### 1

#### The aff burden is to prove that the resolutional statement is logical, and the reciprocal neg burden is to prove that the resolutional statement is illogical.

#### Prefer:

#### 1. Text – Oxford Dictionary defines ought as “used to indicate something that is probable.”

[https://en.oxforddictionaries.com/definition/ought //](https://en.oxforddictionaries.com/definition/ought%20//)Massa

#### Ought is “used to express logical consequence” as defined by Merriam-Webster

(<http://www.merriam-webster.com/dictionary/ought>) //Massa

#### 2. Debatability – a) my interp means debates focus on empirics about squo trends rather than irresolvable abstract principles that’ve been argued for years b) Moral oughts cannot guide action due to the is/ought fallacy – we cannot derive moral obligations from what happens in the real world

#### 3. Neg definition choice – The aff should have defined ought in the 1ac as their value, by not doing so they have forfeited their right to read a new definition – kills 1NC strategy since I premised my engagement on a lack of your definition.

**Negate:**

#### [1] Inherency – either a) the aff is non-inherent and you vote neg on presumption or b) it is and it isn’t logically going to happen.

#### [2] CX you conceded

### 2

#### Ableism is seeded in a process constitutive of the disability drive – composing of primary pity, when one witnesses a fall of the ego and a recognition of the ability status as temporary, and secondary pity, which describes the egos attempt to overcompensate necessitating disabled violence.

**Mollow 15** Anna (2015): The Disability Drive, A dissertation submitted in partial satisfaction of the requirements for the degree of Doctor of Philosophy in English in the Graduate Division of the University of California, Berkeley Committee in charge: Professor Kent Puckett, Chair Professor Celeste G. Langan Professor Melinda Y. Chen Spring 2015 <https://digitalassets.lib.berkeley.edu/etd/ucb/text/Mollow_berkeley_0028E_15181.pdf> //Jia

