



Salgaocar Law Review Special Edition 2025-26

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ISSN 2395-7263



A Critical Analysis of Access and Practice: The Role of Student-Led ADR Clinics in Accommodating Accessible Dispute Resolution Models for Persons with Disabilities

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Arbitration, mediation and negotiation have developed as an Alternative Dispute Resolution system, regarded as a flexible, neutral, and efficient framework. The system tries to address the discrimination based on gender, religion, region or caste and systematically overlooks the disabled people. They face a rigid, exclusionary nature of traditional barriers ranging from inaccessible communication methods to stringent procedural norms and recurring gaps in ethical practice, institutional accountability, and professional training.

This paper examines the current status of inclusion in ADR and the lack of accessibility of processes and opportunities for the differently abled. The research aims to provide a framework of law school clinics for disability competence in the compulsory ADR curriculum and accessible technology with simple interreference ensuring equitable justice. The methodology involves comparing existing clinical protocols with the UNCRPD (United Nations Convention on the Rights of Persons with Disabilities) and identifying gaps, objectively, in the physical, virtual and cognitive accessibility.

The paper explores the unique freedom of student clinics to practice and includes accessible methods of arbitration. The paper discovers the greater focus on accessibility in compulsory ADR education with better accountability in institutions and technology, in order to move the

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litigation field from mere accommodation to substantive participation from Student-led clinics to professionals.

Keywords: Accessible Technology, Accessibility in ADR, Clinical Legal Education, Disability Inclusion, Ethical Accountability, Student-Led Clinics.

A Critical Analysis of Access and Practice: The Role of Student-Led ADR Clinics in Accommodating Accessible Dispute Resolution Models for Persons with Disabilities

The Main Theme: Ethics in ADR

The sub-theme: Clinical Legal Education and Student-Led Clinics

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Introduction: Access, Acceptance and ADR

The Justice system and the education system are closely related; both are complementary and form the concrete bedrock of our society. When we think of Justice system, it is usually the traditional litigation system, the court, the rush and the unending cases. The modern society, with the passage of time, was yearning for a better system, an adaptable and faster method, but it had to be independent and impartial and deliver efficient justice. This quest led us to the “Alternative Dispute Resolution (ADR)” of the justice system, which includes the methods of Arbitration, mediation, negotiation and Lok Adalat, etc.

Mostly praised for “*meet the people, how they want*” but doesn’t compromise its inherent nature of efficient and impartial justice delivery, often praised as an accessible and adaptable form of justice system. The current situation aided its growth; now courts promote the growth of the ADR system, with the recent inculcation of the Community Mediation Training Module by NALSA,² which was inaugurated by the Hon’ble Prime Minister of India and the “Mediation for India Drive” which was pioneered by Justice Suryakant, the Chief Justice of India³. ADR is now being considered as one of the main stream practice that ensure speedy justice and immense growth for the lawyers; most of the young lawyers pursue and strive to establish a career in this niche field.

Let’s take a moment and consider, rather than evaluate the aspect, what the key elements in ADR are. It is known for its Accessibility, efficiency and Adaptability. We can see and

² **Prime Minister’s Office**, *PM Addresses the National Conference on “Strengthening Legal Aid Delivery Mechanisms”* (Nov. 8, 2025), https://www.pmindia.gov.in/en/news_updates/pm-addresses-the-national-conference-on-strengthening-legal-aid-delivery-mechanisms/

³ **Mediation Is a Successful, Cost-Effective Tool, Says CJI**, *The Hindu* (Dec. 26, 2025), <https://www.thehindu.com/news/national/bar-council-of-indias-national-conference-and-symposium-on-mediation-in-south-go-a-cji-surya-kant/article70439364.ece>

understand the efficiency and adaptability, with the speedy delivery and procedural mechanism, *but is it truly accessible? How does one become rather defined Accessible?* When it is a form which can be accessed by everyone, irrespective of differences such as gender, caste, religion and disability⁴.

There has been much driven discussion on gender, caste and other forms of inclusion in ADR, but what about the commonly forgotten strata- the Disabled People, *do they practice or use the ADR System?* In many contexts, access is treated as a question of entry: whether a person can attend a session, log into a digital platform, or be formally included in the process. The issue is not whether ADR excludes by intent, but whether it is equipped to recognise when participation is uneven.

