**FESTSCHRIFT COMMENTS**

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There is an unfair stereotype comparing medical students and law students. Medical students commence as healers and often wind up as determined capitalists, while law students begin with dreams of successful commercial careers, and wind up as…?

Our job as justice educators is to encourage the humanity and compassion of future lawyers - and particularly in such a way that they make the jump in connecting those qualities to the idea of justice. And in an intensive, live-client, poverty law clinic we have the best possible methodology to achieve that leap. Sometimes students ‘get it’ instantly, but most take some months and I think, benefit most when as teachers and practitioners, we articulate early on to each student the requirements of the individual case against the justice architecture. When this process works well, their flourishing also impacts strongly on their clients’ sense of hope.

Watching students connect these dots has given me the most joy, even when the medium was tragic. I recall a student at Monash’s clinic at *Springvale Legal Service* in Melbourne who related, in a distressed manner, the story of a client they had just interviewed in the waiting room, a young mother with small children around her feet. She said she had nothing to feed them because her partner had been sucked into the addiction machine of the infamous Crown Casino, and lost their savings. Our student asked the question: ‘Why was (and is) our state government so willing to see such pain inflicted by the Casino, for the sake of its tax revenue and its budget?’ That led to a long discussion about the classic ethical dichotomy of governments - the end-justifies-the-means *versus* ‘do no harm’ - and later on, enough contextual confidence for the student to go back to our client and talk about how to support her financially and in her relationship. And then that student became part of a community development team at Springvale, which examined and advocated around the Casino’s political manoeuvre supporting so-called self-exclusion orders for addicted gamblers.

Many clinicians have similar experiences. Their stories, in this journal and others, encourage us and perhaps sustain us. *Doing* clinic – ideally with clinician friends who are also looking for justice connections in each student and in each client’s case - is exciting and nourishing, and it can make a profound difference to human beings in need, as well as graduating the sort of lawyers who can powerfully support the social imperative for justice.

Clinical legal education is comparatively costly if it is effective, but its’ position within justice education makes that expense worthwhile many times over. Both clients and future lawyers can develop a practical understanding of and respect for the Rule of Law in an age when many can see the concept as old and tired, or just plain irrelevant. With both our climate and global inhumanity now taking over as dominant moral (if not survival) agendas, I see clinics - and a renewed emphasis on ethical fluency - to be the major upcoming challenges for the legal profession. And I plan to be active in both. Encouraging university leaders and education regulators to see the win-win in clinical and justice education and resource our law schools accordingly, is my recipe for at least some human happiness and justice.