Much as the differentiation between the inseparable processes of primary and secondary narcissism rests on a distinction between building up and breaking down the ego, a similar heuristic distinction gives structure to my concepts of primary and secondary pity. To be clear, pity and narcissism are not the same thing: if narcissism can be understood as love of the self, pity involves a complex affective reaction to the suffering of someone else. Primary pity entails a response to the image of another person succumbing to what I have termed the “tragedy of disability.”121 Primary pity arises when one witnesses a fall of the self, a collapse of the ego; such falling is at once painful and pleasurable to observe. In other words, primary pity could be described as a vicarious experience of the tragedy of disability. A great deal of the pain and pleasure of primary pity center on questions about what, or who, this fallen self is. When most people think about pity, we refer to an affect in which, to adopt Edelman’s phrase, we purport to “feel for the other.” But as with primary narcissism, in which the self has not yet been constituted, and therefore cannot be said to enter into intersubjective relations with an “other,” primary pity entails a mixing up of self and other such that the ego, in becoming permeable to pain that may properly belong to “someone else,” is profoundly threatened in its integrity. Primary pity is that intense pain-pleasure complex that is provoked by the image of a suffering other who, it seems momentarily, both is and is not one’s self. This affective response can feel unbearable, as seen in Siebers’s formulation: one “cannot bear to look…but also cannot bear not to look.” Primary pity is difficult to bear because it involves a drive toward disability (one cannot bear not to look), which menaces the ego’s investments in health, pleasure, and control—because to contemplate another person’s suffering is to confront the question, “Could this happen to me?” Such a prospect, although frightening, may also be compelling; in this way, primary pity replicates the self-rupturing aspects of sexuality. Indeed, the unbearability of primary pity reflects its coextensiveness with sexuality. Sex, or the Unbearable, a book coauthored by Edelman and by Lauren Berlant, argues that sex “unleashes unbearable contradictions that we nonetheless struggle to bear” (back cover). This claim accords with Freud’s account of sexuality as a “pleasurable” “unpleasure” that the ego can never fully master or control (Three 49,75). As Leo Bersani puts it in his reading of Freud, “the pleasurable unpleasurable tension of sexual enjoyment occurs when the body’s „normal‟ range of sensation is exceeded, and when the organization of the self is momentarily disturbed”; thus, “sexuality would be that which is intolerable to the structured self” (Freudian 38). Primary pity is also intolerable to the structured self, because it entails a fascination with the fantasy of a self in a state of disintegration or disablement. Secondary pity is something else, although it cannot wholly be differentiated from primary pity. Secondary pity attempts to heal primary pity’s self-rupturing effects by converting primary pity into a feeling that is bearable. As with secondary narcissism, secondary pity involves both an attempt to get back to that ego-shattering state of painfully pleasurable primary pity, and at the same time to defend against that threat to the ego by aggrandizing oneself at someone else’s expense. Secondary pity refers to all those ego-bolstering behaviors that most people think of when they talk about pity. Disabled people are all too familiar with these behaviors: the saccharin sympathy, the telethon rituals of “conspicuous contribution,” the insistence that “they” (i.e., nondisabled people) could never endure such suffering. More commonly known in our culture simply as “pity,” secondary pity encompasses our culture’s most clichéd reactions to disability: charity, tears, and calls for a cure. Correlatives of these commonplace manifestations of secondary pity are the obligatory claims that disabled people’s suffering is “inspiring.” Indeed, the speed with which conventional cultural representations of disability segue from overt expressions of pity to celebrations of “the triumph of the human spirit” highlights the ways in which secondary pity, as a defense against primary pity’s incursions, reinforces the ego’s fantasy of sovereignty. Secondary pity, in other words, can be seen as a variation of secondary narcissism: these affects enlarge the ego of the pitier or the narcissist at the expense of someone else. But primary pity is not the same as either primary narcissism, secondary narcissism, or secondary pity. Unlike primary narcissism, a feeling that emerges out of a relation to the world in which notions of “self” and “other” do not obtain, primary pity does depend upon the constructs of self and other, although these constructions are unstable and are continually threatening to come undone. Primary pity can thus be envisioned as a threshold category occupying a liminal position between the total denial of the other that is inherent to primary narcissism and the rigid structure of (superior) self and (inferior) other that constitutes secondary narcissism and secondary pity. My concept of primary versus secondary pity also differs from Freud’s primarysecondary narcissism distinction at the level of genealogy. Like Freud’s account of primary and secondary narcissisms, my model of primary and secondary pities involves a temporal transition; but whereas Freud imagines the movement from primary to secondary narcissism as a passage from an earlier to a later stage of an individual’s development, the temporal shift from primary to secondary pity happens much more quickly than this. It happens in an instant: that moment in which we feel primary pity and then, almost before we can blink, deny that we feel or have felt it. The denial is understandable: who wants to admit that one gets pleasure from the sight of another person’s suffering—or, to make matters worse, that this pleasure derives in part from the specter of disability’s transferability, the possibility that this suffering could be—and, fantasmatically, perhaps already is—an image of one‟s own self undone? Indeed, the model of primary pity that I have been constructing may sound a bit too close to sadism for some people’s liking. Pity does come close to sadism, and at the same time, to masochism, which Freud theorizes as sadism’s obverse. In “Mourning and Melancholia,” an essay that can be read as a sequel to “On Narcissism,” Freud approaches a distinction between primary and secondary masochism, which accords with my primary-secondary pity heuristic.122 If the story that I traced in “On Narcissism” could be summarized as “child gets breast; child loses breast; child gets breast back, albeit in a secondary, adulterated form,” the tale that Freud tells about masochism takes much the same form. In this story, subject loves object; subject loses object; and subject tries to get object back by becoming object, that is, by identifying with the object in such a way that object starts to seem—and perhaps in some ways is—part of subject’s self. This last phase is a dysfunctional and disabling form of identification, Freud makes clear. Subject is still angry at object for having left it, and it takes out that anger on the object that is now part of itself. This is the reason that people suffering from melancholia are so hard on themselves, Freud says; the “diminution in…self-regard” that typically accompanies melancholia results from the subject’s attacks on the loved-and-lost object that the subject has incorporated into its ego (“Mourning” 246). Freud had not wanted there to be such a thing as primary masochism; for a long time, he had insisted that sadism, or “aggression,” was the primary instinct, and that masochism was only a turning-inward of this originary aggression. But in “Mourning and Melancholia,” although Freud does not yet use the term “primary masochism,” he nonetheless gets at this concept. The problem of suicide, Freud notes in this essay, raises the possibility that the ego “can treat itself as an object” that it wants to destroy (252). When it comes to such an extreme act as suicide, the possibility of carrying “such a purpose through to execution” must, Freud surmises, involve more than a sadistic wish to punish others. Perhaps, then, there is an innate desire to destroy one’s own self, Freud hypothesizes. If so, this self would not be a single thing: it would be “me” and at the same time, the lost object whose image “I” have internalized. Freud’s notion of a primary masochism is tied very closely to his conceptualization of the drive. Beyond the Pleasure Principle, the text in which Freud first used the term “death drive,” was published three years after “Mourning and Melancholia.” In the later text, Freud’s speculations about the death drive lead him to acknowledge that “there might be such a thing as primary masochism” (66). After all, Freud points out, the idea that either sadism or masochism definitively takes precedence over the other does not ultimately make much sense, as “there is no difference in principle between an instinct turning from the object to the ego and its turning from the ego to an object” (66). If sadism and masochism are ultimately indistinguishable obverses of each other, then pity, in both its primary and its secondary forms, would have to be both sadistic and masochistic. This is a deeply troubling possibility, but I suggest that trying to overcome pity will only make matters worse. There are many ways of trying to overcome primary pity, and each one ultimately aggravates the violence of primary pity. One way is the “pitiless” refusal of compassion that Edelman advocates (70). Another is the disability activist “No pity” injunction. xA third example is secondary pity, as in the query, commonly addressed to disabled people, “Have you ever thought of killing yourself?”123 In this question, disabled people correctly hear the wish, “I’d like to kill you.” Indeed, primary pity is so unsettling that our culture has been driven to “mercifully” kill people in the name of secondary pity. We have also been driven to lock people in institutions, to let them languish on the streets, to stare, to punish, and to sentimentalize—all, I would suggest, in the interest of not owning, not naming, not acknowledging that self-shattering, ego-dissolving, instantaneous and intolerable moment of primary pity. Because primary pity is tied up with the disability drive, it must, like the drive itself, be regarded as unrepresentable. However, I will quote at length from a passage of writing that comes close not only to representing primary pity but also perhaps to producing it. In his memoir, One More Theory About Happiness, Paul Guest describes an experience that he had in the hospital after sustaining a spinal cord injury when he was twelve years old: My stomach still roiled and it was hard to keep anything down. Late one night, a doctor came to my bedside, leaning over me, his hands knotted together. He seemed vexed, not quite ready to say anything. Used to the look, I waited. And then he began. “The acids in your stomach, Paul, because of everything you’re going through, it’s like your body, everything about it, is upset. That’s why you feel so nauseous all the time. We’re going to treat that by putting a tube into your nose and down into your stomach, so we can give you medicine, OK?” When he walked away, I felt something begin to give way inside me. Up until then, I’d faced more misery and indignity than I would have thought possible. I lay there, numb and sick in a diaper, helpless. It was too much to bear, too frightening, a last invasion I could experience and not break, utterly. When he returned with nurses, I was already sobbing. Anyone so limited could hardly fight, but I tried. I tried. The neck collar prevented much movement, and any was dangerous, but I turned my head side to side, just slightly, a pitiful, unacceptable range. Fat tears rolled down my face like marbles. I begged them all, no, no, no, please no. “Hold him, hold him still,” the doctor said. Nurses gripped my head on either side. From a sterile pack, the doctor fished out a long transparent tube and dabbed its head in a clear lubricant. He paused almost as if to warn me but then said nothing. 77 Then the tube entered one nostril, its gauge slight enough to pass through, down my throat and into my stomach. I couldn’t thrash or resist. I could only relent. To the pain, the discomfort, but most distressingly the feeling of powerlessness, of violation. It was in that moment, I think, that the weight of everything which had happened fell upon me, undeniably, and the knowledge of it crushed me. (23-24) “Too much to bear,” Guest writes. The word “unbearable” would indeed be an accurate descriptor of this passage: both the experience of violence that it narrates and also the retelling of that experience produce sensations that, as in Berlant and Edelman’s account of sexuality, one cannot bear but must nonetheless “struggle to bear” (back cover). Guest’s account of a nonconsensual administration of an unwanted medical treatment is especially difficult to bear because it gives the reader no recourse to secondary pity: the passage offers no “lesson” to be learned, no invitation to feel “inspired,” nothing to make one feel in any way okay about what has happened. The medical violence that Guest recounts seems particularly devastating because it is readable as sexual: it takes the form of forced penetration, and it results in a “feeling of powerlessness, of violation” that resonates with experiences recounted by survivors of sexual assault.

