### 1NC - Framing

**My value is morality because the use of the word ought the resolution implies moral obligation**

#### Governments and agents can only evaluate generalities

**Goodin 90.** Robert Goodin 90, [professor of philosophy at the Australian National University college of arts and social sciences], “The Utilitarian Response,” pgs 141-142 //RS

My larger argument turns on the proposition that there is something special about the situation of public officials that makes utilitarianism more probable for them than private individuals. Before proceeding with the large argument, I must therefore say what it is that makes it so special about public officials and their situations that make it both more necessary and more desirable for them to adopt a more credible form of utilitarianism. Consider, first, the argument from necessity. Public officials are obliged to make their choices under uncertainty, and uncertainty of a very special sort at that. All choices – public and private alike – are made under some degree of uncertainty, of course. But in the nature of things, private individuals will usually have more complete information on the peculiarities of their own circumstances and on the ramifications that alternative possible choices might have for them. Public officials, in contrast, are relatively poorly informed as to the effects that their choices will have on individuals, one by one. What they typically do know are generalities: averages and aggregates. They know what will happen most often to most people as a result of their various possible choices, but that is all. That is enough to allow public policy-makers to use the utilitarian calculus – assuming they want to use it at all – to choose general rules or conduct.

#### Any plausible moral theory must prioritize extinction

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

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

#### Thus, the standard is maximizing expected well being.

#### Prefer:

#### 1] Actor specificity:

#### A – governments have to aggregate since collective actions necessarily benefit some

#### people while hurting others either due to resource tradeoffs or scope of effect,

#### deontic side constraints freeze action.

#### 2] Util is a lexical pre-requisite to any other framework: Threats to bodily security and

#### life preclude the ability for moral actors to effectively utilize and act upon other moral

#### theories since they are in a constant state of crisis – that inhibits the ideal moral

#### conditions which other theories presuppose.

#### 3] Parameters –

#### A. Reciprocity – non-utilitarian frameworks can’t be turned because they’re intent

#### based or procedural – only util has equal offense and allows for rigorous testing which

#### O/W’s because that the constitutive purpose of debate

#### B. Ground: we both have equal ground under util whereas more ethical fw’s flow one

#### way or the other

#### C. Clash: Util debates have more substantive clash about the topic in all of it’s aspects

#### encourages people not to just go all in for fw and win.

#### 4] No act omission distinction – if I watch someone drown and I don’t try to save

#### them, that is just as bad as actively drowning them because given that I know this is

#### the consequence, my unwillingness to act promotes the consequence

#### 5] their framing collapses to consequentialism - we can only know what is oppressive or not oppressive based on consequentialism

### DA

#### WTO is collapsing now and the new WTO director general is the brink – she is using public health initiatives to restore the WTO legitimacy

Wolff 21 (Former Deputy Director-General of the WTO, Alan Wm. Wolff, 25 FEBRUARY 2021, “DDG Wolff calls on members to work with new Director-General to reform WTO” <https://www.wto.org/english/news_e/news21_e/ddgaw_25feb21_e.htm>) [Twinz]

My plan is as follows: First to give a brief introduction to herald the beginning of a new era for the WTO under the leadership of a new Director-General. Second to call upon the negotiating chairs who have reports to give to speak. Third to give a brief report on Secretariat and members' activities during the last six months, the interim period since the previous Director-General left office, and then to open the floor for delegations’ statements. The Ngozi Okonjo-Iweala Era The landmark event of the last six months was the appointment of the new Director-General ten days ago after what turned out to be a lengthy process. 91 member delegations spoke last week to congratulate the new Director-General. The DDGs and the Secretariat join you in welcoming Dr Okonjo-Iweala’s appointment with great enthusiasm. Of course, member enthusiasm, optimism and hope need to be translated into concrete action. There is much that needs to be done at this critical juncture for the WTO. World trade must contribute to a more effective pandemic response as well as a strong and sustainable economic recovery. Climate issues are demanding more urgent attention. WTO reform is overdue, having been called for repeatedly by you, by your ministers and by many heads of government. The challenges are many but so are the opportunities. Dr Ngozi's remarks at the Special General Council meeting last Monday, subsequently circulated to delegations in document JOB/GC/250, presented a worthy and ambitious agenda for the members of this organization. What did she say? To act with a sense of urgency to assist in controlling the COVID-19 pandemic through the nexus of trade and public health: First, by playing a more forceful role in exercising the WTO's monitoring function. Part of this would involve encouraging members to minimise or remove export restrictions that hinder supply chains for medical goods and equipment. WTO monitoring suggests that as of yesterday, 59 members and 7 observers still had pandemic-related export restrictions or licensing requirements in place, mostly for personal protective equipment, disinfectants and to a lesser extent, for medicines and food. This represents a significant level of rollback compared to the 81 members and 10 observers that had implemented such measures over the past year. A welcome development — but there is much room to improve this record. And second, by broadening access to new vaccines, therapeutics, and diagnostics by facilitating technology transfer within the framework of multilateral rules.

