DEVELOPING A PEDAGOGY OF COMMUNITY PARTNERSHIP AMIDST COVID-19: MEDICAL-LEGAL PARTNERSHIP FOR CHILDREN IN HAWAI‘I

Catherine Siyue Chen, Fernando P. Cosio, Deja Ostrowski, and Dina Shek*

The Medical-Legal Partnership for Children in Hawai‘i (MLPC) has partnered with low-income families in community health and public housing settings for over a decade to provide direct legal services and engage in systemic advocacy. The MLPC model of legal services is rooted in our pedagogy of community partnership that seeks to confront the legacies of racial inequality and to change systems of power that stigmatize and delegitimize community expertise. Although theories of community lawyering have been developing for many decades, community lawyering principles are commonly de-centered in many public interest legal spaces across the country, particularly in moments of crisis. And most public interest lawyering efforts do not make explicit commitments to racial justice and systems change. The purpose of this essay is to introduce our developing pedagogy of community partnership through the lens of MLPC Hawai‘i’s work and model before and during the COVID-19 pandemic. This essay highlights key tenets of MLPC’s pedagogy, MLPC’s work during COVID-19 and related crises, and challenges faced by MLPC’s lawyering model, including external criticisms and funding complexities.

INTRODUCTION

The Medical-Legal Partnership for Children in Hawai‘i (MLPC or MLPC Hawai‘i) entered 2020 with a range of new plans and ideas. Integrated in a community health center, MLPC provides direct legal

* Catherine Siyue Chen, Staff Attorney and Immigration Specialist, Liman Fellow, Medical-Legal Partnership for Children in Hawai‘i; Fernando P. Cosio, Staff Attorney, Medical-Legal Partnership for Children in Hawai‘i; Deja Ostrowski, Staff Attorney and Policy Advocate, Medical-Legal Partnership for Children in Hawai‘i; Dina Shek, Faculty Specialist, William S. Richardson School of Law, University of Hawai‘i at Mānoa and Legal Director, Medical-Legal Partnership in Hawai‘i. The authors would like to thank Professor Susan Serrano for her valuable suggestions and input. We are deeply grateful to Kōkua Kalili Valley Comprehensive Family Services for twelve years of partnership, especially Dr. Alicia Turlington, our MLPC medical champion in both the practical and heroic sense of the word. Thanks also to our patient-clients, community partners, students, and all who contribute to our knowledge and growth every single day.
services, conducts cross-disciplinary training, and engages in systemic advocacy. We began that year as a full-time staff of four attorneys, the largest staff of attorneys that our small legal clinic has had in its decade of existence. As February turned into March, conversations around COVID-19 became more serious, and on Monday, March 16, 2020, about a week before Hawai‘i initiated its first lockdown orders, we had our last in-person team meeting. Sitting in opposite corners of our small office, we began to pivot to remote services. Just that week, we were supposed to have our first workshop in an ongoing series about “legal care” for elderly patients at the community health center, a meeting with the Office of the Public Defenders about an immigration initiative, a make-up clinic class, and a presentation to the entire staff at the community health center, in addition to our regular on-site clinic hours. We immediately suspended all on-site and in-person activities and began pandemic planning.

The months that followed saw multiple long-term crises unfolding simultaneously around the globe. These crises manifested themselves in unique ways in Hawai‘i, and, as with the rest of the country, highlighted and exacerbated enduring problems with governmental, healthcare, and service systems. Our mostly Micronesian client communities experienced some of the highest rates of COVID-19 in the state, pushed by the racial inequities driving up morbidity and mortality for Native Hawaiian and Pacific Islander (NHPI) communities throughout the country. Hawai‘i’s unemployment rates were among the highest in the country, and MLPC’s neighborhood in Kalihi saw

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1 The four authors of this article.

2 See infra Sections I.A. and I.D.


the highest unemployment rates in the state. The overwhelming need exacerbated longstanding gaps in state agency structures, and the agencies struggled to provide needed services, particularly to limited English proficient (LEP) clients. Finally, as news about racially-motivated violence, particularly anti-Black policing, catapulted around the country (not a new crisis but newly-understood by many in that moment), our clients and community partners continued to navigate and respond to a long history of racial discrimination, specifically in the context of police actions against Micronesians—even as the Honolulu Police Department insisted that such bias did not exist in Hawaii.

In July 2020, with the global pandemic and racial reckoning intensifying, MLPC Hawai’i held its annual discussions on Rebellious Lawyering/Racial Justice with its attorneys, its Medical Director (a pediatrician at the community health center), and its summer students. Weighing our decisions against the framework of rebellious lawyering and racial justice is a part of every weekly team meeting and internal discussion, but this seminar-style discussion was a particular opportunity for the whole team to reflect and to more systematically guide our students in the community lawyering principles that MLPC seeks to practice. As our students contemplated their future careers in a moment defined by uncertainty, the conversation turned to the notion that community lawyering, with attorneys and client communities working in true partnership, is actually rather difficult to
find in practice.

It has been almost three decades since Gerald López wrote *Rebellious Lawyering: One Chicano’s Vision of Progressive Law Practice*, and much has been written about community lawyering in this time. Nonetheless, community lawyering is far from the norm today. Its principles are commonly de-centered in many public interest legal spaces across the country, particularly in moments of crisis. Even among lawyers who champion these principles in their stated values, the realities of their practice may not center community partners in the way that community lawyering requires. Why is that? Why is it difficult for our students to go out and practice community lawyering in their new jobs, not just here in Hawai‘i but in states all over the country, almost three decades and countless articles after *Rebellious Lawyering* first garnered acclaim?

For MLPC Hawai‘i, our twelve years of practice has meant twelve years of developing methods to center rebellious lawyering principles in day-to-day practice. The COVID-19 pandemic was a moment that challenged our practice, as it did all legal practices, and it was a moment to further refine how we lawyer. Ultimately, the crises of the past year have been an affirmation of MLPC’s tenets and a testament to the necessity of rebellious lawyering in the fight for change.

Our praxis and pedagogy is rooted in rebellious lawyering. Building on López’s mostly fictional examples of rebellious lawyering practice, we endeavor to share our practice—including our successes and challenges—as we continue to develop our pedagogy. The purpose of this essay is to develop what we call the pedagogy of community partnership through the lens of MLPC Hawai‘i’s work during the COVID-19 pandemic, from direct service to community education to

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11 See infra Section I.C.


13 This is not a criticism of all public interest lawyers. Many attorneys who value community lawyering, but whose organizations may not center it, are readily aware of these discrepancies and, indeed, offer some of the most compelling insights and critiques. See infra Section III for a discussion of the challenges that may contribute to this disconnect.

systemic advocacy. This pedagogy begins with the core values and tenets of our work that seek to expand the roles of client and lawyer to engage in a true partnership that honors the skills and knowledge and power of all. By breaking through lawyer-client and provider-consumer relationships, we can tip the balance of power towards “the bottom”\(^\text{15}\) in order to create better solutions, and to retain and uplift the human potential of all.\(^\text{16}\)

We offer this developing pedagogy of community partnership that became increasingly significant during the pandemic. It is neither final nor polished, but it is vital to share at this time of great crisis, change, and opportunity. We join others, especially Medical-Legal Partnership (MLP) practitioners, in developing pedagogy from praxis that is rooted in rebellious lawyering, centers racial justice, and uplifts community expertise. And we look forward to broader collaborations in the future to better operationalize, assess, and teach a community lawyering praxis of anti-subordination. Such methods and praxis center racial justice and acknowledge and confront the systems of subordination that affect us all. We hope that by developing this pedagogy of community partnership, we can contribute to the kind of change that is necessary for all communities to see justice.\(^\text{17}\)

The following sections introduce our program framework and core tenets, and illustrate how our pedagogy of community partnership has endured during the COVID-19 pandemic crisis. Section I situates our MLP program within particular lawyering frameworks and introduces the core tenets of our MLPC Hawai‘i program. Section II shares our pandemic experiences and how our practice shifted while adhering to our core praxis and pedagogy. In Section III, we share challenges and critiques that reveal how traditional methods of public

\(^{15}\) Mari Matsuda, *Looking to the Bottom: Critical Legal Studies and Reparations*, 22 *Harv. C.R.-C.L. L. Rev.* 323 (1987). Professor Matsuda’s foundational critical race theory article introduced the concept as, “Looking to the bottom—adopting the perspective of those who have seen and felt the falsity of the liberal promise—can assist critical scholars in the task of fathoming the phenomenology of law and defining the elements of justice.” *Id.* at 324. She explains, “This article [ ] suggests a new epistemological source for critical scholars: the actual experience, history, culture, and intellectual tradition of people of color in America. Looking to the bottom for ideas about law will tap a valuable source previously overlooked by legal philosophers.” *Id.* at 325.

\(^{16}\) Camara Phyllis Jones, *Confronting Institutionalized Racism*, *Phylon* (2003); see, generally, *infra* Section I.D.

\(^{17}\) Charles R. Lawrence III, *Sustaining the Struggle for Justice: Remembering and Renewing Abolitionist Advocacy*, *Access to Justice Conference* (June 21, 2013), https://www.law.hawaii.edu/article/charles-r-lawrence-sustaining-struggle-justice-remembering-and-renewing-abolitionist (“When we speak of ‘access to justice’ do we mean that our laws and institutions are just; that all we need do is insure that each individual can walk through the doors of our courts and legislatures to find that justice? Do we believe that the world our laws and institutions rationalize, support, and justify is a just world?”).
interest lawyering and funding uphold status quo hierarchies and inequalities. We end with case stories during the pandemic to illustrate how our pedagogy of community partnership worked to support clients and uplift community voices and power.

I. MEDICAL-LEGAL PARTNERSHIP FOR CHILDREN IN HAWA‘I BEFORE COVID-19: A DECADE OF DEVELOPING A PEDAGOGY OF COMMUNITY PARTNERSHIP

A. Introduction to MLPC Hawai‘i

The Medical-Legal Partnership in Hawai‘i is a project of the William S. Richardson School of Law (University of Hawai‘i at Mānoa). The primary site is the Medical-Legal Partnership for Children with Kōkua Kalihi Valley Comprehensive Family Services (KKV), a community health center. Since its inception in 2009, MLPC has partnered with low-income families in community health and public housing settings to provide direct legal services and engage in systemic advocacy.