#### The affirmatives optimistic hope of a better future is complicit in rehabilitative futurism, as the disabled object is seen through a lens of nonproduction – this discludes disability from the political and notions of reformism. They don’t get to weigh case – if we win their starting point is violent then they shouldn’t be able to weigh their endpoint.

**Mollow 2** Anna (2015): The Disability Drive, A dissertation submitted in partial satisfaction of the requirements for the degree of Doctor of Philosophy in English in the Graduate Division of the University of California, Berkeley Committee in charge: Professor Kent Puckett, Chair Professor Celeste G. Langan Professor Melinda Y. Chen Spring 2015 <https://digitalassets.lib.berkeley.edu/etd/ucb/text/Mollow_berkeley_0028E_15181.pdf> SJCP//JG

Elsewhere, I have argued that No Future’s impassioned polemic is one that disability studies might take to heart.109 Indeed, the figure that Edelman calls “the disciplinary image of the “innocent” Child” is inextricable not only from queerness but also from disability (19). For example, the Child is the centerpiece of the telethon, a ritual display of pity that demeans disabled people. When Jerry Lewis counters disability activists’ objections to his assertion that a disabled person is “half a person,” he insists that he is only fighting for the Children: “Please, I’m begging for survival. I want my kids alive,” he implores (in Johnson, Too Late 53, 58). If the Child makes an excellent alibi for ableism, perhaps this is because, as Edelman points out, the idea of not fighting for this figure is unthinkable. Thus, when Harriet McBryde Johnson hands out leaflets protesting the Muscular Dystrophy Association, a confused passerby cannot make sense of what her protest is about. “You’re against Jerry Lewis!” he exclaims (61). The passerby’s surprise is likely informed by a logic similar to that which, in Edelman’s analysis, undergirds the use of the word “choice” by advocates of legal abortion: “Who would, after all, come out for abortion or stand against reproduction, against futurity, and so against life?” (16). Similarly, why would anyone come out for disability, and so against the Child who, without a cure, might never walk, might never lead a normal life, might not even have a future at all? The logic of the telethon, in other words, relies on an ideology that might be defined as “rehabilitative futurism,” a term that I coin to overlap and intersect with Edelman’s notion of “reproductive futurism.” If, as Edelman maintains, the future is envisaged in terms of a fantasmatic “Child,” then the survival of this future-figured-as-Child is threatened by both queerness and disability. Futurity is habitually imagined in terms that fantasize the eradication of disability: a recovery of a “crippled” or “hobbled” economy, a cure for society’s ills, an end to suffering and disease. Eugenic ideologies are also grounded in both reproductive and rehabilitative futurism: procreation by the fit and elimination of the disabled, eugenicists promised, **would bring forth a better future**.110

#### The starting point of the 1AC is epistemically flawed and an independent link – fiat is illusory and anything that doesn’t begin from the question of disability allows for ableism to infiltrate modes of thought which means we’re an epistemic prerequisite. Thus, the role of the ballot is to vote for the debater who best methodologically challenges ableism.

**Campbell 13** Fiona Kumari (2013): Problematizing Vulnerability: Engaging Studies in Ableism and Disability Jurisprudence, Fiona Kumari Campbell undertakes research in Studies in Ableism, coloniality, disability studies as well as explorations about Buddhist formations of disability. Trained in sociology, theology and legal studies; she is interested in ways that law, new technologies and the governance of marginal populations produces understandings of the productive citizen, normative bodies, ideas of periphery and ways that ablement privileges and entitles certain groups in society. Campbell is the author of Contours of Ableism: The Production of Disability and Abledness (Palgrave, 2009) and numerous other journal articles and book chapters. SJCP//JG