#### The plan locks in WTO legitimacy

Okonjo-Iweala 21 (Ngozi Okonjo-Iweala is the seventh Director-General of the WTO. 1 MARCH 2021, “DG Okonjo-Iweala: WTO can deliver results if members “accept we can do things differently”” <https://www.wto.org/english/news_e/spno_e/spno1_e.htm>) [Twinz]

Addressing the WTO General Council immediately after taking office on 1 March, Director-General Ngozi Okonjo-Iweala called on members to “do things differently” to achieve reforms necessary to keep the WTO relevant, starting with swift action to curb harmful fisheries subsidies, and to help scale up COVID-19 vaccine production and distribution. The new head of the WTO noted that high expectations for her tenure can only be met if members are willing to compromise and reach agreements. DG Okonjo-Iweala suggested that prospects for a successful Twelfth Ministerial Conference would be enhanced if members target a manageable number of deliverables for this year, and set up longer work programmes to address issues that cannot realistically be resolved within that timeframe. Her full remarks are below: Mr Chairman, Excellencies, Ladies & Gentlemen, Good morning. I am delighted to be with you in Geneva even if circumstances do not yet permit all of us to meet in the same room. Let me at the outset express my gratitude to our Chair, Ambassador Walker, incoming Chair Dacio Castillo and Ambassador Aspelund for their hard work and persistence in getting me here. As I take office as DG, I want to thank you Members once more for the kind wishes and support many of you expressed two weeks ago when you made history by electing me. The large number of delegations (91 in all) that spoke is unprecedented and speaks to the desire of all for a fresh start. Let me specially thank the four DDGs Messrs. Yonov Agah, Mr Karl Bruner, Mr Alan Wolff, and Mr Yi Xiaozhun for ably holding the fort since September. I know this was not easy. Let me also thank the management and staff of the Secretariat for their warm welcome, their enthusiasm and desire to see things done differently. I remain honored and humbled by the confidence Members have placed in me. I will bring all my knowledge, passion, experience and persistence to the task at hand, reforming the organization and achieving results. I am conscious that expectations are high and shall do my utmost to move us forward. However, this is a membership driven organization so I cannot do it without you, I cannot do it without the cooperation of staff and management. What we are involved in is a tripartite partnership. Each partner has to play its part if we are to get results. High expectations of my leadership also means that I have high expectations of you to help me deliver. I have said it. It cannot be business as usual. We have to change our approach from debate and rounds of questions to delivering results. Excellencies, many of you put in long hours and a great deal of effort to do good work much of which goes unnoticed. There are excellent people in the capitals doing good work. We have talented staff in the Secretariat. But the world is no longer cognizant of this, does not recognize the effort because we are not delivering results at the pace required by our fast-changing environment. Last week at the TNC, several Ambassadors said that You Excellencies talk past each other. You don’t talk to each other. This approach has to change. We have to be more accountable to the people we came here to serve — the ordinary women and men, our children who hope that our work here to support the MTS, will result in meaningful change in their lives, will improve their standard of living, and create decent jobs for those who seek work. Excellencies, coming from the outside I have noticed that the world is leaving the WTO behind. Leaders and decision makers are impatient for change. Several Trade Ministers said to me that if things don’t change, they will no longer attend the Ministerial because it is a waste of their time. I have noticed that more and more of the work and decision making that should be undertaken at the WTO is being done elsewhere because there is an increasing loss of confidence in the ability of the WTO to produce results. But there is hope. If we all accept that we can no longer do business as usual, that will help us create the parameters for success.

#### WTO legitimacy is key to China hege – the WTO is the lynchpin to Chinese dominance

Jianguo 19 (HUO Jianguo, Vice President of China Society for World Trade Organization Studies and Former President of Chinese Academy of International Trade and Economic Cooperation of the Ministry of Commerce. 19-01-08, “Huo Jianguo: How to deal with the complex game of WTO reform” <https://baijiahao.baidu.com/s?id=1622020739444807218&wfr=spider&for=pc>) [Twinz]

\*Article was translated to English using google translate.

