester. Each group of clinic students is responsible for completing a discrete phase of a longer project. At the same time, Kruse cautions that to make the projects

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132 Id. at 392.
133 Kruse, supra note 76, at 432.
134 Id.
135 Id. at 435-436.
meaningful, students “must understand how their individual work fits into the larger project, and have a stake in how the goals of the larger project evolve over time.”  

Each set of students should have a clear sense of the goals, the process that came before and input in the project after they leave.

Faculty and former clinic students may be the constant in the attorney-client relationship. At the outset, it is important to explain to the client how the clinic functions and that there will be a new intern each semester. While acknowledging that children would benefit from having the same attorney throughout the duration of a dependency case, Duquette believes “the careful and thorough representation the clinic is able to provide outweighs any possible detriment to the child.” Continuity is provided because the same faculty member generally follows a case from beginning to end, and great care is taken to transfer cases from one student team to the next. Continuity can also be achieved by staggering student enrollment so that students who have already worked on the project for a semester can work with new students, or by having students who already took the clinic return as mentors or project leaders.

E. Class Room Component

An orientation or “boot camp” may be the best way to get an early, running start in a one semester clinic. Some clinicians chose to front load substantive law and procedure in that time, while others do a mix of substance and skills. Either option allows students to get some grounding in the clinic’s practice area before starting actual

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136 *Id.*
137 Duquette, supra note 142, at 15.
138 Babcock, supra note 85, at 40.
139 Duquette, supra note 142, at 22 (class meets three times per week at the beginning of the semester, and twice during later weeks; students are not assigned cases during the first week of the semester).
140 Feldblum, supra note 143, at 825 (The federal legislative clinic has a “boot camp” over three afternoons at the beginning of the semester to learn the basics of congressional process and procedure).
client work. Frontloading can also be done after the semester begins by holding more seminar classes in the beginning of the semester than later in the semester.

Planning the syllabus for a one-semester class requires difficult choices about what to include. The topics chosen for seminar should be dictated by the goals faculty set for the course. Every class should further one of the learning goals for the course; otherwise, the topic may be more appropriately addressed in individual supervision or through reference material. The syllabus should also be dynamic, responding to what is happening in actual cases so that students can make connections between their work and class discussion.\footnote{Kimberly E. O’Leary, Clinical Law Offices and Local Social Justice Strategies: Case Selection and Quality Assessment as an Integral Part of the Social Justice Agenda of Clinics, 11 CLINICAL L. REV. 335, 365 (2005) (describing how team teaching allows for changes in the syllabus when case priorities change).} With a year-long clinic, although we make some changes, most times we follow the syllabus. We feel comfortable that even if an area is not directly relevant to a student when it is taught, the student more than likely will have need for the topic in the course of the year. The readings provide reference that the students can refer back to when they actually encounter the issue in their cases. We do not have that luxury in a one-semester clinic and should, therefore, do our best to make classroom classes directly relevant to our learning goals and students’ actual case work.

Another way to meet learning goals and provide consistency in what students are learning in the limited time span of the semester is to create exercises for the entire class. One of the advantages of a year-long clinic is that students may get to do more lawyering tasks and, even when students are working on different types of cases, they have all had certain lawyering experiences by the end of the year. Assigning exercises, based on a clinic case, ensures that students have consistent opportunities to learn certain aspects of
lawyering. For example, clinicians can assign memos on generic legal issues or, have all students in the class do a mock interview, or draft a complaint or motion.  