A Negotiation might be successful, an arbitral award could be rendered without delay, a mediation may be concluded, the ADR Mechanism may be recorded as successful, even where one participant has experienced significant procedural or communicative difficulty. In these situations, the process itself provides any criteria where access has been compromised. This very situation has been acknowledged and adapted to fit the broader and specific criteria of accessibility.

The research proceeds with an understanding of accessibility that breaks the normative, physical or formal inclusion or difficulties. Accessibility is a multi-dimensional, interrelated and integrated aspect including Procedural accessibility, substantive accessibility and Cognitive accessibility. Procedural Accessibility delves into the structure and the process of the ADR process, and the forum where as substantive accessible address the practical aspects, and the cognitive accessibility explores the inherent, psychosocial and accommodative aspects. These dimensions together provide a framework for assessing not merely whether parties are present, but whether they are able to participate on equitable terms⁵.

The advent of modern society strove to achieve the commonly promoted aspect of equality, and even with the growing prominence of disability rights within the broader legal system, the integration of disability-responsive standards into ADR frameworks is negligible. The governing statutes of arbitration and mediation prioritise objectives such as efficiency, enforceability, and finality and delve into the Ethical frameworks of emphasising neutrality,

⁴ Cynthia Fuchs Epstein, **Justice and Gender**, 79 *Cal. L. Rev.* 577 (1991)

⁵ **Int'l Chamber of Com.**, *ICC Guide on Disability Inclusion in International Arbitration and ADR* 12–18 (2023), https://iccwbo.org/wp-content/uploads/sites/3/2023/10/2023_ICC-Guide-on-Disability-Inclusion-in-International-Arbitration-and-ADR-902.pdf

voluntariness, and informed consent. While these principles are foundational to ADR, they do not, by themselves, address how accessibility should be standardised and operationalised. As a result, accessibility is often addressed indirectly or left to individual discretion rather than embedded as a procedural norm.

This evolution of ADR directly reflects its growth, needs, and development. Where once it was celebrated as the dispute resolution of the wealthy strata, which trickled down to become the friend of the common man, ADR understood that flexibility without structure can produce inconsistency. Where accessibility is not clearly articulated, its implementation may depend on the experience, awareness, or initiative of individual practitioners or institutions. The main difficulty is to enrich the implementation of a better accessible form of ADR, which creates a need for new learning and understanding.

Even though the pandemic, COVID-19, served as a distress signal to the people, it led to the widespread generalisation of Virtual Space and alternative methods. Still, a considerable stratum of people finds it difficult to use this virtual technology. Here, COVID-19 created a necessity for people to learn, but common people will not realise that accessibility is also a primary aspect of complete justice. To inculcate the same, a systematic and study method of inclusion needs to be promoted. The Need for Training and Practice needs to be highlighted here, rather than education, an inclusive method of practical education focusing on inculcating the inclusion of Disabled people in the ADR field⁶. In shaping these patterns, procedural, practical and ethical consideration needs to be addressed and understand even though disability competence is not always a core component of ADR education, an accessible justice needs to be promoted. This creates a requirement for an accessible framework, which can be practised, promoted and understood in the student-led ADR-Clinics

The student-led ADR clinics will become a broad platform to offer this distinct and inclusive perspective in next-generation legal practice, because they are the intersection of education and practice, making it the best space to experiment with this new initiative of inclusive ADR, making it a ground for reflection, experimentation and adaptation. It is against this background that the paper advances its central hypothesis: *the limited integration of disability-responsive standards in ADR regulation, ethics, and education may affect access for persons with disabilities, while student-led ADR clinics serve as a platform for developing inclusive*

⁶ Frank S. Bloch, *The Global Clinical Movement: Educating Lawyers for Social Justice* 150–65 (Oxford Univ. Press 2011).

procedures. The paper seeks to understand how legal frameworks, technological advancement, and ethical norms shape access in the way it way indented⁷.

The research primarily *adopts a doctrinal and observational methodology for the hypothesis*. It looks into the statutory provisions governing arbitration and mediation, ethical guidelines and international instruments, such as the United Nations Convention on the Rights of Persons with Disabilities. The paper mainly examines institutional design and normative assumptions rather than empirical outcomes with concrete data. The paper approaches accessibility as a matter of institutional design rather than individual adjustments and seeks to contribute to a more careful understanding of access in ADR while inviting reflection on the flexibility aspect of the ADR practice with inclusionary principles.