MLPC employs a small staff, with four full-time attorneys. In addition to the staff, the work of MLPC depends on the healthcare providers at KKV (including frontline staff, medical assistants, interpreters, pediatricians, behavioral health physicians, eligibility workers, community health workers, and more), the interpreters outside of KKV who fill gaps in interpretation needs (all paid, professional interpreters), community partners (from a variety of community-based organizations and neighborhood service providers, particularly from our client constituent communities), law school colleagues (from administrators to faculty), and law and other students (who join MLPC through the clinic course, mandatory pro bono hours, externships for credit, or formal summer internships).¹⁸

MLPC’s clients are generally the patients of KKV in the neighborhood of Kalihi Valley in Honolulu. Kalihi Valley’s 30,000 residents are mostly made up of immigrants, including many new immigrant communities.¹⁹ About 70% of MLPC’s clients are recent immigrants from Chuuk State of the Federated States of Micronesia. The vast majority of the rest of MLPC’s clients are immigrants from other Pacific Islands or from Asia.

The work of MLPC is to 1) provide free, onsite, direct legal services, 2) conduct professional education and training across professional disciplines and 3) engage in systematic advocacy through

community education and policy work. Our work alongside KKV’s Pediatrics team seeks to be a “legal home,” building on the “medical home” model central to community health practice.20

Before the pandemic, the direct services work centered around twice-weekly Legal Advocacy Clinics on-site at KKV, regularly scheduling about four to seven patient-client appointments. These appointments were a mix of pre-scheduled appointments and “warm hand-offs,” in which the health care provider brings the client into the MLPC office for a personal introduction.21 Attorneys sometimes met with families right in the exam rooms, while children waited for their vaccinations and booster shots, and sometimes met in the MLPC office, a mere ten steps away from the exam rooms. MLPC also provided “curbside consultations.” A term borrowed from medical practice,22 a legal curbside consultation consists of a meeting with a health provider and an attorney, where the parties consult on a legal issue on behalf of an anonymous client.

Substantively, MLPC sees a range of issues, including housing, public benefits, immigration, civil rights, and family law. MLPC does not “agenda-set” but follows the needs of KKV’s patients. As a result, we occasionally get requests for issues outside our areas of service, such as criminal law and child welfare matters. Even in these instances, MLPC staff spends time to explain legal processes and “how to work with a lawyer,” encourage notetaking and invoking rights like asking for an interpreter, and, when necessary, make the appropriate referrals to other service providers.

For systemic advocacy—through both community education and policy—MLPC works alongside the communities served in our direct services work, focusing on policy solutions that emerge from the community. Professional education involves presentations for KKV’s staff, as well as for other service providers and community leaders. Commu-


21 This is contrasted to a regular referral, in which the healthcare provider gives the client our business card or phone number. In MLPC’s experience, this “warm hand-off,” where a trusted source makes that introduction, is critical to MLPC’s accessibility. When simply given a phone number, clients do not always follow through with that potentially-intimidating call. “Warm hand-offs” are increasingly recognized as a tool in integrated health care settings. See, e.g., Osama Ahmed, Jodi A. Mao, Stephen R. Holt, Kathryn Hawk, Gail D’Onofrio, Shara Martel, & Edward R. Melnick, A scalable, automated warm handoff from the emergency department to community sites offering continued medication for opioid use disorder: Lessons learned from the EMBED trial stakeholders, 102 J. OF SUBSTANCE ABUSE TREATMENT 47, 47-52 (2019).

22 David Kuo, David R. Gifford, & Michael D. Stein, Curbside Consultation Practices and Attitudes Among Primary Care Physicians and Medical Subspecialists, 280 JAMA 905 (1998).
nity education follows our “Advocacy Academy” approach that expands upon traditional “know your rights” workshops by teaching self-advocacy skills purposefully incorporating the policy knowledge, skills, and capacity of workshop participants. Policy and systemic advocacy work ranges from writing, research, and legislative advocacy, to organizing strategies and informal meetings. This work stems directly from the issues presented by direct services cases and by the experiences and express needs of MLPC’s clients. We often follow the lead of our community partners, who have a long history of skilled advocacy around healthcare for Compacts of Free Association (COFA) immigrants, discrimination issues, immigrant rights, policing, and more.

The work of MLPC is situated within the frameworks of 1) the national Medical-Legal Partnership model, 2) community lawyering, and 3) racial justice. The rest of this section first offers a background to these three critical frameworks. The section then concludes by outlining the core tenets of MLPC that incorporate these three frameworks and inform our practice and pedagogy of community partnership.

B. The Medical-Legal Partnership Framework

The national Medical-Legal Partnership model builds on public health concepts that acknowledge poverty, housing, education, employment, discrimination, and other social barriers that impact well-being more than genetics. The history of attorneys and physicians in the United States has been marked by instances of collaboration during key moments like the civil rights movement and the HIV/AIDS crisis.

The Medical-Legal Partnership framework began in 1993, 23 Shek, supra note 14, at 139-140.
when Dr. Barry Zuckerman, a pediatrician at Boston Medical Center created the first pilot MLP, hiring an attorney to work with medical providers to address health-harming legal needs. Since then, the model has developed and spread, including 450 health institutions, 170 legal aid agencies, and 58 law schools, covering 49 states and the District of Columbia.

MLPC Hawai‘i follows the national model in several key ways. First, the MLP framework recognizes the enormous potential of health institutions in serving as an entry point to legal services for low-income individuals. Access to legal services is a notorious challenge. One national study showed that 80% of legal needs are unmet among individuals eligible for Legal Services Corporation services. The same holds true in Hawai‘i. Vulnerable individuals suffering from health conditions with a legal remedy are more likely to access health care than legal assistance. The integration of legal services into the health care team is not only about leveraging the relative accessibility of health institutions but also about embracing holistic care for the patient-clients. The problems of patient-clients do not come pre-packaged into categories—a single problem can involve multiple health and legal areas.

Second, the MLP framework focuses on prevention. MLPs engage in “preventive legal care” alongside “preventive health care” by addressing and improving the social determinants of health that impact family well-being by prioritizing “upstream strategies” rather

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28 See Kenyon et al, supra note 26; see also Elizabeth Tobin-Tyler, Allies Not Adversaries: Teaching Collaboration to the Next Generations of Doctors and Lawyers to Address Social Inequality, 11 J. HEALTH CARE L. & POL’Y 249, 250-51 (2008).
32 Tobin-Tyler, supra note 28, at 254 (“As Zuckerman notes, one of the first points of contact for poor families when a child is born is their pediatrician: ‘The best way to help children is to help their parents, and the best way to reach parents is through their children.’”).
33 Although the health care needs of vulnerable populations are also often unmet, overall the resources for health services for low-income individuals greatly outweighs the equivalent resources for legal services. Ellen M. Lawton & Megan Sandel, Investing in Legal Prevention: Connecting Access to Civil Justice and Healthcare through Medical-Legal Partnership, 35 J. LEGAL MED. 29, 34 (2014).
34 Id. at 36.
than simply responding to urgent problems as they arise.\textsuperscript{35} Because preventive medicine and holistic care are core values in pediatrics, many MLPs, like MLPC Hawai‘i, are in collaboration with pediatric departments.\textsuperscript{36}

Finally, many MLPs across the country, like MLPC Hawai‘i, are clinics associated with law schools and include pedagogy as a critical component.\textsuperscript{37} The MLP framework sits at the crossroads of changes in legal and medical education around the country, as both professions have recognized the importance of teaching ethics, social responsibility, and the specific skills of client- and patient-centered counseling.\textsuperscript{38}

\section*{C. The Community Lawyering Framework}

MLPC employs a community lawyering model based on rebellious lawyering principles, which emphasize fostering the power and self-advocacy skills of low-income and historically excluded communities.\textsuperscript{39} Core to these principles is the role of MLPC attorneys as working with, not only for, clients, as described in Gerald López’s seminal book, \textit{Rebellious Lawyering: One Chicano’s Vision of Progressive Law Practice}.\textsuperscript{40} Public interest lawyer and scholar Angelo Ancheta further defined community lawyering as “a model for challenging racial ideologies and empowering both a subordinated community and specific individuals within that community.”\textsuperscript{41} Clinical law professor Muneer Ahmad describes community lawyering as “a mode of lawyering that envisions communities and not merely individuals as vital in problem-solving for poor people, and that is committed to partnerships between lawyers, clients, and communities as a means of transcending individualized claims and achieving structural change.”\textsuperscript{42} MLPC

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\textsuperscript{35} A helpful analogy likens litigation to surgery—while at times necessary, it cannot be the only solution. As Dr. Barbara Barlow at the Harlem Hospital Center explained, “If the majority of your work is trauma surgery, the fact that all trauma is preventable means that to not develop a program to prevent injuries is not doing your job as a doctor — it’s almost immoral.” Ellen M. Lawton, \textit{Medical-Legal Partnerships: From Surgery to Prevention?}, \textit{MGMT. INFO. EXCH. J.} 37, 37-38 (2007).

\textsuperscript{36} L. Kate Mitchell, \textit{The Promise and Failures of Children’s Medicaid and the Role of Medical-Legal Partnerships as Monitors and Advocates}, 30 \textit{HEALTH MATRIX} 175 (2020).

\textsuperscript{37} Tobin-Tyler, \textit{supra} note 28, at 251-52.

\textsuperscript{38} Id. at 265-77 (describing pedagogical developments in both fields in narrative listening, cultural competence, interdisciplinary practice and holistic problem-solving).

\textsuperscript{39} The term “historically excluded” appears to have been introduced by Dr. Kelebogile Zvobgo in a tweet. Dr. Kelebogile Zvobgo (@kelly_zvobgo), \textit{TWITTER} (June 25, 2021, 9:38 AM), https://twitter.com/kelly_zvobgo/status/1408419297945398202.

\textsuperscript{40} GERALD P. LóPEZ, \textit{REBELLIOUS LAWYERING: ONE CHICANO’S VISION OF PROGRESSIVE LAW PRACTICE} 37 (1992).


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grounds its work in community lawyering for social change that, according to civil rights attorney Charles Elsesser, “comes about when people without power, particularly poor people or oppressed people, organize and recognize common grievances.” And most significantly, “[s]ocial change can only be lasting when it is led and directed by the people most affected.”