After its establishment in 1995, WTO's unique working mechanism and rule-based restraint mechanism successfully created a governance model for international trade. However, since the beginning of the 21st century, the international economic and trade competition pattern has changed, the competitiveness and influence of newly industrialized countries have continued to rise, and competition in the international market has become increasingly fierce. As a result, the normal operating mechanism of the WTO was also destroyed. There are many reasons for the hindrance of the multilateral trading system. From the perspective of internal functions, the first is that the Doha Development Round negotiations have been delayed indefinitely, making it difficult for the WTO's negotiation function to promote trade liberalization to play a role. At the same time, the appellate body lacks judges, and the job is paralyzed. The second is that the trade policy review mechanism is in vain. The trade policy review mechanism has always been one of the core functions of the WTO. Together with the dispute settlement mechanism and trade negotiations, it is also referred to as the three pillars of the WTO. In order to curb trade protectionism, the predecessor of the WTO, the General Agreement on Tariffs and Trade, started from the seventh round of negotiations, and tried to strengthen the supervision of the trade policies of the contracting parties, and gradually established a review mechanism for multilateral trade policies. The main problems existing in the current review mechanism include: First, the review mechanism is out of touch with other WTO functions, making it difficult to perform effective restraint functions, and the review results are not mandatory; It is difficult for the deliberations of major trading countries to play a binding role. In addition to the internal operating mechanism, the external challenges are mainly due to two major factors. One is that the existence of numerous regional trade agreements poses new challenges to WTO multilateral trade rules. The United States attempts to bypass the WTO multilateral system, promote new rules and standards at the level of regional cooperation, regard the free trade agreement as a test ground for the implementation of new international economic and trade rules, and attempt to create a new template for 21st century trade agreements and occupy the commanding heights of future development. The normative content of these new rules and new standards extends from trade policies to industrial policies, environmental standards, labor standards, and regulatory fields that extend from border measures to the border, far beyond the scope of traditional trade agreements, and thus have a serious impact on international multilateral trade rules. challenge. Second, the unilateral policy pursued by the United States for a long time has severely impacted and undermined WTO rules. For example, the United States arbitrarily quoted WTO safeguards clauses, based on the domestic trade law of 1962 and 1974, forcibly imposed on steel and aluminum products. Acts such as imposing tariffs and conducting 301 investigations against China are obviously contrary to WTO multilateral trade rules and practices, and this behavior completely deviates from the requirements of WTO multilateral trade rules and dispute settlement mechanisms. If it is not corrected in time, the seriousness of international multilateral trade rules will be completely undermined. The current WTO reform is facing extremely complex reform situations and contradictions, and the topics discussed involve multiple areas, such as how to consolidate and strengthen WTO functions, safeguard the role of multilateral trade organizations, especially how to improve the functions and roles of the Appellate Body; developing countries; Disputes on the differential preferential treatment; the transparency principle and the requirements of the notification mechanism; the standardized use of industrial policies and subsidies; the competition policy of state-owned enterprises. For my country, WTO reform is a complex and arduous multilateral game with a long way to go. We need to clarify which are of great interest to me, and even which key points are the bottom line that we must adhere to, and which can reflect flexibility, organize professional teams as soon as possible, strengthen discussions on major issues, and make various plans. On the one hand, we must be alert to possible pitfalls in WTO reforms, and at the same time give full play to China's wisdom and influence, and use WTO reforms and other opportunities to create a better and more sustainable external environment for our country. In this process, we must also attach great importance to the public opinion propaganda work of WTO reform. This is very important. The United States is clearly a destroyer of WTO rules, but it often speaks of itself as a victim in the international arena. Constantly trying to win over its main trading partners to form alliances. In this regard, we should resolutely counterattack, explain to the world the real reasons why the WTO and its reforms are facing difficult difficulties, and fully expose the narrow intentions of the United States on reform issues. Propaganda for WTO reform should pay attention to two aspects: first, public opinion propaganda on reform issues, such as maintaining the authority of the multilateral trading system, how to restrain the unilateral behavior of individual trading countries, and why to maintain the differential preferential treatment of developing countries , Why do we need to maintain the principle of most-favored-nation treatment? Second, once we have inclined opinions on WTO reform issues and reform directions, we must do early publicity. This will not only promote WTO reform negotiations, but also promote the domestic market Reform. Properly promoting WTO reform is of great significance to China's deepening of reform and opening up under the current situation, and it also meets the needs of China to participate in international multilateral cooperation and play an active role in international organizations. It is necessary to closely link the advancement of WTO reform with the deepening of domestic reforms and opening up, clarify the key points and nodes of reforms that are in line with the country's long-term interests, and truly transform external pressures into internal driving forces. This is a complementary process. Under the background of grasping the general trend, we can better grasp the direction and goals of domestic reform and opening up. Only by accelerating and deepening domestic reforms can we proactively provide the necessary policy environment for the advancement of WTO reforms, and make my country is taking the initiative in the new round of international multilateral rules game. (The author is the vice chairman of the China World Trade Organization Research Association)

