# 1AC – Delta (6:00)

**The standard is maximizing expected well-being.**

**Only pleasure and pain are intrinsically valuable – everything collapses.**

**Moen 16 [Ole Martin Moen, Research Fellow in Philosophy at University of Oslo “An Argument for Hedonism” Journal of Value Inquiry (Springer), 50 (2) 2016: 267–281]**

Let us start by observing, empirically, that a widely shared judgment about intrinsic value and disvalue is that pleasure is intrinsically valuable and pain is intrinsically disvaluable. On virtually any proposed list of intrinsic values and disvalues (we will look at some of them below), pleasure is included among the intrinsic values and pain among the intrinsic disvalues. This inclusion makes intuitive sense, moreover, for there is something undeniably good about the way pleasure feels and something undeniably bad about the way pain feels, and neither the goodness of pleasure nor the badness of pain seems to be exhausted by the further effects that these experiences might have. “Pleasure” and “pain” are here understood inclusively, as encompassing anything hedonically positive and anything hedonically negative.2 The special value statuses of pleasure and pain are manifested in how we treat these experiences in our everyday reasoning about values. If you tell me that you are heading for the convenience store, I might ask: “What for?” This is a reasonable question, for when you go to the convenience store you usually do so, not merely for the sake of going to the convenience store, but for the sake of achieving something further that you deem to be valuable. You might answer, for example: “To buy soda.” This answer makes sense, for soda is a nice thing and you can get it at the convenience store. I might further inquire, however: “What is buying the soda good for?” This further question can also be a reasonable one, for it need not be obvious why you want the soda. You might answer: “Well, I want it for the pleasure of drinking it.” If I then proceed by asking “But what is the pleasure of drinking the soda good for?” the discussion is likely to reach an awkward end. The reason is that the pleasure is not good for anything further; it is simply that for which going to the convenience store and buying the soda is good.3 As Aristotle observes: “We never ask [a man] what his end is in being pleased, because we assume that pleasure is choice worthy in itself.”4 Presumably, a similar story can be told in the case of pains, for if someone says “This is painful!” we never respond by asking: “And why is that a problem?” We take for granted that if something is painful, we have a sufficient explanation of why it is bad. If we are onto something in our everyday reasoning about values, it seems that pleasure and pain are both places where we reach the end of the line in matters of value.

**[1] Only consequentialism explains degrees of wrongness- breaking a promise to meet up for lunch is not the same as breaking a promise to take a dying person to the hospital- intuitions outweigh.**

**[2] No Act-Omission Distinction- Governments have to say yes/no to bills, which implicitly creates their own consequences. Inaction is essentially prohibiting action, which is an action in itself.**

**[3] Actor-Spec- States lack wills or intentions since policies are collective actions. States are constitutive to util; if they weren’t they would be individual actors which is contradictory to the concept of governance.**

**[4] Extinction Outweighs- in moral uncertainty, it’s a prerequisite because discussions of ethics only exist in the context of life.** **Any plausible moral theory must prioritize extinction.**

**Pummer 15 [Theron, Junior Research Fellow in Philosophy at St. Anne's College, University of Oxford. “Moral Agreement on Saving the World” Practical Ethics, University of Oxford. May 18, 2015]**

