## 1

#### Interpretation: “medicines” is a generic bare plural. The aff may not defend ipp to be reduced for specific medicines. The aff must defend ipp being reduced on all medicine.

Nebel 19. [Jake Nebel is an assistant professor of philosophy at the University of Southern California and executive director of Victory Briefs. He writes a lot of this stuff lol – duh.] “Genericity on the Standardized Tests Resolution.” Vbriefly. August 12, 2019. <https://www.vbriefly.com/2019/08/12/genericity-on-the-standardized-tests-resolution/?fbclid=IwAR0hUkKdDzHWrNeqEVI7m59pwsnmqLl490n4uRLQTe7bWmWDO_avWCNzi14> TG

Both distinctions are important. Generic resolutions can’t be affirmed by specifying particular instances. But, since generics tolerate exceptions, plan-inclusive counterplans (PICs) do not negate generic resolutions.

Bare plurals are typically used to express generic generalizations. But there are two important things to keep in mind. First, generic generalizations are also often expressed via other means (e.g., definite singulars, indefinite singulars, and bare singulars). Second, and more importantly for present purposes, bare plurals can also be used to express existential generalizations. For example, “Birds are singing outside my window” is true just in case there are some birds singing outside my window; it doesn’t require birds in general to be singing outside my window.

So, what about “colleges and universities,” “standardized tests,” and “undergraduate admissions decisions”? Are they generic or existential bare plurals? On other topics I have taken great pains to point out that their bare plurals are generic—because, well, they are. On this topic, though, I think the answer is a bit more nuanced. Let’s see why.

“Colleges and universities” is a generic bare plural. I don’t think this claim should require any argument, when you think about it, but here are a few reasons.

First, ask yourself, honestly, whether the following speech sounds good to you: “Eight colleges and universities—namely, those in the Ivy League—ought not consider standardized tests in undergraduate admissions decisions. Maybe other colleges and universities ought to consider them, but not the Ivies. Therefore, in the United States, colleges and universities ought not consider standardized tests in undergraduate admissions decisions.” That is obviously not a valid argument: the conclusion does not follow. Anyone who sincerely believes that it is valid argument is, to be charitable, deeply confused. But the inference above would be good if “colleges and universities” in the resolution were existential. By way of contrast: “Eight birds are singing outside my window. Maybe lots of birds aren’t singing outside my window, but eight birds are. Therefore, birds are singing outside my window.” Since the bare plural “birds” in the conclusion gets an existential reading, the conclusion follows from the premise that eight birds are singing outside my window: “eight” entails “some.” If the resolution were existential with respect to “colleges and universities,” then the Ivy League argument above would be a valid inference. Since it’s not a valid inference, “colleges and universities” must be a generic bare plural.

Second, “colleges and universities” fails the [upward-entailment test](https://plato.stanford.edu/entries/generics/#IsolGeneInte) for existential uses of bare plurals. Consider the sentence, “Lima beans are on my plate.” This sentence expresses an existential statement that is true just in case there are some lima beans on my plate. One test of this is that it entails the more general sentence, “Beans are on my plate.” Now consider the sentence, “Colleges and universities ought not consider the SAT.” (To isolate “colleges and universities,” I’ve eliminated the other bare plurals in the resolution; it cannot plausibly be generic in the isolated case but existential in the resolution.) This sentence does not entail the more general statement that educational institutions ought not consider the SAT. This shows that “colleges and universities” is generic, because it fails the upward-entailment test for existential bare plurals.

Third, “colleges and universities” fails the adverb of quantification test for existential bare plurals. Consider the sentence, “Dogs are barking outside my window.” This sentence expresses an existential statement that is true just in case there are some dogs barking outside my window. One test of this appeals to the drastic change of meaning caused by inserting any adverb of quantification (e.g., always, sometimes, generally, often, seldom, never, ever). You cannot add any such adverb into the sentence without drastically changing its meaning. To apply this test to the resolution, let’s again isolate the bare plural subject: “Colleges and universities ought not consider the SAT.” Adding generally (“Colleges and universities generally ought not consider the SAT”) or ever (“Colleges and universities ought not ever consider the SAT”) result in comparatively minor changes of meaning. (Note that this test doesn’t require there to be no change of meaning and doesn’t have to work for every adverb of quantification.) This strongly suggests what we already know: that “colleges and universities” is generic rather than existential in the resolution.

