# 1AC

### 1AC – Econ

#### Vaccines will not cover LMICs until at least 2023—fortunately there is massive room for supply increase

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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 L[ow and] M[iddle] I[ncome] C[ountrie]s. 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?’18

#### Unequal vaccine distribution has massive economic costs even with conservative estimates that don’t account for the Delta variant

Çakmakli 21-- Çakmakli, Cem [Assistant Professor at Koç University. PhD: Pennsylvania State University] et al. The economic case for global vaccinations: An epidemiological model with international production networks. No. w28395. National Bureau of Economic Research, 2021. (AG DebateDrills)

To estimate the costs of inequitable vaccine distribution, we develop a global SIR-multi-sectormacro framework and calibrate it to 65 countries-35 sectors. We incorporate sectoral heterogeneity in infections together with inter-industry and international trade and production linkages. Once we account for this economic interdependence of the economies, we reveal the substantial costs, up to 3 percent of advanced countries pre-pandemic GDPs, that will be borne by the vaccinated countries through their trade relationships with unvaccinated countries.36 Our framework captures the short run. We find that AEs may bear somewhere from 13 percent to 49 percent of the global losses arising from an inequitable distribution of vaccines in 2021. Globalization might have amplified the effects of the pandemic but it is also imperative for an equitable distribution of the vaccines because this is the only way for open economies with international linkages to have a robust recovery. There are substantial uncertainties ahead of us regarding the course of vaccine distribution. Our estimates are based on the available information about the pandemic. For example, we did not incorporate the recent developments on the variants into our analysis. To the extent that these variants threaten the efficacy of the current vaccines, there is even more urgency to make the existing vaccines globally available as soon as possible. Mutations that risk a prolonged pandemic would not only have further health costs but also escalate the economic costs that we estimated in our analysis.

#### Economic loss and slow supply recovery causes inflation deanchoring and econ collapse in advanced economies as well as extreme poverty in EMDEs

World Bank 6-21 – World Bank Prospects Group; June 2021 Global Economic Prospects; <https://openknowledge.worldbank.org/bitstream/handle/10986/35647/9781464816659.pdf> (AG DebateDrills)

Since May 2020, however, inflation has gradually picked up.By April 2021, inflation had risen above pre-pandemic levels, in both advanced economies and EMDEs. The inflation pickup was broad-based and present in about four-fifths of countries, although the change in inflation varied widely, especially in EMDEs. The 2020 global recession featured the most muted inflation decline and fastest subsequent inflation upturn of the five global recession episodes of the past 50 years (box 4.1). While this behavior partly reflects lower levels of inflation at the beginning of 2020, purchasing managers report growing pressures on input as well as output prices in 2021 (figure 4.1). Looking ahead, as the global economy gradually reopens, monetary and fiscal policies continue to be accommodative to support the global recovery, and pent-up demand may be about to be unleashed in advanced economies.1 For major advanced economies, some have raised concerns that this confluence of factors may generate significant inflationary pressures (Blanchard and Pisani-Ferry 2020; Goodhart and Pradhan 2020; Landau 2021). Others, in contrast, see little reason for concern, at least for many advanced economies, because of the temporary nature of price pressures over the short-term as well as wellanchored inflation expectations and structural factors still depressing inflation (Ball et al. 2021; Gopinath 2021). If growing inflationary pressures cause financial market participants to become concerned about persistently higher inflation in advanced economies, they may reassess prospects for continued accommodative monetary policies by major central banks. This could trigger a significant rise in risk premia and borrowing costs. EMDEs are particularly vulnerable to such financial market disruptions because of their record high debt and a lagging economic recovery from the pandemic (chapter 1). In the event of financial market stress, sharp exchange rate depreciations and capital outflows may force them to abruptly tighten policies in a manner that could throttle their recoveries. Even in the absence of dislocating financial market stress, E[merging] M[arket] D[eveloping] E[conomie]s may face rising inflation as global price pressures feed into domestic inflation through input prices and exchange rate movements. A temporary increase in inflation may not warrant a monetary policy response. Again, if rapidly rising price pressures risk de-anchoring inflation expectations, EMDE central banks may be forced to tighten monetary policy before the recovery is fully entrenched. Persistently higher inflation would erode discretionary incomes of the poorest households and may tip some back into poverty (Ha, Kose, and Ohnsorge 2019). This is a particularly serious risk for low-income countries (LICs; box 4.2). Since food accounts for a substantial share of consumption in these countries, recent increase in food prices have led to higher inflation and compounded the challenges confronting the poor during the pandemic.