Studies in Ableism What is meant by the concept of ableism? The literature suggests that the term is often used fluidly with limited definitional or conceptual specificity. The work of Carlson (2001)5 and Campbell (2001) represented a turning point in bringing attention to this new site of subordination not just in terms of disablement but also ableism’s application to other devalued groups. Ableism is deeply seeded at the level of knowledge systems of life, personhood and liveability. Ableism is not just a matter of ignorance or negative attitudes towards disabled people; it is a schema of perfection, a deep way of thinking about bodies, wholeness and permeability.6 As such integrating ableism into social research and advocacy strategies represents a significant challenge to practice as ableism moves beyond the more familiar territory of social inclusion and usual indices of exclusion to the very divisions of life. Bringing together the study of existence and knowledge systems, ableism is difficult to pin down. Ableism is a set of processes and practices that arise and decline through sequences of causal convergences influenced by the elements of time, space, bodily inflections and circumstance. Ability and the corresponding notion of ableism are intertwined. Compulsory ablebodiedness is implicated in the very foundations of social theory, therapeutic jurisprudence, advocacy, medicine and law; or in the mappings of human anatomy. Summarised by Campbell (2001, 44) Ableism refers to; …A network of beliefs processes and practices that produces a particular kind of self and body (the bodily standard) that is projected as the perfect, speciestypical and therefore essential and fully human. Disability then is cast as a diminished state of being human. Writing today (2013) I add an addition to this definition: ‘The ableist bodily configuration is immutable, permanent and laden with qualities of perfectionism or the enhancement imperative orientated towards a self-contained improvability’. Sentiency applies to not just the human but the ‘animal’ world. As a category to differentiate the normal from the pathological, the concept of abledness is predicated on some preexisting notion about the nature of typical species functioning that is beyond culture and historical context. Ableism does not just stop at propagating what is typical for each species. An ableist imaginary tells us what a healthy body means – a normal mind, the pace, the tenor of thinking and the kinds of emotions and affect that are suitable to express. Of course these ‘fictional’ characteristics then are promoted as a natural ideal. This abled imaginary relies upon the existence of an unacknowledged imagined shared community of able-bodied/minded people held together by a common ableist world view that asserts the preferability and compulsoriness of the norms of ableism. Such ableist schemas erase differences in the ways humans express our emotions, use our thinking and bodies in different cultures and in different situations. This in turn enacts bodily Otherness rendered sometimes as the ‘disabled’, ‘perverted’ or ‘abnormal body’, clearly demarcating the boundaries of normal and pathological. A critical feature of an ableist orientation is a belief that impairment or disability is inherently negative and at its essence is a form of harm in need of improvement, cure or indeed eradication.

#### The alternative is to endorse the negative and unwavering pessimism – we reject the political and notions of futurism in exchange for an affirmation of disability’s abjection as something beautiful.

**Selck 16** Michael (2016): Crip Pessimism: The Language of Dis/ability and the Culture that Isn't, Southern Illinois University Carbondale, SJCP//JG