IV. Reflections on a One-Semester Experiment in a Child Advocacy Clinic

A. The University of Miami School of Law Children & Youth Law Clinic

Established in 1995, the Children & Youth Law Clinic is a live-client clinic at University of Miami that has traditionally operated as a year-long clinic. The Clinic primarily represents children in foster care and young adults who recently aged out of the foster care system. We occasionally, but increasingly, handle cases unrelated to foster care involving custody of minors or public benefits for teenagers with disabilities. The Clinic has six goals that are included in the Clinic’s handbook and discussed with students at the beginning of the academic year. They are to: (1) train students in fundamental lawyering skills; (2) instill in students high standards of ethics and professional responsibility; (3) provide high quality, professional and zealous representation to clients; (4) foster students’ ability to engage in self-reflection and

142 Babcock, supra note 85, at 40.
143 Over the past few years, these two categories of cases have been hard to turn down because, while they technically fall outside our child welfare mission, they are within our expertise, involve vulnerable children who “but for the grace of God” would be in foster care, and do not neatly fall within the service priorities of other legal services providers. The custody cases almost never involve a custody dispute between two parents, although we do handle custody cases on behalf of former foster youth. Rather, the “non-foster care” custody cases typically involve seeking legal recognition for a person who is already caring for a child because the biological parents are unable or unwilling to do so. In Florida, there are several options by which a caregiver can become a legal custodian. A child’s relatives are eligible for a specialized type of custody called Custody by a Relative Caregiver. FLA STAT. § 751.01 (1) (2009). For non-relatives, guardianship either through the probate or juvenile court using different procedures may be available. FLA. STAT. § 744.3021 (2009). Adoption is the most permanent option. FLA. STAT. § 63.032(2) (2009). Legal custody allows the caregiver to enroll the child in school, consent to medical treatment, obtain school and medical records and obtain public benefits, without which the family risks intervention by the child welfare system. The young people with disabilities on the verge of turning 18 resemble our clients aging out of foster care — they live in the same poor neighborhoods, attend the same failing schools, and their medical and mental health needs have long been neglected. Although they may live with relatives, these clients typically facing the same level of instability as our foster care clients upon reaching 18.
introspective professional development; (5) enhance students’ understanding of how legal doctrine and institutions operate in individual cases; and (6) emphasize the value of public service.

Holistic representation, client-centeredness and therapeutic jurisprudence have been central philosophies since the Clinic’s inception. Holistic representation requires lawyers to see their client as a whole person, rather than simply a legal issue. It is premised on the idea that when we understand the full context of our clients’ experiences, we are better able to achieve the best outcomes and contribute to the clients’ overall well-being. Under this model, the lawyer seeks to understand and address all of the client’s legal, as well as non-legal, needs. What this means for our practice is that we try to

144 Therapeutic jurisprudence is a theoretical model that seeks to reduce the negative consequences of law on the psychological functioning and emotional well-being of clients. LAW IN A THERAPEUTIC KEY: DEVELOPMENTS IN THERAPEUTIC JURISPRUDENCE ___ (David B. Wexler & Bruce J. Winnick, eds., 1996). The model contemplates that lawyers provide sensitive counseling and prevent and solve legal problems using creativity and alternative dispute resolution techniques. A client-centered approach to lawyering puts clients in the best position to make important decisions by looking at problems from clients’ perspectives, of seeing problems’ diverse natures, and of making clients true partners in the resolution of their problems. DAVID A. BINDER ET AL., LAWYERS AS COUNSELORS: A CLIENT-CENTERED APPROACH 3 (Thomson West 2004) (1991). In his article George’s Story: Voice and Transformation Through the Teaching and Practice of Therapeutic Jurisprudence in a Law School Child Advocacy Clinic (hereinafter “George’s Story”), Bernie Perlmutter’s account of the Clinic’s advocacy on behalf of George is typical of many of our clients. When George was 15, the Clinic was appointed as his attorney ad litem by the Judge in his dependency case. Over the next three years, the Clinic motioned for George’s desired permanency goal; conducted legal check-ups and appeared at the semi-annual judicial reviews required for all children in state care; filed a contempt motion for DCF’s failure to deliver services in the court-approved case plan; participated in treatment team meetings at the psychiatric facility where George was placed; advocated in court for a shortened stay and humane treatment in the psychiatric facility; petitioned for George’s legal emancipation and early release from DCF custody; did special education advocacy; and compelled the DCF to pay for George (and other high school graduates in foster care) to participate in graduation ceremonies. Bernard P. Perlmutter, George’s Story: Voice and Transformation Through the Teaching and Practice of Therapeutic Jurisprudence in a Law School Child Advocacy Clinic, 17 ST. THOMAS L. REV. 561, 588 (2005). As Bernie writes, “our clinic was more than just [George’s] law enforcer. The Clinic was his therapeutic agent, facilitating his ability to be heard by decision-makers with regard to his permanency and independent living needs.” Perlmutter, George’s Story, supra note __, at 593-594. The Clinic also worked hard to ensure that George had the information to make important decisions and empowered him to make those decisions based on his own values. Id. Our work on behalf of George typifies our aspirations with every client.