#### Economic Collapse goes Nuclear.

Tønnesson 15, Stein. "Deterrence, interdependence and Sino–US peace." International Area Studies Review 18.3 (2015): 297-311. (the Department of Peace and Conflict, Uppsala University, Sweden, and Peace research Institute Oslo (PRIO), Norway)

Several recent works on China and Sino–US relations have made substantial contributions to the current understanding of how and under what circumstances a combination of nuclear deterrence and economic interdependence may reduce the risk of war between major powers. At least four conclusions can be drawn from the review above: first, those who say that interdependence may both inhibit and drive conflict are right. Interdependence raises the cost of conflict for all sides but asymmetrical or unbalanced dependencies and negative trade expectations may generate tensions leading to trade wars among inter-dependent states that in turn increase the risk of military conflict (Copeland, 2015: 1, 14, 437; Roach, 2014). The risk may increase if one of the interdependent countries is governed by an inward-looking socio-economic coalition (Solingen, 2015); second, the risk of war between China and the US should not just be analysed bilaterally but include their allies and partners. Third party countries could drag China or the US into confrontation; third, in this context it is of some comfort that the three main economic powers in Northeast Asia (China, Japan and South Korea) are all deeply integrated economically through production networks within a global system of trade and finance (Ravenhill, 2014; Yoshimatsu, 2014: 576); and fourth, decisions for war and peace are taken by very few people, who act on the basis of their future expectations. International relations theory must be supplemented by foreign policy analysis in order to assess the value attributed by national decision-makers to economic development and their assessments of risks and opportunities. If leaders on either side of the Atlantic begin to seriously fear or anticipate their own nation’s decline then they may blame this on external dependence, appeal to anti-foreign sentiments, contemplate the use of force to gain respect or credibility, adopt protectionist policies, and ultimately refuse to be deterred by either nuclear arms or prospects of socioeconomic calamities. Such a dangerous shift could happen abruptly, i.e. under the instigation of actions by a third party – or against a third party. Yet as long as there is both nuclear deterrence and interdependence, the tensions in East Asia are unlikely to escalate to war. As Chan (2013) says, all states in the region are aware that they cannot count on support from either China or the US if they make provocative moves. The greatest risk is not that a territorial dispute leads to war under present circumstances but that changes in the world economy alter those circumstances in ways that render inter-state peace more precarious. If China and the US fail to rebalance their financial and trading relations (Roach, 2014) then a trade war could result, interrupting transnational production networks, provoking social distress, and exacerbating nationalist emotions. This could have unforeseen consequences in the field of security, with nuclear deterrence remaining the only factor to protect the world from Armageddon, and unreliably so. Deterrence could lose its credibility: one of the two great powers might gamble that the other yield in a cyber-war or conventional limited war, or third party countries might engage in conflict with each other, with a view to obliging Washington or Beijing to intervene.

