# Waivers 1AC

## 1AC

### Adv 1: Accessibility

#### IP Laws are a barrier to production during COVID – waiver allows for diversified production while upholding standards

HRW June 21 (Human Rights Watch)

International non-governmental organization, headquartered in New York City, that conducts research and advocacy on human rights.[2] The group pressures governments, policy makers, companies, and individual human rights abusers to denounce abuse and respect human rights, and the group often works on behalf of refugees, children, migrants, and political prisoners. June 3, 2021 DS

https://www.hrw.org/news/2021/06/03/seven-reasons-eu-wrong-oppose-trips-waiver

Intellectual Property is currently a barrier to swiftly scaling up and diversifying the production of Covid-19 health products, including vaccines. The European Commission claims that intellectual property (IP) is not a barrier to scaling up the manufacturing of vaccines or other health products needed for the Covid-19 response, suggesting that sharing IP would not immediately speed up manufacturing. Right now, there are manufacturers with capacity to produce additional Covid-19 vaccines and other health products at factories in Bangladesh, Canada, Denmark, India, and Israel, but they are unable to contribute because they do not yet have the right licenses. So, IP is a barrier to them. The TRIPS waiver proposal sponsors and experts at the leading science journal Nature, Médecins Sans Frontières (MSF) Access Campaign, the Third World Network, and others have presented many other concrete examples of how enforcement of IP rules blocked, delayed, or limited production of chemical reagents for Covid-19 tests, ventilator valves, Covid-19 treatments, and elements of Covid-19 vaccines. IP constraints have not only led to vaccine shortages but have also led to shortages of key raw materials like bioreactor bags and filters. Rather than manufacturers being held back by an inherent lack of manufacturing and technological capability, studies have shown that transnational claims to IP impede new manufacturers from entering and competing in the market. The same dynamics are playing out today with Covid-19. Even though a waiver will not automatically expand production overnight, it paves the way for speedy technology transfers and manufacturing. The waiver by itself will not automatically result in widespread and diversified manufacturing, but it will ease complex global rules governing IP and exports and give governments freedom to collaborate on technology transfers and exports without fearing trade-based retaliation. It will help reduce the dependence on any one country or region for medical products and mitigate the risks of export restrictions. With new variants emerging and some evidence that repeat vaccine boosters may be needed, the waiver will enable governments around the world to be prepared for a long-term response to Covid-19. Experts have mapped out plans for how the manufacturing of mRNA and other vaccines, could be dramatically expanded in a relatively short period of time. Waiving certain IP rules in the TRIPS agreement over the next three years could help create diverse regional manufacturing hubs and protect the EU and the rest of the world from future pandemics, supply chain disruptions, and resulting economic disaster. Concerns that widening the universe of producers may lower or compromise quality standards are unfounded because stringent regulatory authorities and the World Health Organization (WHO) would continue to play their existing role as arbiters of quality and safety for vaccines, which have a very stringent process for approval.

#### TRIPS waiver uniquely needed to remove barriers to Access

Zhony 6/21

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https://blogs.bmj.com/medical-ethics/2021/05/13/making-a-killing-the-imperative-to-waive-covid-19-vaccine-ip-rights/