There appears to be lot of disagreement in moral philosophy. Whether these many apparent disagreements are deep and irresolvable, I believe there is at least one thing it is reasonable to agree on right now, whatever general moral view we adopt: that it is very important to reduce the risk that all intelligent beings on this planet are eliminated by an enormous catastrophe, such as a nuclear war. How we might in fact try to reduce such existential risks is discussed elsewhere. My claim here is only that we – whether we’re consequentialists, deontologists, or virtue ethicists – should all agree that we should try to save the world. According to consequentialism, we should maximize the good, where this is taken to be the goodness, from an impartial perspective, of outcomes. Clearly one thing that makes an outcome good is that the people in it are doing well. There is little disagreement here. If the happiness or well-being of possible future people is just as important as that of people who already exist, and if they would have good lives, it is not hard to see how reducing existential risk is easily the most important thing in the whole world. This is for the familiar reason that there are so many people who could exist in the future – there are trillions upon trillions… upon trillions. There are so many possible future people that reducing existential risk is arguably the most important thing in the world, even if the well-being of these possible people were given only 0.001% as much weight as that of existing people. Even on a wholly person-affecting view – according to which there’s nothing (apart from effects on existing people) to be said in favor of creating happy people – the case for reducing existential risk is very strong. As noted in this seminal paper, this case is strengthened by the fact that there’s a good chance that many existing people will, with the aid of life-extension technology, live very long and very high quality lives. You might think what I have just argued applies to consequentialists only. There is a tendency to assume that, if an argument appeals to consequentialist considerations (the goodness of outcomes), it is irrelevant to non-consequentialists. But that is a huge mistake. Non-consequentialism is the view that there’s more that determines rightness than the goodness of consequences or outcomes; it is not the view that the latter don’t matter. Even John Rawls wrote, “All ethical doctrines worth our attention take consequences into account in judging rightness. One which did not would simply be irrational, crazy.” Minimally plausible versions of deontology and virtue ethics must be concerned in part with promoting the good, from an impartial point of view. They’d thus imply very strong reasons to reduce existential risk**, at least when this doesn’t significantly involve doing harm to others or damaging one’s character. What’s even more surprising, perhaps, is that even if our own good (or that of those near and dear to us) has much greater weight than goodness from the impartial “point of view of the universe,” indeed even if the latter is entirely morally irrelevant, we may nonetheless have very strong reasons to reduce existential risk. Even egoism, the view that each agent should maximize her own good, might imply strong reasons to reduce existential risk. It will depend, among other things, on what one’s own good consists in. If well-being consisted in pleasure only, it is somewhat harder to argue that egoism would imply strong reasons to reduce existential risk – perhaps we could argue that one would maximize her expected hedonic well-being by funding life extension technology or by having herself cryogenically frozen at the time of her bodily death as well as giving money to reduce existential risk (so that there is a world for her to live in!). I am not sure, however, how strong the reasons to do this would be. But views which imply that, if I don’t care about other people, I have no or very little reason to help them are not even minimally plausible views (in addition to hedonistic egoism, I here have in mind views that imply that one has no reason to perform an act unless one actually desires to do that act). To be minimally plausible, egoism will need to be paired with a more sophisticated account of well-being. To see this, it is enough to consider, as Plato did, the possibility of a ring of invisibility – suppose that, while wearing it, Ayn could derive some pleasure by helping the poor, but instead could derive just a bit more by severely harming them. Hedonistic egoism would absurdly imply she should do the latter. To avoid this implication, egoists would need to build something like the meaningfulness of a life into well-being, in some robust way, where this would to a significant extent be a function of other-regarding concerns (see chapter 12 of this classic intro to ethics). But once these elements are included, we can (roughly, as above) argue that this sort of egoism will imply strong reasons to reduce existential risk. Add to all of this Samuel Scheffler’s recent intriguing arguments (quick podcast version available here) that most of what makes our lives go well would be undermined if there were no future generations of intelligent persons. On his view, my life would contain vastly less well-being if (say) a year after my death the world came to an end. So obviously if Scheffler were right I’d have very strong reason to reduce existential risk. We should also take into account moral uncertainty. What is it reasonable for one to do, when one is uncertain not (only) about the empirical facts, but also about the moral facts? I’ve just argued that there’s agreement among minimally plausible ethical views that we have strong reason to reduce existential risk – not only consequentialists, but also deontologists, virtue ethicists, and sophisticated egoists should agree. But even those (hedonistic egoists) who disagree should have a significant level of confidence that they are mistaken, and that one of the above views is correct**. Even if they were 90% sure that their view is the correct one (and 10% sure that one of these other ones is correct), they would have pretty strong reason, from the standpoint of moral uncertainty, to reduce existential risk. Perhaps most disturbingly still, even if we are only 1% sure that the well-being of possible future people matters, it is at least arguable that, from the standpoint of moral uncertainty, reducing existential risk is the most important thing in the world. **Again, this is largely for the reason that there are so many people who could exist in the future – there are trillions upon trillions… upon trillions. (For more on this and other related issues, see this excellent dissertation). Of course, it is uncertain whether these untold trillions would, in general, have good lives. It’s possible they’ll be miserable. It is enough for my claim that there is moral agreement in the relevant sense if, at least given certain empirical claims about what future lives would most likely be like, all minimally plausible moral views would converge on the conclusion that we should try to save the world. While there are some non-crazy views that place significantly greater moral weight on avoiding suffering than on promoting happiness, for reasons others have offered (and for independent reasons I won’t get into here unless requested to), they nonetheless seem to be fairly implausible views. And even if things did not go well for our ancestors, I am optimistic that they will overall go fantastically well for our descendants, if we allow them to. I suspect that most of us alive today – at least those of us not suffering from extreme illness or poverty – have lives that are well worth living, and that things will continue to improve. Derek Parfit, whose work has emphasized future generations as well as agreement in ethics, described our situation clearly and accurately: “We live during the hinge of history. Given the scientific and technological discoveries of the last two centuries, the world has never changed as fast. We shall soon have even greater powers to transform, not only our surroundings, but ourselves and our successors. If we act wisely in the next few centuries, humanity will surviveits most dangerous and decisive period. Our descendants could, if necessary, go elsewhere, spreading through this galaxy…. Our descendants might, I believe, make the further future very good. But that good future may also depend in part on us. If our selfish recklessness ends human history, we would be acting very wrongly.”(From chapter 36 of On What Matters)**