address, with few exceptions, all of the civil legal problems faced by our clients.\textsuperscript{146} For the clients under 18, advocacy in dependency cases is the common element of our work, but we may also do special education, health and disability administrative appeals and specialized immigration.\textsuperscript{147} For those over age 18, the most common case we handle is administrative appeals for independent living benefits,\textsuperscript{148} but we may also handle other public benefits cases, landlords-tenant or custody disputes for former foster youth.

Another important feature of the Clinic is its law reform advocacy. In its early years, the Clinic engaged in a multi-year litigation that culminated in the Florida Supreme Court issuing a procedural rule requiring pre-commitment hearings and appointment of counsel for foster children facing involuntary commitment to psychiatric facilities.\textsuperscript{149} It has participated in other systemic litigation and been at the forefront of legislative advocacy relevant to youth in the foster care system. Clinic students routinely write amicus briefs, conduct “know your rights” presentations for foster youth and social workers, and engage in local and statewide advocacy to change policies. Much of this systemic work comes to fruition in the second semester, after students become familiar

\textsuperscript{146} We do not handle criminal matters, as our clients are appointed (and very ably represented by) our local public defender office. We may, however, assist the public defender’s office in marshalling mitigating evidence from our client’s extensive foster care history, handle expungement of criminal records, or occasionally represent an adult client at arraignment on minor misdemeanor charges. In addition, we do not handle personal injury claims, but may assist the client in gathering facts and refer the case to a member of the private bar.

\textsuperscript{147} Our immigration work is limited to applications for Specialized Immigration Juvenile Petitions, available to unaccompanied minors who were abused, abandoned and neglected and Naturalization Applications.

\textsuperscript{148} The John H. Chafee Foster Care Independence Act is a federal law that authorizes funding to states to provide services such as education, employment, financial management, housing, emotional support ad connections to caring adults for young adults age 18-21 who age out of foster care. 42 U.S.C. § 677(a) (2003). To implement Chafee, Florida developed a program that provides stipends and services to young adults who turn 18 while in state custody. Fla. Stat. § 409.1451. The Road to Independence program provides a stipend that equals a 40-hour-a-week federal minimum wage job to to young adults enrolled in school full-time, while the Aftercare and Transitional funds program provides emergency and short-term support to students based on other eligibility criteria.

\textsuperscript{149} M.W. v. Davis, 756 So. 2d 90 (Fla. 2000); In re Amendment to Fla. R. Juv. P. 8.350, 842 So. 2d 763, 768 (Fla. 2003).
with the issues in their individual cases and are better able to step back and take a look at the big picture. For example, this year, several students who conducted Medicaid waiver administrative hearings conducted trainings for foster care social workers during the second semester.