Rebellious lawyering for social change requires us to view clients as advocates who are capable of problem-solving for themselves and others. The community lawyering theory of change focuses on community empowerment in the fight for systemic change. As López suggests, all are “lay lawyers,” problem-solving while helping ourselves and helping others. The other side of broadening the identity of “clients” to “lay lawyers” is expanding the role of lawyers: attorneys should not limit themselves to traditional legal tools. On the systemic advocacy side, this includes community organizing in addition to more traditional “policy” tasks. On the direct legal services side, this includes “self-help” services and “social work” in addition to more traditional representation.

Thus, collaboration with client communities is key to community lawyering. Many community lawyers define that “community” within a particular geographic area, centering a sense of place (or “home”) in their practice. Part of this collaboration is recognition of

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43 Charles Elsesser, Community Lawyering - The Role of Lawyers in the Social Justice Movement, 14 LOY. J. PUB. INT. L. 375, 384 (2013). The literature on community lawyering is expansive and many have offered their definitions of its key elements. See, e.g., Michael Diamond, Community Lawyering: Revisiting the Old Neighborhood, 32 COLUM. HUM. RTS. L. REV. 67, 109 (2000) (proposing the model of the “activist lawyer” within community lawyering in which “[t]he activist lawyer not only interacts with the client on a nonhierarchical basis, but also participates with the client in the planning and implementation of strategies that are designed to build power for the client and allow the client to be a repeat player at the political bargaining table.”)


45 See, e.g., Theresa Zhen, Community Lawyering: Direct Legal Services Centered around Organizing, 9 CAL. L. REV. ONLINE 29, 32 (2018) (“What if each relationship we made intentionally advanced organizing campaigns that are led by a grassroots movement of people impacted by systems of exploitation? What if we saw each connection as an opportunity to build the type of power that is needed to topple systems?”)

46 See, e.g., Seema N. Patel, On Love and Lawyering: A Celebration of the East Bay Community Law Center, 106 CAL. L. REV. 541 (2018) (explaining the East Bay Community Law Center’s pyramid system that includes a base of outreach and education, a middle tier of self-help and counseling, and a top tier of traditional representation.)


48 Lucie E. White, Collaborative Lawyering in the Field? On Mapping the Paths From Rhetoric to Practice, 1 CLIN. L. REV. 157 (1994). White’s seminal work on “collaborative lawyering” as a mode of community lawyering has been embraced by generations of community lawyers.
the role of culture in these interactions. This includes not only the culture of client communities but also “the influence the lawyer’s own culture has on the lawyer him/herself, his/her lawyering style, approach and problem-solving technique and their impact on the client.”

Finally, community lawyering has a strong pedagogical component and is interwoven in the history of law school clinics. Juliet M. Brodie argues that “community lawyer clinics,” and in particular the “neighborhood-based community lawyer clinic model,” are valuable settings for students, uniquely balancing the dual goals of clinical education—social justice and pedagogy. As Karen Tokarz, Nancy L. Cook, Susan Brooks, and Brenda Bratton Blom celebrate:

The skills that students learn in community lawyering clinics are varied: they learn to tolerate chaos and disorder; they learn to be part of a team (with many individuals who are not lawyers); they learn to think outside the legal box; they learn long-term commitment; they learn consensus building and dispute resolution; they learn about lawyering in multiple settings (from corporate boardrooms to the courts to the administrative offices of many different government agencies to the streets of the communities they serve); and they learn that intelligence and education do not always coincide. They come to understand that lawyers and clients are co-producers of the strategies and actions that have the capacity to solve some of the problems facing the clients in our more under-resourced communities.

For young public interest attorneys, the integration of these lessons into the clinical legal education is critical.

D. The Racial Justice Framework

Racial justice is the third framework within which MLPC situates


50 Juliet M. Brodie, Little Cases on the Middle Ground: Teaching Social Justice Lawyering in Neighborhood-Based Community Lawyering Clinics, 15 CLIN. L. REV. 333 (2009). Brodie defines these clinics as 1) free-standing offices in a low-income community, 2) with a relatively robust and diverse caseload that consists mostly of smaller service cases, 3) that are structured by a commitment to a community rather than a subject area or mode of advocacy. Id. at 346-47, MLPC Hawai’i is not a “free-standing” office but an MLP embedded in a community health center. But it otherwise fits well in Brodie’s definition, particularly in regards to the commitment to a neighborhood as a defining characteristic.

itself. We recognize and actively challenge the ways that racism, even when directed at marginalized individuals and communities, harms us all. Dr. Camara Jones offers the following definition of racism that informs our work:

Racism is a system of structuring opportunity and assignment value based on phenotype (‘race’), that:

- unfairly disadvantages some individuals and communities
- unfairly advantages other individuals and communities
- undermines realization of the full potential of the whole society through the waste of human resources.

As Jones states, “The first step is to name racism in a society where many are in denial about its continued existence and impacts.” From there, we must understand the mechanisms and impact and, finally, act to dismantle it. In the legal setting, Eric Yamamoto described how legal outcomes may curtail overt racism without actually changing the daily experiences of the people most affected by those legal outcomes. For MLPC advocates, this understanding is crucial to ethical and effective advocacy in both individual client cases and systemic change.

The racial justice framework is critical to MLPC’s daily work that exists in the context of Hawai‘i’s colonial history and the complex narratives of Hawai‘i as a “majority minority” state. Today, Hawai‘i’s newest immigrants are citizens from the Micronesian nations of the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau. After World War II, the U.S. administered the islands under the Trust Territory of the Pacific Islands. In 1986,
the U.S. and the newly-independent Micronesian nations established the Compact of Free Association (COFA), which allows individuals from these nations to live and work in the U.S., in exchange for the U.S.’s exclusive military control over their Pacific Islands region. However, COFA-status immigrants are permanently stuck in this “non-immigrant” status, unless they have an independent form of immigration relief. Finally, Micronesians face high levels of discrimination in Hawai’i.

The pedagogical component of the racial justice framework is also important. All MLPC students read key works on rebellious lawyering and racial justice. Clinic students undergo a more rigorous seminar as part of their class, and even pro bono students with limited volunteer hours are required to read some foundational texts and engage in a discussion group with MLPC attorneys.


Documents sometimes use the term “migrant” to reflect that COFA-status is technically a non-immigrant status under immigration law. However, this article uses the term “immigrant” to more accurately reflect the lived experience of many COFA-status individuals as immigrants—permanent members of the community who call Hawai’i home and intend to stay.


Shek, supra note 14, at 133 n.116.
E. The Tenets of MLPC Hawai‘i

MLPC’s model stands on the shoulders of medical-legal partnership, community lawyering, and racial justice pioneers, and in conversation with other scholars and practitioners in these fields today. The work of MLPC is ever evolving as its attorneys seek to continuously learn. This section introduces three interrelated tenets of MLPC’s developing pedagogy and praxis of community partnership.

I. “Neighbors being neighborly to neighbors.”

MLPC is built upon embracing the motto of KKV: “Neighbors being neighborly to neighbors.” The Kalihi Valley neighborhood and its demographics, rhythms, and history are an important part of the MLPC model. This is a living motto, one that all KKV staff and partners embrace. It means that we are not only providers and patient-clients but also neighbors, with our futures, successes, and failures interconnected.

This tenet means MLPC’s position in the community is broader than an attorney in times of trouble. Although the problem-solving role of lawyers by definition assumes that there is a problem, MLPC’s commitment to the neighborhood means that its relationship to the community is not only in the context of difficulties but also in the context of celebrations, forward-looking goals (i.e., “preventative legal care”), and daily life. As MLPC Legal Director Dina Shek wrote, “This simple philosophy demanded a different approach than typical ‘top-down’ lawyering that teaches lawyers to be experts, that says our time is valuable and shouldn’t be wasted on non-legal matters, and that claims you can dissociate your work from your personal life. Being ‘neighborly’ means that we see ourselves as connected to our clients, that we share knowledge as readily as food and banter, and that

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66 Who We Are, KÔKUA KALIHI VALLEY, https://www.kkv.net/who-we-are (last visited Apr. 5, 2021) (“Kôkua Kalihi Valley Comprehensive Family Services (KKV) is a community health center and federally qualified health center that serves the ahu’u’a of Kalihi on the island of O’ahu, Hawai‘i . . . . Guided by a social-determinants of health approach, we provide a wide range of programs and activities that connect people to family, culture, community, land, and comprehensive clinical services, for an overall improved sense of self.”).
we embrace building meaningful relationships.”67

There is also teaching significance in the clinic’s physical location in the neighborhood served. As Brodie described about Stanford Community Law Clinic, “[b]eing in East Palo Alto allows the students to observe residents’ interactions with police, to notice the public transportation patterns, and when it pours in January, to experience the high risk of flooding that does not occur on the higher grounds of the surrounding wealthier communities.”68 This dynamic is true of MLPC in Kalihi as well. Just as importantly, the location also allows students to see the joy and beauty of the neighborhood. Students can see when a toddler pokes her curious chubby cheeks through the MLPC office door or when former clients stop by to say hello. During MLPC’s annual KKV site visits with medical and law students,69 one stop is KKV’s Elder Care Program, where students participate in the weekly dance exercise program—a moment of unfailing delight every visit.70

2. Expanding the Role of “Client”: From “Learned Helplessness” to “Power”

Drawing from the precepts of community lawyering and racial justice, this second tenet calls advocates to upend power differentials between clients and lawyers and the systems they encounter. Our work requires us to make an explicit and detailed commitment to meeting and challenging broken systems, and centering community leadership and power.

This tenet means shifting the work of lawyers away from reinforcing “learned helplessness” in clients and towards the promotion of power and self-advocacy skills in social, legal, and policy matters. It focuses on power relationships and how to change systems, and it strongly rejects any framework that blames or coerces clients. As clinical lawyer and professor Gary Bellow wrote, “Clients can be liter-

67 Shek, supra note 14, at 110-111.
68 Brodie, supra note 50, at 359.
70 *Elder Care, Kokua Kalihi Valley*, https://www.kkv.net/elder (last visited Apr. 4, 2021).
ally ‘taught’ that their situations are natural, inevitable, or their own fault, and that dependence on professional advice and guidance is their only appropriate course of action . . . . To echo a now familiar phrase, a profession that is not part of the solution can soon become part of the problem.”

Similarly, López presented the framework of “regnant lawyering”—in which attorneys center themselves as detached experts and professionals—versus “rebellious lawyering”—in which the lawyer recognizes and promotes the expertise of their client communities.