#### It applies to medicines:

#### Upward entailment test – spec fails the upward entailment test because saying that nations ought to reduce IPP for one medicine does not entail that those nations ought to reduce IPP for all medicines

#### Adverb test – adding “usually” to the res doesn’t substantially change its meaning because a reduction is universal and permanent

#### Violation: the aff only defends medicines that use indigenous knowledge

#### Vote neg:

#### 1] Semantics outweigh: a) T is a constitutive rule of the activity and a basic aff burden – they agreed to debate the topic when they came here b) It’s the only stasis point we know before the round so it controls the internal link to engagement – there’s no way to use ground if debaters aren’t prepared to defend it

#### 2] Limits – there are countless affs accounting for thousands of medicines – unlimited topics incentivize obscure affs that negs won’t have prep on – potential abuse doesn’t justify foregoing the topic compeltely and 1AR theory checks PICs if they are as abusive as you say.

#### There are over 20,000 affs

FDA 11/18 [(U.S. Food and Drug Administration, federal agency of the Department of Health and Human Service) “Fact Sheet: FDA at a Glance,” 11/18/2020] JL

There are over 20,000 prescription drug products approved for marketing.

FDA oversees over 6,500 different medical device product categories.

There are over 1,600 FDA-approved animal drug products.

There are about 300 FDA-licensed biologics products.

#### 3] Ground – spec guts core generics like innovation that rely on reducing IP for all medicines because individual medicines don’t affect the pharmaceutical industry broadly – also means there is no universal DA to spec affs

#### 4] TVA solves – read as an advantage to whole rez

## 2

#### Interpretation—the aff must disclose the plan text, framework, and advantage area 30 minutes before the round. To clarify, disclosure can occur on the wiki or over message.

#### Violation—they didn’t, and wouldn’t tell me if teammates have read their aff before. They just told me it was new, when it wasn’t since teammates have read it. See screenshot

Graphical user interface, text, application, chat or text message

Description automatically generated

Graphical user interface, application, table, Excel

Description automatically generated

#### Vote neg for prep and clash—two internal links—a) neg prep—4 minutes of prep is not enough to put together a coherent 1nc or update generics—30 minutes is necessary to learn a little about the affirmative and piece together what 1nc positions apply and cut and research their applications to the affirmative b) aff quality—plan text disclosure discourages cheap shot affs. If the aff isn’t inherent or easily defeated by 20 minutes of research, it should lose—this will answer the 1ar’s claim about innovation—with 30 minutes of prep, there’s still an incentive to find a new strategic, well justified aff, but no incentive to cut a horrible, incoherent aff that the neg can’t check against the broader literature.

## 3

#### Pharma innovation high now – monetary incentive is the biggest factor.

**Swagel 21** Phillip L. Swagel, Director of the Congressional budget office 4-xx-2021, "Research and Development in the Pharmaceutical Industry," Congressional Budget Office, <https://www.cbo.goc/publication/57126#_idTextAnchor020> SJ//DA