The classroom component of the clinic, which meets twice a week, reinforces the social justice mission and central philosophies. In the fall, the class covers substantive law, lawyering skills and ethics. Given the diverse substantive areas in which students practice, the substantive part of the class is intended to give students a general overview of the more common practice areas. As such, we always cover federal and state child welfare laws, independent living, special education and health and mental health. We may also cover other areas, such as immigration, SSI or adoption, depending on the number of active cases in an area during a given semester. The skills classes cover case planning, interviewing and counseling, fact investigation, administrative hearing advocacy, trial advocacy, legal research, legal writing and cultural competence. There are also classes on ethics and clinic students are required to take ethics as a co-requisite to the clinic. We also sometimes devote an entire class to holistic representation and therapeutic jurisprudence. We integrate structured case rounds into many of the classes. For example, a class on ethical responsibilities of the child’s lawyer may include discussion from actual cases about ethical issues with which students are grappling. A portion of the class on substantive law relating to independent living benefits for children aging out of the foster care system includes student discussion of the relevant legal issues on some of their individual cases. We try to devote some classes entirely to case rounds, allowing students to select any cases or issues they would like to present and solicit
strategic advice from their classmates. Each year we get feedback that students want more of these classes, but there is never enough time in the fall with everything else on the syllabus. In the spring, we devote many more classes to case rounds, but also typically do a few substantive classes on areas we did not get a chance to cover in the fall, and several classes on law reform and community lawyering. In addition, each student does a “CLE” presentation on a topic of their choice, typically one in which they have become an expert.

B. The One-Semester Experiment

Demand for spaces in the clinic outstrips slots each year. In the year we tried the experiment, 48 students ranked the clinic first, and many more ranked it lower, in applying for the Clinic’s 27 slots. One group of students took the clinic for the entire year, while one group took it in the fall only and another the spring only. By offering the clinic for one semester, we were able to offer the clinic to 9 more students than our usual 18. We had 13 students do the Clinic for a full year, 5 students did the clinic in the fall only, and another 9 students did the clinic in the spring only. On the clinic application, we asked students whether they preferred to take the clinic for a semester or a year. Once we decided which students would be accepted into the clinic, we assigned students to the full year or a semester. Because the majority of students said they wanted to take the clinic for a year, we could not always respect students’ preference. The spring one-

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150 The original plan was that 9 students would take the clinic for the full year, 9 would take it in the fall only and a different 9 would take spring only. In keeping with this plan, 18 students started the clinic in the fall. At the end of the fall semester, 5 students who were supposed to be fall only asked to stay on in the spring. One student who was supposed to do the clinic for the entire year asked to drop the clinic in the spring so that he could pursue international moot court and other opportunities. This means that we ended up with a total of 22 students during the spring semester. We agreed to this heavier supervision load because we had recently hired a staff attorney, Carolina Guacci, who would be able to assist with supervision in the spring semester.
semester students did a repeat of the fall version of the clinic seminar, while the year-long group did the version of the seminar that we usually do in the spring semester.

C. Lessons Learned from the One Semester Experiment

After the Clinic ended, students were sent an email asking whether they would take the Clinic for one semester or two if they did the Clinic again, and whether the Clinic should be offered for one semester or a year. The vast majority of students stated that the Clinic should continue to be offered for an entire year. Students commented that they need an entire year to learn the material and be able to apply it to actually make a difference for their clients. For example, two students who favored a full year clinic stated:

My first choice was to intern for the entire year so yes, I would have taken the clinic for the entire year. I very strongly think that the clinic should not be a one semester course. I do not think it gives students ample time to build relationships with their clients, to see case matters to completion, or to become as familiar with the relevant laws and rules. I also think that the change in the middle of the year can be detrimental to some clients, especially those who are wary of the legal system to begin with. A year would allow students to build better relationships with their clients and allow them to feel like they have achieved more and come away from the internship with a greater sense of accomplishment.

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I participated in the clinic for a full school year. If given the chance, I would not have participated in the clinic for only one semester. Last year, I felt as though I spent the entire first semester learning how to be a CYLC intern, the dependency system, my clients, etc. During the second semester, I was able to use what I learned during the first semester, and grow as a lawyer. I feel that only participating for one semester would have limited that growth.