The disabled are dying and with them dis/abled culture is being eradicated. In the time between formulating this project and its completion already too many disabled souls have been taken from this world, including pivotal disability studies influences for this research. I barely had enough time to mourn the loss of disability advocate and inspiration porn critic Stella Young before grieving the loss of disability studies exemplar Tobin Siebers. Attached to the grief I feel as a result of the fading disability studies community is the perpetual grief I harbor since my disabled Father’s suicide and in turn the grief concomitant to the claiming of a disabled identity. I choose to start out this project with grief because it communicates the tenor of this research; this is not the disability studies project of inspiration or utopia. My entry point to the disability studies dialogue is riddled with grief, anger, and pain and it is as such that this project plots a course of disability research that attempts to make a space free from the ideological constraints of optimism. The language surrounding dis/ability is highly political. Entire words, phrases, and identities are stretched between, in, and out of the nexus of dis/ability. The choice, for instance, to include a backslash in the word dis/ability represents for Goodley (2014) a desire to delineate and expand each of the categories in the face of global neoliberalism. My initial research inquired about the impact of dis/abled terms and phrases. I went to interrogate rhetoric like “special education”, “handicapable”, and one of the most glaringly overused insults in the American education system “retard”. The scholarship I was coming up with was plentiful but was for the most part located entirely outside of intercultural communication programs like the one I was attending. For the most part the few and far between intercultural communication projects about dis/ability I was able to locate were without modal complexity and didn’t bear semblance to so many of my own experiences. I was beginning to notice a layer of optimism that has been communicatively imprinted upon the negotiation of dis/abled identity. The angst started to manifest as I questioned if I was in the correct field or if dis/ability even was ‘cultural’. I felt a very real cultural erasure of dis/ability in academia and ultimately that glaring lack of consideration is what pushed me to performance studies. I first worked to close the apparent research gap by crafting a collaborative performance titled Under the Mantle (UTM), which put dis/ability, communication scholarship, and pessimist philosophy on stage. The larger purpose of this research report is to antagonize the erasure of dis/ability from communication studies by autoethnographically analyzing the crip-pessimist performance art project Under The Mantle. This research report will first detail the components of the theoretical work that was drawn on to create UTM. Next I offer a literature review to demonstrate the combination of optimism and neglect dis/ability has undergone in intercultural communication models. Following that section I mark my shift to performance methods as I explain how narrative autoethnography can illuminate cultural misconceptions regarding the dis/abled. In the last sections of this report I offer a textual analysis of the performance UTM and analyze three significant arguments of the instillation before concluding. Contextualizing Critical Dis/Ability Theory Often used interchangeably, critical disability theory (CDT) and critical disability studies (CDS) contest dis/ablism (Goodley, 2011, 2014; Devlin & Pothier, 2006; Hosking, 2008). There are several unique additions made to CDS with every new instantiation. Scholars in European countries and Canada attend to the theory, with United States academics often underrepresented. There are three concurrent themes of CDT that I will synthesize in this section with some dis/ability studies authors claiming there are as many as seven themes of CDT (Hosking, 2008). In the introduction to their edited collection of dis/ability essays, Richard Devlin and Dianne Pothier (2006) present three themes of CDT as, first, to highlight the unequal status to which persons with disabilities are confined; second, to destabilize necessitarian assumptions that reinforce the marginalization of persons with disabilities; and third, to help generate the individual and collective practical agency of persons with disabilities in the struggles for recognition and redistribution. (p. 18, emphasis mine) Already the connections between the CDT and the critical communication paradigm are visible as each respectively forefronts notions of power, privilege, identity, and agency. Outlined in more detail, the first theme of CDT argues that there is systemic micro and macro level discrimination against bodies with disabilities. To some critical communication scholars, this theme might be obvious, but it seldom is when “the resulting exclusion of those who do not fit able-bodied norms may not be noticeable or even intelligible” (Delvin & Pothier, 2006, p. 7). As the bumper sticker on my laptop proudly disclaims, “Not all disabilities are visible,” which necessarily adds a level of nuance and complexity to the way that dis/ability studies attend to the prospect of discrimination and violence. Often times, “social organization according to able-bodied norms is just taken as natural, normal, inevitable, necessary, even progress” (Delvin & Pothier, 2006, p. 7). It might be true that the lack of collaborative work between critical communication studies and dis/ability studies is because neoliberalism is supremely effective at rebranding marginalized oppression as a marker of its progress. The implications of this assertion are dire but essential to the basis of crip-pessimism. Theoretical approaches based in pessimism and skepticism are often necessary to distinguish the instruments of self destruction that have been mistaken for those of self betterment. Thus, a key question remains, what is regarded as progress and to whom does it count? The politics of progress call for the second tenet of CDT, which is a destabilization of neoliberal practices that strip power and agency from bodies with disabilities. Devlin and Pothier (2006) use the language of “anti-necessitarian” (p. 2), which refers to the efficacy of social organizations and an unflinching skepticism of liberalism. For Shildrick and Price (1999), “disabled bodies call into question the ‘giveness’ of the ‘natural body’ and, instead, posit a corporeality that is fluid in its investments and meanings” (p. 1). Anti-necessitarian logics ask questions that remain innocuous to the critical communication paradigm. Can the architectural proliferation of stairs and multiple levels on buildings be attributed to neoliberalism and active disablism? If stairs seem to focus too exclusively on physical impairments, then what about the sensitivity of the building’s lighting, acoustics, and spatiality? Finally, if neoliberalism fights to protect its grand narrative of progress then is the social exclusion of bodies with disabilities necessary for the day-to-day operation of our globalized world? As Donaldson (2002) posits: “theories of gendered, raced, sexed, classed, and disabled bodies offer us critical languages for ‘denaturalising’ impairment’” (p. 112) at the level of the subjective and inter-subjective. The third theme of CDT is to attend to the agency of bodies with disabilities in the struggle for recognition. One key element of extending agency to the disabled is the use of social experience. Experience is subjective “but experience remains intimately connected to political and social existence, and therefore individuals and societies are capable of learning from their experiences” (Siebers, 2008, p. 82). Though absolutely necessary, it is not enough to write treatises on the oppression of the disabled over time. Academics, theorists, intercultural trainers, and storytellers alike should be aware of the constant risks of representation. Representation and context are at the core of critical disability studies. The notion of agency is as unstable as the notions of dis/ability. There is no one-size-fits-all human rights based approach that will be suitable to address all disabled experiences, as the theoretical call for crip-pessimism will remind us. Instead of a universal abstract Rawlsian concept of social justice, CDS “attend(s) to the relational components of dis/ablism” (Goodley, 2011, p. 159). By a Rawlsian concept of social justice I mean a model that relies on distributive justice with utopist equality at its core. Where utopist equality projects highlight human sameness to the point of purity. CDT unavoidably invites a discussion about difference into the folds as postmodern and post-structural thinkers position the self as defined constantly in relation to others. Therein lies the difference between an equality model and a justice model of social identity. Often in the attempt to open up spaces for reconsidering self and other, CDS celebrates disability as a positive identity marker. This essay offers a strong argument of caution that the inclusion of CDS in critical communication studies might rely too heavily on celebrations of disabled identity. Nothing better demonstrates that reliance on celebrating identity than the myriad language choices used to describe a disabled identity including: differently-abled, special needs, person with disability, disabled person, temporarily able-bodied, and others. Often, able- bodied audiences have a tendency to sensationalize the presence of disability in a space that has not traditionally welcomed it. Examples of this are highlighted by the increasingly popular discussion of ‘inspiration porn’ (Young, 2014) and Hollywood’s representation of disability. The tendency is to inspirationalize the disabled for achieving tasks that would not be celebrated if they were accomplished by an unimpaired body. Crossing the street, showing up on time, entering a building by oneself are all tasks profoundly routine to the non-disabled and yet simultaneously cherished as markers of progress for the disabled. Philosophical pessimism is articulated next as a way to temper the risk of sensationalizing dis/ability. The theories ultimately fuse together like orchids and wasps to generate the larger theme of crip-pessimism. Philosophical Pessimism Throughout the 19th century pessimism was one of the most popular intellectual and philosophical strains, crossing countries and continents. Authors such as Rousseau, Leopardi, Schopenhauer, and Nietzsche overwhelmingly created and lead the spirit of pessimism. Contemporarily however, the word ‘pessimism’ is pejorative and describes a body’s emotional discontent rather than intellectual engagement with the world. Dienstag (2009) writes, “Since pessimism is perceived more as a disposition than as a theory, pessimists are seen primarily as dissenters from whatever the prevailing consensus of their time happens to be, rather than as constituting a continuous alternative” (p. 3). Power is responsible for ontological shifts, and during shifts some populations benefit while others are harmed. The turn in thinking about pessimism from an intellectual position to an emotional state has been particularly gratuitous for bodies with disabilities. I come to pessimism because of my experience with disability. My anxiety disorder comes with an exteriority of anti-social behavior that has branded me pessimistic. The concern for my anxiety in public situations is often commented on as overly critical, negative, narcissistic, and most often pessimistic. I experience an anxious state of becoming different, and after years of failing to rehabilitate my sameness to able-bodied standards, I have come to a comfort with pessimism. I choose to include pessimism as a theoretical crutch to avoid communication studies’ sensationalism of disability. I imagine that when critical communication studies does bridge the dis/ability research gap that it might, at least initially, extend some neoliberal logics at the expense of CDS. This might manifest by scholars simply asserting disabled personhood where it does not institutionally, culturally, or individually exist. I find that CDT and philosophical pessimism combine in unique and valuable ways, particularly around tensions of personhood, abstract ideal humanism, and neoliberalism. Neoliberalism should be understood as “the superiority of individualized, market-based competition over other modes of organization. This basic principle is the hallmark of neo-liberal thought— one with old roots that lay partly in Anglo economics and partly in German schools of liberalism” (Mudge, 2008, p. 706-707). There are four components of pessimism outlined by Joshua Foa Dienstag (2006) in his book Pessimism: Philosophy, Ethic, Spirit that I wish to explore difference through. They are as following that: (1) time is a burden, (2) history is ironic, (3) human existence is absurd, and finally (4) resignation or affirmation. To write about pessimism necessarily involves questions of time, temporality, and history. The development of philosophical pessimism, specifically, the theories regarding the burden of time-consciousness, begins with difference. For the pessimist, the concept of time begets a differentiation between human and animal. Being a dog-owner myself, I have heard the colloquial aphorism that dogs, as all animals, have no concept of time. Pessimists understand time consciousness as a unique, but ultimately loathsome, trait of the human condition. Even in projects that appear to be geared toward sameness there are always unperceived and neglected populations. For example, even the U.S. constitution alleges persons of color were (and still are often) racially subjugated as property instead of considered to be fully human. The notion of difference is at the center of the pessimist’s position on time-consciousness because the philosophy accepts that the conditions of our existence are subject to relentless unpredictable change. “To the pessimists, however, the human condition is existentially unique— its uniqueness consisting precisely in the capacity for time-consciousness” (Dienstag, 2009, p. 20). For the pessimist nothing is ever the same, everything is always different, and to inhabit linear time means that everything in existence is always rushing off into the past. The advent of human time consciousness is also what leads the pessimist to find the course of history to be ironic. History is ironic for the pessimist because progress is always related to a greater set of unperceived consequences. As suggested above, philosophical pessimism acknowledges that change occurs; technologies develop and improve over time. Pessimists ask if those improvements are related to a greater set of costs that are not immediately recognizable. (Dienstag, 2006, p. 25) Similar to critical disability theory, pessimism interrogates power and privilege. Pessimists rely on the logic of difference to chart consequences. Consequences go unperceived because they occur across populations with disproportionate access to power, populations that are often culturally unintelligible. For instance, the massive boom in mobile technologies like cell phones and laptops has created vast pits of ‘e-waste’ in Africa, surges in child labor, and conflict over rare earth minerals (Vidal, 2013). Pessimists use difference to tease out the distinction between the instruments of suffering and those of betterment. The third philosophical pessimistic position is that human existence is absurd. The absurdity of existence “is illustrated by the persistent mismatch between human purposes and the means available to achieve them: or again, between our desire for happiness and our capacity to encounter or sustain it” (Dienstag, 2006, p. 32). Difference is built upon exanimations of power, which is both fluid and transferable but ultimately permanent. Classical western philosophy has an optimistic pragmatism built into it that posits there must be an answer to our questions. Alternatively, the pessimist embraces uncertainty, ambiguity, and intersubjectivity. Pessimism encourages a sense of comfort around the idea of multiple, coexistent, and perhaps competing histories. Neoliberal optimism is the logic of conflict as materially reconcilable, rather than antagonistically irreconcilable. The fourth and final tenet of pessimism that we are to examine asks what we are to do about our dire human condition. There are multiplicities of rationales that ultimately inform the pessimistic dualism to either resign from life or affirm it entirely. I defer to an existential or Nietzschean pessimism that recognizes suffering is inevitable for two reasons. First, human time-consciousness necessitates an awareness of our impending death. Second, mutually assured value systems will always intersubjectively exist. The choice to affirm life in its entirety is a pessimistic choice. Embracing life as both miserable and beautiful, fleeting and enduring, validates the perpetually fragmented subject seeking a world that exists beyond good and evil and instead just is.

