

INTRODUCTORY REMARKS AT THIRD SESSION

HARRY W. JONES

We have been building up to this afternoon's discussion of "The Clinical Component in University Professional Education." Thus, at our opening session, it was provisionally agreed—although I sensed a few stirrings of politely withheld dissent from some of the law students in our company—that a university's distinctive task is the pursuit and transmission of objective knowledge and that universities and their professional schools are inefficient agencies for direct social action or for the direct furnishing of societal services. On this hypothesis, clinical work in the university has to be justified chiefly if not exclusively in terms of the contribution it makes to the intellectual and moral education of professional students.

President Levi and Dean Smith had their doubts, grave ones, as to whether the pattern of clinical education so well established in medicine could be transferred to other professional schools of the university. Specifically, President Levi said—and I think I quote him accurately: "Not even Bill Pincus has convinced me, and I hope he will not be able to convince you, that it makes any sense to keep a three year law school program just for the purpose of having a clinical year in lawyer training." When you hear the blockbuster of a paper Mr. Pincus has prepared for this session, you will see that Mr. Pincus is responding to President Levi's challenge with all guns firing and full speed ahead.

You will recall, too, that the prospects and problems of the "clinical component" figured prominently last evening, when Dean Kirby, Dr. Cramblett and Professor Smigel discussed the professional school's teaching and research responsibilities. All three of them, it seems to me, gave aid and comfort to Mr. Pincus's cause: Dean Kirby because he wants legal education to be more challenging and innovative and is persuaded that clinical experience will encourage the law student to look beyond the law library to the world outside, Dr. Cramblett by his testimony that the clinical component contributes more than anything else to the excellence of American medical education, and Professor Smigel in his insistence that no one is really "socialized" into a profession and its modes of behavior until he has discharged the professional's role with a living patient or client before him.

I first met this afternoon's principal speaker, Mr. William Pincus, when he, working in close cooperation with Dyke Brown, was the Ford Foundation's man in motion for law and legal education. These were the years B.M.B. (before McGeorge Bundy) when law teachers, too, joined their voices in the great academic hymn of the time, "Praise Ford from whom all blessings flow." Bill Pincus, I can testify from hard experience, was no easy mark and no freehanded Maecenas. Good lawyer that he is, he was

incisive in his analysis of proposals, critical in his judgments, and no respecter of persons.

Mr. Pincus, I suspect, came out of it all thinking that legal education was pretty good on the whole but deficient in—shall we say?—"soul." His experience with the Ford Foundation persuaded him, or so I read the regular reports of his Council on Legal Education for Professional Responsibility, that the law schools have been slow to recognize what Dr. Pace, Dr. Cramblett and their colleagues have long known in medicine, that is, that a patient or client must be viewed and treated as a whole person, in all his personal and social singularity, and not as an item for conceptual analysis and classification. It is this view, I think, that first aroused Mr. Pincus's interest in the clinical component of legal education and persuaded him to become the president and eloquent spokesman of the Council on Legal Education for Professional Responsibility.