Students who recommended that the Clinic be offered for one semester cited several reasons. The clinic required a significant time commitment and sometimes caused students to neglect other courses. The time commitment over the entire year also may have prevented students from taking internships or participating in other law school activities. Taking the clinic for 8 credits for a full year made it difficult for students to
meet “core” graduation requirements. Finally, a few students mentioned that the Clinic was emotionally draining. As one student noted:

Based on my experience in the clinic (which was unique with the clients I had) I honestly would say that the clinic should be a semester long experience. The thing about it being a one semester class is that the frustration levels that I experienced and I'm aware others experienced is less, during a semester. Because of the high level of work that the clinic requires, it prevents working at a job or even devoting extra time to class if needed. I think because obviously our clients are our top priority, it means everything else takes a back burner, resulting in neglecting of school work. While it isn't difficult to take a light case load one semester, it is hard to take two semesters worth, and I think, watching people who did the entire year, some of them have a hard time making sure they get all the requirements in, especially if they want to do litigation skills.

Several students noted that they would have done the Clinic for a full year, but believe there should be a one-semester option for all of these reasons.

We abandoned the one semester experiment, concluding that it had not worked. Several of our fall one-semester students asked to stay on in the spring, and we agreed that it would be good for them and the clients. When we added the new one-semester students in the spring, we split into two seminar sections. I taught the year-long seminar, but some of the students I supervised were one-semester spring students. In supervising those students, there was often a disconnect because I did not have the benefit of participating in their seminar discussion. They also never truly integrated with the year-long students so we lost some of the peer-to-peer learning that is such an important part of clinic. The net result was a spring semester that felt intense and unwieldy.

Once the semester ended and I had a chance to catch my breath, I reflected on the lessons learned from the experience and the idea for this article was conceived. I concluded, like several of my students, that there are very good reasons to continue offering the clinic for a full year. There was in fact a tremendous amount of student
growth over the course of a year that simply would not have been possible in just a semester. Several of the fall semester students who were supposed to take the clinic for one semester stayed on in the spring, precisely because they had not yet had an opportunity to witness the fruits of their labor. Students just began to get their stride at the end of the first semester. They had finally figured out the facts, understood the law and started to earn the client’s trust, and it was just beginning to click that practicing law is so much more complex and nuanced than they expected. In the second semester, I had multiple moments where I burst with pride as the same timid student who constantly came to me seeking the “right” answer transforms into a lawyer navigating the multiple dimensions of the representation.

My second reason for valuing the full year model is the potential negative impact on clients, particularly our younger clients. Our clients are children and young adults involved with the child welfare system who have learned to mistrust adults after years of disappointment by the parents, foster parents and social workers responsible for their care. As a result of our holistic approach, we represent them in multiple legal matters typically over several years. It is difficult enough that our child-clients are introduced to a new student attorney once a year, it would be very difficult to expect them to share their story with a new person every three months. The turnover on the cases that got a new intern in the spring also slowed progress as the new intern got up to speed on the law and facts, and built a relationship not just with the client, but with the many third parties involved in the client’s life.

The third reason I think a full year model for the clinic is valuable is because it became clear over the course of the year that the Clinic would not be able to do the same
level of law reform work that it has traditionally done. The students who did the Clinic for only one semester could barely master the facts, law and skills necessary for their individual representation. Even if we were able to include some “know your rights presentations” or more manageable projects in the mix, it would be difficult for a student to handle their individual cases and do legislative or administrative advocacy at the same time.

The other lesson I learned, however, was that it would be possible to offer an effective one-semester version of my child advocacy clinic, as long as there was careful planning and sufficient thought given to how clinic goals and other design elements would need to be restructured. Many of the specific lessons learned are reflected in the discussion in Part IV of this article. In the next section, I re-imagine our child advocacy clinic as a one-semester clinic.