#### WTO is key to China hege – economic coercion

Lin et al. 21 (China Power Team, Bonny Lin is a senior fellow for Asian security and director of the China Power Project at the Center for Strategic and International Studies (CSIS). Matthew P. Funaiole is a senior fellow for data analysis with the iDeas Lab and a senior fellow with the China Power Project at the Center for Strategic and International Studies (CSIS). Brian Hart is an associate fellow with the China Power Project at the Center for Strategic and International Studies (CSIS). Hannah Price is a program manager with the China Power Project at the Center for Strategic and International Studies (CSIS). August 27, 2021. “How Influential is China in the World Trade Organization?” <https://chinapower.csis.org/china-world-trade-organization-wto/>) [Twinz]

China’s Impact on the WTO In other international organizations, size and influence directly afford major countries specific privileges. China, for instance, holds veto power in the UN as a permanent member of the Security Council. In the International Monetary Fund, China wields the third-largest voting share (6.09 percent), after the US (16.52 percent) and Japan (6.15 percent). This is not the case in the WTO, where size and power manifest themselves indirectly. Winning a trade dispute is costly and requires significant technical and legal expertise, which often compels less-developed members to forego filing complaints. LEARN MORE "Is China Contributing to the United Nations’ Mission?" Unsurprisingly, the five most active members within the DSS – the US, EU, China, Canada, and India – are five of the world’s largest economies. Together they accounted for roughly two-thirds of global GDP in 2018. By comparison, the WTO’s 30 least-developed members had a combined GDP of less than one percent of the global total in 2018,8 and have only ever been involved as a complainant or respondent in one dispute – a complaint by Bangladesh against India in 2004. The economic policies of the world’s second-largest economy have been a source of tension between WTO members. The US and EU have long accused the Chinese government of providing subsidies that have led to overcapacity and subsequently the dumping of goods – including solar panels, aluminum, and steel – in markets around the world. In a smaller economy, these policies would be less consequential, but subsidies provided by Beijing can reshape the global marketplace. For example, Chinese aluminum subsidies caused world aluminum prices to plummet 46 percent between 2007 and 2015. SHARE The scale of China’s economy also weighs heavily on other WTO members. Taiwan and South Korea, which both rely heavily on trade with China, have refrained from filing any disputes against China. Fear of retribution from Beijing likely factors into this hesitancy. Seoul did voice a complaint in March 2017 claiming that China had retaliated against South Korean companies after Seoul deployed the THAAD missile system, but a formal complaint was never filed. How Beijing responds to DSS rulings can present additional challenges for the WTO. In many cases, China has shown a willingness to comply with rulings it views as unfavorable. However, it has also found creative ways of demonstrating sufficient legal compliance while sidestepping the spirit of certain decisions. SHARE In one of the most well-known WTO disputes, China was found to have inadequately opened its market to foreign electronic payment services, such as Mastercard and Visa. The WTO determined that China had violated WTO rules by making China Union Pay a monopoly supplier for the clearing of RMB-denominated payment card transactions. In accordance with the ruling, China’s State Council announced in 2014 that it would open its markets to foreign payment services, yet it was not until early 2020 that Mastercard, American Express, and other companies were approved by the People’s Bank of China to set up bank card operations in China. In some aspects, China has space to improve, like services commitments and also some domestic policies. I think the problem is these commitments are not so clear-cut – not like tariff reductions. DR. TU XINQUAN China’s status as a “developing” country has likewise heightened tensions within the WTO. About two-thirds of all WTO members, including China, designate themselves as developing economies in order to receive “special and differential treatment.” This provides developing members with several benefits, such as extended windows for implementing WTO commitments and assistance with handling disputes and technical matters. Several advanced economies have pushed back against China’s self-designation as a developing country. In February 2019, the US proposed reforms to the WTO that would create stricter eligibility requirements for this designation. China responded by teaming up with India and seven other developing members to refute the US proposal and voice support for the WTO’s practice of allowing members to self-designate their status. In May 2019, China submitted its own WTO reform proposal that (among other points) criticized a “certain member” (the US) for blocking appointments to the WTO’s Appellate Body. For years, the US has challenged the Appellate Body due to concerns that it has at times overstepped its authority. The US has also complained that the body has ignored rules mandating the completion of cases within a specified time period. Under President Donald Trump, the US has strengthened its efforts to limit the Appellate Body by blocking the appointment of new judges to the body. When the terms of two judges ended on December 11, 2019, without any re-appointments, the Appellate Body was left with only one sitting judge. Since WTO rules require a quorum of at least three judges on the Appellate Body, it now stands unable to issue rulings, effectively bringing WTO dispute settlement to a standstill. Issues with the Appellate Body are part of broader disagreements among WTO members over how to address underlying problems within the organization. These divisions, coupled with ongoing US-China trade tensions, offer Beijing an opportunity to cast itself as a defender of global trade and elevate its role within the WTO. Given China’s mixed record of compliance with WTO dispute rulings, Beijing’s role in addressing these issues will significantly shape the organization’s future. ChinaPower