The Frame in the Framework: Regulatory, Ethical and Normative.

Accessibility is the core aspect of the legal structure, statutes, institutional rules, and professional regulations that shape expectations about who ADR is designed for and how participation is understood. The historical growth of Indian laws can be understood as a relative, developmental and integrative growth with culture, traditional practices, colonial interference and revolutionary thoughts. The Arbitration and Conciliation Act, 1996, prioritises party autonomy, minimal judicial intervention, efficiency, and enforceability. The Indian judiciary safeguarded these principles and has reinforced these objectives with its interpretations. The Mediation Act 2023⁸ also provides importance to institutionalising mediation as a credible and efficient dispute resolution mechanism. The statutory frameworks treat procedural flexibility as a virtue, which allows parties to tailor processes to their needs and create a Frame within the framework.

The Arbitration and Mediation statutes foreground enforceability, confidentiality, and timelines and are inherently silent on the responses of needs of persons with disabilities. Accessibility is enriched in the form of a virtual platform, but in the aspect of disabled people, the law neither prohibits nor promotes it. This research flags this legislative silence as a category of concern, not just ethical but procedural. When the statutes are silent, the responsibility shifts away from institutions to the individual stakeholders. While the ethical framework of the acts emphasises voluntariness, independence, impartiality and neutrality, forming the core principles of ADR.

⁷World Health Org., *World Report on Disability* 161–70 (2011), <https://www.who.int/publications/i/item/9789241564182>

⁸ The Mediation Act, No. 32 of 2023, *India Code* (2023), <https://www.indiacode.nic.in/handle/123456789/19082>

They are articulated in inherent bias as all parties are equally positioned to understand the process, communicate, understand their interest and needs and reach an amicable settlement⁹.

While ethical representation largely stems from this notion, it makes us wonder: *How does one reconcile ethical neutrality with unequal access?* Ethics, rather morality, is often considered as non-intervention, impartiality, fairness and equal treatment. However, equal treatment does not automatically guarantee equitable treatment. When participants inherently have a different access need, the classic dilemma of justice and equality, what may be equal may not be just. Where ethical regulation does not clarify the mechanism to exercise and ensure neutrality in the contents of disabled practitioners and participants, the stakeholders will interpret these principles arbitrarily to meet their temporary needs, compromising the ethical essence. The absence of guidance does not resolve this situation; it suppresses it, rather than forgetting it. The Rights of Persons with Disabilities Act, 2016,¹⁰ aims to adopt the United Nations Convention on the Rights of Persons with Disabilities¹¹ and empower the strata to ensure a dignity and rights-based approach to access and participation. It recognises that the system creates these barriers rather than the individual and places the primary responsibility and obligation on institutions to ensure reasonable accommodation¹² and accessibility. The system and individual stakeholders need to understand that access to justice is framed not as a privilege, but as a right that requires active facilitation. When these principles are comparatively analysed with ADR statutes, the normative disconnect becomes evident. The Law for the Disabled speaks the language of obligation and entitlement, whereas ADR law speaks the language of discretion and flexibility¹³.

The UNCRPD promotes effective participation in legal processes and emphasises procedural accommodations to ensure equality before the law. These obligations are broadly framed to consider judicial proceedings and alternative dispute mechanisms. Surprisingly, when it comes to practice, ADR is often considered as frame out of this Framework, operating outside the core aspect of access to justice, perhaps because of its private and consensual nature. This aspect made ADR relatively ignorant of the standard accessibility standard and ethical

⁹ Rahul Jain & Neha Chaudhary, **Analyzing the Rights and Entitlements of Persons with Disabilities in India**, 1 *Chandigarh Univ. L. Rev.* 129, 131–35 (2025)

¹⁰ **The Rights of Persons with Disabilities Act**, No. 49 of 2016, *India Code* (2016), <https://www.indiacode.nic.in/handle/123456789/2155>

¹¹ **Convention on the Rights of Persons with Disabilities** art. 13, Dec. 13, 2006, 2515 U.N.T.S. 3.