**[5] Permissibility affirms- [A] Fairness- Aff has 4 minutes to respond to 7 minutes of args along with 3 minutes to respond to 6 minutes of args- the aff starts with a harder access to the ballot so they should have a lower burden of proof [B] All statements are justified as true unless proven otherwise- if I told you my name you would believe me and not question it.**

**[6] TJF- All frameworks must be theoretically legitimate- prefer util a] Ground: Both debaters are guaranteed access to ground – Aff gets plans and advantages, while Neg gets disads and counterplans. b] Topic Education – util forces debates about the world because we have to use empirics and analyze the consequences of the plan versus neg advocacy- outweighs all other frameworks on timeframe because discourse is limited to 2 months.**

## A1: Delta

#### The Delta variant of the coronavirus is spreading world-wide – only vaccines can stop thousands from dying.

**Steenhuysen et al. 7/26** [Julie Steenhuysen, Alistair Smout and Ari Rabinovitch, 7-26-2021, "How the Delta Variant Upends Assumptions About the Coronavirus," US News &amp; World Report, <https://www.usnews.com/news/top-news/articles/2021-07-26/how-the-delta-variant-upends-assumptions-about-the-coronavirus>] //DD PT

(Reuters) - The Delta variant is the fastest, fittest and most formidable version of the coronavirus that causes COVID-19 the world has encountered, and it is upending assumptions about the disease even as nations loosen restrictions and open their economies, according to virologists and epidemiologists. Vaccine protection remains very strong against severe disease and hospitalizations caused by any version of the coronavirus, and those most at risk are still the unvaccinated, according to interviews with 10 leading COVID-19 experts. But evidence is mounting that the Delta variant, first identified in India, is capable of infecting fully vaccinated people at a greater rate than previous versions, and concerns have been raised that they may even spread the virus, these experts said. As a result, targeted use of masks, social distancing and other measures may again be needed even in countries with broad vaccination campaigns, several of them said. Israel recently reinstated mask-wearing requirements indoors and requires travelers to quarantine upon arrival. U.S. officials are considering whether to revise mask guidance for the vaccinated. Los Angeles County, the most populous in the United States, is again requiring masks even among the vaccinated in indoor public spaces. "The biggest risk to the world at the moment is simply Delta," said microbiologist Sharon Peacock, who runs Britain's efforts to sequence the genomes of coronavirus variants, calling it the "fittest and fastest variant yet." Viruses constantly evolve through mutation, with new variants arising. Sometimes these are more dangerous than the original. The major worry about the Delta variant is not that it makes people sicker, but that it spreads far more easily from person to person, increasing infections and hospitalizations among the unvaccinated.

#### And, billions across the planet lack proper access to vaccines – there’s no barrier between them and the new and improved Delta variant.

**Rouw et al. 7/21** [Anna Rouw, Adam Wexler, Jennifer Kates, and Josh Michaud, 7-21-2021, "Tracking Global COVID-19 Vaccine Equity," KFF, <https://www.kff.org/coronavirus-covid-19/issue-brief/tracking-global-covid-19-vaccine-equity/>] //DD PT