**Every year, the U.S. pharmaceutical industry develops a variety of new drugs that provide valuable medical benefits. Many of those drugs are expensive and contribute to rising health care costs for the private sector and the federal government. Policymakers have considered policies that would lower drug prices and reduce federal drug expenditures. Such policies would probably reduce the industry’s incentive to develop new drugs.** In this report, the Congressional Budget Office assesses trends in spending for drug research and development (R&D) and the introduction of new drugs. CBO also examines factors that determine how much drug companies spend on R&D: expected global revenues from a new drug; cost to develop a new drug; and federal policies that affect the demand for drug therapies, the supply of new drugs, or both. What Are Recent Trends in Pharmaceutical R&D and New Drug Approvals? T**he pharmaceutical industry devoted $83 billion to R&D expenditures in 2019. Those expenditures covered a variety of activities, including discovering and testing new drugs, developing incremental innovations such as product extensions, and clinical testing for safety-monitoring or marketing purposes. That amount is about 10 times what the industry spent per year in the 1980s, after adjusting for the effects of inflation.** The share of revenues that drug companies devote to R&D has also grown: **On average, pharmaceutical companies spent about one-quarter of their revenues (net of expenses and buyer rebates) on R&D expenses** in 2019, which is **almost twice as large a share of revenues as they spent in 2000.** That revenue share is larger than that for other knowledge-based industries, such as semiconductors, technology hardware, and software. The number of new drugs approved each year has also grown over the past decade. On averace, the Food and Drug Administration (FDA) approved 38 new drugs per year from 2010 through 2019 (with a peak of 59 in 2018), which is 60 percent more than the yearly average over the previous decade. **Many of the drugs that have been approved in recent years are “specialty drugs.” Specialty drugs generally treat chronic, complex, or rare conditions, and they may also require special handling or monitoring of patients**. Many specialty drugs are biologics (large-molecule drugs based on living cell lines), **which are costly to develop, hard to imitate, and frequently have high prices.** Previously, most drugs were small-molecule drugs based on chemical compounds. Even while they were under patent, those drugs had lower prices than recent specialty drugs have. Information about the kinds of drugs in current clinical trials indicates that much of the industry’s innovative activity is focused on specialty drugs that would provide new cancer therapies and treatments for nervous-system disorders, such as Alzheimer’s disease and Parkinson’s disease. **What Factors Influence Spending for R&D?** Drug companies’ R&D spending decisions depend on three main factors: Anticipated lifetime global revenues from a new drug, **Expected costs to develop a new drug**, and Policies and programs that influence the supply of and demand for prescription drugs. Various considerations inform companies’ expectations about a drug’s revenue stream, including the anticipated prices it could command in different markets around the world and the expected global sales volume at those prices (given the number of people who might use the drug). The prices and sales volumes of existing drugs provide information about consumers’ and insurance plans’ willingness to pay for drug treatments. Importantly, when drug companies set the prices of a new drug, they do so to maximize future revenues net of manufacturing and distribution costs. A drug’s sunk R&D costs—that is, the costs already incurred in developing that drug—do not influence its price. **Developing new drugs is a costly and uncertain process, and many potential drugs never make it to market. Only about 12 percent of drugs entering clinical trials are ultimately approved for introduction by the FDA. In recent studies, estimates of the average R&D cost per new drug range from less than $1 billion to more than $2 billion per drug**. Those estimates include the costs of both laboratory research and clinical trials of successful new drugs as well as expenditures on drugs that do not make it past the laboratory-development stage, that enter clinical trials but fail in those trials or are withdrawn by the drugmaker for business reasons, or that are not approved by the FDA. Those estimates also include the company’s capital costs—the value of other forgone investments—incurred during the R&D process. Such costs can make up a substantial share of the average total cost of developing a new drug. The development process often takes a decade or more, and during that time the company does not receive a financial return on its investment in developing that drug. The federal government affects R&D decisions in three ways. First, it increases demand for prescription drugs, which encourages new drug development, by fully or partially subsidizing the purchase of prescription drugs through a variety of federal programs (including Medicare and Medicaid) and by providing tax preferences for employment-based health insurance. Second, the federal government increases the supply of new drugs. It funds basic biomedical research that provides a scientific foundation for the development of new drugs by private industry. Additionally, tax credits—both those available to all types of companies and those available to drug companies for developing treatmentscof uncommon diseases—provide incentives to invest in R&D. Similarly, deductions for R&D investment can be used to reduce tax liabilities immediately rather than over the life of that investment. Finally, the patent system and certain statutory provisions that delay FDA approval of generic drugs provide pharmaceutical companies with a period of market exclusivity, when competition is legally restricted. During that time, they can maintain higher prices on a patented product than they otherwise could, which makes new drugs more profitable and thereby increases drug companies’ incentives to invest in R&D. Third, some federal policies affect the number of new drugs by influencing both demand and supply. For example, federal recommendations for specific vaccines increase the demand for those vaccines and provide an incentive for drug companies to develop new ones. Additionally, federal regulatory policies that influence returns on drug R&D can bring about increases or decreases in both the supply of and demand for new drugs. Trends in R&D Spending and New Drug Development Private spending on pharmaceutical R&D and the approval of new drugs have both increased markedly in recent years, resuming a decades-long trend that was interrupted in 2008 as generic versions of some top-selling drugs became available and as the 2007–2009 recession occurred. **In particular, spending on drug R&D increased by nearly 50 percent between 2015 and 2019.** Many of the drugs approved in recent years are high-priced specialty drugs for relatively small numbers of potential patients. By contrast, the top-selling drugs of the 1990s were lower-cost drugs with large patient populations. R&D Spending R&D spending in the pharmaceutical industry covers a variety of activities, including the following: Invention, or research and discovery of new drugs; Development, or clinical testing, preparation and submission of applications for FDA approval, and design of production processes for new drugs; Incremental innovation, including the development of new dosages and delivery mechanisms for existing drugs and the testing of those drugs for additional indications; Product differentiation, or the clinical testing of a new drug against an existing rival drug to show that the new drug is superior; and Safety monitoring, or clinical trials (conducted after a drug has reached the market) that the FDA may require to detect side effects that may not have been observed in shorter trials when the drug was in development. In real terms**, private investment in drug R&D among member firms of the Pharmaceutical Research and Manufacturers of America (PhRMA), an industry trade association, was about $83 billion in 2019, up from about $5 billion in 1980 and $38 billion in 2000**.1 Although those spending totals do not include spending by many smaller drug companies that do not belong to PhRMA, the trend is broadly representative of R&D spending by the industry as a whole.2 A survey of all U.S. pharmaceutical R&D spending (including that of smaller firms) by the National Science Foundation (NSF) reveals similar trends.3 Although total R&D spending by all drug companies has trended upward, small and large firms generally focus on different R&D activities. **Small companies not in PhRMA devote a greater share of their research to developing and testing new drugs,** many of which are ultimately sold to larger firms (see Box 1). By contrast, a greater portion of the R&D spending of larger drug companies (including those in PhRMA) is devoted to conducting clinical trials, developing incremental “line extension” improvements (such as new dosages or delivery systems, or new combinations of two or more existing drugs), and conducting postapproval testing for safety-monitoring or marketing purposes.