Recent lobbying disclosures revealed that over 100 lobbyists have been deployed to the World Trade Organisation (WTO) by the pharmaceutical industry to block generic manufacture of COVID-19 vaccines. The background here is that the richest countries have over half the purchased vaccine doses, yet only 16% of the global population. This has led to calls to donate vaccines to the global poor. In low income countries, only 1 in 500 adults has received a vaccine, compared to 1 in 4 in rich countries. To really understand this you have to look far back to the emergence of the AIDS epidemic and early therapeutics. In the 1990s, Ghana and Brazil tried to import generically manufactured drugs from India (a key site of non-profit generic drug manufacture for decades). This spurred legal action taken by the US against Brazil at the WTO, though was eventually dropped under intense political pressure. As May and Sell note in their summary of the affair, for the US Trade Representative, “whatever the human costs, intellectual property rights must be upheld.”[1] Bill Gates has also been heavily criticised for insisting that IP law is maintained. It was Gates’s foundation who persuaded Oxford University to grant sole rights to AstraZeneca without a price guarantee. His defence seems to turn on whether or not Black and Brown people are smart enough to make vaccines, maintaining, “it’s only because of our grants and expertise that that can happen at all.” Gates cannot countenance the possibility that the same forces of global capitalism that made him one of the world’s richest men also entrench and maintain poverty in the Global South, precluding improvements in health and infrastructure. Indeed, the negotiated contracts are genuinely shocking. As reported by the New York Times, Pfizer has sought liability protection (including against negligence claims) by asking governments to put up assets including bank reserves, embassies and military bases, as collateral. The deals made by AstraZeneca are shrouded in secrecy, though also seem deeply problematic. The biggest kick in the teeth is that COVID-19 vaccination development has dispelled the greatest capitalist myth in medicine: private sector investment is needed to develop drugs, and this investment will only take place if the product can be monetised. Not only does this take a tragically reductive view of human motivations (if I cared solely about money, I’d have trained in banking not medicine and law) it is also factually wrong: in the case of Oxford-AstraZeneca vaccine, for example, the public provided over 97% of research and development costs. A case in point is that of Cuba: it has developed five vaccines, two of which are in phase III trials (of 23 COVID-19 vaccines globally). When Boris Johnson says capitalism and greed gave Britain its vaccine success, what he means is that greedy capitalists are able to monetise a product the public paid to develop, ensure protectionist IP policies prevent the global poor from access, then take the profits. It is on this background that we must judge why 85 countries (including almost all of Africa) likely won’t even have vaccines until 2023. Vaccine makers have complained to US officials that waiving IP rights will risk handing novel technology to China and Russia. This technology could be used for other vaccines, or even therapeutics for cancer and cardiovascular issues. Indeed, one feels a palpable sense of disgust just reading such articles, that the lives of citizens in those nations matter so little compared to the possibility of pharmaceutical company shareholders enriching themselves. That any breakthrough with those technologies in Russia or China could benefit people everywhere is irreconcilable with their profit motive. So, I am led to ask, what should be done? As I write this blog post, a letter has just been published by over fifty British parliamentarians calling for, inter alia, a TRIPS waiver. For the purposes of this blog, this is essentially a derogation from IP law, allowing generic manufacture for a specific time period. Six months on from India and South Africa proposing a TRIPS waiver, backed by over 100 countries, Britain along with a small number of governments including the US, are stonewalling the proposal. A TRIPS waiver is the only way to appropriately match the global efforts made on vaccine development, granting a worldwide right to use, produce and supply the vaccine. Some will point to COVAX, the World Health Organisation initiative to to accelerate equitable distribution of vaccines and therapeutics to the global poor, yet on data published last week commitments only reach USD 14.1 billion of a budget estimated at USD 38.1 billion. The problem though isn’t about the who isn’t being charitable enough, the problem here is a question of money and power. The richest get to make racist allegations that non-white people are inadequate to make vaccines, whilst watching their own bank balances skyrocket. They can point to philanthropic endeavours, yet COVAX is already showing that these are underfunded. The ethical imperative is not to have more donations of vaccines, but to address the imbalance of power between nations that causes the very issue of vaccine inequity — this means confronting IP law. As Médicins Sans Frontières detail in their explainer, it is a myth that manufacturers in the global south are unable to produce vaccines — this presumption has been repeatedly proven wrong, from Hepatitis B in 80s India, to pneumococcal vaccination in China and South Korea. The technology to save lives exists; its just that those states with the most influence over IP law do not care. To put it most succinctly, why waive IP rights? Why is that more ethical than donating vaccines? Ignoring the empirical motivations on expanding capacity, it is simply this: health is a human good irreducible to the language of costs. People come before profit. Rather than white saviours vaunting their already inadequate contribution, we need global solidarity through information and technology sharing. Despite 175 former world leaders and Nobel laureates calling on the US to lead on waiving IP rights, I am pessimistic about the likelihood of this succeeding. The permeation of neoliberalism — “[a] programme for destroying collective structures which may impede pure market logic” — is anathema to the global solidarity ethically required. As I write the paper that will come from this blog, I am left with one depressing thought: they really are making a killing.

#### Patent Expiration allows for new generic manufacturers to enter the market.

**Pharmexec** 19**98** https://www.pharmexec.com/view/what-happens-when-product-loses-its-patent

**Losing patent protection on a prescription drug** is one certainty in the constantly changing world of pharmaceuticals. Just as surely as a company patents its breakthrough product at the beginning of its development process, that patent will expire approximately 20 years down the road, **leav**ing **the door open for generic products to enter the market.** And the end of a product's life cycle will affect all areas of a pharmaceutical company, including its sales force.Erin

#### Generics reduce cost 85% through competition

**FDA 2018 https://www.fda.gov/drugs/generic-drugs/generic-drug-facts**

**Generic medicines** tend to **cost less than their brand-name counterparts** because they do not have to repeat animal and clinical (human) studies that were required of the brand-name medicines to demonstrate safety and effectiveness. In addition, **multiple applications for generic drugs are often approved to market a single product**; **this creates competition in the marketplace**, typically **resulting in lower prices. The reduction in upfront research costs means that**, although **generic medicines** have the same therapeutic effect as their branded counterparts, they **are** typically **sold at substantially lower costs**. **When multiple generic companies market a single approved product, market competition typically results in prices about 85% less** **than the brand-name**. According to the IMS Health Institute, **generic drugs saved the U.S. health care system $1.67 trillion** from 2007 to 2016. [[1]](https://www.fda.gov/drugs/generic-drugs/generic-drug-facts#f1)er

#### Price Differentials prevent millions from getting treatment, aff price drop solves.

#### Sir John Sulston 2001 https://www.iatp.org/sites/default/files/Cut\_the\_Cost\_-\_Patent\_Injustice\_How\_World\_Trad.htm