As of July 7, 2021, of the estimated 3.3 billion COVID-19 vaccine doses administered globally, most had been provided in a small number of countries only. For much of the world, particularly for those living in low- and middle-income countries, COVID-19 vaccines remain out of reach. While international efforts, such as COVAX and additional [vaccine donations](https://www.g7uk.org/wp-content/uploads/2021/06/Carbis-Bay-G7-Summit-Communique-PDF-430KB-25-pages-3.pdf) are seeking to increase global vaccine access, several estimates suggest that many countries may not achieve substantial levels of vaccination until at least [2023](https://www.nature.com/articles/d41586-021-01762-w). Drawing on and complementing existing efforts that track global vaccine access, such as [Our World in Data](https://ourworldindata.org/covid-vaccinations), the [Launch and Scale Speedometer](https://launchandscalefaster.org/COVID-19), and [Bloomberg’s Vaccine Tracker](https://www.bloomberg.com/graphics/covid-vaccine-tracker-global-distribution/), we examine several measures of global vaccine equity in an effort to assess where the biggest gaps are and whether they are narrowing or getting worse. Specifically, we group countries by income and by region and look at: Share of the total population having received at least one vaccine dose Rate of first vaccine doses administered (Using the 7-day rolling average per 1,000,000 people) Based on the current rate of vaccine doses administered, we also estimate how much the pace would need to increase in order to reach global vaccine coverage goals[1](https://www.kff.org/coronavirus-covid-19/issue-brief/tracking-global-covid-19-vaccine-equity/#footnote-528198-1) set by the [World Health Organization](https://www.who.int/news-room/commentaries/detail/a-new-commitment-for-vaccine-equity-and-defeating-the-pandemic), World Trade Organization, International Monetary Fund, and World Bank: 40% coverage by the end of 2021 and 60% by mid-2022. We do this at the country-level, and for countries by income group and regional classification. As we find here, there are wide disparities in access by income and by region (especially where these overlap), with low-income countries (LICs) in particular lagging far behind, followed closely by lower middle-income countries (LMICs), and Africa lagging behind all other regions. If current rates continue, most low-income countries and most countries in Africa are not on track to meet global vaccination targets. COVID-19 Vaccinations by Country Income There are large differences in the share of the population that has received at least one vaccine dose by country income, with LMICs lagging significantly behind. As of July 7, whereas more than half of individuals (51%) have received at least one dose in high-income countries (HICs), only 1% of the population in LICs, 14% in LMICs, and 31% in upper middle-income countries (UMICs) have received at least one dose (see Figure 1 and Figure 2). Three countries (China, India and the United States) account for the majority (57%) of all first doses administered globally. When removed, the difference between HICs and middle-income countries becomes even starker, with HICs still well ahead of other income groups in share of population that has received at least one dose (see Figure 3). See [Table 1](https://www.kff.org/coronavirus-covid-19/issue-brief/tracking-global-covid-19-vaccine-equity/#table1) for the full list of countries in each income group by share of population that has received at least one dose. Similarly, there is also a large gulf in the rate at which vaccines are being administered by country income. While the daily rate of first doses administered varies by country (see Figure 4), HICs were administering first doses at a rate nearly 2 times the rate in LMICs and in UMICs, and nearly 30 times the rate in LICs. See [Table 2](https://www.kff.org/coronavirus-covid-19/issue-brief/tracking-global-covid-19-vaccine-equity/#table2) for a breakdown of top countries in each income group by coverage and daily administration rates. If current trends continue, these disparities are likely to grow, and LICs are unlikely to meet vaccination targets. Based on current vaccination rates (using rates of first doses administered), HICs and UMICs are on track to have 40% or more of their populations having received at least one dose by the end of the year, whereas LMICs would need to increase their daily rate by 1.03 times and LICs would need to increase their daily rate by nearly 19 times in order to meet the same goal. HICs, UMICs, and LMICs are on track to have 60% or more of their populations having received at least one dose by mid-2022, while LICs would need to increase their daily rate by 14 times (see Figure 5). Certain countries, primarily HICs, have already met some of these vaccination targets. COVID-19 Vaccinations by Region As with country income, there are large differences in the share of the population that has received at least one vaccine dose among regions, with the highest coverage in Europe and smallest in Africa. As of July 7, the region with the highest coverage is Europe (40%) followed by the Americas (39%) and the Western Pacific (37%); Africa has the lowest coverage (2%) (see Figure 6 and Figure 7). Similar to income level, China, India and the U.S. are driving trends in vaccination coverage in their respective regions. For instance, China accounts for 87% of first doses administered in Western Pacific, the US accounts for 46% in the Americas, and India accounts for 84% in South-East Asia. When removing these countries, the differences between Europe and the Americas, Western Pacific, and South-East Asia are larger (see Figure 8). See [Table 3](https://www.kff.org/coronavirus-covid-19/issue-brief/tracking-global-covid-19-vaccine-equity/#table3) for a breakdown of top countries in each region by coverage and daily administration rates. The rate of vaccine administration is highest in Europe and the Americas and lowest in Africa. While rates of first doses administered vary by country (see Figure 9), Europe and the Americas currently have the highest rate of daily doses administered. These regions are vaccinating at a rate approximately 1.5 times that of South-East Asia, nearly 3 times that of Eastern Mediterranean, 4 times that of the Western Pacific, and more than 13 times higher that of Africa. See [Table 4](https://www.kff.org/coronavirus-covid-19/issue-brief/tracking-global-covid-19-vaccine-equity/#table4) for a breakdown of top countries in each region by coverage and daily administration rates. These disparities are likely to grow based on current vaccination trends. Western Pacific, Europe, the Americas, and South-East Asia are all ahead of schedule toward reaching 40% by the end of 2021 while Eastern Mediterranean would need to increase its rate of daily first doses administered by nearly 1.6 times the current rate, and Africa by approximately 11 times the current rate. They are also ahead of schedule to reach 60% by mid-2022, while Eastern Mediterranean would need to increase its rate of daily first doses administered by approximately 1.4 times the current rate, and Africa by approximately 8 times the current rate (see Figure 10). Certain countries, primarily those in Europe, have already met some of these vaccination targets.