### 1AC – Disease

#### Extended COVID in developing countries will exacerbate inequalities fostered by COVID—job loss, poverty, and lack of health insurance all increase

Pley et al 21-- Pley, Caitlin M. [University of Cambridge Department of Medicine, Public Policy Researcher], et al. "The global impact of the COVID-19 pandemic on the prevention, diagnosis and treatment of hepatitis B virus (HBV) infection." BMJ Global Health 6.1 (2021): e004275. (AG DebateDrills)

The COVID-19 pandemic is amplifying existing economic and public health inequalities. The pandemic is likely to cause a worldwide recession and the contraction of national economies, pushing millions more below the poverty line, especially in countries without universally accessible health systems and already high levels of outof-pocket spending on health.21 Furthermore, the most vulnerable members of society are not only more likely to be affected by HBV, but they are also more likely to have comorbid non-communicable diseases that raise the risk of a severe COVID-19 disease course**.** Rural and indigenous communities in LMICs, as reported in India and Nigeria, are most severely affected by movement restrictions, as they impede access to health centres and the ability to earn a living wage.6 Individuals working in unstable employment arrangements risk losing their health insurance, and those working in the informal sector frequently already pay for healthcare expenditures out-of-pocket, with no access to fiscal stimulus packages and other social safety nets if they lose their employment. Such issues extend to HICs, such as the USA, where a large number of job losses have led to 6.2million people losing their health insurance since the onset of the COVID-19 pandemic.22 Drops in healthcare coverage will likely lead to worsening of chronic conditions, including CHB, and may reduce the incentive to seek testing services when treatment is unaffordable.

#### The plan also sets a precedent to seamlessly shift to a direct support model during pandemics--that solves future pandemics but avoids the innovation DA.

Brink **Lindsey 21**. Vice President, Niskanen Center; Writes for Brookings, “Why Intellectual Property and Pandemics Don’t Mix,” Brookings, June 3, 2021, <https://www.brookings.edu/blog/up-front/2021/06/03/why-intellectual-property-and-pandemics-dont-mix/>, RJP, **DebateDrills**.