D. Reconstructing a One Semester Child Advocacy Clinic

The goals for the re-imagined clinic are for students to: (1) develop interpersonal skills for the attorney-client and other professional relationships; (2) solve legal problems; (3) learn how to learn from experience; and (4) understand how legal doctrine and institutions impact the lives of poor people. I chose these goals because they form the core of what can reasonably and uniquely be achieved during a semester in a live-client clinic. By focusing on these goals, I do not expect that my students will know everything they need to know to practice law, but I hope students will have a solid introduction to their role as attorneys and models for future professional growth.¹⁵¹

¹⁵¹ Weinstein, supra note 124, at 573 (“I have watched very capable students make the leap to very capable young student lawyers. They are not ready for all that awaits them but they have taken a big step in that direction.”).
In addition to the general clinic goals, I would like students to determine their own strengths and weaknesses, and identify strategies to achieve their learning goals. To tailor the experience to students’ individualized objectives for learning, I will use learning contracts. While we have used a standardized learning contract in the past, we have never used individualized contracts where students identify personal goals. By emphasizing students’ own goals and learning from experience, I hope that students will more fully engage in the experience and leave the clinic armed with tools to help boost their professional development when they enter practice.

This vision pares down what we seek to do in the current year-long configuration of the clinic, primarily by de-emphasizing objectives that can be achieved through other courses in the curriculum. In doing so, however, students will still necessarily be exposed to many of the things we do in the current clinic. Among the goals of our year-long clinic is to teach “fundamental lawyering skills”, and we try to devote equal attention to a broad range of skills. In a one-semester clinic, the focus will be on those skills best learned when there is a real life client and ever shifting facts: client interviewing and counseling, fact development and problem solving. Trial skills, on the other hand, will not receive a great deal of attention because the University of Miami has a rigorous simulation litigation skills course in which many of our students enroll. Of course, students will need to be prepared for litigation if necessary. Rather than devoting precious class time to in-depth training on litigations skills, I may provide guidance on

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153 The current clinic goals are to: (1) train students in fundamental lawyering skills; (2) instill in students high standards of ethics and professional responsibility; (3) provide high quality, professional and zealous representation to clients; (4) foster students’ ability to engage in self-reflection and introspective professional development; (5) enhance students’ understanding of how legal doctrine and institutions operate in individual cases; and (6) emphasize the value of public service.
trial techniques individually and recommend trial texts or webinars for students. Class time may be better used for mooting oral arguments or trials.

Another current clinic goal that will be de-emphasized is teaching substantive law. We currently devote almost half of our classes in the first semester to teaching substantive law on a range of topics such as child welfare, special education, and disability law. As part of our non-directive approach, we also often expect students to find the law, and sometimes reinvent the wheel, on even basic law in our substantive areas. Because substantive law is no longer a primary focus, students can be provided the general law more efficiently during the orientation at the beginning of the semester or through better dissemination of reference material and prior clinic work product. Students will still be expected to do research on issues specific to their cases, and substantive law may be discussed in class as part of a broader discussion about legal strategy.

While one of the clinic’s goals still reflects a social justice mission, it is framed more narrowly than in the current year-long clinic. Students in the year-long clinic work on a wide range of law reform projects including legislation, administrative advocacy, amicus briefs and litigation. In the one-semester clinic, students will learn to interview and counsel in a way that reflects understanding of the lives of our clients. And we will discuss the way in which the law often operates to further marginalize poor people. In addition to their individual cases, students will participate in at least one project that approaches problem-solving from another perspective, such as providing community education, engaging in collaborative problem-solving with a community group, or examining an issue or problem that arises in the context of their representation of
individual clients.\textsuperscript{154} There may be manageable projects that allow students to “recognize that lawyering for social change requires a lawyer to attend to the broader social context in which the client and other similarly situated persons live”\textsuperscript{155} The key is identifying a project that is discrete enough to allow the student to have a meaningful experience in one semester.