#### Psychoanalysis is both falsifiable and accurate – studies prove.

Grant & Harari 5 (Don and Edwin, psychiatrists, “Psychoanalysis, science and the seductive theory of Karl Popper,” Australian and New Zealand Journal of Psychiatry)

Attacks on psychoanalysis and the long-term therapies derived from it, have enjoyed a long history and much publicity [1-4]. Yet, the justification for such attacks has been challenged on many grounds, including their methodology [5] and the empirically demonstrable validity of core psychoanalytic concepts [6,7]. Also, burgeoning neuroscience research, some of which is summarized below, indicates likely neurological correlates for many key clinically derived psychoanalytic concepts such as self-coherence [8], repression [9] and projective identification [10]. Furthermore, the effectiveness of psychoanalysis and its derivative therapies has been supported by empirical research [11,12], particularly for patients with DSM axis II pathology. Despite this evidence, the attacks on psychoanalysis continue unabated, not only from some psychiatrists [13,14] but also from the highest levels of politics and health bureaucrats [15], although what exactly is being attacked is often unclear.

### Case

#### The aff ignores insufficient infrastructure, materials, and “know how” needed to expand vaccine supply- even if IPR were waived there’s no scale up

Santos Rutschman 21 Santos Rutschman, Ana (Professor of Law, St. Louis University) and Julia Barnes-Weise (Executive Director of the Global Healthcare Innovation Alliances Accelerator a non-profit organization spun out of a program in Public Policy at Duke University, and a Senior Consultant to the Coalition for Epidemic Preparedness Innovations. She is a lawyer, global health policy consultant, entrepreneur and Certified Licensing Professional). "The COVID-19 Vaccine Patent Waiver: The Wrong Tool for the Right Goal." Bill of Health (2021) (2021)./SJKS