**PUBLIC HEALTH EMERGENCIES AND DIRECT GOVERNMENT SUPPORT** For pandemics and other public health emergencies, patents’ mix of costs and benefits is misaligned with what is needed for an effective policy response. The basic patent bargain, even when well struck, is to pay for more innovation down the road with slower diffusion of innovation today. In the context of a pandemic, that bargain is a bad one and should be rejected entirely. Here the imperative is to accelerate the diffusion of vaccines and other treatments, not slow it down. Giving drug companies the power to hold things up by blocking competitors and raising prices pushes in the completely wrong direction. What approach to encouraging innovation should we take instead? How do we incentivize drug makers to undertake the hefty R&D costs to develop new vaccines without giving them exclusive rights over their production and sale? The most effective approach during a public health crisis is direct government support: public funding of R&D, advance purchase commitments by the government to buy large numbers of doses at set prices, and other, related payouts. And when we pay drug makers, we should not hesitate to pay generously, even extravagantly: we want to offer drug companies big profits so that they prioritize this work above everything else, and so that they are ready and eager to come to the rescue again the next time there’s a crisis.It was direct support via Operation Warp Speed that made possible the astonishingly rapid development of COVID-19 vaccines and then facilitated a relatively rapid rollout of vaccine distribution (relative, that is, to most of the rest of the world). And it’s worth noting that a major reason for the faster rollout here and in the United Kingdom compared to the European Union was the latter’s [misguided penny-pinching](https://www.nytimes.com/2021/05/17/opinion/europe-vaccines-commission.html?smid=tw-share). The EU bargained hard with firms to keep vaccine prices low, and as a result their citizens ended up in the back of the queue as various supply line kinks were being ironed out. This is particularly ironic since the Pfizer-BioNTech vaccine was developed in Germany. As this fact underscores, the chief advantage of direct support isn’t to “get tough” with drug firms and keep a lid on their profits. Instead, it is to accelerate the end of the public health emergency by making sure drug makers profit handsomely from doing the right thing.Patent law and direct support should be seen not as either-or alternatives but as complements that apply different incentives to different circumstances and time horizons. Patent law provides a decentralized system for encouraging innovation. The government doesn’t presume to tell the industry which new drugs are needed; it simply incentivizes the development of whatever new drugs that pharmaceutical firms can come up with by offering them a temporary monopoly. It is important to note that patent law’s incentives offer no commercial guarantees. Yes, you can block other competitors for a number of years, but that still doesn’t ensure enough consumer demand for the new product to make it profitable. DIRECT SUPPORT MAKES PATENTS REDUNDANT The situation is different in a pandemic. Here the government knows exactly what it wants to incentivize: the creation of vaccines to prevent the spread of a specific virus and other drugs to treat that virus. Under these circumstances, the decentralized approach isn’t good enough. There is no time to sit back and let drug makers take the initiative on their own timeline. Instead, the government needs to be more involved to incentivize specific innovations now. As recompense for letting it call the shots (pardon the pun), the government sweetens the deal for drug companies by insulating them from commercial risk. If pharmaceutical firms develop effective vaccines and therapies, the government will buy large, predetermined quantities at prices set high enough to guarantee a healthy return. For the pharmaceutical industry, it is useful to conceive of patent law as the default regime for innovation promotion. It improves pharmaceutical companies’ incentives to develop new drugs while leaving them free to decide which new drugs to pursue – and also leaving them to bear all commercial risk. In a pandemic or other emergency, however, it is appropriate to shift to the direct support regime, in which the government focuses efforts on one disease. In this regime, it is important to note, the government provides qualitatively superior incentives to those offered under patent law. Not only does it offer public funding to cover the up-front costs of drug development, but it also provides advance purchase commitments that guarantee a healthy return. It should therefore be clear that the pharmaceutical industry has no legitimate basis for objecting to a TRIPS waiver. Since, because of the public health crisis, drug makers now qualify for the superior benefits of direct government support, they no longer need the default benefits of patent support. Arguments that a TRIPS waiver would deprive drug makers of the incentives they need to keep developing new drugs, when they are presently receiving the most favorable incentives available, can be dismissed as the worst sort of special pleading. That said, it is a serious mistake to try to cast the current crisis as a morality play in which drug makers wear the black hats and the choice at hand is between private profits and public health. We would have no chance of beating this virus without the formidable organizational capabilities of the pharmaceutical industry, and providing the appropriate incentives is essential to ensure that the industry plays its necessary and vital role. It is misguided to lament that private companies are profiting in the current crisis: those profits are a drop in the bucket compared to the staggering cost of this pandemic in lives and economic damage. What matters isn’t the existence or size of the profits, but how they are earned. We have good reason to want drug makers to profit from vaccinating the world: the comparative price is minuscule, and the incentive effects are a vital safeguard of public health in the event of future crises. What we want to avoid at all costs is putting drug makers in the position where drug companies can profit from standing in the way of rapid global vaccination. That is why intellectual property rights need to be taken out of the equation. Vaccinating the world in any kind of reasonable time frame will require large-scale technology transfer to drug firms in other countries and rapid expansion of their production capacity. And looking beyond the current pandemic to the longer term, we need [ample, redundant global vaccine production capacity](https://www.vox.com/future-perfect/22397914/vaccine-mrna-adenovirus-manufacturing-process-investment) that is widely distributed around the planet. To achieve these goals as rapidly as possible will require the active cooperation of the U.S. pharmaceutical industry, which is why the direct support model now needs to be extended. What is needed now is an Operation Warp Speed for the world, in which we make it worth current vaccine producers’ while to share their know-how broadly and ramp up global capacity. Here again, we must recognize that the choice isn’t between people on the one hand and profits on the other. Rather, the key to good pandemic response policy is ensuring that incentives are structured so that drug company profit-seeking and global public health are well aligned. That means opting out of the default, decentralized patent bargain in favor of generous but well-focused direct government support.