The one-semester clinic will still handle several different types of cases, but will focus primarily on cases with shorter life spans. A clinic for youth transitioning out, or who have already aged out, of the foster care system may lend itself to a one-semester model. The one-semester clinic could primarily handle administrative appeals of independent living benefits, Medicaid waiver cases and guardianships for youth with disabilities. These are essentially cases in our current caseload mix that are capable of resulting in a start to finish experience in the course of one semester. Students should be able to meet the client and understand the problem; engage in strategic planning and analysis; and execute strategy in the course of a semester.\textsuperscript{156}

Every team of students will be assigned one administrative appeal, as well as two or three other cases.\textsuperscript{157} It is hard to gage how much time students will need to spend on this particular mix of cases so the caseload may need to be adjusted. The value in


\textsuperscript{155} Benson, supra note 108, at X (discussing how domestic violence clinic students learn about law as a tool for social change through education of elementary and high school students about domestic violence, organizing a support group for victims of domestic violence, conducting research about practice and client narratives, and lobbying); Duquette, supra note 142, at 17 (noting that students in the University of Michigan child advocacy clinic, which is only a semester, are involved in legislative drafting).

\textsuperscript{156} Weinstein, supra note 124, at 603.

\textsuperscript{157} In the current year-long clinic, students work individually. In the one-semester clinic, students will work in teams of two both as a means of cutting down on formal supervision meeting time and to increase the likelihood that every student will get a similar range of experiences. Daniel Medwed, \textit{Actual Innocents: Reflections on Selecting Cases for a New Innocence Project}, 81 \textit{Neb. L. Rev.} 1097, 1147 (2003). Students also get the opportunity to learn how to collaborate with colleagues. David F. Chavkin, \textit{Matchmaker, Matchmaker: Student Collaboration in Clinical Programs}, 1 \textit{Clinical L. Rev.} 199, 209 (1994).
administrative appeals is that they allow students to get an entire litigation-based experience in a condensed time-frame, and might involve negotiations, pre-trial motions, trial preparation and an evidentiary hearing. Our Medicaid waiver cases are typically set two months from notice of appeal. The cases are challenging, often involving expert witnesses and review of medical evaluations, yet manageable for a student who devotes the time necessary to master the facts and law. Guardianships typically culminate in fairly straightforward court hearings, but are rich with opportunities for students to develop facts, analyze potential options to achieve the clients’ goals, and draft simple pleadings.

By focusing on a client population – older youth – as opposed to a substantive area, we will continue to represent the “whole client.” We may not be able to handle as broad a range of cases as we currently do, but can continue to do holistic representation. Students will still need to recognize the clients’ strengths and challenges, as well as the nuances of the clients’ experiences and the lens through which the client sees the world. Students will still be asked to confront questions such as: what are the factors that led to the client’s current circumstances?; what factors influence what the client wants?; and what are our assumptions about the poor? Cases that cannot be handled by the one-semester clinic can be referred to another clinic within the law school or a legal services program in the community.

The number of credits will be increased from the current four credits for ten hours of field work and 3½ hours of seminar per week to at least six credits. Under the formula that we use, six hours of clinic would translate into approximately 21 hours of structured interaction time in the clinic. By working more hours in the clinic, students have more
time to devote to their cases, thereby increasing their opportunity to learn from the experience. At the same time, student will be able to take fewer other courses during their semester of clinic. This responds to the concern most commonly expressed by students who favored a one-semester clinic that the time spent on clinic makes it difficult to balance clinic with other classes.

Conclusion

In developing clinical programs, we should be conscious of the trade-offs in choosing to offer clinics for a year or a semester. There are sufficient benefits to students, clients and law schools that there should be year-long clinics. At the same time, in offering one-semester clinics, clinicians should be mindful of setting realistic goals and designing the clinic to ensure that students get the most of the experience. As with other aspects of clinical design, we need empirical research on whether longer clinical experiences lead to students who are better prepared for practice.158

158 Sandefur and Selbin, supra note 87, at 83 (noting that one of the challenges with drawing conclusions from the After the JD Study is that some students may have spent several semesters in their law school’s clinical program, which others were in clinic for only a brief time).