#### **And, this completely decks economic development, global economic recovery, and threatens to collapse health systems in the developing world.**

**WHO 7/22** [Who Media, 7-22-2021, "Vaccine inequity undermining global economic recovery," World Health Organization, <https://www.who.int/news/item/22-07-2021-vaccine-inequity-undermining-global-economic-recovery>] //DD PT

New Global Dashboard on COVID-19 Vaccine Equity finds low-income countries would add $38 billion to their GDP forecast for 2021 if they had the same vaccination rate as high-income countries. Global economic recovery at risk if vaccines are not equitably manufactured, scaled up and distributed. COVID-19 vaccine inequity will have a lasting and profound impact on socio-economic recovery in low- and lower-middle income countries without urgent action to boost supply and assure equitable access for every country, including through dose sharing, according to new data released today by the United Nations Development Programme (UNDP), the World Health Organization (WHO) and the University of Oxford An acceleration in scaling up manufacturing and sharing enough vaccine doses with low-income countries could have added $38 billion to their GDP forecast for 2021 if they had similar vaccination rates as high income countries. At a time when richer countries have paid trillions in stimulus to prop up flagging economies, now is the moment to ensure vaccine doses are shared quickly, all barriers to increasing vaccine manufacturing are removed and financing support is secured so vaccines are distributed equitably and a truly global economic recovery can take place.A high price per COVID-19 vaccine dose relative to other vaccines and delivery costs – including for the health workforce surge – could put a huge strain on fragile health systems and undermine routine immunization and essential health services and could cause alarming spikes in measles, pneumonia and diarrhea. There is also a clear risk in terms of foregone opportunities for the expansion of other immunization services, for example the safe and effective rollout of HPV vaccines. Lower income countries need timely access to sustainably priced vaccines and timely financial support.These insights come from the Global Dashboard for COVID-19 Vaccine Equity, a joint initiative from UNDP, WHO and the University of Oxford’s Blavatnik School of Government, which combines the latest information on COVID-19 vaccination with the most recent socio-economic data to illustrate why accelerating vaccine equity is not only critical to saving lives but also to driving a faster and fairer recovery from the pandemic with benefits for all. “In some low- and middle-income countries, less than 1 per cent of the population is vaccinated – this is contributing to a two-track recovery from the COVID-19 pandemic”, said UNDP Administrator, Achim Steiner. “It’s time for swift, collective action – this new COVID-19 Vaccine Equity Dashboard will provide Governments, policymakers and international organisations with unique insights to accelerate the global delivery of vaccines and mitigate the devastating socio-economic impacts of the pandemic. According to the new Dashboard, which builds on data from multiple entities including the IMF, World Bank, UNICEF and Gavi, and analysis on per capita GDP growth rates from the World Economic Outlook, richer countries are projected to vaccinate quicker and recover economically quicker from COVID-19, while poorer countries haven’t even been able to vaccinate their health workers and most at-risk population and may not achieve pre-COVID-19 levels of growth until 2024. Meanwhile, Delta and other variants are driving some countries to reinstate strict public health social measures. This is further worsening the social, economic and health impact, especially for the most vulnerable and marginalised people. Vaccine inequity threatens all countries and risks reversing hard won progress on the Sustainable Development Goals.

### **And, the impact is millions of global deaths and infections in the developing world.**

**Smith-Schoenwalder 7/8 -** Cecelia Smith-Schoenwalder writes about space, science and the environment for U.S. News & World Report. <https://www.usnews.com/news/world-report/articles/2021-07-08/global-coronavirus-death-toll-tops-4-million-as-delta-variant-reported-in-100-countries>. June 8, 2021.