#### Pandemics will always temporarily disrupt developing country healthcare—preventing prolonged pandemics is key to overall health

Pley et al 21-- Pley, Caitlin M. [University of Cambridge Department of Medicine, Public Policy Researcher], et al. "The global impact of the COVID-19 pandemic on the prevention, diagnosis and treatment of hepatitis B virus (HBV) infection." BMJ Global Health 6.1 (2021): e004275. (AG DebateDrills)

There is previous evidence to show that routine immunisation programmes are highly vulnerable to disruption resulting from epidemics, political upheaval or economic crises. When vaccination coverage rates sharply dipped in West Africa during the 2013–2016 Ebola outbreak, the incidence of measles rapidly rebounded.7 Although HBV global vaccination coverage has steadily increased since the 1990s, previous experience shows correlation of declines in vaccination coverage with political and economic unrest that disrupt infrastructure (figure 1). Since the progression to overt liver disease occurs slowly, the impact of a drop in HBV vaccination coverage may go unnoticed for decades in settings without adequate diagnostic infrastructure. Preliminary data from the Institute for Health Metrics and Evaluation indicate that overall global vaccination coverage levels in 2020 have dropped to levels last seen in the 1990s, threatening 25 years of progress in just 6 months**.**8 The USA’s federally financed ‘Vaccines for Children’ Programme has documented notable declines in vaccine ordering and administration after declaration of the national emergency on 13 March 2020, although more markedly in children older than 24 months than younger children, reflecting some success in maintaining routine vaccination of infants.9 In England, electronic health records have shown that coverage of the measles, mumps, rubella vaccination dropped by 19.8% when physical distancing measures were implemented between February and April 2020, compared with the same period in 2019.10 Reduced vaccination coverage may have particularly strong repercussions on HBV incidence in infancy and early childhood, contributing to an increase in the global burden of chronic infection and providing a long-term source of onward transmission that threatens progress towards the 2030 elimination goals. The repercussions of the COVID-19 pandemic on HBV vaccination and control may even outweigh the number of direct COVID-19 deaths in the long term. A recent model has projected that for one excess COVID-19 death attributable to visiting a vaccination delivery point, mostly in the older household contacts of children, the deaths of 84 children under 5years could be prevented if routine childhood immunisation programmes were sustained in sub-Saharan Africa.11

#### Future pandemics are 10x more deadly – absent a solution we’re all going to die.

Ceballos 5/27 Gerardo Ceballos [PhD, Dr Gerardo Ceballos is an ecologist and conservationist at the Universidad Nacional Autonoma de Mexico. He is particularly recognized for his influential work on global patterns of distribution of diversity, endemism, and extinction risk in vertebrates. He is also well-known for his contribution to understanding the magnitude and impacts of the sixth mass extinction.], 5/27/21, “THE SIXTH MASS EXTINCTION AND THE FUTURE OF HUMANITY”, Population Matters, <https://populationmatters.org/news/2021/05/sixth-mass-extinction-and-future-humanity> DD AG