#### China rise leads to US-China war – extinction

Kim 19 (Min-hyung Kim (Department of Political Science and International Relations, Kyung Hee University, Seoul, South Korea). 4 February 2019, “A real driver of US–China trade conflict: The Sino–US competition for global hegemony and its implications for the future” <https://www.emerald.com/insight/content/doi/10.1108/ITPD-02-2019-003/full/html#sec006>) [Twinz]

Conclusion Since the end of the Second World War, the USA has undoubtedly been a global hegemon. With its preponderant military and economic strength, it has created a liberal international economic order and maintained it by promoting global free trade. USA sudden turn to protectionism under the banner of “America First” in the Trump administration illustrates “US fear” that its hegemony or Pax Americana is declining vis-à-vis China’s growing power. It also demonstrates that the USA now seeks to deter China from overtaking its hegemony so as to keep US hegemony as long as possible. Currently, the USA and China are waging a trade war. What is important to note here is that the driving force of the trade war between the world’s two largest economies is more political than economic. That is to say, as China’s economic and political influence in the world vis-à-vis that of the USA increases, US fear about China’s power also grows. Under these circumstances, Washington makes every effort to assert its global dominance by deterring China’s challenge to its hegemony[13]. It is this sort of “US fear” about hegemonic power transition from Washington to Beijing that brought about US policies against the BRI, the AIIB, and Made in China 2015. The fear of hegemonic power transition is indeed a driving force for the US-launched trade war. Understood this way, the trade war between the USA and China may be a harbinger of a much larger-scale conflict between the two parties, since as PTT predicts, war is more likely to occur when the power gap between a declining hegemon and a rising challenger is getting closed. As China’s economic, technological, military and political rise continues down the road, the USA will try to contain it in order to maintain its global hegemony. The obvious consequence of this seesaw game is the intensification of the Sino–US competition over global hegemony. The USA and China, the two most powerful states in the world, appear as if they were on a collision course. What this means is that so long as US fear about China’s overtaking US hegemony persists, a similar type of conflict between the two hegemonic powers is likely to occur in the future even if the current trade war is over.

### DA

#### Innovation is fragile, any reduction triggers a downward spiral.

**Charlton 20** Charlton, Emma. Senior Writer for the World Economic Forum, Formative Content. “The looming health catastrophe that could be more deadly than COVID-19.” 2021 World Economic Forum. 20 Nov 2020. https://www.weforum.org/agenda/2020/11/superbugs-health-risk-antimicrobial-resistance/