More than 4 million people across the globe have died from the [coronavirus](https://www.usnews.com/topics/subjects/coronavirus), according to data from Johns Hopkins University. New global deaths, however, have been decreasing. Last week's global mortality figure was the lowest since October 2020, according to WHO. Still, experts believe the global death toll to be a vast [undercount](https://www.usnews.com/news/health-news/articles/2021-05-06/analysis-half-of-global-coronavirus-deaths-unreported). But the delta coronavirus variant is posing a problem in [unvaccinated populations](https://www.usnews.com/news/health-news/articles/2021-06-25/who-delta-coronavirus-variant-spreading-rapidly-among-unvaccinated-people). More than 100 countries have documented the variant, according to WHO. "Compounded by fast-moving variants and shocking inequity in vaccination, far too many countries in every region of the world are seeing sharp spikes in cases and hospitalizations," WHO Director General Tedros Adhanom Ghebreyesus said this week. "Based on the estimated transmission advantage of the Delta variant, it is expected that Delta will rapidly outcompete other variants and become the dominant circulating lineage over the coming months," WHO reported in its weekly epidemiological update. Meanwhile, over 3.3 billion doses of coronavirus vaccine have been administered across the world. But "as a global community, we are failing" on COVID-19 vaccine supply, according to Tedros. The vast majority of vaccines have been administered in high and upper-middle-income countries.

### **Only the aff solves- eliminating IP allows rapid global vaccination progress that solves the Delta Variant.**

**Jecker 21-** Jecker, Nancy S. "What’s Yours Is Ours: Waiving Intellectual Property Protections For COVID-19 Vaccines." Journal of Medical Ethics. June 22, 2021. Web. August 20, 2021.

Since consequentialist justifications treat the value of IP as purely instrumental, they are also vulnerable to counterarguments showing that a sought-after goal is not the sole or most important end. During the COVID-19 pandemic, we submit that the vaccinating the world is an overriding goal. With existing IP protections intact, the world has fallen well short of this goal. Current forecasts show that at the current pace, there will not be enough vaccines to cover the world’s population until 2023 or 2024.15 IP protections further frustrate the goal of universal access to vaccines by limiting who can manufacturer them. The WHO reports that 80% of global sales for COVID-19 vaccines come from five large multinational corporations.16 Increasing the number of manufacturers globally would not only increase supply, but reduce prices, making vaccines more affordable to LMICs. It would stabilise supply, minimising disruptions of the kind that occurred when India halted vaccine exports amidst a surge of COVID-19 cases. It might be objected that waiving IP protections will not increase supply, because it takes years to establish manufacturing capacity. However, since the pandemic began, we have learnt it takes less time. Repurposing facilities and vetting them for safety and quality can often happen in 6 or 7months, about half the time previously thought.17 Since COVID-19 will not be the last pandemic humanity faces, expanding manufacturing capacity is also necessary preparation for future pandemics. Nkengasong, Director of the African Centres for Disease Control and Prevention, put the point bluntly, ‘Can a continent of 1.2billion people—projected to be 2.4billion in 30 years, where one in four people in the world will be African—continue to import 99% of its vaccine?

## A2: Bioterror

### **Bioterror probability is high now- terrorists have access to biological weapons and are developing now.**

**Green et. al. 18 -** School of Public Health, University of Haifa, Haifa, Israel (Prof M S Green MBChB); Galveston National Laboratory, University of Texas Medical Branch, Galveston, TX, USA (Prof J LeDuc PhD); School of Public Health, Tel Aviv University, Tel Aviv, Israel (Prof D Cohen PhD); and College of Veterinary Medicine, Kansas State University, Manhattan, KS, USA (Prof D R Franz PhD), “Confronting the threat of bioterrorism: realities, challenges, and defensive strategies”, <https://doi.org/10.1016/S1473-3099(18)30298-6>

Following the breakup of the former Soviet Union, there was concern that loss of control of their biological weapons programme could allow terrorist groups to gain access to both the weapons and scientific expertise. Additionally, in the past few years, developments in the field of microbial genetics have heightened concern about the possible abuse of new technologies. Since there are so many unknowns, it is extremely difficult to assess the risks and threats of bioterrorism. The most likely perpetrators could be disgruntled individuals, terrorist organizations, or rogue countries that are believed to support international terrorism. Whereas individual attackers are unlikely to cause mass casualties, terrorist organizations could pose a substantial threat if they gain access to sophisticated biological weapons, materials, or scientific expertise. Although regulations and safeguards for securing dangerous pathogens in research laboratories now exist in most countries, the scope of these regulations and the extent of the safeguards vary. Rogue countries have the necessary capabilities for a bioterrorist attack but might be restrained by the threat of the response of a unified global community. Knowledge gained from legitimate research that could also be applied to bioterrorism is considered dual-use. As a result, the regulation of legitimate research on infectious diseases has increased. There will always be a risk of the “insider threat”, which typically involves a single individual, so it is important to assure that new regulations truly increase security and have minimal negative effect on legitimate research. The cost of regulations applied to research on infectious diseases, in terms of missed opportunities for international collaboration, exchange of pathogens, and sharing of novel agents, is often intangible and overlooked. It is essential to promote healthy organisational cultures to enhance both safety and security in laboratories.