Somewhere, sometime in late 2019, a coronavirus from a wild species, perhaps a bat or a pangolin, infected a human in China. This could have been an obscure event, lost without trace in the annals of history, as it is very likely this has occurred many times in the last centuries. But this particular event was somehow different. The coronavirus became an epidemic first and a pandemic later. Covid-19 became the worst pandemic since the Spanish flu in 1918. The horrific human suffering it has caused, and its economic, social and political impacts, are still unraveling. The reason Covid-19 and more than forty other very dangerous viruses, such as Lassa fever, HIV and Ebola, have jumped from wild animals to humans in the last four decades is the destruction of natural environments and the trafficking and consumption of wild animals. The wildlife trade is to satisfy the insatiable and extravagant demand for these species in the Asian market, in countries such as China, Vietnam and Indonesia. The illegal wildlife trade is a gigantic business. It is as lucrative as the drug trade, but without the legal implications. The immense appetite of China and other Asian societies for exotic animals has promoted exponential growth in trade and profits. Wild and domestic animals sold in “wet markets” are kept in unsanitary and unethical conditions. There, feces, urine and food waste from cages at the top spill into cages at the bottom, creating the perfect conditions for viruses to leap from wild animals to domestic animals and humans. Thousands of wildlife species or their products are traded annually. Wildlife trade is one of several human impacts, including habitat loss and fragmentation, pollution, toxification and invasive species, that have caused the extinction of thousands of species and threaten many more. Indeed, most people are unaware that the current extinction crisis is unprecedented in human history. Extinction occurs when the last individual of a species dies. The UN recently estimated that one million species, such as the panda, the orangutan and the Sumatran rhino, are at risk of extinction. The second finding is that population extinctions, which are the prelude to species extinctions, are occurring at very fast rates (Ceballos et al., 2017). Around 32 percent of a sample of 27,000 species have declining populations and have experienced massive geographic range contractions. Population extinctions are a very severe and widespread environmental problem which we have called “Biological Annihilation”. Finally, our third finding indicates that the magnitude of the extinction crisis is underestimated because there are thousands of species on the brink of extinction (Ceballos et al., 2020). Those species will likely become extinct in the near future unless a massive conservation effort is launched soon. Many times, people have asked me why we should care about the loss of a species. There are ethical, moral, philosophical, religious and other reasons to be concerned. But perhaps the one that is most tangible for most people is the loss of ecosystem services, which are the benefits that humans derive from the proper function of nature. Ecosystem services include the proper mix of gases in the atmosphere that support life on Earth, the quantity and quality of water, pollination of wild crops and plants, fertilization of the soil, and protection against emerging pests and diseases, among many others. Every time a species is lost, ecosystem services are likely to erode and human well-being is reduced. The loss of so many ecosystems and species is pushing us towards the point of collapse of civilization. The good news is that there is still time to reduce the current extinction crisis. The species and ecosystems that we manage to save in the next 10 – 15 years will define the future of biodiversity and civilization. What it is at stake is the future of mankind.

### 1AC – Solvency

#### Plan: Member nations of the WTO ought to grant a TRIPS waiver for COVID medicines.

#### India and South Africa have signaled ability to increase vaccine production after a TRIPS waiver—this is also our solvency advocate

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This view has come under increasing fire. Two competing positions have emerged. First, India and South Africa petitioned the WTO for a temporary waiver of IP rights for medical products pertaining to preventing, containing or treating COVID19.2 The wavier would apply to all WTO members and lift restrictions in four TRIPS sections: copyright and related rights, industrial designs, patents and protection of undisclosed information. It would be annually reviewed and last for a set length, determined by the WTO Council. Proponents of the proposal argue that IP protections have ‘hindered urgent scale-up of vaccine production’ and that ‘many countries—especially LMICs countries—may face institutional and legal difficulties when using TRIPS flexibilities’.12 To break the divide, WTO Director General, Okonjo-Iweala, proposed ‘a third way’ in which ‘we… license manufacturing to countries so that we can have adequate supplies while still making sure that IP issues are taken care of.’13 This approach permits companies to retain ownership while licensing other companies to manufacture their vaccines.

#### The plan is also a prerequisite to starting the WHO technology transfer hub.

WHO 4/21—WHO, 4-21-2021, “Establishment of a COVID-19 mRNA vaccine technology transfer hub to scale up global manufacturing,” <https://www.who.int/news-room/articles-detail/establishment-of-a-covid-19-mrna-vaccine-technology-transfer-hub-to-scale-up-global-manufacturing>. (AG DebateDrills)