#### The aff crushes innovation in the pharma sector---incentivizes them to focus on non-important issues.

Glassman 21 [Amanda; 5/6/21; Executive vice president and a senior fellow at the Center for Global Development, a nonpartisan, nonprofit think tank in Washington and London; “*Big Pharma Is Not the Tobacco Industry*,” Barron, <https://www.barrons.com/articles/big-pharma-is-not-the-tobacco-industry-51620315693>] Justin

But here is the crux of the problem: The pharmaceutical industry is not the tobacco industry. They are not merchants of death. The companies are amoral and exist to make money, but their business is not fundamentally immoral. Big Pharma (mostly) develops and sells products that people need to survive and thrive. Their products improve health and welfare. Fights over access to medicines are possible because medicines exist in the first place—medicines that were usually developed by Big Pharma. And yes, the pharmaceutical industry benefits from public subsidy and publicly financed foundational research. But the companies also put their own capital at risk to develop new products, some of which offer enormous public benefits. In fact, several of them did just that in the pandemic: invested their own money to develop patented manufacturing technologies in record time. Those technologies are literally saving the world right now. Public funding supported research and development, but companies also brought their own proprietary ingenuity and private investments to bear toward solving the world’s singular, collective challenge. Their reward should be astronomical given the insane scale of the health and economic benefits these highly efficacious vaccines produce every day. Market incentives sent a clear signal that further needed innovation—greater efficacy, single doses, more-rapid manufacturing, updated formulations, fast boosters, and others—would be richly rewarded. Market incentives could also have been used to lubricate supply lines and buy vaccines on behalf of the entire world; with enough money, incredible things can happen. But activist lobbying to waive patents—a move the Biden administration endorsed yesterday—sends exactly the opposite signal. It says that the most important, valuable innovations will be penalized, not rewarded. It tells innovators, don’t bother attacking the most important global problems; instead, throw your investment dollars at the next treatment for erectile disfunction, which will surely earn you a steady return with far less agita. It is worth going back to first principles. What problem are we trying to solve? We have highly efficacious vaccines that we would like to get out to the entire world as quickly as possible to minimize, preventable disease and deaths address atrocious inequities, and enable the reopening of society, trade, and commerce. Hundreds of millions of people have been plunged into poverty over the past year; in the developing world, the pandemic is just getting started. What is the quickest way to get this done? Vaccine manufacturing is not just a recipe; if you attack and undermine the companies that have the know-how, do you really expect they’ll be eager to help you set up manufacturing elsewhere? Is the plan to march into Pfizer and force its staff to redeploy to Costa Rica to build a new factory? Do the U.S. administration or activists care that this decision could take years to negotiate at the World Trade Organization, and will likely be litigated for years thereafter? Does it make sense to eliminate the incentive for private companies to invest in vaccine R&D or in the response to the next health emergency? And if the patent waiver is only temporary and building a factory takes months or years, will anyone bother to do so, even if they could? No, none of it makes sense. Worse still, we could solve the policy problem more easily by harnessing market incentives for the global good by ponying up cash to vaccinate the entire world. No confiscation necessary.

#### Pharma Innovation prevents Extinction – checks new diseases.

Engelhardt 8, H. Tristram. Innovation and the pharmaceutical industry: critical reflections on the virtues of profit. M & M Scrivener Press, 2008 (doctorate in philosophy (University of Texas at Austin), M.D. (Tulane University), professor of philosophy (Rice University), and professor emeritus at Baylor College of Medicine)