### **And, patents make it impossible to respond to a bioterror attack- vagueness of the law on compulsory licensure and patents delay crucial reaction times.**

**Oriola 7-** Taiwo A. Oriola (Cardiff Law School, and the ESRC Centre for Business Relationships, Accountability, Sustainability, & Society, University of Cardiff, United Kingdom). “AGAINST THE PLAGUE: EXEMPTION OF PHARMACEUTICAL PATENT RIGHTS AS A BIOSECURITY STRATEGY.” JOURNAL OF LAW, TECHNOLOGY & POL‑ ICY. 2007. JDN. http://illinoisjltp.com/journal/wp‑content/uploads/2013/10/05‑05‑ 08\_Oriola\_AHW\_Formatted\_FINAL.pdf

Time is of the essence in getting crucial drugs to victims of bioterrorism attacks to save as many lives as possible, and authorities should be able to mass‑produce cru‑ cial drugs with minimal delay. Drug stockpiling is of limited practical value since most drugs and vaccines have limited shelf‑life,53 and no one knows for sure when terrorists would strike. Moreover, drug stockpiling is not a feasible bioterrorism policy option for resource‑poor countries that, unlike the United States and other wealthy nations,54 are already overwhelmed by HIV/AIDS, and lack functional public health infrastructures and the resources to stockpile bioterrorism‑specific drugs for their populations.55 Nevertheless, securing crucial drugs in the shortest time possible for those infected in a bioterrorism attack is no less important than other public health preparedness measures. It would undoubtedly minimize loss of life and effectively contain further spread of diseases and mass hysteria.56 However, the high propensity for intellectual property rights wrangling—as exemplified by the skirmishes over Bayer’s ciprofloxacin in the wake of the September 11, 2001 anthrax attacks in the United States57 —could stymie authorities’ efforts to mass produce or parallel import crucial patented drugs within the shortest time possible, especially in resource‑poor countries of Africa, Asia, and Latin America. This makes an effective bioterrorism‑specific pharmaceutical patent appropriation clause in international and national patent laws bereft of the bureaucratic trap‑ pings of the contemporary patent regime, and the TRIPS access to medicines paradigms.

### **And, an effective bioterror attack would overwhelm natural resistance and cause extinction**.

**Singer 01-** Clifford E. Singer, Spring 2001, Swords and Ploughshares, http://www.acdis.uiuc.edu/homepage\_docs/pubs\_docs/S&P\_docs/S&P\_XIII/Singer.htm

There are, however, two technologies currently under development that may pose a more serious threat to human survival. The first and most immediate is biological warfare combined with genetic engineering. Smallpox is the most fearsome of natural biological warfare agents in existence. By the end of the next decade, global immunity to smallpox will likely be at a low unprecedented since the emergence of this disease in the distant past, while the opportunity for it to spread rapidly across the globe will be at an all time high. In the absence of other complications such as nuclear war near the peak of an epidemic, developed countries may respond with quarantine and vaccination to limit the damage. Otherwise mortality there may match the rate of 30 percent or more expected in unprepared developing countries.. With development of new biological technology, however, there is a possibility that a variety of infectious agents may be engineered for combinations of greater than natural virulence and mortality, rather than just to overwhelm currently available antibiotics or vaccines.

### **And, only the aff solves- it allows for compulsory licensing that allows for pandemic preparedness in bio-attacks.**

**Mullowney and Harris 13** Jared Mullowney (Texas Tech University School of Law) and Neil Harris (Texas Tech University School of Law). “Patent Protectability or Public Health?—An Examination of the Patent Compulsory License and Bioterrorism.” Journal of Biosecurity, Biosafety, and Biodefense Law 4(1). June 2013. JDN. https://doi.org/10.1515/jbbbl‑2012‑0011