WHO and its partners are seeking to expand the capacity of low- and middle-income countries (LMICs) to produce COVID-19 vaccines and scale up manufacturing to increase global access to these critical tools to bring the pandemic under control. WHO will facilitate the establishment of one (or more, as appropriate) technology transfer hub(s) that will use a hub and spoke model (REF) to transfer a comprehensive technology package and provide appropriate training to interested manufacturers in LMICs. This initiative will initially prioritize the mRNA-vaccine technology2 but could expand to other technologies in the future.The intention is for these hubs to enable the establishment of production process at an industrial or semi-industrial level permitting training and provision of all necessary standard operating procedures for production and quality control. It is essential that the technology used is either free of intellectual property constraints in LMICs, or that such rights are made available to the technology hub and the future recipients of the technology through non-exclusive licenses to produce, export and distribute the COVID-19 vaccine in LMICs, including through the COVAX facility. Preference will be given to applicants who have already generated clinical data in humans, as such clinical data will contribute to accelerated approval of the vaccines in LMICs. It is anticipated that WHO will work with funders and donors to mobilize financial support to establish the hubs and, as they are being established, to support the transfer of technology to selected manufacturers in LMICs, taking into consideration the need to establish permanent vaccine production capacity in regions where this is currently mostly absent. This broader objective will ensure that all WHO regions will be able to produce vaccines as essential preparedness measures against future infectious threats.

#### There are many countries including Canada, Bangladesh, Denmark, and African nations that have capacity to produce millions of doses

Meldrum and Cheng 21-- ANDREW MELDRUM and MARIA CHENG, AP News, “Vaccine technology transfer center to open in South Africa,” 6/21/2021, <https://apnews.com/article/united-nations-south-africa-africa-technology-coronavirus-vaccine-3cbdee395502802b55db2b5c81e6becd>. (AG, DebateDrills)

Poor countries in Africa and elsewhere are facing dire shortages of COVID-19 jabs despite some countries having the ability to produce vaccines, lamented Lara Dovifat, a campaign and advocacy adviser for Doctors Without Borders. “The faster companies share the know-how, the faster we can put an end to this pandemic,” she said in a statement. Numerous factories in Canada, Bangladesh, Denmark and elsewhere have previously called for companies to immediately share their technology, saying their idle production lines could be churning out millions of doses if they weren’t hampered by intellectual property and other restrictions**.** More than 1 billion coronavirus vaccines have been administered globally, but fewer than 1% have been in poor countries. South Africa accounts for nearly 40% of Africa’s total recorded COVID-19 infections and is currently suffering a rapid surge, but vaccine rollout has been slow, marked by delayed deliveries among other factors. South Africa currently does not manufacture any COVID-19 vaccines from scratch, but its Aspen Pharmacare assembles the Johnson & Johnson shot by blending large batches of the ingredients sent by J&J and then putting the product in vials and packaging them, a process known as fill and finish. Earlier this month the company had to discard 2 million doses because they had ingredients produced in the U.S. in a factory under suspect conditions.

### 1AC – Util

#### The standard is maximizing expecting well-being.

#### 1] Phenomenal introspection - it’s the most epistemically reliable - historical and moral disagreement over internal conceptions of morality such as questions of race, gender, class, religion, etc. prove the fallibility of non-observational based ethics - introspection means we value happiness because we can determine that we each value it - just as I can observe a lemon’s yellowness, we can make those judgements about happiness.

#### 2] Actor specificity

#### ---A] Aggregation – every policy benefits some and harms others, which also means side constraints freeze action.

#### ---B] No act-omission distinction – choosing to omit is an act itself – governments actively decide not to act so there is no omission.

#### --C] Governments empirically use util which solves calc indicts because it empirically works.

### 1AC – Theory

#### 1] 1AR theory – a) AFF gets it because otherwise the neg can engage in infinite abuse, making debate impossible, b) reject the debater – the 1AR is too short for theory and substance so ballot implications are key to check abuse, c) no RVIs – they can stick me with 6min of answers to a short arg and make the 2AR impossible, d) competing interps – 1AR interps aren’t bidirectional and the neg should have to defend their norm since they have more time, e) no 2NR theory – 2-to-1 time tradeoff makes it devastating for the 2AR, f) comes first – it’s a bigger percentage of the 1AR than 1NC which means there’s more abuse if I’m devoting a larger fraction of time and only the 2N has time to win multiple layers, g) voters – fairness because debate’s a game that needs rules to evaluate it and education since it gives us portable skills for life like research and thinking.