Implementing this tenet involves daily reflection and purposeful action, trying new things and learning from missteps. These principles can be difficult to find in public interest lawyering, particularly when it matters the most. This tenet is not only foundational to dismantling institutional racism, but also the only way to treat individuals as full humans with the power and right to lead themselves. It is the underpinning of societal change—and, ultimately, legal and democratic change.

3. Expanding the Role of “Lawyer”: Broadening the Idea of “Legal Needs” and “Legal Work”

MLPC Hawai‘i embraces the nimbleness and creativity needed to serve the community beyond traditionally-defined boundaries for legal work. The MLP and community lawyering literature uses many words to describe flexibility in legal work: holistic, multimodal, multidisciplinary. At MLPC, this tenet first involves offering a “generalist” model of legal practice rather than focusing on a specific subject...
area—acting as “primary care lawyers”\textsuperscript{79} analogous to the primary care physicians working next door. Second, it involves embracing the cross-discipline relationships within KKV and other community partners, so that “warm handoffs” are a key part of MLPC’s work.

Finally, this tenet requires MLPC attorneys to respond to client needs without limiting themselves to “legal” tasks or even “legal” subjects. Teitelbaum and Lawton identified that there is no agreement on what constitutes a “legal need.”\textsuperscript{80} Similarly, Brodie recognized that community lawyering clinics commonly embrace flexibility, purposefully responding to changing community circumstances and priorities.\textsuperscript{81} Jane Aiken and Stephen Wizner in their article, \textit{Law as Social Work}, respond to the critique that the work done on behalf of low income clients “isn’t law, it’s social work” with, “You’re right. What \textit{we do is social work, and that is why it is so challenging and so important.”\textsuperscript{82} Set within López’s framework of “lay lawyering,” this tenet involves collapsing the distinction between “lay” and “lawyer” from both directions.

This does not mean that MLPC takes on every problem. Not only would that be impractical for its staff and students, but it also would disrespect the expertise of MLPC’s many partners within KKV and other local organizations (including social workers). MLPC often engages in “warm handoffs” to its partners when the need arises.

Expanding our role does mean that, when the moment calls for it, MLPC’s attorneys will spend non-negligible amounts of time in what would traditionally be considered non-legal tasks. Examples include filling out Head Start applications and rent relief applications, and navigating government systems that do not require a lawyer’s expertise. It also means bringing coffee to encourage a client to show up to appointments, waiting for an hour with the client in a scary government waiting room so she does not feel alone, hanging out after hours at a community meeting just to chat, or helping a client start an intimi-

\textsuperscript{79} See Shek & Turlington, supra note 20.

\textsuperscript{80} Teitelbaum & Lawton, supra note 27, at 369.

\textsuperscript{81} Brodie, supra note 50, at 345.

\textsuperscript{82} Aiken & Wizner, supra note 47, at 63-64. Aiken and Wizner go on to clarify, “Of course, simply saying that our practice of law is, or ought to be, ‘social work,’ is something of a play on words. There are significant differences in the professional education, training, expertise, practice, and professional ethics of lawyers and social workers. While we do not wish to ignore or minimize these differences, we do want to argue that there is much in social work education, ethics, and practice that can and should be adopted by lawyers. These qualities are especially important for those who represent, and those who teach others to represent, both low income and disadvantaged clients.” \textit{Id.} at 64.
dating phone call with a government agency.

Very often there is a direct legal pay-off to these moments. These are all moments that build trust in the lawyer-client relationship, which leads to successful legal outcomes in individual cases. They are also moments that allow the advocate insights into the lived experiences of client constituent communities, allowing for more effective collaboration in meaningful systemic advocacy. A moment of kindness often opens the door for clients to share stories of poor and denigrating—and at times discriminatory—treatment in other settings. The legal pay-off is not always foreseeable in the moment, however. Sometimes these moments are simply friendly gestures\(^3\) of “neighbors being neighborly to neighbors.”

II. MLPC DURING THE COVID-19 PANDEMIC

MLPC’s pedagogy of community partnership faced tests during the COVID-19 pandemic but ultimately proved effective in maintaining relationships. The COVID-19 pandemic challenged MLPC’s neighborhood-centered model: being on-site and easily accessible were critical to MLPC’s services and relationship with the community, and that physical presence was suddenly untenable during the COVID-19 pandemic. Nonetheless, following MLPC’s longstanding tenets and working through our pre-existing collaboration with KKV community health center and other community partners, MLPC was able to pivot quickly to meet the demands and conform to the “new normal.” As the overlapping crises of COVID-19, economic devastation, and racial injustice affected our client communities, the value of MLPC’s model became increasingly clear.

A. Being There – Virtually

COVID-19 posed a challenge to MLPC’s first tenet of “neighborliness.”\(^4\) Accessibility to clients and relationships with client communities are both important elements of MLPC that were facilitated through in-person interaction.\(^5\) MLPC attorneys would sit with the door open at the health center, just a block away from the public housing complex that many clients called home. Clients could easily access legal services through their existing relationships with their local community health center providers.

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\(^3\) A MLPC community partner, Jendrikdrik Paul, President of the Marshallese Community Organization of Hawai’i, described the key to building trusting relationships as, “We’re not just colleagues, we’re friends,” Telephone Interview with Jendrikdrik Paul, President, Marshallese Community Organization of Hawai’i (Jan. 4, 2021).

\(^4\) See supra Section I.E.1.

\(^5\) See supra Section I.B-C.
The unprecedented nature of the pandemic led to many limitations and closures, and in the early days of COVID-19, many were scared to leave their homes. As attorneys working in a medical space, MLPC was particularly mindful of the needs of our healthcare partners, the safety of our medically vulnerable clients, and the overall public health of the neighborhood. When the MLPC team first cancelled in-person KKV legal clinics and education workshops in March 2020, we were unsure how being “neighborly” would look in this new reality.

Far from being an impediment, however, this tenet became one of the main reasons MLPC was able to quickly adapt. First, the pre-existing relationship between MLPC and the health care providers at KKV became vital on a practical level. Prior to the pandemic, MLPC attorneys would meet with clients directly onsite, usually through a referral from a healthcare provider immediately after a medical exam. With COVID-19, MLPC transitioned mostly to online referrals and consultations through video or phone conferencing, which were accomplished with the assistance of an onsite provider and interpreter at KKV. Clients still combined their medical appointments with legal ones. Medical providers continued to identify legal needs during health appointments, mainly through the pediatric and behavioral health departments. Sometimes pre-existing clients also called or emailed one of the attorneys separately. Now, however, MLPC attorneys set up new systems for remote sessions, using tablets and other mobile devices to mimic the onsite legal consultation process. KKV staff also facilitated meetings for patients without regular access to a telephone or computer, ensuring that technology access was not a barrier to clients. Finally, the community health center continued to provide trusted language interpreters, a critical, legally required, and trust-building necessity that was even more essential in remote communication.

Furthermore, the last decade of fostering a relationship of trust with patient-clients and the community health center proved critical. The pre-existing relationships allowed clients to rely on trust to share sensitive legal information through new technology methods during a time of crisis. Rather than looking outward, community members

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87 See supra Section I.A.
89 In our experience, the claim that “everyone has a smart phone” is simply not true. Many of our clients have no regular access to phones or share cell phones, including older
leaned on their local health center. Local community health centers and community-centered non-profit organizations filled the voids where larger municipal entities fell short.\footnote{Eleni Avendaño, Oahu Turns To Community Health Centers To Boost COVID-19 Efforts, HONOLULU CIVIL BEAT (Nov. 12, 2020), https://www.civilbeat.org/2020/11/oahu-turns-to-community-health-centers-to-boost-covid-19-efforts/ (reporting that in response to pandemic relief funds going directly to KKV health center, Director David Derauf said, “To the extent we can get those dollars out into the community through existing channels that have longstanding relationships, then that starts to happen faster . . . . We know there’s been a lot of frustration, for example, getting rental assistance out, and this is one way we can expedite that.”); Ku’uweli Hiraishi, Why Hawai‘i’s Marshallese Are Taking COVID-19 Matters Into Their Own Hands, HAW. PUBL. RADIO (Sep. 9, 2020), https://www.hawaiipublicradio.org/post/why-hawaii-marshallese-are-taking-covid-19-matters-their-own-hands#stream/0.} For example, many experienced difficulties in accessing timely unemployment benefits and rent relief subsidies. As a result, local community health centers provided assistance with benefits navigation and launched their own rent support programs. As the situation developed, community health centers and local organizations provided other response measures, such as contact tracing, COVID-19 outreach, food drives, and other necessary support services.

Overall, MLPC’s decade of being embedded in the community and health center allowed our services to continue smoothly. In fact, MLP saw doubled case referrals in 2020 despite the shift to remote services. Cases grew in a variety of practice areas, like eviction defense and advocating for unemployment benefits. We also increased “curbside” consultations, in which medical and other service providers asked questions prior to a client referral. During the pandemic, these physical “curbside” consultations transitioned to electronic sessions, which allowed providers greater flexibility to consult at a convenient time. For example, KKV’s behavioral health providers often consulted about an anonymous client via Zoom chat or encrypted email. If the MLPC attorney felt that more information was needed to vet the case, then he or she could formally initiate a full legal consultation. The MLPC’s longstanding integration into the community health center allowed for a seamless transition to virtual conferencing methods and allowed us to amplify our voice with the community when it was most needed. As a member of a broader team, MLPC transformed the tenet of “neighborliness” to being there for our client communities virtually.

\textbf{B. Expanding the Roles of Attorney, Client, and Community}

The MLPC’s second and third tenets of expanding what can traditionally be considered a lawyer’s role and client’s role were also criti-
cal in allowing for the flexibility, dexterity, and creativity needed to successfully respond to the COVID-19 pandemic. COVID-19 challenged these tenets initially too, as much of our power-building and non-traditional legal education work had relied on human connections. As we canceled in-person legal education and outreach events, it was unclear how this work would look. Ultimately, these tenets encouraged MLPC to leverage technologies and existing relationships to come up with creative solutions together with our clients and community partners. MLPC responded in several ways.

First, MLPC adapted together with our healthcare partners. With the consent of the client, the MLP model allows the attorney to confer with healthcare staff to achieve case objectives. The pre-existing focus on team collaboration became even more necessary during COVID-19, when providers were precluded from traditional case conferencing methods, that normally took place during the twice-weekly onsite clinic hours. After COVID-19, MLPC structured regular weekly video meetings with both medical and legal providers, with part of the agenda dedicated to case conferencing. This allowed both legal and pediatric providers to collaborate and strategize on case issues. MLPC also increased remote communication lines with healthcare providers outside those meetings. These and other remote communication options proved to be a convenient benefit that will endure after COVID-19, particularly for providers working remotely offsite and on their own independent schedules.