This is not a distant threat. The application of strengthened patent rules to medical products is already causing serious problems, notably in relation to the treatment of HIV/AIDS. Patented versions of anti-retroviral therapies which are used to keep HIV in check, and other drugs effective against the diseases which accompany HIV and cause opportunistic infections, typically cost between 3 and 15 times as much as their generic equivalents. In countries with large numbers of HIV-sufferers and chronically over-stretched health budgets, **price differentials can mean the exclusion of millions of people from effective treatment.** The problem extends beyond HIV. **Prices for** non-patented (**generic**) **versions** **of antibiotics used to treat major** childhood **killers** such as diarrhoea and chest infections **The next generation of medicines which could be used to combat** these and other **infectious diseases will, i**f the existing WTO rules persist, **be marketed in developing countries at prices which reflect the monopolistic pricing opportunities provided through patents.** **At a time when millions of lives are at risk from newly-virulent diseases**, and from the increasing drug resistance to old killers, **trade rules threaten to make basic medicines even less affordable to the poor**. WTO rules provide limited public-health safeguards, **especially in the case of national health emergencies**. These are hedged in by onerous conditions and, in practice, efforts to apply these measures have been fiercely contested by pharmaceutical companies, often with the backing of Northern governments.

#### Covid 19 Vaccine price is the major roadblock preventing world vaccination, aff solves

#### OXFAM 21 https://www.oxfam.org/en/press-releases/vaccine-monopolies-make-cost-vaccinating-world-against-covid-least-5-times-more

**The cost of vaccinating the world against COVID-19 could be at least five times cheaper if pharmaceutical companies weren’t profiteering from their monopolies on COVID-19 vaccines**, campaigners from [The](https://www.oxfam.org/en/press-releases/peoplesvaccine.org/) [People’s Vaccine Alliance](https://peoplesvaccine.org/) said today. **New analysis** by the Alliance **shows that** the firms **Pfizer/BioNTech and Moderna are charging governments as much as $41 billion above the estimated cost of production.** Colombia, for example, has potentially overpaid by as much as $375 million for its doses of the Pfizer/BioNTech and Moderna vaccines, in comparison to the estimated cost price. **Despite a rapid rise in COVID cases and deaths across the developing world,** Pfizer/BioNTech and Moderna **have sold over 90 percent of their vaccines so far to rich countries**, **charging up to 24 times the** potential **cost of production**. Last week Pfizer/BioNTech announced it would licence a South African company to fill and package 100 million doses for use in Africa, but this is a drop in the ocean of need. Neither company have agreed to fully transfer vaccine technology and know-how with any capable producers in developing countries, a move that could increase global supply, drive down prices and save millions of lives. Analysis of production techniques for the leading mRNA type vaccines produced by Pfizer/BioNTech and Moderna ―which were only developed thanks to public funding to the tune of $8.3 billion― suggest **these vaccines could be made for as little as $1.20 a dose**. **Yet COVAX,** the scheme set up to help countries get access to COVID vaccines, **has been paying**, on average, **nearly five times more**. COVAX has also struggled to get enough doses and at the speed required, because of the inadequate supply and the fact that rich nations have pushed their way to the front of the queue by willingly paying excessive prices. Without pharmaceutical monopolies on vaccines restricting supply and driving up prices, the Alliance says **the money spent by COVAX to date** **could have been enough to fully vaccinate every person in low- and middle-income countries with cost-price vaccines**,if there was enough supply. **Instead at best COVAX will vaccinate 23 percent** by end of 2021.er

### Adv 2: WTO Credibility

#### TRIPS waiver for COVID key to restore WTO credibility

Meyer 21

David Meyer (Senior writer at Fortune). “The WTO’s survival hinges on the COVID-19 vaccine patent debate, waiver advocates warn.” Fortune. 18 June 2021. https://fortune.com/2021/06/18/wto-covid-vaccines-patents-waiver-south-africa-trips