Many are suspicious of, or indeed jealous of, the good fortune of others. Even when profit is gained in the market without fraud and with the consent of all buying and selling goods and services, there is a sense on the part of some that something is wrong if considerable profit is secured. There is even a sense that good fortune in the market, especially if it is very good fortune, is unfair. One might think of such rhetorically disparaging terms as "wind-fall profits". There is also a suspicion of the pursuit of profit because it is often embraced not just because of the material benefits it sought, but because of the hierarchical satisfaction of being more affluent than others. The pursuit of profit in the pharmaceutical and medical-device industries is tor many in particular morally dubious because it is acquired from those who have the bad fortune to be diseased or disabled. Although the suspicion of profit is not well-founded, this suspicion is a major moral and public-policy challenge. Profit in the market for the pharmaceutical and medical-device industries is to be celebrated. This is the case, in that if one is of the view (1) that the presence of additional resources for research and development spurs innovation in the development of pharmaceuticals and med-ical devices (i.e., if one is of the view that the allure of **profit is one of the most effective ways not only to acquire resources but productively to direct human energies** in their use), (2) that given the limits of altruism and of the willingness of persons to be taxed, the possibility of profits is necessary to secure such resources, (3) that the allure of profits also tends to enhance the creative use of available resources in the pursuit of phar-maceutical and medical-device innovation, and (4) if one judges it to be the case that such innovation is both necessary to maintain the human species in an ever-changing and always dangerous environment in which new microbial and other threats may at any time emerge to threaten human well-being, if not survival (i.e., that such innovation is necessary to prevent increases in morbidity and mortality risks), as well as (5) in order generally to decrease morbidity and mortality risks in the future, it then follows (6) that one should be concerned regarding any policies that decrease the amount of resources and energies available to encourage such innovation. One should indeed be of the view that the possibilities for profit, all things being equal, should be highest in the pharmaceutical and medical-device industries. Yet, there is a suspicion regarding the pursuit of profit in medicine and especially in the pharmaceutical and medical-device industries.

## Case

### Framework

#### The role of the judge is to vote for the better debater and the role of the ballot is to communicate that – anything else is self serving, arbitrary, and begs the question of the rest of the debate

#### High magnitude, low probability first

* extinction eliminates future potential and math swamps appeals to low risk
* no bias
* uncertainty can artificially deflate risk
* discount appeals to empirics because of the nature of \*new\* risks

Bostrom 13 ---- Nick, Philosopher and professor (Oxford), Ph.D. (LSOE), director of The Future of Humanity Institute and the Programme on the Impacts of Future Technology, “Existential Risk Prevention as Global Priority,” Global Policy, Vol 4, Issue 1, <http://www.existential-risk.org/concept.html>

The maxipok rule 1.1. Existential risk and uncertainty An existential risk is one that threatens the premature extinction of Earth-originating intelligent life or the permanent and drastic destruction of its potential for desirable future development (Bostrom 2002). Although it is often difficult to assess the probability of existential risks, there are many reasons to suppose that the total such risk confronting humanity over the next few centuries is significant. Estimates of 10-20% total existential risk in this century are fairly typical among those who have examined the issue, though inevitably such estimates rely heavily on subjective judgment.1 The most reasonable estimate might be substantially higher or lower. But perhaps the strongest reason for judging the total existential risk within the next few centuries to be significant is the extreme magnitude of the values at stake. Even a small probability of existential catastrophe could be highly practically significant (Bostrom 2003; Matheny 2007; Posner 2004; Weitzman 2009). Humanity has survived what we might call natural existential risks for hundreds of thousands of years; thus it is prima facie unlikely that any of them will do us in within the next hundred.2 This conclusion is buttressed when we analyze specific risks from nature, such as asteroid impacts, supervolcanic eruptions, earthquakes, gamma-ray bursts, and so forth: Empirical impact distributions and scientific models suggest that the likelihood of extinction because of these kinds of risk is extremely small on a time scale of a century or so.3 In contrast, our species is introducing entirely new kinds of existential risk — threats we have no track record of surviving. Our longevity as a species therefore offers no strong prior grounds for confident optimism. Consideration of specific existential-risk scenarios bears out the suspicion that the great bulk of existential risk in the foreseeable future consists of anthropogenic existential risks — that is, those arising from human activity. In particular, most of the biggest existential risks seem to be linked to potential future technological breakthroughs that may radically expand our ability to manipulate the external world or our own biology. As our powers expand, so will the scale of their potential consequences — intended and unintended, positive and negative. For example, there appear to be significant existential risks in some of the advanced forms of biotechnology, molecular nanotechnology, and machine intelligence that might be developed in the decades ahead. The bulk of existential risk over the next century may thus reside in rather speculative scenarios to which we cannot assign precise probabilities through any rigorous statistical or scientific method. But the fact that the probability of some risk is difficult to quantify does not imply that the risk is negligible. Probability can be understood in different senses. Most relevant here is the epistemic sense in which probability is construed as (something like) the credence that an ideally reasonable observer should assign to the risk's materializing based on currently available evidence.4 If something cannot presently be known to be objectively safe, it is risky at least in the subjective sense relevant to decision making. An empty cave is unsafe in just this sense if you cannot tell whether or not it is home to a hungry lion. It would be rational for you to avoid the cave if you reasonably judge that the expected harm of entry outweighs the expected benefit. The uncertainty and error-proneness of our first-order assessments of risk is itself something we must factor into our all-things-considered probability assignments. This factor often dominates in low-probability, high-consequence risks — especially those involving poorly understood natural phenomena, complex social dynamics, or new technology, or that are difficult to assess for other reasons. Suppose that some scientific analysis A indicates that some catastrophe X has an extremely small probability P(X) of occurring. Then the probability that A has some hidden crucial flaw may easily be much greater than P(X).5 Furthermore, the conditional probability of X given that A is crucially flawed, P(X|¬A), may be fairly high. We may then find that most of the risk of X resides in the uncertainty of our scientific assessment that P(X) was small (figure 1) (Ord, Hillerbrand and Sandberg 2010).