Second, MLPC bolstered its own staff capacities. As the pandemic developed and it became evident that more services were needed, MLPC hired a part time interpreter/intake liaison to facilitate client intake and interviews. This new member of the team is not only a professional interpreter but also a trusted community advocate. Thus, MLPC was able to connect its model of community lawyering to what is called “community interpreting,” which, as Muneer Ahmad describes, “explicitly contemplates an active role for interpreters in ensuring equal access to legal, health, and social services for LEP individuals.”

Third, MLPC embraced creative solutions to communication challenges. MLPC employed whatever means of communication was

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91 See supra Section I.B.
93 Ahmad, *supra* note 42, at 1066 (“In practice, and as a normative approach advocated by a small but growing literature on the subject, community interpreting blurs the boundaries of traditional interpreters, frequently embracing cultural brokering, advocacy, and conciliation as a part of the interpreters’ project.”).
most practical for the client, from text and picture messaging to email to regular mail. This flexibility allowed clients the option to communicate confidentially and securely in the manner most comfortable to them. If an in-person signature was required, this was accomplished with the help of healthcare providers with whom clients had in-person appointments, or by meeting in outdoor locations. Like other providers, we met clients in parking lots and on sidewalks outside of KKV and public housing complexes in order to facilitate document exchanges and signatures.

Fourth, MLPC continued to embrace moments when clients required what might traditionally be considered non-legal tasks. These moments took on increased importance during COVID-19 as need in all areas grew. We assisted families in navigating rent relief programs, including proactively reaching out to previous clients. We helped clients understand changing laws, like mask mandates and eviction moratoriums. We walked through confusing government forms and used our access to computers to help clients who were applying for benefits for the first time.

Fifth, MLPC worked together with other community partners. These relationships have always been a bulwark of MLPC. As community partners also took their work onto virtual platforms, MLPC maintained those connections and developed new ones. We responded to requests for community trainings from the City & County of Honolulu, AlohaCare insurance provider, and Micronesian community groups like the Big Island Kosrae COVID-19 Task Force; all of these requests stemmed from prior, longstanding relationships with key personnel. We worked strategically with other attorneys and grassroots community advocates to address illegal evictions and craft media messages to illuminate illegal and often discriminatory landlord practices. We also participated in organizing efforts alongside Micronesian communities facing high COVID-19 rates and discriminatory policing—an intersection not carefully contemplated or addressed by many others up until that point.

Finally, MLPC leveraged technology and learned new skills to continue its community education goals. MLPC updated our website in an effort to reach more people. This included regular updates and

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94 Outdoor locations were recognized as safer than indoors due to lower likelihood of COVID-19 transmission. There are still COVID-19 risks for outdoor meetings, so advocates were always careful to maintain other safety measures like masks and social distancing. Michael Levenson, Tara Parker-Pope & James Gorman, What We Know About Your Chances of Catching the Virus Outdoor, N.Y. TIMES (May 15, 2020), https://www.nytimes.com/2020/05/15/us/coronavirus-what-to-do-outside.html.

95 Shek, supra note 75, at 153.

96 See infra Section IV.B.
legal “alerts” that were made available to the public for educational and outreach purposes.\textsuperscript{97} MLPC attorneys created infographics, alerts, posters, and videos so that the legal knowledge would be accessible to as many people as possible.\textsuperscript{98} MLPC also took part in speaking to media and authoring editorials.\textsuperscript{99} Community members and partners relied on these services when messaging from state and county offices lacked clarity.

\textbf{C. Student Involvement and Pedagogy}

Student interns of the William S. Richardson School of Law have been actively involved in all aspects of MLP work since our founding.\textsuperscript{100} Throughout the pandemic, all interactions with students followed pandemic protocols and were done via remote options. MLPC attorneys met with students through videochat to discuss case assignments and debrief on research findings. MLPC was fortunate to have had many interns over the course of the pandemic period. These students, ranging from 1Ls to 3Ls, worked on an array of case issues including public and private landlord tenant issues, workers’ compensation claims, drafting legal memoranda, case and statutory research, and mediation preparation.

Working with students remotely during the pandemic was also an opportunity to refine and teach the MLP pedagogy of community partnership, as well as to teach more broadly the national MLP, community lawyering, and racial justice models.\textsuperscript{101} COVID-19 and the other crises of the moment provided learning opportunities for students to more fully understand community lawyering during a time when their effect was critical. As we guided our students, we were


\textsuperscript{98} In addition to the MLPC website, MLPC also posted MLP Alerts and other resources on its MLPC Hawai‘i (@mlpchawaii), INSTAGRAM, https://www.instagram.com/mlpchawaii/?hl=en (last updated Aug. 28, 2021), and its Facebook, MLPC Hawaii, FACEBOOK, https://m.facebook.com/mlpchawaii/ (last updated Aug. 27, 2021).


\textsuperscript{100} The William S. Richardson School of Law (WSRSL) requires every student to complete 60 hours of pro bono work. MLPC Hawai‘i accepts students year-round to engage as pro bono volunteers, clinic students and externs for course credit, and paid fellowships such as the WSRSL Advocates for Public Interest Law.

\textsuperscript{101} See supra Section I.
learning these lessons ourselves. No one knew what to expect out of COVID-19, and so equal knowledge sharing between attorneys, students, clients, and others—already a key part of community partnership—carried heightened importance during this time. We encouraged students to bring their own creativity to lawyering. For example, faced with multiple calls regarding lost Unemployment Insurance online accounts, one MLPC student came up with the idea of a bookmark simplifying the steps for individuals with varying levels of technology access.102 Additionally, with increased volume in new referrals and intakes, students had increased opportunities to lead client intakes and interviews. Students attended and were active participants in weekly MLPC staff meetings, which allowed them to become acquainted with all the workings of the organization. Our students reported feeling like full members of the team, whose opinions and suggestions were valued and appreciated.

Overall, the pandemic galvanized the importance of creative and proactive lawyering. A regnant model of lawyering may have led to resistance to expanding outside the bounds of “traditional” lawyering, thus inhibiting effective services.103 Rather than resisting change, MLPC was open and willing to adapt in any way that served our clients best. Throughout this process, we continued to stress and emphasize the importance of “self-advocacy,” knowing that despite our best efforts, we may not know when we will see our clients again, especially during the multiple challenges of the pandemic. Rather than leaving our clients vulnerable and dependent on access to a lawyer, we aimed to go beyond the task at hand and arm them with legal information and practical skills to advance their own “lay lawyering.” In addition, we also made this information readily available to providers and other community partners to enhance their advocacy skills. Through this method we were able to amplify our voices at a time when we were all physically distanced and separated from our clients. We credit our success to our continued partnership with Kōkua Kalihi Valley and other trusted community groups.

III. CHALLENGES FOR THE MLPC PROGRAM

A. Criticisms of MLPC Lawyering

The MLPC Hawai‘i developing pedagogy and praxis that allowed us to respond during the pandemic and to model new ways of lawyering also comes with challenges. Because the pedagogy of commu-

102 MLP Alerts, supra note 97.
103 See supra Section I.E.2. See, generally, López, supra note 40; Ancheta, supra note 41, at 1367-1372 (exploring what makes lawyering more regnant versus more rebellious).
nity partnership is explicit in centering race and seeks to change systems that delegitimize community expertise, confronting these power systems requires new problem-solving skills and client counseling skills. We next address common criticisms from government service providers and other members of the legal community that attorneys and law students must learn to respond to.

1. “Not Legal Enough”

One of the challenges MLPC faces is carving out our role as lawyers when working on matters often viewed as “not legal enough” for our involvement.104 Because our policy advocacy (“upstream” work) is rooted in our direct services work, we see and understand the compounding systemic challenges of racism, patriarchy, and government system delivery through individual client matters. Following our clients as they try to access a bed in an emergency shelter, apply for welfare benefits, or engage in other “non-legal” transactional tasks is an irreplaceable window into the way most people experience how our government and social services implement care. These stories illuminate how race, gender, and colonial and military legacies work to reward, or disempower communities and individuals. The experiences of an individual client demonstrate barriers faced by the entire community—including barriers our system chooses not to confront. Their experiences often reveal underlying system values that condone or perpetuate rather than confront racism and discrimination.

Many times, some of the biggest barriers are also the most mundane—not flashy cases, but invisible injustices. For example, lack of access to a copy machine is a significant barrier for individuals receiving state welfare benefits who must make copies. The costs per page mean that clients must pay about $15 in copy fees for pay stubs and other documentation in order to receive a total benefit of $388 a month.105 During the pandemic when offices were closed, cutting off access to free copy machines, this barrier became even more challeng-

104 This critique has been lobbed at many public interest lawyers engaging in many types of work over the course of many decades. See Aiken & Wizner, supra note 47, at 63-64; see also López, supra note 40, at 12 (confronting this challenge through López’s fictional protagonist and illustrating a common refrain heard by public interest lawyers: “Her father, a private big-firm attorney with liberal leanings, supports her decision to go into public interest law, but he thinks she should work first for a large firm, ‘just for a few years,’ so that she can get ‘proper training.’”)

105 This was the amount for General Assistance, administered by Hawai‘i’s Department of Human Services. The Department began in March 2021 to reduce those payments from $388 to $260 a month. Hawai‘i reduces welfare payments to about 6,700 residents, ASSOCIATED PRESS (March 22, 2021), https://apnews.com/article/hawaii-honolulu-homelessness-710f080813ef058de6a29a10b15c32b9c.
Access to these resources is often not viewed as a systemic challenge, and policymakers often fail to focus on removing these practical barriers to enhance access. Yet, we as lawyers see the “downstream” effects in the form of inevitable increases in administrative hearings for individuals wrongfully terminated from welfare benefits because they were unable to provide documentary evidence.

Lawyers partnering with communities to address system barriers like access to copy machines, however, is often viewed as an inefficient use of our time, and not a legal problem. Our presence as attorneys in problem solving conversations requires new counseling skills and communicating directly about these expectations with clients. Together, we demonstrate how program administration and the daily transactional work of an agency effectuates “legal policy.”