The World Trade Organization knows all about crises. Former U.S. President Donald Trump threw a wrench into its core function of resolving trade disputes—a blocker that President Joe Biden has not yet removed—and there is widespread dissatisfaction over the fairness of the global trade rulebook. The 164-country organization, under the fresh leadership of Nigeria's Ngozi Okonjo-Iweala, has a lot to fix. However, one crisis is more pressing than the others: the battle over COVID-19 vaccines, and whether the protection of their patents and other intellectual property should be temporarily lifted to boost production and end the pandemic sooner rather than later. According to some of those pushing for the waiver—which was originally proposed last year by India and South Africa—the WTO's future rests on what happens next. "The credibility of the WTO will depend on its ability to find a meaningful outcome on this issue that truly ramps-up and diversifies production," says Xolelwa Mlumbi-Peter, South Africa's ambassador to the WTO. "Final nail in the coffin" The Geneva-based WTO isn't an organization with power, as such—it's a framework within which countries make big decisions about trade, generally by consensus. It's supposed to be the forum where disputes get settled, because all its members have signed up to the same rules. And one of its most important rulebooks is the Agreement on Trade-Related Aspects of Intellectual Property Rights, or TRIPS, which sprang to life alongside the WTO in 1995. The WTO's founding agreement allows for rules to be waived in exceptional circumstances, and indeed this has happened before: its members agreed in 2003 to waive TRIPS obligations that were blocking the importation of cheap, generic drugs into developing countries that lack manufacturing capacity. (That waiver was effectively made permanent in 2017.) Consensus is the key here. Although the failure to reach consensus on a waiver could be overcome with a 75% supermajority vote by the WTO's membership, this would be an unprecedented and seismic event. In the case of the COVID-19 vaccine IP waiver, it would mean standing up to the European Union, and Germany in particular, as well as countries such as Canada and the U.K.—the U.S. recently flipped from opposing the idea of a waiver to supporting it, as did France. It's a dispute between countries, but the result will be on the WTO as a whole, say waiver advocates. "If, in the face of one of humanity's greatest challenges in a century, the WTO functionally becomes an obstacle as in contrast to part of the solution, I think it could be the final nail in the coffin" for the organization, says Lori Wallach, the founder of Public Citizen's Global Trade Watch, a U.S. campaigning group that focuses on the WTO and trade agreements. "If the TRIPS waiver is successful, and people see the WTO as being part of the solution—saving lives and livelihoods—it could create goodwill and momentum to address what are still daunting structural problems." Those problems are legion. Reform needs Top of the list is the WTO's Appellate Body, which hears appeals in members' trade disputes. It's a pivotal part of the international trade system, but Trump—incensed at decisions taken against the U.S. —blocked appointments to its seven-strong panel as judges retired. The body became completely paralyzed at the end of 2019, when two judges' terms ended and the panel no longer had the three-judge quorum it needs to rule on appeals. Anyone who hoped the advent of the Biden administration would change matters was disappointed earlier this year when the U.S. rejected a European proposal to fill the vacancies. "The United States continues to have systemic concerns with the appellate body," it said. "As members know, the United States has raised and explained its systemic concerns for more than 16 years and across multiple U.S. administrations." At her confirmation hearing in February, current U.S. Trade Representative Katherine Tai reiterated those concerns—she said the appellate body had "overstepped its authority and erred in interpreting WTO agreements in a number of cases, to the detriment of the United States and other WTO members," and accused it of dragging its heels in settling disputes. "Reforms are needed to ensure that the underlying causes of such problems do not resurface," Tai said. "While the U.S. [has] been engaging [with the WTO] it hasn't indicated it would move quickly on allowing appointments to the Appellate Body," says Bryan Mercurio, an economic-law professor at the Chinese University of Hong Kong, who opposes the vaccine waiver. "This is not a good sign. In terms of WTO governance, it's a much more important step than supporting negotiations on an [intellectual property] waiver." It's not just the U.S. that wants to see reform at the WTO. In a major policy document published in February, the EU said negotiations had failed to modernize the organization's rules, the dispute-resolution system was broken, the monitoring of countries' trade policies was ineffective, and—crucially—"the trade relationship between the U.S. and China, two of the three largest WTO members, is currently largely managed outside WTO disciplines." China is one of the key problems here. It became a WTO member in 2001 but, although this entailed significant liberalization of the Chinese economy, it did not become a full market economy. As the European Commission put it in February: "The level at which China has opened its markets does not correspond to its weight in the global economy, and the state continues to exert a decisive influence on China's economic environment with consequent competitive distortions that cannot be sufficiently addressed by current WTO rules." "China is operating from what it sees as a position of strength, so it will not be bullied into agreeing to changes which it sees as not in its interests," says Mercurio. China is at loggerheads with the U.S., the EU and others over numerous trade-related issues. Its rivals don't like its policy of demanding that Chinese citizens' data is stored on Chinese soil, nor do they approve of how foreign investors often have to partner with Chinese firms to access the country's market, in a way that leads to the transfer of technological knowhow. They also oppose China's industrial subsidies. Mercurio thinks China may agree to reforms on some of these issues, particularly regarding subsidies, but "only if it is offered something in return." All these problems won't go away if the WTO manages to come up with a TRIPS waiver for COVID-19 vaccines and medical supplies, Wallach concedes. "But," she adds, "the will and the good faith to tackle these challenges is increased enormously if the WTO has the experience of being part of the solution, not just an obstacle." Wallach points to a statement released earlier this month by Asia Pacific Economic Cooperation (APEC) trade ministers, which called for urgent discussions on the waiver. "The WTO must demonstrate that global trade rules can help address the human catastrophe of the COVID-19 pandemic and facilitate the recovery," the statement read in its section about WTO reform.

#### The WTO has an irreplaceable role, action now is key to revive the organization

Okonjo-Iweala 20

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But despite these challenges, the WTO has not been a “failure.” Rather, it has built upon the successes of its predecessor, the General Agreement on Tariffs and Trade, which entered into force in 1948. The rules-based multilateral trading system that began with GATT has contributed immensely to global economic growth over the last seven decades, by reducing average tariffs and steadily eliminating non-tariff barriers. As a result, living standards have improved in most countries. Moreover, rules-based global trade has helped to underpin peace and security, because trading partners are more likely to resolve differences through negotiations than through armed conflict. Nonetheless, WTO members today recognize the need to reboot the organization for the 21st century. Developed countries believe that they have shouldered the burden of trade liberalization for far too long, and that developing countries should shoulder more obligations if they are in a position to do so. Least-developed and low-income developing countries, meanwhile, say that WTO rules are hampering their efforts to grow and modernize their economies. Over the last two decades, international trade has become a bogeyman for critics who blame it for the economic woes some countries face. But trade is not a zero-sum game: Rights and obligations can be balanced, as the evolution of global and regional trading rules since 1948 has shown. The question facing the WTO and its members now, therefore, is how to make progress and reach mutually beneficial agreements. All members should participate in this endeavor, because that is the only way the organization can regain its credibility and carry out its rule-making function. New negotiations must therefore take account of members’ varying levels of economic development, and aim—as ever—to reach fair and equitable agreements. Other crucial priorities for the WTO include enhanced transparency, in the form of timely notifications of countries’ trade measures, and an effective dispute-settlement system that commands the confidence of all members. A moribund WTO does not serve any country’s interest. An effective, rules-based international trade system is a public good, and failure to revive it will undermine governments’ efforts to pull the global economy out of the recession caused by the COVID-19 pandemic. The WTO has an irreplaceable role to play in transforming countries’ economic prospects and the lives of people around the world. Although the current crisis has brought the organization’s deteriorating health into sharp focus, its further decline is not inevitable. In a world economy already imperiled by COVID-19, we must now apply the antidote—members’ political will, determination, and flexibility—needed to revive it.