¹² *Vikash Kumar v. Union Pub. Serv. Comm'n*, (2021) 5 SCC 370 (India)

¹³ **Supreme Court of India**, *Handbook on Combatting Stereotypes* 14–22 (2023), https://main.sci.gov.in/pdf/LU/16082023_073106.pdf

guidelines. The combined effect of legislative silence and abstract ethical framing is not outright exclusion, but discretionary inclusion. Accessibility becomes something that may be provided, rather than something that must be assured¹⁴.

Looking through the window, *how does this affect the system?* Disabled people can choose to go to those institutions, mediators or centres that ensure their accessibility and ensure a coherent justice model. But this very thinking process systematically created a bias towards the strata, creating a divide which the constitution promises to correct. This discretionary model has significant structural consequences. It does not place but creates a conditional burden of identifying and articulating access needs on persons with disabilities, often in environments that prioritise efficiency and resolution, creating a difficult situation for the differently abled, where, for them to get to justice, they might be forced to choose at the very beginning, as it is not made universal.¹⁵ Further, it will limit accountability and stability, as the absence of explicit standards makes it difficult to assess whether a process has been inaccessible in any legally meaningful sense, and a conditional exploitation begins. Importantly, these consequences arise not from hostility or neglect, but from the way ADR has been conceptualised and regulated¹⁶.

Even with the Identification of these Legislative and normative gaps, it does not actively imply that ADR is deficient in its objectives; it simply highlights how to ensure its essence in what it intended to create. The concern, rather, is that accessibility has not been integrated into these goals in a systematic way¹⁷. Where disability-responsive standards are absent, accessibility remains peripheral, addressed when noticed, overlooked when not.

The Initiative of Student-Led ADR Clinics: Role, Responsibility and Revolution

We have identified the issues in the system, we all realise what the solution but when it comes to the implementation, the real barriers, such as generational gap in inculcation and rigid procedural rigidity, really become the Everest we need to mount. The aspect of inclusion will be meaningful when it is sustained and developed and becomes the common norm. The Practitioners and the stakeholders need to understand and adopt the same. The statute, rules

¹⁴ Frank E.A. Sander & Mariana Hernandez Crespo, **A Dialogue Between Institutions and Practitioners: Specialized Mediation Units**, 23 *Ohio St. J. on Disp. Resol.* 249 (2008).

¹⁵ Mike Oliver, **The Social Model of Disability: Thirty Years On**, 28 *Disability & Soc'y* 1024 (2013).

¹⁶ Vesselin Popovski, Abhinav Mehrotra & Kaainat Pundir, **The Human Capabilities Approach in Legal Education: A Case Study of Jindal Global Law School in India**, 6 *Eur. J. Legal Educ.* 101 (2025).

¹⁷ Carrie Menkel-Meadow, **Ethics and Professionalism in Non-Adversarial Lawyering**, 27 *Fla. St. U. L. Rev.* 153 (1999).

regulation and practice make the framework of ADR, but it is the professional training and education that shape those frameworks and profess it. An ADR professional would require a professional certificate, either as an arbitrator or as a mediator, we have many reputed institutions, including the Supreme Court, Indian Institute of Mediation and Arbitration and others providing the same. The ways in which ADR is taught, what is emphasised, what is assumed, and what is left unsaid will have a deep imprint on professional habits

ADR has steadily become an indelible part of legal education. Mediation, negotiation, and arbitration teach the students essential skills that are promoted by simulations, role-plays, and competitions. Now most universities and colleges have ADR in their curriculum and most institution have actively promoted their own ADR institutions. These academic endeavours allow students to engage with process design, ethical dilemmas, commercial problems, and interpersonal dynamics in ways that traditional doctrinal teaching does not.

In these competitions or the simulation practised in the student-run society or institution, they tend to reflect an assumed participant profile. Mostly involving parties who are articulate, legally informed, and capable of engaging with the process without additional support. The focus is typically on managing conflict between equally situated parties rather than on adapting processes to diverse access needs. The aspect of disability might be addressed indirectly, either as the question of capacity, representation or ethical sensitivity, but not discussed as a procedural rather than a structural fault. Even in the Professional Mediation and Arbitration Training programmes, which focus on communication skills, ethical standards, negotiation strategies, and procedural management, but not on the ability to recognise and respond to procedural, communicative, and cognitive access needs¹⁸. Where accessibility is addressed, it is often framed as a situational issue, to be managed when encountered, rather than as a standard consideration in process planning