Second, even if all types of legal restrictions on the use of vaccine technology were lifted — or had never existed in the first place — there is simply not enough infrastructure (manufacturing facilities and equipment) nor raw materials (the components needed to manufacture and deliver vaccines) to produce and distribute COVID-19 vaccines as predicted under current waiver proposals. We have long faced a global vaccine manufacturing problem that will not be fully resolved during the current pandemic. In the case of vaccines that need to be kept at ultra-cold temperatures, these problems intensify. One of us (Barnes-Weise) has been involved in the contractual negotiations for the development, manufacturing and transfer of technology related to COVID-19 vaccines. In addition to the informational gaps described above, COVID-19 vaccine manufacturers are most concerned about how well the recipients of the technology transfer will understand and be able to implement such knowledge in making vaccines of the necessary quality. Shortages do not merely affect materials necessary to manufacture vaccines and facilities adequate to manufacture the vaccines; they also affect the availability of personnel qualified to instruct the licensee and recipient of this information. Sending an employee of this caliber out of the original manufacturing site to a partner site risks reducing the capacity of the first site. And remote instruction, necessitated by the pandemic, has its own shortcomings. In relation to the patents on the vaccines themselves, most of the concerns that the vaccine manufacturers express are around the protection of their vaccine platforms for the purposes of making future or non-COVID-19 vaccines. Moderna shared information about its [patents](https://www.modernatx.com/patents) in summer 2020. The manufacturers, as evidenced by the number of licenses to manufacture granted to date, are eager to [find](https://www.reuters.com/article/us-health-coronavirus-lonza-moderna/lonza-gets-licence-to-make-ingredients-for-moderna-vaccine-idUSKBN2B72BB) [partners](https://www.bloomberg.com/news/articles/2021-01-27/sanofi-to-make-millions-of-biontech-pfizer-s-covid-vaccine-doses) with the [capabilities](https://www.fosunpharma.com/en/news/news-details-3801.html) to expand production. It is not to their benefit to produce an inadequate supply of a highly sought-after vaccine. However, even willingness to transfer patented vaccine technology has faced numerous practical hurdles to date: 1) infrastructural limitations; 2) scarcity of raw materials; 3) concerns about licensees having the ability to actually manufacture effective vaccines in light of the infrastructural and product scarcity, even in situations in which there might be no informational gaps. A patent waiver would not address any of the practical concerns currently at the root of tech transfer negotiations involving COVID-19 vaccine technology. Compounding these problems is the fact that, should a waiver be issued, there is no legal mechanism that can compel the transfer of certain types of know-how or trade secrets should a company be unwilling to license its intellectual property — which, again, at this point in the pandemic, is not a problem we have observed. Finally, it is important to keep in mind that a waiver would be temporary: supporters of current waiver proposals should consider what will happen once demand for vaccines begins diminishing and fewer manufacturers remain on the market. Moreover, they should consider the legal and practical uncertainty that a waiver would introduce, as it is unclear how technology transfer between companies would cease (or continue) once the waiver expires.

#### Companies are already producing at maximum capacity – the aff trades off with quality and can’t provide more vaccines.

Szabo et. Al 21 Liz Szabo et. Al 21 [Liz Szabo (Liz Szabo, a senior correspondent and enterprise reporter who focuses on the quality of patient care, has covered medicine for two decades.)]. "Why Even Presidential Pressure Might Not Get More Vaccine to Market Faster." Kaiser Health News, 1-26-2021, Accessed 8-5-2021. https://khn.org/news/article/ramping-up-covid-vaccine-production-could-take-months-even-with-bidens-best-tool-to-pressure-companies/ // duongie