#### WTO key to help develop trade in the developing world

WTO

<https://www.wto.org/english/thewto_e/whatis_e/10thi_e/10thi06_e.htm> DS

Over three-quarters of WTO members are developing or least-developed countries. All of those in the queue to join are likewise developing countries. Whether the interests of developing countries are well enough served in the WTO is a subject of continuing debate. But even the most critical developing countries acknowledge that the system offers them benefits. In fact, few economists dispute that properly handled, trade is essential for development. All WTO agreements contain special provisions for developing countries, including longer periods to implement agreements and commitments, measures to increase their trading opportunities and support to help them build the infrastructure for WTO work, handle disputes, and implement technical standards. Least-developed countries receive special treatment, including exemption from many provisions. The needs of developing countries can also be used to justify actions that might not normally be allowed under the agreements – for example, governments giving certain subsidies. And the negotiations and other work launched at the Doha Ministerial Conference in November 2001 include numerous issues that developing countries want to pursue. Finally, although the WTO is not an aid agency, it does have a role to play, particularly as a forum and clearing house for information on trade-related development aid. Aid for Trade. The debate over whether developing countries need aid or trade is at an end. Today, there is widespread recognition that developing countries need both. But WTO agreements do not guarantee increased trade flows: they provide opportunities. Some countries are better placed than others to grasp those opportunities. Some need help: “Aid for Trade” and various other tools are aimed at enhancing the capacity of developing countries to participate more effectively in the global marketplace. The WTO is the coordinating agency for the Aid for Trade programme and as such regularly brings donors, development agencies, recipient governments and the private sector together. This dialogue helps to highlight what is being provided and what is needed while encouraging the development of more suitably designed projects. Both donor and recipient countries have responded to these efforts. Donor countries have committed an average of $40 billion a year to trade-related development programmes while recipient countries have had success in pinpointing the specific areas where aid is needed and in mainstreaming trade into their development strategies. Better communications. The WTO has set up reference centres in over 100 trade ministries and regional organizations in capitals of developing and least-developed countries, providing computers and internet access to enable ministry officials to keep abreast of events in the WTO in Geneva through online access to the WTO’s immense database of official documents and other material. Efforts are also being made to help countries that do not have permanent representatives in Geneva.