Resistance is increasing, partly because [antimicrobials have been overused](https://www.who.int/campaigns/world-antimicrobial-awareness-week/2020) since their discovery, and partly because poor sanitation and hygiene allow resistant strains to spread. In farming, antibiotics are often given to animals to boost their growth or to prevent diseases from spreading when livestock are kept in cramped conditions. COVID-19 has added another layer, with antibiotics being prescribed to people around the world, even though it is caused by a virus, not by a bacteria, the [WHO](https://www.who.int/campaigns/world-antimicrobial-awareness-week/2020)says. Tackling resistance matters because the problem has the potential to spiral, with the AMR Action Fund estimating that [deaths from antibiotic-resistant infections](https://amractionfund.com/amr-innovation-challenge/#page-section-0)could rise to around 10 million a year by 2050, up from around 700,000 in 2019. And it could cost the global economy as much as $100 trillion between now and 2050, according to the [International Federation of Pharmaceutical Manufacturers & Associations, IFPMA](https://www.ifpma.org/subtopics/antimicrobial-resistance/). “The coronavirus has really driven home how [vulnerable we are as a society to contagious diseases](https://novonordiskfonden.dk/en/news/lars-rebiens-speech-on-amr/),” says Lars Rebien Sørensen, chairman of the Novo Nordisk Foundation, which helps fund the AMR Action Fund. “2,000 people die every day due to antimicrobial-resistant infections. Even if we start doing everything we can today, this number will increase before it will drop. If we fail to act, a catastrophe is looming.” The WHO [global action plan](https://www.who.int/news-room/feature-stories/detail/an-update-on-the-fight-against-antimicrobial-resistance) seeks to improve awareness of the issue, bolster research, improve sanitization, cut back excessive use of antimicrobial medicines in human and animal health and invest in new medicines to act against the superbugs. **At the moment,** the bacteria are winning the race, morphing faster than drugs are being developed to counter them, the [AMR Action Fund](https://amractionfund.com/amr-innovation-challenge/#page-section-0) says. And that’s partly because of the [poor business case](https://novonordiskfonden.dk/en/news/lars-rebiens-speech-on-amr/): development costs cannot be covered through sales. While pharmaceutical companies are racing to find a vaccine for COVID-19, research and development of [new antibiotics has slowed](https://www.pewtrusts.org/en/research-and-analysis/reports/2016/05/a-scientific-roadmap-for-antibiotic-discovery), according to Pew research. Now the WHO is calling for a bold, unified agenda focused on prevention and finding new medicines. Seeking to redress this, the AMR Action Fund has raised $1 billion from major pharmaceutical companies to invest in [biotech](https://novonordiskfonden.dk/en/news/major-danish-contribution-to-billion-dollar-global-initiative-to-combat-antimicrobial-resistance/) and plans to bring as many as four new antibiotics to patients by 2030. “There is currently [no viable market for the development of new antibiotics](https://novonordiskfonden.dk/en/news/major-danish-contribution-to-billion-dollar-global-initiative-to-combat-antimicrobial-resistance/),” says Kasim Kutay, CEO of Novo Holdings, which administers the investment in the AMR Action Fund on behalf of the Novo Nordisk Foundation. “As a result, antibiotics that are in the early stages of development never reach patients because of a lack of funding for the later stages of clinical research. The AMR Action Fund is an important part of the solution to this.” Until new antibiotics are found, the US Centers for Disease Control and Prevention advocates good general health practices, like keeping your hands clean, getting vaccinated, only using antibiotics when they’re really needed, and preparing food in a hygienic way. Even so, it’s likely to be a long battle. “AMR is a complex problem that requires a [united multisectoral approach](https://www.who.int/news-room/fact-sheets/detail/antimicrobial-resistance),” the WHO says. “Greater innovation and investment is required in operational research, and in research and development of new antimicrobial medicines, vaccines, and diagnostic tools.”

#### Plan kills pharma innovation.

**Akkara et. al. 16** Akkari, Alessandra Cristina Santos et al. “Pharmaceutical innovation: differences between Europe, USA and ‘pharmerging’ countries.” SciELO - Scientific Electronic Library Online. 14 June 2016. https://www.scielo.br/j/gp/a/F66RRXT8N33rmDyV73cGJrk/?lang=en