This teaching method has subtle but imperative consequences; when accessibility is taught as an exception, practitioners may approach it reactively rather than proactively. Accommodations become something to be requested rather than anticipated and accepted. The need for introducing the method for inculcating procedural and structural accessibility will be evident in the professional practice as they are accustomed to standard formats, may view deviations as disruptions rather than as legitimate design choices. In such environments, accessibility

¹⁸ Katie Brooker et al., **Out of Sight, Out of Mind? The Inclusion and Identification of People with Intellectual Disability in Public Health Research**, 135 *Persps. in Pub. Health* 204 (2015).

depends heavily on individual awareness and experience. This aspect cannot be easily corrected with the introduction of stringent regulations¹⁹. Even in this current practice, where fairness and informed consent is procedural norms, their application depends on how the stakeholders interpret it. .

A student-led ADR clinic will be a turning point in creating this generation, where accessibility is accepted as a common norm, not as a privilege. This will promote a new compulsory ADR teaching mechanism and structural adjustment²⁰, with technological assistance. The modern technologies like Speech-to-Speech controls, AI assistance and other Disability assistive technology should be compulsory taught and practised²¹. The idea is not to make the people with disabilities feel included, but not to make them feel excluded. Here, disability competence becomes a core course and practice area, which will make it a prominent requirement rather than considered as an additional adjustment. This positioning affects how future practitioners prioritise accessibility amid competing demands of efficiency, client expectations, and institutional norms. The essence is not to transmit knowledge but to shape professional imagination²².

The primary objective of the ADR clinic is to create a platform for students to engage in practical disputes involving people with diverse needs, to understand accessibility as a practical question rather than theoretical preaching. The clinic will actively require the students and professors to address the process to function, delve in developing communication methods, procedural pacing, and participant support²³. These experiences push the student in the legal field, enriching and equipping them with real skills rather than abstract notions formed in a classroom setting and encourage a more reflective approach. However, clinics need to collaborate with active practitioners and prominent ADR professionals, as they cannot compensate for gaps in formal education and training. With the guidance of these professionals, the clinic can integrate a broader curriculum and their insights are translated into institutional

¹⁹ Nicola Glumann et al., **Inclusion of People with Disabilities in the Workplace: A Focus on Germany, Austria, and Switzerland**, in *Inclusion of People with Disabilities in the Workplace* (Stephan Boehm ed., 2025).

²⁰ Sanjay K. Jain, **Clinical Legal Education in India: A Path Towards Social Justice**, 9 *Indian J. L. & Just.* 44 (2025).

²¹ **United Nations Reg'l Info. Ctr. for W. Eur.**, *Building an Accessible Future for All: AI and the Inclusion of Persons with Disabilities* (Dec. 3, 2021), <https://unric.org/en/building-an-accessible-future-for-all-ai-and-the-inclusion-of-persons-with-disabilities/>

²² David Allen Larson, **ODR Accessibility for Persons with Disabilities: We Must Do Better**, SSRN (May 30, 2020), https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3614838

²³ Donald A. Schön, *The Reflective Practitioner: How Professionals Think in Action* (1983).

norms²⁴. The relationship between professional engagement, classroom teaching, training frameworks, and clinical practice, therefore, becomes crucial.

The Beginning of a New Ideology: An ADR Ecosystem

Student-led ADR Clinic initiatives hold a distinctive position in the legal education paradigm. They are neither purely academic nor fully professional institutions. Such clinics function for skill development, ethical formation, which is at the juncture of praxis and teaching, and engagement with real-world notions of dispute²⁵. Such an internally inclusive nature would facilitate examining how accessibility can be understood and operationalised within ADR processes.

Such clinics serve as platforms for ability-based learning within legal education. Their model nature prioritises praxis by directly addressing and engaging with notions that are consonant with the realities of dispute resolution²⁶. Unlike classroom simulations, clinics involve real participants, real constraints, and real consequences²⁷. This form of ability-based learning, grounded in clinical practice rather than simulated exercises, encourages reflective agency in process design, an aspect often omitted or inadequately captured within purely theoretical settings. Consequently, accessibility concerns that arise in clinics are not hypothetical; they directly determine whether a dispute resolution process can proceed at all.

Student-led ADR clinic initiative's notable feature would be procedural flexibility, due to the environment it tries to create, that is, operating without the commercial pressure, rigid timetable, or reputational loss that affects the institutional ADR practice. The environment assures that the objective is constrained to pedagogy rather than outcome-oriented.