#### Trade key to alleviating poverty – but only international assistance ensures steady gains

Córdoba 06

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When countries open up to trade, they generally benefit because they can sell more, then they can buy more. And trade has a two-way gain."-- Jeffrey Sachs, Special Advisor to the UN Secretary-General and former Director of the UN Millennium Project Developing countries depend on national and global economic growth to achieve the Millennium Development Goals (MDGs) by 2015. In this regard, international trade is recognized as a powerful instrument to stimulate economic progress and alleviate poverty. Trade contributes to eradicating extreme hunger and poverty (MDG 1), by reducing by half the proportion of people suffering from hunger and those living on less than one dollar a day, and to developing a global partnership for development (MDG 8), which includes addressing the least developed countries' needs, by reducing trade barriers, improving debt relief and increasing official development assistance from developed countries. Poverty is the most crucial plague of our times. It is commonly agreed that in order to reduce the proportion of people living on less than $1 a day, developing countries need to substantially accelerate their economic growth by carefully opening their markets. The standard rationale is that trade liberalization improves efficiency in the allocation of scarce resources, enhances economic welfare and contributes to long-term economic growth. However, while there might well be long-term gains from opening their markets, liberalizing economies are likely to face some short-term adjustment costs. This is because, as economies open up, a country's imports use existing channels, while its new exports opportunities often come from different sectors that have yet to sufficiently develop production capacity. The international community recognizes the importance of trade for development through initiatives, such as Aid for Trade, Financing for Development and, most importantly, the World Trade Organization (WTO) Doha Round of trade negotiations. It is estimated that the global annual welfare gains from trade liberalization would be in the order of $90 billion to $200 billion, of which two thirds would accrue to developing countries.1 This could help lift 140 million people out of poverty by 2015.2 Trade and economic growth. In the last decade, trade has helped trigger strong growth in developing countries, whose share in the global trade has increased from 29 per cent in 1996 to 37 per cent in 2006 and whose exports have consistently been growing at a faster rate than those of developed countries. This has stimulated growth in export revenues of developing countries. At the same time, gross domestic product (GDP) per capita, one of the most relevant indicators of MDG progress, has increased by more than 16 per cent over the past five years in Africa, West Asia and Latin America (see table above). This has led to significant increases in employment and investment levels. The strong growth in exports from developing countries has, to a large extent, been due to the steady reduction of global tariffs as barriers to trade. On average, world tariffs have declined from 11 per cent in 2000 to 7 per cent in 2006 (see Figure 1). However, there is still evidence that developing countries face disproportionately high tariffs and trade barriers on products of export interest for them (see Figure 2). For example, in 2005, developing countries' agricultural exports faced, on average, a tariff of 8.9 per cent. Developed countries still impose tariffs on imports from developing countries that are twice as high as those from developed countries.1 In Africa, Mauritius -- one of the most open economies in sub-Saharan Africa -- exemplifies how trade can be a strong instrument for achieving the MDGs. Its traditional exports, such as sugar and textiles, have been sustained by trade policies that have allowed the country to adapt to international competition and develop value-added services. Mauritius' GDP growth reached an impressive average of 6 per cent per year after implementing an export-oriented strategy in 1996. Other successful initiatives have been initiated in Rwanda, where coffee exports have fuelled economic development, and also in Kenya, where cut-flower exports have seen a growth rate of 35 per cent annually over the last 15 years, sustained by trade incentives. Coping with trade liberalization. Considering these success stories, should developing countries confidently rush towards liberalizing their economies? The answer is that they must be more cautious towards dashing to trade competition. Economic research today recognizes that the relationship between trade openness and growth is more complex than a simple causation. Trade liberalization does not automatically increase trade, let alone growth. The impact of trade openness depends on national context, rather than on the application of a theoretical demonstration.3The reality is that trade liberalization has different effects on poverty in different countries, depending on a wide range of factors, including macroeconomic stability, infrastructure and the financial sector. It is quite clear that trade alone will not help the developing world reach the MDGs and that the international community must significantly increase its efforts to cope with trade liberalization and establish certain conditions for growth to take place in all countries. Developing countries have to be better prepared before entering the global market. Developing countries should develop or expand their supply capacity before opening up to global competition. They will need technical and financial assistance to benefit from the opportunities that trade opening provides. For this reason, the international community has launched the Aid for Trade initiative, which has been designed to help developing countries build their supply capacity by developing infrastructure investments, productive capacity investments and transition assistance. This will, for example, help Haitian rice producers or Kenyan flower producers to export their products to international markets. To minimize unemployment distress from the open markets transition, developing countries also need to develop social safety nets. As developing countries liberalize, workers in sectors without competitive advantage will face unemployment. There is thus a need to reallocate workers to the newly growing sectors, which implies education, training policies and unemployment benefit programmes. In the short term, trade reform will also decrease government tariff revenues, reducing social spending particularly needed to face the rise in unemployment. The international community should therefore assist developing countries in addressing these adjustment costs, one of the reasons why the United Nations system insists on integrating all development policies into the National Development Strategy of each developing country. To conclude, in the words of Bono, co-founder of the "One" campaign against poverty, trade reform is not about charity, but about providing developing countries the necessary tools to achieve the MDGs. Trade is an important instrument to accelerate economic growth and reduce poverty. However, trade openness has to come with comprehensive reforms in line with each country's specificity and degree of development. The international community has acknowledged these issues in the last few years. United Nations action in social development is therefore crucial in helping developing countries profit from the growth opportunities provided by trade.

### Plan Text

#### The Member nations of the WTO will temporarialy waive IPR protections relating to technology needed to prevent, contain, or treat COVID-19. This includes removing IP protections to vaccines

#### I’ll defend the following:

1. The obligations of Members to implement or apply Sections 1, 4, 5 and 7 of Part II of the

TRIPS Agreement or to enforce these Sections under Part III of the TRIPS Agreement, shall be

waived in relation to health products and technologies including diagnostics, therapeutics, vaccines,

medical devices, personal protective equipment, their materials or components, and their methods

and means of manufacture for the prevention, treatment or containment of COVID-19.

2. This waiver shall be in force for at least 3 years from the date of this decision. The General

Council shall, thereafter, review the existence of the exceptional circumstances justifying the waiver,

and if such circumstances cease to exist, the General Council shall determine the date of termination

of the waiver.

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3. The waiver in paragraph 1 shall not apply to the protection of Performers, Producers of

Phonograms (Sound Recordings) and Broadcasting Organizations under Article 14 of the TRIPS

Agreement.

4. This decision is without prejudice to the right of least developed country Members under

paragraph 1 of Article 66 of the TRIPS Agreement.

5. This waiver shall be reviewed by the General Council not later than one year after it is granted,

and thereafter annually until the waiver terminates, in accordance with the provisions of paragraph

4 of Article IX of the WTO Agreement.

6. Members shall not challenge any measures taken in conformity with the provision of the

waivers contained in this Decision under subparagraphs 1(b) and 1(c) of Article XXIII of GATT 1994,

or through the WTO's Dispute Settlement Mechanism.

### Framing

**I value morality as ought implies a moral obligation**

#### The standard is minimizing material and structural violence. Prefer:

#### Structural violence and oppression are based in moral exclusion, which is fundamentally flawed because exclusion is based on arbitrarily perceived differences.