#### Global existential threats must be addressed before emancipatory threats –logically prior framework

Booth 14[Ken Booth, Senior Research Associate, Department of International Politics, Aberystwyth University, where he was formerly E.H. Carr Professor and Head of Department. He is a Fellow of the British Academy (FBA) and a former Chair of the British International Studies Association, The Handbook of Global Security Policy: Edited by Mary Kaldor & Iavor Rangelov, published by Wiley Blackwell, Chapter 1: Global Security, pages 11-39]

“Global Security Threats” A concept of **global security requires a framework for understanding the dangers** threatening the referent (the global-we). What follows is based on a schema of Arnold Wolfers (1962, pp. 73–77), who distinguished the foreign policy objectives of states in relation to their “possession” or “milieu” goals. The former pertains to “national possessions” (the “things to which it attaches value”, such as territory) while the latter pertains to “the shape of the environment in which the nation operates” (meaning the external conditions in which a people’s values might flourish). The privileged referent for “global security” differs radically from Wolfers’s state-centrism, but his distinction is nonetheless instructive. **First: global existential threats**. These threats involve a danger of global reach, which poses a potential or actual risk to the continued being of individuals or groups. Such threats include nuclear weapons, “climate chaos” (the coinage of the World Wide Fund for Nature) threatening food and water security, and pandemics. The risks from climate change and disease underline that global existential threats do not necessarily have to be intentional or politically targeted. Global existential threats involve the survival of people and groups from physical dangers of global reach, whether or not a specific referent is designated as the target. Second: global emancipatory threats. Emancipation involves freedom from oppression: the latter might be material threats such as hunger and poverty, social threats such as religious and cultural dogmatism, and political threats such as conquest, tyranny, and institutionalized racism (Booth 2007, pp. 95–116). Emancipatory goals are the equivalent for individuals and groups of the “milieu” goals that Wolfers identified for nation-states, namely those conditions that enhance or diminish the prospect of experiencing flourishing lives. By this conception, the abuse of human rights anywhere is a threat to human rights everywhere. Global emancipatory threats are local challenges to global human flourishing, whereby the political, social, and economic ideas and structures that promise to lift humans out of oppression are seriously challenged. Existential and emancipatory securities are related in logic and in politics. Clearly, **security-as-survival is logically prior to security-as-emancipation: existential security is the necessary condition for human flourishing.** Politically, security-as- emancipation changes the conditions of possibility in relation to meeting existential threats. Above all, the wider and deeper the political identification with the referent of a global community embedded in shared values, the greater the likelihood of rational decisions being made in the global existential interest. Put simply, existence is the condition of possibility for emancipation, while furthering global emancipatory goals improves the conditions of possibility for global existential security. The themes of human survival (in relation to threats of global reach) and emancipation (in relation to flourishing under conditions of global interconnectedness) will run through the rest of the discussion. “Global security”, for the moment, can therefore be defined as a condition in which humankind has a stable pattern of structures and processes, with associated institutions, attitudes, and behavior, that work towards the reduction and elimination of existential and emancipatory threats of global reach. The higher the level of global security experienced, the greater the conditions of possibility for people everywhere to explore the potentialities of being “human”, beyond the merely animal.