Clinics experimentally test accessible communication, procedures, participation without threatening legitimacy. Such modest adaptations organically enhance engagement, emerging from participation demands. When accessibility is considered in the legal education framework, such clinics offer insights about how the ADR can function in this environment. It would further develop a notion that is concerned of how the participants would be benefiting

²⁴ Editorial, **Inclusivity for People Living with Disability: The Gap Between Understanding and Implementing**, 37 *Lancet Reg'l Health – Se. Asia* 100614 (2025)..

²⁵R. Tang, *Experience and Knowledge* (Ph.D. thesis, Univ. Coll. London 2010), <http://discovery.ucl.ac.uk/20475/>

²⁶ **Centre for Judicial Studies & Research, C.S.J.M. Univ. Kanpur**, *Clinical Legal Education in India: Challenges and Prospects* (2021), <https://gyansanchay.csjmu.ac.in/wp-content/uploads/2021/11/Clinical-legal-education-in-India.pdf>.

²⁷Shalanda H. Deo, **The Diversity of Exclusion in Legal Education**, *Reg. Rev.* (Nov. 9, 2020), <https://www.theregreview.org/2020/11/09/deo-diversity-exclusion-legal-education/>

from it by not devaluing the principles. Different tenets in ADR such as party autonomy, voluntariness, and informed consent can also be better informed, handled much more efficiently. So, this entails that clinics can function to illustrate the inclusivity in the praxis and maintain the core ADR values

The alignment between clinical practices and the principles of the UNCRPD is often implicit rather than explicit. However, clinics have a lot of constraints while framing this, so they will not, in general, frame in right-based language. But it is to be noted that they do keep in mind the UNCRPD commitments, as it is often reflected in the practices²⁸. This would result in participation which would be, accommodation, and autonomy. Such an arrangement would function better from the participant's requirement after reflective engagement than a formal regulation, this would be an inclusive ADR practice. ADR student clinic initiative functions optimally contingent on two situations, that is, if it is limited to institutional context and is catering to a small group of members for accessibility²⁹. While this is addressed, it is important to note that the role of clinics must not be overly stated due to the flexibility principle that it needs.

Apart from the notion of an illustrative model that was addressed previously, if this is to be extended, it has some significance as an observational role. ADR clinic initiative generates experiential knowledge, which tenets would be beneficial and what all are non-beneficial in this setting that is focusing on the participant needs. This would aid the educator and participants together because of the accommodating nature it carries³⁰. This has a potential impact that spans across multiple fronts, including design, training, and regulation, which is done by reflective notions for each tenet; this setup will not be uniform in this regard.

The ADR clinic initiative would generate a causal effect, which would impact wider regions in an indirect way, in a meaningful way. Such an impact affects the participants as well as it is not only constrained to the wider set up of ADR clinic functioning, that is by such an awareness carried latently to professional life. This latency would act as a reference point for such initiatives and intentions in a professional setup for further discussions, such as in how any new initiative affects the environment for the participants and how the conventional setup could

²⁸United Nations Dev. Programme–India, *Study on Law School-Based Legal Services Clinics* (2021), <https://www.undp.org/india/publications/study-law-school-based-legal-services-clinics>.

²⁹ Lynn M. Shore et al., *Inclusion and Diversity in Work Groups: A Review and Model for Future Research*, 37 J. MGMT. ____ (2011), <https://doi.org/10.1177/0149206310385943>.

³⁰ Alan S. Gutterman, *Businesses' Role in Combatting Ableism* (May 1, 2025), https://www.researchgate.net/publication/391346396_Businesses'_Role_in_Combatting_Ableism

align in this regard. This, in turn, can lead to better formal guidance; however, developments are all very gradual and diffuse.

The paper notes that all tenets of inclusive innovations are contingent on the factor of how they can be integrated into legal education. In the current framework, that is the conventional setup which sees such ADR student clinic initiatives as marginal or optional, impact is also limited; it is essential. Such contingency, if overseen by compulsory curriculum and is supported institutionally, can be enhanced³¹. Ethical guidance or regulatory clarity would not be replaced, in response to such changes, it is to be noted that ethical guidelines would be isolated from such notions to maintain the sanctity of the legal framework and education. Rather, reflective insights are what is offered to these frameworks on how accessibility would help and support the participants in ADR. Clinic initiative would be significant in this regard in showing the framework of how this is a plausible notion which can be operationalised.