**Opotow 01** [Susan Opotow is a social and organizational psychologist. Her work examines the intersection of conflict, justice, and identity as they give rise to moral exclusion -- seeing others as outside the scope of justice and as eligible targets of discrimination, exploitation, hate, or violence. She studies moral exclusion and moral inclusion in such everyday contexts as schooling, environmental and public policy conflict, and in more violent contexts, such as deadly wars and the post-war period. She has guest edited The Journal of Social Issues and Social Justice Research and co-edited Identity and the Natural Environment: The Psychological Significance of Nature (MIT Press, 2003). She is associate editor of Peace and Conflict: Journal of Peace Psychology and Past President of the Society for the Psychological Study of Social Issues], “Social Injustice”, Peace, Conflict, and Violence: Peace Psychology for the 21st Centuryl Englewood Cliffs, New Jersey: Prentice-Hall, 2001,

Both structural and direct violence result from moral justifications and rationalizations. Morals are the norms, rights, entitlements, obligations, responsibilities, and duties that shape our sense of justice and guide our behavior with others (Deutsch, 1985). Morals operationalize our sense of justice by identifying what we owe to whom, whose needs, views, and well-being count, and whose do not. Our morals apply to people we value, which define who is inside our scope of justice (or “moral community”), such as family members, friends, compatriots, and coreligionists (Deutsch, 1974, 1985; Opotow, 1990; Staub, 1989). We extend considerations of fairness to them, share community resources with them, and make sacrifices for them that foster their well- being (Opotow, 1987, 1993). We see other kinds of people such as enemies or strangers outside our scope of justice; they are morally excluded. Gender, ethnicity, religious identity, age, mental capacity, sexual orientation, and political affiliation are some criteria used to define moral exclusion. Excluded people can be hated and viewed as “vermin” or “plague” or they can be seen as expendable non-entities. In either case, disadvantage, hardship, and exploitation inflicted on them seems normal, accept- able, and just—as “the way things are” or the way they “ought to be.” Fairness and deserving seem irrelevant when applied to them and harm befalling them elicits neither remorse, outrage, nor demands for restitution; instead, harm inflicted on them can inspire celebration. Many social issues and controversies, such as aid to school drop-outs, illegal immigrants, “welfare moms,” people who are homeless, substance abusers, and those infected with HIV are essentially moral debates about who deserves public resources, and thus, ultimately, about moral inclusion. When we see other people’s circumstances to be a result of their moral failings, moral exclusion seems warranted. But when we see others’ circumstances as a result of structural violence, moral exclusion seems unwarranted and unjust. While it is psychologically more comfortable to perceive harm-doers to be evil or demented, we each have boundaries for justice. Our moral obligations are stronger toward those close to us and weaker toward those who are distant. When the media reports suffering and death in Cambodia, El Salvador, Nicaragua, the former Yugoslavia, and Rwanda, we often fail—as a nation, as com- munities, and as individuals—to protest or to provide aid. Rationalizations include insufficient knowledge of the political dynamics, the futility of doing much of use, and not knowing where to begin. Our tendency to exclude people is fostered by a number of normal perceptual tendencies: 1. Social categorization. Our tendency to group and classify objects, including social categories, is ordinarily innocuous, facilitating acquisition of information and memory (Tajfel & Wilkes, 1963). Social categorizations can become invidious, however, when they serve as a basis for rationalizing structural inequality and social injustice. For example, race is a neutral physical characteristic, but it often becomes a value-loaded label, which generates unequal treatment and outcomes (Archer, 1985; Tajfel, 1978). 2. Evaluative judgments. Our tendency to make simple, evaluative, dichotomous judgments (e.g., good and bad, like and dislike) is a fundamental feature of human perception. Evaluative judgments have cognitive, affective, and moral components. From a behavioral, evolutionary, and social learning perspective, evaluative judgments have positive adaptive value because they provide feedback that protects our well-being (Edwards & von Hippel, 1995; Osgood, Suci, & Tannenbaum, 1957). Evaluative judgments can support structural violence and exclusionary thinking, however, when they lend a negative slant to perceived difference. In-group-out-group and we-them thinking can result from social comparisons made on dimensions that maximize a positive social identity for oneself or one’s group at the expense of others (Tajfel, 1982).

**The structural violence of inequality outweighs other impacts—there is an ethical obligation to address it.**

**Ansell 17** — David A. Ansell, Senior Vice President, Associate Provost for Community Health Equity, and Michael E. Kelly Professor of Medicine at Rush University Medical Center (Chicago), holds an M.D. from the State University of New York Upstate Medical University College of Medicine, 2017 (“American Roulette,” *The Death Gap: How Inequality Kills*, Published by the University of Chicago Press, ISBN 9780226428291, p. kindle 307-363)