### FW on case

#### 1] They shouldn’t win for reading this aff – justifies reading the racism bad AC and calling it a day – solvency matters – any alternative incentivizes lazy activism and saying “well, we tried” – also is extra topical because the garner offense from things beyond the plan – voter because it infinitely explodes limits and justifies Frankenstein planks to skirt neg ground

#### 2] They can only leverage the amount of colonialism solved by the aff – alt causes – Chinese oppression of Uighurs, Turkey’s involvement in Syria, Native Americans making $.60 to the dollar

#### 3] Consequences matter – policies have material impacts for the lives of millions of indigenous people across the globe – disgarding them is lazy and armchair activism

#### 4] Death drive thesis outdated

Smith, Director of the Critical Transdisciplinary Research Program and Editor at Heathwood Institute and Press, ‘3/22/17

(Robert C., “An Alternative Conception of Social Pathology,” in *Society and Social Pathology*, palgrave, pg. 74-75, \*language modified)

Aside from the question of social pathology, at the heart of this book is also the issue of subject development. This involves questions of how a human being develops—or how a child changes during the course of his/ her growth (Litowitz 1999)—and how social conditions, positive or negative, affect that development. “Every psychoanalytic theory from Freud’s earliest models to the latest post-Freudian versions” attempt to capture a theory of development in some way (Litowitz 1999). Freud’s theories claim to describe universal developmental stages, which do not depend upon specific environmental responses, cultural or social or otherwise (Litowitz 1999). Thus significant emphasis is placed on biology in the development of the psyche (Moritsugu et al. 2016).

Outside of certain movements within CT and more traditional pockets of psychoanalysis, Freud’s instinct theory and biological model is generally considered highly questionable (Benja eld 2010; Benjamin 1988; Black and Mitchell 2016; Blum and Hoffman 2016; Gomez 1997; Buirski and Kottler 2007; Rogers 1951, 1959; Schneider et al. 2001; Shane et al. 1997; Simanowitz and Pearce 2003). In fact, Freud’s theories in general are being increasingly challenged, or shown as not possible to prove (Dvorsky 2013). Many have either already discarded his theories as postulation without scientic validation or have used them as guidance knowing they are awed or incredibly abstract. As Axel Honneth put it:

Only dogmatism can today still ~~blind one to~~[conceal] the fact that a string of premises of Freudian theory have [...] become highly questionable. Developments in infant research, in developmental psychology generally, but also in evolutionary biology, have cast doubt on central and basic assumptions of the psychoanalytic view of young children. (Honneth 2009, p. 126)

Even contemporary theories of the unconscious, which many have labelled one of Freud’s greatest accomplishments, are continuously seeking to establish differentiation from Freudian theory (Romand 2012), rooting their concepts in Gustav Fechner’s earlier hypotheses. Additionally, while efforts at reforming classical Freudian theory have been attempted by the likes of Jacques Lacan and his contemporary followers, which is a popular movement in psychoanalysis today, particularly or primarily in theory and through the work of Slavoj Žižek, this too can be argued for different reasons to be deeply inadequate when weighed against more up-to-date cross-disciplinary research programme (Smith 2013).

Indeed, from a wide survey of literature, and from a discussion with different clinical practitioners and psychotherapists, it is clear that Fromm’s challenging Freudian instinct theory is, in present times, a less than controversial course of critique. This lends to the belief that when reading Freud today, as Fisher and Greenberg (1996) argue, what is required is a significant amount of nuance. His theory should be evaluated, they claim, in terms of specific hypotheses rather than as a whole (Fisher and Greenberg 1996; also cited in McLeod 2013). One reason for this, quite simply, has to do with the many “unresolved contradictions in Freud’s writings”, including what has been summarized as an unevenly developed system of ideas that are not integrated into a logical, systematic whole (Boag 2014).

### Advantages

#### Waivers don’t improve vaccine supply or distribution, but do allow for poorly made vaccines that undermine vaccine confidence

Delgado 5/25 [(Carla, health & culture journalist who’s written for Insider, Architectural Digest, Elemental, Observer, and Mental Floss) “Experts Say Patent Waivers Aren't Enough To Increase Global Vaccination,” Verywell Health, 5/25/2021] JL

“Waiving intellectual property rights for COVID-19 vaccines is likely to only have a modest impact on global vaccine supply,” William Moss, MD, executive director of the International Vaccine Access Center at the Johns Hopkins Bloomberg School of Public Health, tells Verywell. “A vaccine IP waiver is not in itself likely to lead to increased vaccine production in less developed countries because much more needs to be in place to increase the global vaccine supply.”

For several countries outside of the U.S. that have the necessary equipment to produce mRNA vaccines effectively and safely, the IP waiver can be of great help. However, many more countries lack this capacity, and this move still leaves them behind.

“The majority of the world’s countries lack the capacity to produce and distribute COVID-19 vaccines, and especially at the scale required to get this pandemic under control,” Richard Marlink, MD, director of the Rutgers Global Health Institute, tells Verywell. “They need funding, manufacturing facilities, raw materials, and laboratory staff with the technological expertise required.”