Translating Accessibility into Practice

This discourse on accessibility remained confined to doctrinal interpretation and aspirational reform. However, its practical aspects, particularly with this idea of a student-led ADR clinics represent the evolutionary notion of institutionalising accessibility as an ethical and procedural standard. This framework needs to focus on the three main stakeholders: The Practitioners, the participants and the students

How does it create a new standard for the Practitioners? The student-led ADR clinics cannot exist in isolation; the students would require active guidance from legal practitioners and accessibility guidance experts and technical assistance, here the idea is to create an environment for the current and the future to break down the rigid structure of accessibility. Here, mediators and arbitrators are trained to identify access barriers and apply *reasonable accommodations* under the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), which mandates effective participation and equality before the law³² and focus on the new notion of practitioner competence, the practitioner would be qualified in these aspects and certified to ensure their competence to ensure reasonable accommodation to different people at different stages. The clinic aims to operationalise the doctrinal commitment

³¹ Ilan Wiesel, Carolyn Whitzman, Brendan Gleeson & Christine Bigby, The National Disability Insurance Scheme in an Urban Context: Opportunities and Challenges for Australian Cities, *37 Urb. Pol'y & Rsch.* 1 (2019), <https://doi.org/10.1080/08111146.2018.1481026>

³² United Nations Convention on the Rights of Persons with Disabilities, Dec. 13, 2006, 2515 U.N.T.S. 3

of disability inclusion by treating accessibility as a condition for justice³³. This initiative aims to ensure participant accessibility with practitioners' competence with the aid of young professionals.

How will the student-led ADR clinics ensure this new standard? The pillars of these clinics will be Assistive digital technology, Smart Categorisation and systematic training along with structural accommodations. The clinic will actively integrate tools like AI-enabled transcription services, speech-to-text captioning, and sign-language recognition software allow real-time translation and communication between parties³⁴. In addition, screen-reader-compatible e-filing portals and Braille-based case summaries foster an inclusive learning environment and enhance participation among persons with disabilities when systems are co-designed with them. With active workshops, camps and training sessions, these clinics ensure that the practitioner and participants are equipped with the knowledge of these technologies. Further, these assistive technology drive, will call for the need of smart categorisation of various disability and its effect and accommodation to ensure better participation. The clinics can introduce training and certification modules to include Indian sign language, Braille literacy, and communication strategies for cognitive diversity. These programs must categorize disabilities functionally visual, auditory, cognitive, or psychosocial so that adjustments become systematic and anticipatory. These training will become the foothold for the structural integration in building, technologies and legal norms and ensure true neutrality, not by denying structural inequality but by actively addressing it³⁵.

The discussion in this chapter builds on the earlier analysis of regulation and education in the ADR clinic initiative, in reference to participants and educators. We identified normative silences in law and ethics, concerning the participants, and examined pedagogical gaps in the approaches towards such clinics and the professional framework. This chapter argues and positions a space where those silences are sometimes addressed through praxis³⁶. The concluding chapter would draw these strands together to reflect on how accessibility might be

³³ Rosemary Kayess & Phillip French, *Out of Darkness into Light? Introducing the Convention on the Rights of Persons with Disabilities*, 8 Hum. Rts. L. Rev. 1 (2008)

³⁴ Charlotte Vuyiswa McClain-Nhlapo et al., *Disability Inclusion and Accountability Framework*, World Bank Working Paper No. 126977 (Nov. 1, 2022), <https://documents.worldbank.org/en/publication/documents-reports/documentdetail/437451528442789278/disability-inclusion-and-accountability-framework>

³⁵ S. Menon, K. Merchant & S. Rana, *National Centre for Promotion of Employment for Disabled People: Dignifying the Disabled* (ISDM Case Centre, *Talent Management in the Indian Social Sector Case Study*, 2023), <https://www.isdm.org.in/pdf/tmi-reports/ncpedp.pdf>

³⁶ Mark C. Weber, *Disability Rights, Disability Discrimination, and Social Insurance*, 25 *Ga. St. U. L. Rev.* 575 (2009)

more systematically integrated into ADR frameworks, without undermining the features that make ADR a distinctive ethos. While advancing this argument, this paper does not seek to prescribe a uniform model of inclusive ADR, as participants and their requirements vary. Rather, it suggests that institutional design, education, and experiential learning can help shift accessibility from an optional concern within ADR discourse to a central consideration.