There are many different kinds of violence. Some are obvious: punches, attacks, gunshots, explosions. These are the kinds of interpersonal violence that we tend to hear about in the news. Other kinds of violence are intimate and emotional. But the **deadliest** and most thoroughgoing kind of violence is woven into the fabric of American society. It exists when some groups have more access to goods, resources, and opportunities than other groups, including health and life itself. This violence delivers **specific blows against particular bodies in particular neighborhoods**. This unequal advantage and violence is built into the very rules that govern our society. In the absence of this violence, **large numbers of Americans would be able to live fuller and longer lives**. This kind of violence is called structural violence, because it is embedded in the very laws, policies, and rules that govern day-to-day life.8 It is thecumulative impact of laws and social and economic policies and practices that render some Americans less able to access resources and opportunities than others. This inequity of advantage is not a result of the individual’s personal abilities but is built into the systems that govern society. Often it is a product of **racism**, **gender**, and **income inequality**. The diseases and premature mortality that Windora and many of my patients experienced were, in the words of Dr. Paul Farmer, “biological reflections of social fault lines.”9 As a result of these fault lines, a disproportional burden of illness, suffering, and premature mortality falls on certain neighborhoods, like Windora’s. Structural violence can overwhelm an individual’s ability to live a free, unfettered, healthy life. As I ran to evaluate Windora, I knew that her stroke was caused in part by lifelong exposure to suffering, racism, and economic deprivation. Worse, the poverty of West Humboldt Park that contributed to her illness is directly and inextricably related to the massive concentration of wealth and power in other neighborhoods just miles away in Chicago’s Gold Coast and suburbs. That concentration of wealth could not have occurred without laws, policies, and practices that favored some at the expense of others. Those laws, policies, and practices could not have been passed or enforced if access to political and economic power had not been concentrated in the hands of a few. Yet these political and economic structures have become so firmly entrenched (in habits, social relations, economic arrangements, institutional practices, law, and policy) that they have become part of the matrix of American society. The rules that govern day-to-day life were written to benefit a small elite at the expense of people like Windora and her family. These rules and structures are powerful destructive forces. The same structuresthat render life predictable, secure, comfortable, and pleasant for many destroy the lives of others like Windora through **suffering**, **poverty**, **ill health**, and **violence**. These structures are neither natural nor neutral. The results of structural violence can be very specific. In Windora’s case, stroke precursors like chronic stress, poverty, and uncontrolled hypertension run rampant in neighborhoods like hers. Windora’s illness was caused by neither her cultural traits nor the failure of her will. Her stroke was caused in part by inequity. She is one of the lucky ones, though, because even while structural violence ravages her neighborhood, it also abets the concentration of expensive stroke- intervention services in certain wealthy teaching hospitals like mine. If I can get to her in time, we can still help her. Income Inequality and Life Inequality Of course, Windora is not the only person struggling on account of structural violence. Countless neighborhoods nationwide are suffering from it, and people are dying **needlessly young** as a result. The magnitude of this excess mortality is mind-boggling. In 2009 my friend Dr. Steve Whitman asked a simple question, “How many extra black people died in Chicago each year, just because they do not have the same health outcomes as white Chicagoans?” When the Chicago Sun-Times got wind of his results, it ran them on the front page in bold white letters on a black background: “HEALTH CARE GAP KILLS 3200 Black Chicagoans and the Gap is Growing.” The paper styled the headline to look like the declaration of war that it should have been. In fact, we did find ourselves at warnot long ago, when almost 3,000 Americans were killed. That was September 11, 2001. That tragedy propelled the country to war. Yet when it comes to the premature deaths of urban Americans, no disaster area has been declared. No federal troops have been called up. No acts of Congress have been passed. Yet this disaster is **even worse**: those 3,200 black people were in Chicago alone, in just one year. Nationwide each year, more than **60,000** black people die prematurely because of inequality.10 While blacks suffer the most from this, it is not just an issue of racism, though racism has been a unique and powerful transmitter of violence in America for over four hundred years.11 Beyond racism, poverty and income inequality perpetuated by exploitative market capitalism are singular agents of transmission of **disease and early death**. As a result, there is a new and alarming pattern of declining life expectancy among white Americans as well. Deaths from drug overdoses in young white Americans ages 25 to 34 have exploded to levels not seen since the AIDS epidemic. This generation is the first since the Vietnam War era to experience higher death rates than the prior generation.12 White Americans ages 45 to 54 have experienced skyrocketing premature death rates as well, something not seen in any other developed nation.13 White men in some Appalachian towns live on average twenty years less than white men a half-day’s drive away in the suburbs of Washington, DC. Men in McDowell County, West Virginia, can look forward to a life expectancy only slightly better than that of Haitians.14 But those statistics reflect averages, and every death from structural violence is **a person**. When these illnesses and deaths are occurring one at a time in neighborhoods that society has decided not to care about—neighborhoods populated by poor, black, or brown people—they seem easy to overlook, especially if you are among the fortunate few who are doing incredibly well. The tide of prosperity in America has lifted some boats while others have swamped. Paul Farmer, the physician-anthropologist who founded Partners in Health, an international human rights agency, reflects on the juxtaposition of “unprecedented bounty and untold penury”: “It stands to reason that as beneficiaries of growing inequality, we do not like to be reminded of misery of squalor and failure. Our popular culture provides us with no shortage of anesthesia.”15 That people suffer and die prematurely because of inequality is **wrong**. It is wrong from an **ethical** perspective. It is wrong from a **fairness** perspective. And it is wrong because **we have the means to fix it**.

#### Other fws like Util rely on low probability, big stick impacts, exclude the suffering of those on the bottom rung. Their suffering simply doesn’t matter under util because their struggle is ongoing