We've already seen what can go wrong with substandard vaccine manufacturing. In April, the Food and Drug Administration (FDA) inspected the Emergent BioSolutions factory in Baltimore and consequently shut down their production after concerning observations, which include:3

The factory was not maintained in a clean and sanitary condition.

Waste handling was found to be inadequate because generated waste was transported through the warehouse before disposal, which can potentially contaminate other areas.

Employees were seen dragging unsealed bags of medical waste from the manufacturing area across the warehouse.

Peeling paint, paint flecks, loose particles/debris were observed. There were also damaged floors and rough surfaces that cannot be properly cleaned and sanitized.

Employees were seen removing their protective garments where raw materials were staged for manufacturing.

They reportedly spoiled about 15 million doses of the Johnson and Johnson COVID-19 vaccine, and more than 100 million doses are on hold as regulators inspect them for possible contamination.4

“Vaccines are complex biological products, much more complex than drugs, and need to be produced by manufacturers and in facilities with the highest quality control standards,” Moss says. “Adverse events associated with a poorly made or contaminated batch of vaccines would have a devastating impact on vaccine confidence.”

In a statement last October, Moderna announced that they will not enforce their COVID-19-related patents against those who will make vaccines during this pandemic.5 While waiving some vaccine patents may allow third-party manufacturers to make and sell COVID-19 vaccines, the transfer of skills and technology that will allow them to manage production isn't very simple.

For instance, a spokesperson for Pfizer said that the Pfizer-BioNTech vaccine required 280 different components sourced from 86 suppliers across various countries. Manufacturing the vaccine would require highly specialized equipment and complex technology transfers.6

“Technology transfer also would need to be a critical component to expand vaccine manufacturing by other companies as an IP waiver is insufficient to provide the ‘know how’ needed to manufacture mRNA or adenovirus-vectored COVID-19 vaccines,” Moss says. “And supply chains for the reagents, supplies, and equipment would be needed.”

Interested manufacturers would need to have the proper equipment to test the quality and consistency of their manufacturing. At present, the World Health Organization (WHO) has plans to facilitate the establishment of technology hubs to transfer "a comprehensive technology package and provide appropriate training" to manufacturers from lower- and middle-income countries.7

While waiving vaccine patents is necessary, it's likely not enough. Additionally, negotiations about it are still ongoing. Even though the U.S. supports the waiver of COVID-19 vaccine patents, other countries like the United Kingdom, Japan, and Germany oppose it.8

It's also important to remember that manufacturing vaccines is only one step of the process of vaccinating the global population—distributing it is yet another hurdle.

“Many countries are counting on COVAX, a global collaboration to distribute COVID-19 vaccines more equitably around the world,” Marlink says. “The single largest supplier to COVAX is in India, where exports have been suspended since March due to the country’s COVID-19 crisis.”

#### TRIPs waiver is a symbolic gesture that prevents vaccine production and distribution

Ikenson 6/25 [(Dan, former director of the Cato Institute's Herbert A. Stiefel Center for Trade Policy Studies, MA in economics from George Washington University) “Stop Blaming Patents For The World’s Low Vaccination Rates,” Forbes, 6/25/2021] JL

The premise of the need for a TRIPS waiver is simply absurd. It serves to divert attention from the failures of governments to protect their citizens with smart public health policies and, importantly, to demonize intellectual property protections more broadly. Governments are already free to waive IP protections and to engage in compulsory licensing in times of health crises but have not done so because patents are not the bottleneck. The bottlenecks result from limited global expertise in the highly technical process of producing the vaccine, the dearth of production facilities and capacity to ramp up production at existing facilities, the tight supply of crucial pharmaceutical ingredients (including vials, bags, and other components), and the limited distribution channels through which the proper handling of vaccines at proper temperatures can be assured.

To be sure, global health officials and biopharmaceutical companies have been working to resolve these real bottlenecks—a process that has benefited significantly from the fact that U.S. officials have more bandwidth to devote more attention and other resources to these matters precisely because U.S. vaccination efforts have been successful. And why have they been successful? In large measure, they have been successful because intellectual property protections have bred expectations of future intellectual property protections, which has invited and enabled an accumulation of R&D investment, infrastructure, and expertise in the United States.

The effort to surmount these real impediments to producing, distributing, and injecting vaccines is not made any easier by a symbolic waiver of IP protections—and may be made more difficult. The volume of vaccines necessary to ending the pandemic requires governments and public health officials to coordinate and focus on ramping up the capacity to produce and distribute, and to safeguard against the squandering of pharmaceutical ingredients by ensuring those inputs are channeled to producers with expertise in manufacturing and distribution. On the contrary, suspending IP protection might encourage novice firms with no expertise to end up wasting limited, essential ingredients.