Our pedagogy of community partnership involves training community members in Advocacy Academies to act as their own self advocates. When we refer to Advocacy Academy workshops as “mini law school” for community members, we have heard lawyers balk at the idea of non-professionals being trained as “lay lawyers,” even if this is both a key aspect of rebellious lawyering and necessary. Underlying their reaction is a societal devaluation of the knowledge and skills of non-professionals, particularly those with expertise in community organizing and advocacy.

2. “Not Important Enough”

Our pedagogy of community partnership involves training community members in Advocacy Academies to act as their own self advocates. When we refer to Advocacy Academy workshops as “mini law school” for community members, we have heard lawyers balk at the idea of non-professionals being trained as “lay lawyers,” even if this is both a key aspect of rebellious lawyering and necessary. Underlying their reaction is a societal devaluation of the knowledge and skills of non-professionals, particularly those with expertise in community organizing and advocacy.

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108 See Shek, supra note 14, at 138. (“Academy begins with a dynamic presentation about a rights issue (e.g., language access, housing, public benefits, family law) that often includes role-playing common scenarios. Basic lessons are shared about the mechanics of the law, regulations, and procedures. Participants will then practice self-advocacy skills, including, for example, taking notes during class, role-playing various scenarios, practicing to request documentation, or simply repeating, ‘I need an interpreter!’ Advocacy participants often then share their own experiences and stories of barriers and of success when navigating complex and unfriendly systems. In this safe space, race stories, including triumph over discriminatory encounters and systems, are shared. At the end of each session, participants are asked to suggest future topics to explore. Advocacy Academy moves beyond traditional “know your rights” workshops in two ways. First, by teaching skills, through hands-on, experiential learning, for navigating complex systems. Second, by consciously incorporating policy knowledge so that these family navigators understand not only what is happening to them, but why, and to whose benefit.” (footnotes omitted)).

109 See López, supra note 40.
abilities of our client communities, often because of the legacies of racism and patriarchy.\textsuperscript{110} The voices and perspectives of those most impacted by poverty-related policies are commonly deemed not knowledgeable or relevant enough to be at the policy table.

Part of the MLPC pedagogy is to reframe the idea of “community knowledge gaps” and instead view the partnership as “different knowledge contributions.” Centered in a racial justice framework, MLPC acknowledges the legacies of racism that lead to devaluing the knowledge and power of community. Communities and lay advocates know how to navigate systems while contending with the layered narratives of race, gender, immigrant status, colonialism, and militarization. Communities have important knowledge that is equally important to outcomes, and survival under systems of racism and patriarchy mean communities have already trained lay advocates with important knowledge to contribute. Lay advocates know that going to a certain agency office is better because security protocols at the other site result in clients being unable to access the building lobby. Lay advocates know staffing schedules at offices and can identify those employees who are better at communication with LEP clients. Lay advocates know that racism and discrimination mean that challenging a worker or asserting their rights can lead to being labeled as uncooperative or even dangerous. Most times lay advocates know how to navigate complex systems better than lawyers. This type of on-the-ground knowledge is not taught in an academic classroom setting. Even more importantly, it acknowledges the ways in which centering race is vital, as the lawyer may have knowledge gaps in understanding the practical strategies needed to assist individuals as they confront racism embedded in systems.

We have seen our work inspire visceral reactions from other members of the legal profession, who are concerned about diminishing or de-professionalizing the work of a lawyer. However, in reality, it is only by valuing the knowledge of our clients that we are able to fulfill our profession as attorneys, and center race in our work to actually improve outcomes. Our clients lay the groundwork for the partnership, at which point we are all equipped to share our respective knowledge. Our community partnerships mean we are in constant communication to spot challenges and barriers together, to provide comprehensive self-advocacy training, and to work together to analyze and create the most appropriate response. Only then, when com-

munities most affected are at the table and heard, can systems be truly responsive.

3. “Too Adversarial”

As MLPC attorneys, we also train students on our model of prevention, working to address problems before they become “legal.”111 Because it is unusual for lawyers to be present at these early stages, other lawyers and government service providers have criticized our program’s early legal intervention in cases as needlessly adversarial. This is particularly relevant when we make race and bias explicit in our advocacy. The nature of the practice of law is too often seen as only adversarial. The prevailing view of the attorney is that of a zealous advocate looking for evidence of wrongdoing, rather than that of a subject matter specialist, mediator, or even system problem solver. For frontline staff at government agencies, a phone call or meeting they see as routine is not a place where they expect, or want, to see an attorney. Discussing race or gender explicitly as a consideration is seen as needlessly complicating or causing division.

Working as an MLPC Hawai‘i lawyer means developing the client counseling and advocacy skills to directly confront, inform, and complete a power analysis112 with clients. For example, during client counseling, the MLPC attorney will discuss with a client the pros and cons of when to have the MLPC attorney on the call, and when to have the client work on their own. A power analysis with our clients directly addresses implicit biases—often acknowledging and validating their experiences of being treated differently or disrespectfully—and situates their individual case within the larger contexts of systemic justice movements. Client counseling skills mean understanding when a client may have the legacies of racism land on their shoulders directly. Working together, the MLPC attorney and client engage in complex problem-solving, spotting which issues are better tackled in tandem, and which issues require more direct legal intervention.113

111 This expands on the general MLP model of preventative legal care. See supra Section I.B.


113 This is actually required by basic professional responsibility. Hawaii Rules of Professional Conduct, Rule 1.2(a) Scope of Representation and Allocation of Authority Between Client And Lawyer (“Subject to paragraphs (c) and (d), a lawyer shall abide by a client’s decisions concerning the objectives of representation, and, as required by Rule 1.4, shall consult with the client as to the means by which the objectives are to be pursued. A lawyer may take such action on behalf of the client as is impliedly authorized to carry out the
4. “Special Treatment”

Government service providers have also criticized early intervention by attorneys as inappropriately asking for better attention for our clients, as compared to the general population. For example, when MLPC lawyers and students work upstream to ensure that a client receives a comprehensive shelter services screening to ensure they are ‘scored’\(^{114}\) to be best placed with appropriate housing and case management services, our program has been criticized as lawyers working for “special treatment” for clients. Yet most of these clients are immigrants with limited English who were overlooked or under-scored by traditional screening methods.

MLPC Hawai‘i pedagogy means to make explicit when this response by the system is due to the history of racial, gender, and other forms of discrimination. When the MLPC attorney is involved in early intervention on behalf of those in poverty or with limited English proficiency, we are often confronting systems that expect poor people and immigrants to be content with a status quo that marshals them through systems that are chronically underfunded, and thus consistently fall short of adequate services and even civil rights compliance.\(^{115}\)

As we follow our clients through services, the involvement of lawyers can be seen as not working ‘collaboratively’ because it disrupts both the service side (where clients are not expected to push back) and the policy side (where clients and even frontline staff are not expected to have input). Our lens of racial justice means not accepting a system of dysfunction that disproportionately affects Native Hawaiians or Pacific Islanders in our community. Additionally, with our community partnerships, we are able to work together, and know when client experiences are not outliers, but standard procedures.

Part of the problem is that for many systems that provide benefits for those in poverty, their function is too often viewed only as “benefits” rather than essential government functions.\(^{116}\) Government service providers, as well as charitable organizations, are often unaccustomed to being held accountable for gaps in access or system representation. A lawyer shall abide by a client’s decision whether to settle a matter. In a criminal case, the lawyer shall abide by the client’s decision, after consultation with the lawyer, as to a plea to be entered, whether to waive jury trial, and whether the client will testify.”).


\(^{115}\) Lawrence, supra note 17.

\(^{116}\) See John McKnight, Services Are Bad for People: You’re Either a Citizen or a Client, ORGANIZING, Spring/Summer 1991, at 41, 41-44.
dysfunctions. Similarly, indigent legal services too often are framed as only providing acute and necessary emergency legal interventions to those in poverty. Systemic advocacy and working to problem-solve to meet community needs together is not seen as a space for indigent and poor communities.

Overall, using the public health model to discuss the acute care issues of “direct service” while working on more “upstream” preventive lawyering through community partnership helps us respond to criticisms. Most importantly, focusing on a power analysis and building community power as a team partner, rather than through a purely client services approach, has proven most helpful. The true power of our model of partnership lies in investing in community ownership, education, and power to tackle systemic inequality and positively address community wellbeing. As the community begins to flex their power—in individual transactional work, in broader community agenda-setting, and in training everyone to assert their rights—we hope to see the benefits of our work together. Every day we challenge ourselves to better develop how we work in partnership.

B. The Challenges of Funding

Funding has always shaped public interest lawyering services. The COVID-19 pandemic highlighted and exacerbated these dynamics, as the community’s needs both expanded and deepened in a myriad of ways. The pandemic crisis made some one-time donations and grants available, but in general traditional nonprofit funding sources are not conducive to community lawyering. Tensions remain between MLPC’s tenets and the requirements of many funding opportunities.

1. Influencing the Process

Funding can influence how an organization undertakes its work. Most notably, organizations who receive federal Legal Services Corporation (LSC) funding face strict restrictions on their legal activi-
ties, and some state funds also include restrictions. Further, many grants, especially government funding for “legal aid” services, provide funding based on the number of cases while limiting the number of hours per case. Most civil legal services funding does not reward assisting families with “non-legal” work like completing Head Start applications or engaging in hours-long meetings to help a single mother self-advocate in a criminal law setting. Even less restrictive grants often include burdensome reporting requirements to clearly delineate (and properly account for) lawyers’ time and types of services. On the other hand, grants that fund policy and community engagement work often distinguish and exclude funding direct legal services. While many non-profit organizations aspire to maintain diverse funding streams that allow for both lawyering and advocacy activities, this is difficult to maintain. It is a rare grant opportunity that supports community lawyering elements and does not venerate case closure numbers.

122 See Alan W. Houseman, Restrictions By Funders And The Ethical Practice Of Law, 67 Fordham L. Rev. 2187, 2188-2193 (1999) (describing the history of LSC-funding restrictions and considering the ethical implications for civil legal assistance providers); Quigley, supra note 121, at 264 (1998) (“Congress has decided that legal aid alone and not legal aid and law reform will be available to the poor. As a consequence, poor people’s lawyers will not be allowed access to all the tools available to the lawyers for the rest of the population.”).

123 See Houseman, supra note 122, at 2196-97 (explaining state-created restrictions for Interest on Lawyers’ Trust Accounts (IOLTA) and other funds, and detailing examples from Texas and Washington).