#### 2] Speccing a medicine is good—a) All medicines is a bad model since the neg won’t be able to read policy specific offense and each one is different—leads to non-specific debates and no good ground b) stable advocacy—their interp means the aff can be shifty with their plan and the definitions of medicines c) applying generics to spec affs helps you think on your feet and adapt which is key to utilizing real world skills in new situations.

### 1AC – Method

#### Free market capitalism has drastically improved the world.

Empirical education in child mortality and increase in life expectancy, development of tech innovation in the private market k2 medical advances, food production increased with agriculture tech green revolution, also decreased armed conflicts

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In How Much Have Global Problems Cost the World? Lomborg and a group of economists conclude that, with a few exceptions, the world is richer, freer, healthier, and smarter than it’s ever been. These gains have coincided with the near-universal rejection of statism and the flourishing of capitalist principles. At a time when political figures such as New York City mayor Bill de Blasio and religious leaders such as Pope Francis frequently remind us about the evils of unfettered capitalism, this is a worthwhile message. The doubling of human life expectancy is one of the most remarkable achievements of the past century. Consider, Lomborg writes, that “the twentieth century saw life expectancy rise by about 3 months for every calendar year.” The average child in 1900 could expect to live to just 32 years old; now that same child should make it to 70. This increase came during a century when worldwide economic output, driven by the spread of capitalism and freedom, grew by more than 4,000 percent. These gains occurred in developed and developing countries alike; among men and women; and even in a sense among children, as child mortality plummeted. Why are we living so much longer? Massive improvements in public health certainly played an important role. The World Health Organization’s global vaccination efforts essentially eradicated smallpox. But this would have been impossible without the innovative methods of vaccine preservation developed in the private sector by British scientist Leslie Collier. Oral rehydration therapies and antibiotics have also been instrumental in reducing child mortality. Simply put, technological progress is the key to these gains—and market economies have liberated, and rewarded, technological innovation. People are not just living longer, but better—sometimes with government’s help, and sometimes despite it. Even people in the developing countries of Africa and Latin America are better educated and better fed than ever before. Hundreds of thousands of children who would have died during previous eras due to malnutrition are alive today. Here, we can thank massive advancements in agricultural production unleashed by the free market. In the 1960s, privately funded agricultural researchers bred new, high-yield strains of corn, wheat, and various other crops thanks to advances in molecular genetics. Globalization helped spread these technologies to developing countries, which used them not only to feed their people, but also to become export powerhouses. This so-called “green revolution” reinforced both the educational progress (properly nourished children tend to learn more) and the life-expectancy gains (better nutrition leads to better health) of the twentieth century. These children live in a world with fewer armed conflicts, netting what the authors call a “peace dividend.” Globalization and trade liberalization have surely contributed to this more peaceful world (on aggregate). An interdependent global economy makes war costly. Of course, problems remain. As Lomborg points out, most foreign aid likely does little to boost economic welfare, yet hundreds of billions of dollars in “development assistance” continue to flow every year from developed countries to the developing world. Moreover, climate change is widely projected to intensify in the second half of the twenty-first century, and will carry with it a significant economic cost. But those familiar with the prior work of the “skeptical environmentalist” understand that ameliorating these effects over time could prove wasteful. Lomborg notes that the latest research on climate change estimates a net cost of 0.2 to 2 percent of GDP from 2055 to 2080. The same report points out that in 2030, mitigation costs may be as high as 4 percent of GDP. Perhaps directing mitigation funding to other priorities—curing AIDS for instance—would be a better use of the resources. Lomborg’s main message? Ignore those pining for the “good old days.” Thanks to the immense gains of the past century, there has never been a better time to be alive.