Conclusion: A Stance towards a Standard System

The ADR fraternity made a promise to its participants, for being independent, impartial, adaptive and accessible, to genuinely make it an Alternative Justice system. This paper explores that promise and the comfortable assumptions, often misunderstood principles. The research points out that flexibility and adaptability cannot equate to fairness and accessibility, each is distinct, they are inter-related and interdependent yet unique principles necessary to keep the spirit of the ADR system³⁷. The paper argues that an nominal flexibility procedure does not guarantee the equitable participation, to engage a meaningful participation a standard operational system needs to be incorporated, to ensure an equal platform for access to participate and profess this system, unless it is available equally to all the strata ADR will not become a true Alternative.

The notion of neutrality in the system made us inherently believe that the process was accessible, the paper argues that with a doctrinal analysis of the Mediation Act 2023 and the Arbitration and Conciliation Act 1996 suggests, legislative silence is not a neutral stance; it is a structural barrier. The papers discover that in the situation where law treats accessibility as a matter of the discretion of the stakeholders, it becomes a conditional burden on the disabled participant to be a part of this system.³⁸ ADR needs to move forward from this entry-point model of access, simply providing virtual access will not equate to accessibility. It requires a framework where procedural, substantive and cognitive accommodation, the active use of advanced accessibility technology and artificial intelligence can prove to be useful. The use of advanced accessibility options would create an explicit gap of structural transformation, where

³⁷ Robyn Weinstein & Lance Bond, **Visions for the Future: Diversity and Inclusion Initiatives in Court-Annexed ADR Programs**, *Cardozo J. Conflict Resol.* 22 (2021), <https://ssrn.com/abstract=4205730>

³⁸ **Ireland Law Reform Comm'n**, *Alternative Dispute Resolution: Mediation and Conciliation* (LRC 98-2010) (Nov. 16, 2010), <https://www.lawreform.ie/fileupload/reports/r98adr.pdf>

seasoned practitioners will feel overwhelmed with the adaptation of the new structure. This calls for a systematic integration of the same.

This is where student-led ADR clinics become an important part in introducing, rather than diluting the system into society. The idea is to integrate disability-responsive standards at the primary level, where we are not just teaching students how to manage disputes; we are recalibrating their "professional imagination." This student-led initiative will foster a new option to break the common assumed participant profile, where we usually believe disputes occur with individuals with similar circumstances. They break this bias and articulate and adapt to meet the needs of the people, who have inherently different needs³⁹. Here we learn to incorporate the forgotten strata of people and aim to produce a generation of lawyers, which considers accessibility as a fundamental principle not as an extra accommodation⁴⁰. These student-led ADR clinics will create an ecosystem, providing awareness to the common people, preparation to the students and adaptation to the seasoned professionals⁴¹.

The paper paints a broader picture that accessibility is an integral part of ADR's legitimacy, not an external adjustment. ADR can only become a parallel to the traditional litigation system, when it inherently accepts accessibility. We require active recognition and support from the government, judicial, the executive, students and the people to make this dream a reality.⁴² We need to provide normative commitment and a guide to make justice common, not a convenience. Student-led ADR clinics suggest one possible pathway by creating an ecosystem where profession meets adaptability, accessibility and acceptance with the people. The aspect is to understand the benefit that this alternation of the ADR system will bring to the judicial system in reducing its overburden and focus on cases where it genuinely requires constitutional attention, and create an aware and better society.

³⁹ **ADR Vantage**, *Navigating Diversity, Equity, and Inclusion in ADR Practice* (survey report summary), <https://advantage.com/adrdei/>

⁴⁰ Ellen E. Deason et al., **ADR and Access to Justice: Current Perspectives**, 33 *Ohio St. J. on Disp. Resol.* 303 (2018).

⁴¹ Paridhi Goel, **Accessibility and Equity in Alternative Dispute Resolution**, 4 *Indian J. Legal Rev.* 905, 905–35 (2024).

⁴² Frank E.A. Sander & Mariana Hernandez Crespo, **A Dialogue Between Institutions and Practitioners: Specialized Mediation Units**, 23 *Ohio St. J. on Disp. Resol.* 249 (2008).