Americans are dying of covid-19 by the thousands, but efforts to ramp up production of potentially lifesaving vaccines are hitting a brick wall. Vaccine makers Moderna and Pfizer-BioNTech are **running their factories full ti**lt and are under enormous pressure to expand production or collaborate with other drug companies to set up additional assembly lines. That pressure is only growing as new viral variants of the virus threaten to launch the country into a deadlier phase of the pandemic. President Joe Biden has said he plans to invoke the Cold War-era authority of the Defense Production Act to provide more vaccines to millions of Americans. Consumer advocates — who had called for Donald Trump to use the Defense Production Act more aggressively as president — are now asking Biden to do the same. But even forcing companies to gear up production won’t **provide much-needed doses anytime soon**. Expanding production lines takes time. Establishing lines in repurposed facilities can take months. “The big problem is that even if you can get the raw material and get the infrastructure set up, how do you get a company that is already producing at maximum capacity to go beyond that maximum capacity?” said Lawrence Gostin, a professor of global health law at Georgetown University. Ordering the companies to work 24/7 “would be a naïve solution,” said Dr. Nicole Lurie, a senior adviser to the CEO of the Coalition for Epidemic Preparedness Innovations, an international group that finances vaccines for emerging diseases. “They’re probably already doing that to the extent they have the raw materials.” Lurie added, “If you completely wear people out, mistakes happen. You **have to balance speed with quality and safety.”** The technological challenges involved are daunting, and the companies haven’t been forthcoming about what’s needed to overcome any supply shortfalls. “We don’t know what the holdup is. Is it capacity? Raw materials? People? Glass vials? We just don’t know what the bottleneck is,” said Erin Fox, senior director of drug information and support services at the University of Utah Health Hospitals. Forcing other companies to start making the vaccines might not work either, Gostin said. “I’m not sure if Biden could require a private company to transfer its technology to another company,” Gostin said. “That is highly questionable legally. … President Biden’s room for maneuvering isn’t as great as people think.” Drug companies define “trade secrets” broadly, Fox said. “In general, drug companies don’t have to tell me who is making their product, where it’s made, the location of the factory. … That’s considered proprietary.” Part of the challenge relates to how these vaccines are made. The first two authorized products use lipid nanoparticles to deliver a snippet of the coronavirus’s genetic material — called messenger RNA, or mRNA — into cells. The viral genes teach our cells how to make proteins that stimulate an immune response to the novel coronavirus. Messenger RNA is fragile and breaks down easily, so it needs to be handled with care, with specific temperatures and humidity levels. The vaccines “are not widgets,” said Lurie, who served as assistant secretary for preparedness and response at the Department of Health and Human Services during the Obama administration. Every step, experts say, to get vaccines to market has its complexities: obtaining raw materials; building facilities to precise specifications; buying single-use products, such as tubing and plastic bags to line stainless steel bioreactors; and hiring employees with the requisite training and expertise. Companies also must pass safety and quality inspections and arrange for transportation. The Defense Production Act, for instance, would allow the government to commandeer a plant that already has a fermenter — there are plenty in the biotech industry — to expand production. But that’s just the first stage in making an mRNA vaccine and, even then, it would take about a year to get going, said Dr. George Siber, a vaccine expert who is on the advisory board of CureVac, a German mRNA vaccine company. Companies would first have to do a breathtakingly thorough cleaning to prevent cross-contamination, Siber said. Next, they would need to set up, calibrate and test equipment, and train scientists and engineers to run it. Finally, Siber said, unlike a drug, whose components can be tested for purity, there’s no way to be sure a vaccine produced in a new facility is what it claims to be without testing it on animals and people. “Making vaccines is not like making cars, and quality control is paramount,” said Dr. Stanley Plotkin, a vaccine industry consultant credited with inventing the rubella vaccine. “We are expecting other vaccines in a matter of weeks, so it might be faster to bring them into use.” However, even that will require patience. Johnson & Johnson, expected to announce clinical trial results this month, has said that it won’t be able to deliver as many shots as planned because of manufacturing delays. The company did not confirm a manufacturing delay and declined to respond to questions. AstraZeneca’s vaccine, also funded in part by U.S. taxpayers, is in use already in the United Kingdom and India, but the Food and Drug Administration has raised questions about its late-stage trial, so it may not be available here until the spring. Novavax, another U.S.-funded vaccine maker, has been plagued by delays and only recently began recruiting volunteers for its big trial. Merck, the most recent company to get federal support for covid vaccines, announced Monday it was scrapping its two candidates after they failed to produce adequate immune response in early tests. “None of the vaccine makers are manufacturing at the volume they ultimately want to be at,” Lurie said. “They all have manufacturing delays.” Pfizer, which has committed 200 million doses to the U.S. government by the end of July, said last week it expected “no interruptions” in shipments from its primary U.S. covid manufacturing plant in Kalamazoo, Michigan. Pfizer spokesperson Sharon Castillo said the company has expanded manufacturing facilities and added more suppliers and contract manufacturers. Those efforts, and the company’s announcement that its five-dose vials actually contain an extra dose, mean “we can potentially deliver approximately 2 billion doses worldwide by the end of 2021.” The U.S. government also has an option to acquire another 400 million doses of the Pfizer-BioNTech vaccine, though the company declined to provide details on that option when asked. But countries around the world are competing for the same supplies and raw materials, Gostin said. Biden could use the Defense Production Act “to force Pfizer to prioritize U.S. contracts, but that would be politically risky,” given that other countries could retaliate by hoarding supplies. Although Pfizer is an American company, it has partnered with BioNTech, of Germany, to make its covid vaccine. “That would lead to a global mess.” Trying to corner the world market on vaccine ingredients or supplies would look bad, experts say, given that the United States just this week joined Covax, an international venture to source and distribute vaccines, in an effort to ensure poor countries aren’t left behind. Paradoxically, the rush to get vaccines to market may have resulted in a less efficient manufacturing process. Vaccine companies typically spend months making their factories run as efficiently as possible, as well as finding an ideal dose and the most effective interval between doses, Lurie said. Given the urgency of the pandemic, however, they delayed parts of this process and launched straight into mass production. Pfizer angered European countries last week when it paused vaccine production at a Belgian plant to upgrade its capacity. Pfizer said the weeklong closure would decrease vaccine deliveries to Europe for three to four weeks before boosting supplies in February. The move doesn’t affect U.S. vaccine supplies. “The U.S can’t necessarily readily access stuff that’s being held for vaccines in other countries,” Lurie said. And forcing other companies to make covid vaccines could jeopardize production of **other important shots,** such as measles, said Dr. Amesh Adalja, a senior scholar at the Johns Hopkins Center for Health Security. Routine childhood immunization rates have fallen during the pandemic, raising the risk of epidemics. Using the act to prioritize covid vaccine manufacturing has already disrupted supplies of at least one drug, Fox noted. In December, Horizon Therapeutics warned doctors and patients to expect a shortage of a drug called Tepezza, used to treat thyroid-related eye disease, because its manufacturer was ordered to prioritize covid shots. Lawmakers and consumer advocates such as Public Citizen called on the government to use the Defense Production Act more aggressively. In a letter sent earlier this month, Sen. Elizabeth Warren (D-Mass.) and Rep. Katie Porter (D-Calif.) said Moderna should share its technique for stabilizing its vaccine at normal refrigerator temperatures, without “ultracold” freezers. Moderna officials have said the intrinsic differences in the two companies’ mRNA material make that technology hard to share. Besides, they say, Pfizer has declined to share data with Moderna. Pfizer has declined to comment on the issue. Since Moderna’s effort is federally funded, the government presumably has march-in rights and could take over production, said Mike Watson, former president of Moderna subsidiary Valera, in an email. “The reality is that however far you push production capacity, you sooner or later reach a bottleneck.” Experts say it’s not as simple as demanding that glassmaker Corning step up and make glass vials, for example. Of course, the vials will need to meet rigorous requirements. But there’s also this: The U.S. is facing a shortage of mined sand, the main component needed to make glass vials.

#### No extinction from disease – burnout and variation checks

York ‘14 (Ian, head of the Influenza Molecular Virology and Vaccines team in the Immunology and Pathogenesis Branch of the Influenza Division at the CDC, PhD in Molecular Virology and Immunology from McMaster University, M.Sc. in Veterinary Microbiology and Immunology from the University of Guelph, former Assistant Prof of Microbiology & Molecular Genetics at Michigan State, “Why Don't Diseases Completely Wipe Out Species?” 6/4/2014, http://www.quora.com/Why-dont-diseases-completely-wipe-out-species)

But mostly diseases don't drive species extinct. There are several reasons for that. For one, the most dangerous diseases are those that spread from one individual to another. If the disease is highly lethal, then the population drops, and it becomes less likely that individuals will contact each other