As mentioned earlier, the United States Code does not lay out guidelines that must be followed if a compulsory license is to be granted.87 But when should it be used? No doubt, it should be used in a situation similar to the anthrax attacks seen in 2001. As mentioned earlier, Bayer still held a valid patent over the cipro drug during the anthrax attacks. There were two major issues surrounding the public reaction to the anthrax attacks: the first dealt with the price of cipro and the second dealt with the availability of cipro.88 In essence, the situation was that there have been two reported anthrax attacks on America. Following these attacks, the general public and the government go into a widespread panic of a large scale bioterrorism attack. People rush out to buy, and the government hopes to stockpile, an antibiotic called cipro. Bayer, the patent holder of cipro, indicates that it can only produce about 200 million of the 1.2 billion tablets in the timeframe that the Government projects will be necessary. Cipro is expensive, and the cost of anthrax treatment for a single individual ranges from $500 to $700 or more. Congress has placed a compulsory license scheme for patents within the United States Code. So then, how could it have helped? Although the compulsory license ultimately was not needed, analysis should not be done with the gift of hindsight. The compulsory license could have solved the two problems the country faced surrounding the attacks: it would have increased the availability of cipro and would have reduced the price. It would have increased the availability because as discussed earlier, Bayer would only be able to provide 200 million tablets,89 and at least three other pharmaceutical manufacturers were ready and willing to make the generic form of cipro.90 This, at least, would have provided the government with more than 200 million tablets. Furthermore, the potential licensees would have offered cipro at drastically reduced prices.91 While it is now known that the situation surrounding Bayer and cipro resolved itself without major issue, this must not be a reason to disregard similar future situations.

## UV

#### 1] 1AR and 1AC theory is legit – anything else means infinite abuse because I can’t check back on their positions – drop the debater – 1AR & 1AC are too short to make up for the time trade-off – no RVIs – 6 min 2NR means they can brute force me every time and spend the entirety of the time on the shell – competing interps – otherwise the 2NR could drown the aff in arguments while playing defense. Aff theory first – much larger strategic loss – ¼ of the 1AR vs. 1/7 of the 1NC.

#### 2] Reasonability on 1NC shells – the 1AR is too short to line by line every argument, make a counter interpretation, and go for substance – key to check arbitrary interps.

**3] The 1AC acknowledges the state is bad in many ways. However, the aff uses state as heuristic which doesn’t affirm its legitimacy but allows enhanced governmental resistance.**

**Zanotti 14** Dr. Laura Zanotti (Associate Professor of Political Science at Virginia Tech) “Governmentality, Ontology, Methodology: Re-thinking Political Agency in the Global World” – Alternatives: Global, Local, Political – vol 38(4):p. 288-304,. A little unclear if this is late 2013 or early 2014 – The Stated “Version of Record” is Feb 20, 2014, but was originally published online on December 30th, 2013. Obtained via Sage Database

By questioning substantialist representations of power and subjects, inquiries on the possibilities of political agency are reframed in a way that focuses on power and subjects’ relational character and the contingent processes of their (trans)formation in the context of agonic relations. **Options for resistance to government**al scripts **are not limited to ‘‘rejection,’’ ‘‘revolution,’’ or ‘‘dispossession’’** to regain a pristine ‘‘freedom from all constraints’’ or an immanent ideal social order. **It is found instead in** multifarious and **contingent struggles that are constituted within the scripts of governmental rationalities and at the same time exceed and transform them. This approach questions oversimplifications of the complexities of liberal political rationalities** and of their interactions with non-liberal political players **and nurtures** a **radical skepticism about identifying universally good or bad actors or abstract solutions to political problems.** International power interacts in complex ways with diverse political spaces and within these spaces it is appropriated, hybridized, redescribed, hijacked, and tinkered with. **Government**ality **as** a **heuristic focuses on performing complex diagnostics of events. It invites** historically situated **explorations and** careful **differentiations rather than** overarching **demonizations of ‘‘power,’’** romanticizations of the ‘‘rebel’’ or the ‘‘the local.’’ More broadly, theoretical formulations that conceive the subject in non-substantialist terms and focus on processes of subjectification, on the ambiguity of power discourses, and on hybridization as the terrain for political transformation, open ways for reconsidering political agency beyond the dichotomy of oppression/rebellion. **These alternative formulations** also **foster an ethics of political engagement, to be continuously taken up through plural and uncertain practices**, that demand continuous attention to ‘‘what happens’’ instead of fixations on ‘‘what ought to be.’’83 **Such ethics** of engagement would not await the revolution to come or hope for a pristine ‘‘freedom’’ to be regained. Instead, it **would constantly attempt to twist the working of power by playing with whatever cards are available and would require intense processes of reflexivity on the consequences of political choices**. To conclude with a famous phrase by Michel Foucault ‘‘my point is not that everything is bad, but that everything is dangerous, which is not exactly the same as bad. If everything is dangerous, then we always have something to do. So **my position leads not to apathy but to** hyper- and **pessimistic activism**.’’84