**para. 3.1 importance of patent protection**

Although the IP system is not the only one to encourage innovation, the absence of such laws would significantly affect innovation in the pharmaceutical industry, unlike some other sectors, since **the patent is an integral part of the company's innovation strategy in the field of medication** (**Binns & Driscoll, 1998**). In fact, **Mansfield (1986)** shows that the absence of patent protection would have a small impact on the innovation efforts of most industries, but the pharmaceutical industry was an obvious exception. According to the author, this special behavior is a result of a high rate and a high cost of imitation, i.e. the discovery or the development of a new molecule requires a lot of time and investment, but once the drug is obtained, the medicinal product can be easily prepared by different laboratories with the minimal capabilities of developing chemical syntheses. As such, given that patents are seen as the main means of appropriability available to the pharmaceutical industry, delaying the development of an IP system that provides the drugs protection, in addition to maintaining an ineffective and impaired system, will have damaging consequences for the industry and also for the countries technological progress. According to **Scherer & Ross (1990)**, the patent is an indicator of technological progress, being one of the possible mechanisms to appropriate innovations as well as the advantages of the pioneering spirit; the benefits obtained by the inventor through the evolution of his learning curve; industrial secrets; and sales and service efforts. According to the so-called Yale Survey by **Levin et al. (1987)**, patents are only seen as the most effective means of ensuring the returns for the release of new products and processes in the pharmaceutical and oil refining industries. In other segments, including R&D intensive sectors, industries have reported that patents are not the most important mechanism to generate profits from their innovations, which means they employ mainly other mechanisms to this purpose. The information gathered by analyzing patents becomes especially important to guide the decision-making and the acquisition of competitive advantages by an organization, as well as the definition of public policies and strategic sectors of a country, since it enables the investigation of a global, national, regional and sectorial scenario in terms of technological innovation. According to the Frascati Manual, indicators based on patents provide a measure of a innovative production of a different countries, considering the investments and the other costs linked to the R&D activities as the *input*s of the inventive activities, while patents can be considered as the *output* of the innovation process (**OCDE, 2007**). **Masiakowski & Wang (2013)** state that information about patents is crucial for many aspects of a successful business, but its complexity, distribution over several different databases (in a wide variety of formats) and generation of many pure numeric values, place major challenges for their efficient and strategic use. Therefore, studies geared toward the grouping and analysis of innovation indicators (technological mappings, for example) are becoming a facilitating factor to guide organizations or countries, especially in the pharmaceutical segment.

#### Innovation key to stop super infections

**Baker 18** Stephen J. Baker, David J. Payne, Rino Rappuoli and Ennio De Gregorio. “Technologies to address antimicrobial resistance.” JSTOR. 18 December 2018.https://www.jstor.org/stable/10.2307/26574193

Some of the challenges that currently face this approach are the conduct of clinical trials, which mostly focus on treating a specific pathogen, and the cost of goods of mAbs. The use of mAbs to protect against many hospital-acquired infections, such as Acinetobacter, P. aeruginosa, or K. pneumoniae, in high-risk patients may be a more pragmatic approach than vaccination for these pathogens, where infection can be a relatively rare event in most people’s lives until they enter a higher risk environment, such as the intensive care unit (48). As antibody engineering and diagnostics technologies advance, coupled with manufacturing approaches that decrease the cost of goods, this could become an area of significant growth in the future. Of all of the approaches described, mAbs probably have the best opportunity to successfully treat AMR, although each mAb treatment will probably be limited to a specific species of bacteria. This will mean these treatments will be reserved for second- or third-line therapy once the infecting organism has been identified. The downside is each mAb will need to have its own clinical development path, which will greatly increase the cost of development. Technology or regulatory changes that reduce the cost or accelerate the development path will certainly catalyze the further development of mAbs. AMR is eroding our ability to control infections with traditional antibiotics, and there are scientific challenges to develop new treatments at an equivalent rate. These challenges include the need to kill rapidly growing organisms that are adept at keeping out xenobiotics, lack of rapid diagnostics leading to empirical treatment of infections, and a need to administer high doses to cover worst-case scenarios. However, new innovations in vaccines and antibacterial approaches have potential to provide new tools to address this public health threat. Clearly, broader vaccination programs can play a bigger role in preventing bacterial infections and innovative platforms are available to create new vaccines against additional pathogens of concern. Furthermore, innovative approaches need to be explored for traditional small-molecule antibacterial discovery programs, and alternative approaches need to be robustly validated and progressed. Together, vaccines and antibiotics have played a key role in our ability to manage bacterial infections, which has enabled the advancement of medical science. However, **this progress has been at risk for some time**, despite the underpinning science and platforms that can address this global threat being available. Significant and coordinated investment is needed to broaden the application of innovative vaccine platforms to additional pathogens and to expand research around novel approaches that will improve the success of traditional and alternative antibacterial discovery. In conclusion, we believe that a coordinated effort in research and development of new antibiotics and vaccines that takes advantage of the opportunities provided by the new technologies, combined with appropriate policy measures, can greatly advance our ability to control AMR.