124 See, e.g., Section 2.5: Compensation and Method of Payment, Legal Advocacy, Outreach, and Referral Services to Protect the Rights of Children and Their Families (Dec. 5, 2012) (on file with authors) (allowing for $70/hour for lawyers and $35/hour for non-lawyers and for the maximum amount per case to be $3,500, requesting a proposal that estimated the anticipated number of service hours by category, and then requiring tracking and monthly reporting on hours per case for each category); see also Nathan Eagle, Hawaii Lawmakers Quietly Dole Out Millions of Dollars in Grants, Honolulu Civil Beat (May 7, 2015), https://www.civilbeat.org/2015/05/hawaii-lawmakers-quietly-dole-out-millions-of-dollars-in-grants/ (describing the lack of transparency and politicization of the state’s grants-in-aid process).

125 Many of these challenges arise in private funding sources as well. Much has been written about the trends, opportunities, and challenges of private philanthropy. See, e.g., Richard L. Abel, Law without Politics: Legal Aid under Advanced Capitalism, 32 UCLA L. Rev. 474, 537-39 (1985) (explaining the history of philanthropy in establishing legal aid in the nineteenth century and subsequent role in shaping it, with related limits); Susan R. Jones, Current Issues in the Changing Roles and Practices of Community Economic Development Lawyers, 2002 Wis. L. Rev. 437, 443-45 (2002) (discussing the subfield of Community Economic Development public interest law, which has always involved private entities, including trends in charitable giving); Sally Brooks, Melissa Leach, Erik Millstone, & Henry Lucas, Silver Bullets, Grand Challenges And The New Philanthropy (2009).

If community lawyering elements do not “count” towards funding, then they can be difficult to maintain and prioritize. Funding solely focused on a narrow view of “direct legal services” would undercut our core tenets, including promoting community power\textsuperscript{127} and encouraging staff to spend the time to address an array of client needs.\textsuperscript{128} Such grants can actually undermine efforts to build relationships with clients and communities, work that is essential to our racial justice commitment. For example, when a client comes to us with a problem that is stressful or shameful, if we cut short our time with them because the issue is not “legal” enough, then that sends our client the message that we do not want to hear from them. In tight-knit client communities, that message spreads.

Finally, when reporting on community lawyering work for grant evaluations and applications, it can be challenging to describe and uplift work that is not only done in collaboration with others but also meant to place constituent communities at the forefront. The pedagogy of community partnership runs counter to the “lawyer as hero” narrative, and rarely boasts of “wins” and finite case closures.\textsuperscript{129} In a field that rewards formal representation and lawyers winning and closing cases, quickly, it is often difficult to quantify the legal outcomes of a client who successfully self-advocates at the public housing office after we walk her through the process or the ten hours over several weeks that an attorney spends on safety planning with a mother escaping domestic violence, even after the mother ultimately decides against filing a restraining order or engaging in other legal procedures.

The COVID-19 pandemic and related economic crisis magnified these funding and reporting dynamics. During an unprecedented time of need among our clients, we expanded our services in ways that would have been in tension with traditional funding requirements. MLP increased its workload substantially over the course of the pandemic, and some of those cases were “curbside” consultations\textsuperscript{130} with medical and other service providers. In other words, while we did not form the traditional “lawyer-client” relationship with some of those individuals—and, relatedly, did not assume the role of the “hero law-

\textsuperscript{127} See supra note I.E.2.
\textsuperscript{128} See supra note I.E.3.
\textsuperscript{129} As a reporting matter, we follow standard protocols for counting and closing legal case matters. But as a practice matter, we rarely tell clients “your case is closed” if a client returns after completing a legal matter. Instead, we invite them to update their situation and assess whether to re-open a previously “closed” legal matter or to open a new matter. As a neighborhood-based, community health center—their “legal home”—MLPC recognizes how legal norms can work to undermine community relationships.
\textsuperscript{130} See supra notes 21-22.
yer” who takes credit for relaying information and sharing knowledge—our role as part of a larger community of providers allowed us to help more community members through the moment of crisis than otherwise would have been possible by restricting ourselves to traditional representation.

MLPC continued to practice rebellious lawyering in ways that were less visible to other attorneys and especially to traditional funders. We did this both on the direct services side, like assisting families in navigating rent relief programs, and on the systemic advocacy and education side, responding to requests from a range of community groups for education workshops or their own “curbside” consultations.131 We also engaged in extensive behind-the-scenes work to uplift community voices and power, such as ghostwriting and co-authoring popular and scholarly works and engaging in extensive community organizing.132 Despite the fact that this was not quantifiable and not necessarily traditional lawyering, our intention was simply to respond to community needs and provide the most information possible in the hopes that it would benefit people during a hard time. These actions may not be easy to compartmentalize into normal reporting categories, but they have been essential at a time when people need information and support from someone they can trust.

2. Influencing the Substance

Funding can also shape community advocacy in complex ways by molding priorities and centering attorneys in ways that strain community lawyering tenets. Some funders are aware of these subtleties and have critiqued and sought to transform their own roles. Benjamin Márquez, for example, illuminates the history of the Ford Foundation’s role in building the Mexican American Legal Defense and Educational Fund (MALDEF) and shaping Latinx politics.133 The story of the relationship between funding and advocacy is complex.134

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131 See supra Section II.B.
134 Id. at 8 (“I contend that foundations, corporations, and the wealthy individuals who give to MALDEF are arbiters in the articulation of community interests. These entities and individuals set the terms of engagement by funding specialized entities that employ teams of professional advocates. Resource-poor populations are especially vulnerable to financial agenda-setting that confers legitimacy and grants longevity to those who engage
Recently, the Ford Foundation has been making headlines for the efforts of its president Darren Walker to move his $14 billion foundation “from generosity to justice.”135 Nearly thirty years earlier, another major foundation took steps to consider centering the practical needs, voices, and power of traditionally under-resourced communities. In 1992, Charles Lawrence III, led a review for the Rockefeller Foundation that culminated in a report, *Sustaining the Struggle for Justice: A Program Review of the Basic Rights Portfolio*.136 At a time of great crisis following the Rodney King verdict and subsequent riots, the foundation sought to re-think their strategies and interventions. Two recommendations were to “provide support to advocacy organizations for transactional lawyering,” and to “make and steward investments in human capital, the most important asset of basic rights organizations.”137

At MLPC, our pedagogy of community partnership closely tracks many of the specific recommendations offered by Professor Lawrence including the idea that “transactional civil rights advocacy involves the work of building the capacity of constituent communities to advance their own interests. It is more important for lawyers and other advocates to help individuals and groups from minority communities gain a voice and a continuing role in policy-making than it is to win substantive decisions establishing judicially or legislatively created rights.”138 Three decades after this report, meaningful funding for power-building work like this remains rare. Our adherence to following community needs and advancing community voices, rather than independently agenda-setting, makes us cautious and careful about the various influences tied to funding opportunities.

IV. Case Stories: Pedagogy of Community Partnership in Action

Our pedagogy of community partnership develops directly from our practice. We offer two case stories—one in our direct services work and one in our systemic advocacy work—to illustrate the chal-

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136 Lawrence, supra note 107.
137 Id. at 44-45.
138 Id. at 26.
lenges that arose during COVID-19 and how we see our pedagogy through our client and community work.

A. Compounding Legal Troubles and MLPC’s Pedagogy in Direct Services

Joanna\textsuperscript{139} resides in a local public housing complex near KKV with her children. She was a former client, and after her prior matter ended, we encouraged her to keep in touch. When she experienced new legal issues during COVID-19, she turned to a familiar resource and called us.

During the early days of the pandemic, Joanna’s husband suddenly abandoned the family, sparking a series of housing and public benefits issues for Joanna, during a time of office closures and general confusion. To make matters worse, all her children contracted COVID-19. As the sole caretaker, she had no ability to work as the children required around-the-clock care. Once they thankfully recovered, she was able to obtain part time employment at a small retail store. However, bad luck continued to strike as she was precluded from starting her first day on the job due to the City and County of Honolulu’s mandatory closures of all non-essential businesses.

The first problem was housing, as Joanna had no other means to pay the outstanding rent. Under normal circumstances, as a Project-Based Section 8 tenant, Joanna could have reported her household income changes to management and have the rental charges amended. However, due to COVID-19, many state offices had closed to the public. State agency office closures led to confusion for many tenants. Reporting monthly income changes quickly morphed into a “he said she said debate,” with tenants swearing that they had communicated the information beforehand and housing providers denying it. For those like Joanna without regular phone and computer access, these processes became more difficult. Additionally, she had heard various rumors from friends that, as a legal permanent resident, she may not be able to qualify for housing assistance independently, without her U.S. citizen husband.

Earlier in the pandemic, in response to confusion from many clients following office closures, MLPC had updated our self-help template for reporting income changes in subsidized housing to include COVID-based changes. The goal was to reduce the reliance on verbal communications and help tenants transition their transactions into something that could be proven via written record. Our healthcare

\textsuperscript{139} MLPC shares the following client story with permission from the client. We have changed the client’s name and certain identifying details.
partners passed out these forms to clients during doctor’s visits and reminded them of their housing rights. However, even with this proactive approach, tenants like Joanna still experienced delay in the adjustment of their rent.

Joanna continued to incur bills based on outdated financial information. Once she was finally able to reach her housing management, they instructed her to obtain a signed affidavit from her husband to amend the rental amount. This task seemed impossible, as he had abandoned the family. Finally, with the assistance of other family members, she was able to locate him and obtain the executed affidavit. By that point, the outstanding balance had ballooned to over $10,000.00.

MLPC negotiated on Joanna’s behalf and pursued other avenues of relief, helping Joanna seek financial assistance for her remaining rent and utility expenses. Ultimately, Joanna successfully received rental assistance, finding success in smaller neighborhood organizations rather than larger State and County agencies. MLPC also assured Joanna that her immigration status made her eligible to continue to receive Section 8 benefits, and that those benefits would not hurt her immigration status.

At that same time, Joanna encountered a second problem when the Hawai‘i Department of Human Services suddenly terminated her welfare benefits for the same reason of failure to report spousal income information. Joanna shared yet again that she could not provide this information because her husband had abandoned the family—to get a second affidavit from the husband would have been too difficult. At that point, MLP attorneys formally intervened and threatened an appeal, and the Department of Human Services finally restored Joanna’s benefits.

Cases like Joanna’s highlight the compounding challenges that individuals face daily and that are exacerbated by the COVID-19 pan-

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141 This situation would not have occurred had there been a practice of communication between the agencies. A simple note in the file from the housing department indicating that the individual had abandoned the household would have notified DHS of the issue. This could have prevented the unwarranted termination of benefits at a time when she needed it most. In contrast, state agencies will immediately share client information when, for example, the public benefits office shares information about a family separation in order to trigger a child support case with the goal of recovering funding back to the state from the non-custodial parent. At times this occurs without the meaningful knowledge of the reporting parent.
demic. Tasks that already presented challenges became increasingly difficult when offices closed for in-person business. Her case also highlights how community health centers and other neighborhood organizations were best poised to meet needs when the pandemic hit. These institutions were successful due to the underlying trust and relationships fostered with members of the community for the many years preceding COVID-19.142 These groups were receptive to patient-client needs, equipped to address their cultural and linguistic needs, and overall more aware of how COVID-19 caused disproportionate problems for patient-clients. At its core, the emphasis was placed on proactive, rather than reactive response protocols.

Joanna’s case also offers an example of how MLPC’s pedagogy of community partnership requires collaboration between client, legal advocate, and other trusted providers. Here, MLPC and Joanna worked together to determine when MLPC would intervene behind the scenes—by walking her through her rights and various processes and by providing form templates that she could submit without a formal lawyer at her side. MLPC and Joanna also worked together to determine when a more active intervention by the attorney would be necessary. Although MLPC attorneys took a more direct approach in representing her in front of the housing authority and welfare department, it was still a team effort. Joanna’s children’s healthcare provider was an important part of connecting Joanna to MLPC resources, and Joanna’s extended family was also important in securing that affidavit on which her housing management insisted. The informed contributions of multiple people—most centrally of which was Joanna—was a critical component to Joanna’s case.

Finally, MLPC’s intervention at these early “non-legal” stages of Joanna’s housing dilemma were critical to a much better outcome than any situation involving the stressful process of housing court and ongoing indebtedness for Joanna’s family. Here in many ways our attorneys were much more than a legal resource, but simply rather a friend and confidant during a time of need during extreme personal hardship. The client felt comfortable knowing that she could openly share all aspects of her situation without any judgment, from her husband’s spontaneous abandonment to the fact that all of her children contracted COVID-19. Regardless of any external stigma, she felt comfortable to approach MLPC. This willingness can only be attributed to the prior relationships, reputation, and longstanding trust that was developed over the years.

142 See Avendaño, supra note 90.
B. Policing Abuses in the Micronesian Community and MLPC’s Pedagogy in Systemic Advocacy

One story of MLPC’s policy work exemplifies how we center client stories and follow the lead of the community’s needs, readiness, and strategies. During the pandemic, several latent policy matters boiled up as COVID-19 intensified long-simmering injustices. One of the biggest Micronesian community concerns was discriminatory policing. For many years, MLPC had been hearing about police abuses, most often from female colleagues like KKV staff and interpreters who shared stories about their boyfriends, nephews, or sons being mistreated by police. Then, as trust was built, we increasingly heard from clients directly about police abuses like “driving while Micronesian” and random harassment at bus stops by the Honolulu Police Department after kitchen shifts in Waikiki.¹⁴³

Despite our urging, people rarely wanted to file a complaint or push back on the system. Then the pandemic hit, George Floyd was murdered, and racial disparity and inequality became part of the daily ether. During the pandemic, the over-policing of Pacific Islanders—mostly Micronesians—for mask citations and other pandemic-related violations pushed this issue to the fore.¹⁴⁴ At a weekly gathering of Micronesian ministers and leaders, stories emerged from professional interpreters, community health workers, and youth about troubling and discriminatory police encounters. This Micronesian Ministers & Leaders Uut (a Chuukese word meaning “gathering”) was first organized and facilitated by KKV health center (Micronesian staff member Innocenta Sound-Kikku and Executive Director David Derauf) in May 2020 “to address community concerns and disseminate critical public health information and advisories.”¹⁴⁵ MLPC was first invited to the uut in early September to share information about employment

¹⁴³ Most of the stories we heard went formally unreported, especially where no arrests were made. Yet formal data affirmed these claims with findings of significant racial disparities in Honolulu’s use of force. See Jedra & Hofschneider, supra note 9. And even in the face of these facts, and with the rest of the country and the world facing racial reckoning following the murder of George Floyd, Honolulu Police Chief Susan Ballard downplayed implicit bias and race disparities in Hawaii. See Hofschneider, supra note 10; Anita Hofschneider, HPD Chief Says There’s Less Racial Bias in Hawaii. She’s Wrong, HONOLULU CIVIL BEAT (June 29, 2020), https://www.civilbeat.org/2020/06/what-implicit-bias-looks-like-in-hawaii/.

¹⁴⁴ Anita Hofschneider, HPD Data Shows Racial Disparities in Stay-At-Home Enforcement, HONOLULU CIVIL BEAT (June 29, 2020), https://www.civilbeat.org/beat/hpd-data-shows-racial-disparities-in-stay-at-home-enforcement/ (“Reporter Ashley Mizuo analyzed police data and found 26% of arrests involved Micronesians, Pacific Islanders indigenous to Micronesia who represent just 1% of Hawaii’s population, and 8% involved Samoans, who represent about 3% of the population.”); Mizuo, supra note 9.

¹⁴⁵ Dina Shek et al., supra note 132, at 29.
rights during the pandemic (e.g., COVID-19 testing requirements, “return to work” policies and expectations, and privacy rights). Our subsequent attendance at the weekly Zoom gatherings alongside Micronesian ministers and leaders established trust, and over time allowed us to introduce critical analysis of civil rights issues facing the community. Like many other Asian and Pacific immigrant communities before them, Micronesian leaders moved from a stance of “don’t make waves” to “we must really listen to the young people” to address the discrimination they face.\footnote{146 Personal notes from a Micronesian Ministers and Leaders Uut (April 13, 2021) (on file with authors). For more background about the Micronesian Ministers and Leaders Uut, see Shek et al., supra note 132.}

Soon, more stories about youth harassment by the Honolulu Police Department were shared. Tragically, just as pandemic restrictions were easing in April 2021, Honolulu police officers killed a 16-year-old Micronesian American boy, Iremamber Sykap, when they shot into a stopped car full of mostly minor Micronesian boys.\footnote{147 Jennifer Sinco Kelleher, Micronesians feel hatred in Hawaii, decry police shooting, STAR ADVERTISER (May 9, 2021), https://www.staradvertiser.com/2021/05/09/breaking-news/micronesians-feel-hatred-in-hawaii-decry-police-shooting/.} This further galvanized the Ministers group to respond and demand accountability.\footnote{148 The uut co-authored an open letter to Honolulu Mayor Rick Blangiardi. Sound-Kikku & Puas, supra note 25. Uut members also worked closely with the Sykap family to identify and engage a civil rights attorney. Christine Jedra, Sykap Family Sues Honolulu Police, Alleging Wrongful Death of Teen, HONOLULU CIVIL BEAT (May 21, 2021), https://www.civilbeat.org/2021/05/sykap-family-sues-honolulu-police-alleging-wrongful-death-of-teen/.} After months of participation in the uut, MLPC is now fully engaged in working alongside affected communities to address police misconduct. Over time, this group has uncovered painful policing stories and connected what is happening to Micronesians in Hawai‘i with “mainland” racial justice movements. This work includes engaging policing data, supporting testimony at Honolulu Police Commission and City Council meetings, advising youth advocates, ministers, and elders, and engaging with other civil rights lawyers, advocates, and community organizers.

The social change impact of following the lead of the community often reveals itself slowly, especially in a public interest legal paradigm rife with fast-moving, quick-fix, crisis interventions. The unfolding timeline for this significant policy issue was measured in years of developing the necessary trusted relationships before any meaningful action could be taken. The level of trust that allows for meaningful change and activates community power requires months and years of investment in the relationships. This often invisible and unquantifiable work could be considered “non-legal” by traditional standards. But
without it, meaningful social change is not possible.

This case story also illustrates challenges in funding. First, this work is difficult to quantify and report. It involved years of listening to second-hand stories without engaging any “clients” or opening any cases, months of attending community meetings, and hours of talking to clients who ultimately do not want to pursue legal processes. Nonetheless, these are necessary investments of time. Second, this story shows how funding considerations might have thwarted our community approach. Throughout the last decade, grants related to “juvenile justice” have been offered before us, but it would not have made sense at the time when we only had snippets of stories and most importantly, our community partners were not ready for action. Funding and related reporting requirements would likely have pushed us to push the community to act in ways that would only replicate hierarchies and racist narratives.\footnote{For example, “juvenile justice” funding typically involves diversion programs for youth after involvement with law enforcement rather than addressing systemic racism or building relationships and drawing meaningful solutions with historically excluded communities. See, e.g., Funding, Office of Juvenile Justice and Delinquency Prevention, https://ojjdp.ojp.gov/funding (last visited Sep. 1, 2021).} During the pandemic, the dire health disparities also widened inequities in policing, access to benefits, and other areas of life. And throughout, the community members we worked with led their own efforts to address each of these disparities. It has been a great privilege to work alongside and support communities at a time when they are ready to take action from positions of leadership and power.

**CONCLUSION**

We at MLPC Hawai‘i, like our colleagues around the country, wonder what lessons will be learned from COVID-19. The calendar years of 2020 and 2021 will be a unique chapter in our MLPC practice, but the general themes of this period remain the same as they have always been: racial discrimination, economic inequality, and health disparities. Looking backwards at the preceding years, the community was already in crisis in many ways. Looking forward to a “post-pandemic” world, we know that these underlying problems will continue as they always have unless there is a profound change in our society.

In the same way that crisis did not start with COVID-19, however, joy also did not stop with it. So that is how we will end our essay on our pedagogy of community partnership: by remembering the moments of profound happiness we have shared with our clients, our healthcare partners, and our community partners. There was genuine laughter over phones and computer screens, screams of excitement...
when a case or policy was won, and quieter moments of gratitude and hope. The pedagogy of community partnership relies on our human relationships, and that has been a relief in a year where public health required physical isolation. We hope that the joy of our pedagogy of community partnership—in addition to its efficacy in advocacy and its necessity in pursuing justice—will be one of the enduring lessons from COVID-19.