#### If not treated, AMR could cause massive repercussions—twice that of covid per year.

**Friedman 20** Friedman, Eric. A. Eric A. Friedman is the O’Neill Institute’s global health justice scholar. He works on global health and human rights projects and scholarship, with a focus on equity, empowerment, and accountability. He is also a member of the Executive Committee of the Framework Convention on Global Health Alliance, which advocates for a treaty to improve accountability to the right to health and is aimed at national and global health equity. He also serves on the Steering Committee of the Sustainable Health Equity Movement. Before joining the O’Neill Institute in 2010, Friedman was a senior global health policy advisor at Physicians for Human Rights, where he focused on health systems, the global shortage of health workers, and HIV/AIDS, and sought to increase the extent to which U.S. global health policy, and health workforce and systems policies globally, incorporated the right to health. He also served on the board of the Global Health Workforce Alliance, an international partnership hosted by the World Health Organization, and chaired the Health Workforce Advocacy Initiative. Friedman holds a law degree from Yale Law School and a B.A. from Yale College. “Behind the Headlines: 10 Million Deaths From Antimicrobial Resistance by 2050 (or Not?).” O’Neill Institute for National and Global Health Law or Georgetown University. 12 February 2020. https://oneill.law.georgetown.edu/behind-the-headlines-10-million-antimicrobial-deaths-by-2050-or-not/

**One of the greatest health threats of our time, one that grows by the year, is antimicrobial resistance.** **Bacteria and other microbes develop mutations that protect them against antibiotics and other antimicrobial drugs, meaning that infections, including deadly ones, that we can now treat will become more difficult — even possible — to treat. The** [700,000 or more deaths](https://www.who.int/news-room/detail/29-04-2019-new-report-calls-for-urgent-action-to-avert-antimicrobial-resistance-crisis) **that antimicrobial resistance now causes every year could grow to 10 million by 2050.** It could cause 10 million deaths per year by 2050. But just how likely is this? Read an article or book discussing antimicrobial resistance, and you would think that without more action to combat resistance (such as by developing new antibiotics and other antimicrobials) and slow its spread (such as through more prudent use of existing antibiotics), we are on track to that [truly frightening future](https://amr-review.org/sites/default/files/AMR%20Review%20Paper%20-%20Tackling%20a%20crisis%20for%20the%20health%20and%20wealth%20of%20nations_1.pdf). It would be a future where more people die of antimicrobial resistance than cancer, and today’s routine surgeries become dangerous – even too dangerous to undertake – because of the risk of deadly infections. Bill Bryson’s general excellent book [*The Body: A Guide for Occupants*](https://www.theguardian.com/books/2019/sep/26/the-body-guide-for-occupants-bill-bryson-review) (2019) puts it this way: “At the current rate of spread, antimicrobial resistance is forecast to lead to ten million preventable deaths a year” (p. 46). Bill Bryson cites a [BBC Radio science program](https://www.bbc.co.uk/programmes/b07djvbp), whose host says that “the O’Neill report [to which we will return] suggests that [deaths from antibiotic resistance] will rise to 10 million people per year by 2050.” And he cites [an article from Chemistry World](https://www.chemistryworld.com/features/the-antibiotic-countdown/3008544.article), a news website developed by the United Kingdom’s Royal Society of Chemistry, which reports: “Already, drug-resistant bacterial infections kill 700,000 people every year…and authoritative sources suggest that this figure may rise to 10 million by 2050.” Authoritative indeed. A [*New York Times* article](https://www.nytimes.com/2019/12/25/health/antibiotics-new-resistance.html) in December 2019 that warned of bankruptcies of antibiotic start-ups, threatening an already inadequate pipeline of new antibiotics, states, “**Without new therapies**, **the United Nations says the** [global death toll could soar to 10 million by 2050](https://www.nytimes.com/2019/04/29/health/un-drug-resistance-antibiotics.html)**.”** And indeed, the United Nations said just that – though with emphasis on the word “could.” An April 2019 [report from a UN interagency group](https://www.who.int/antimicrobial-resistance/interagency-coordination-group/final-report/en/) stated: “**Drug-resistant diseases already cause at least 700,000 deaths globally a year**, including 230,000 deaths from multidrug-resistant tuberculosis, a figure that could increase to 10 million deaths globally per year by 2050 under the most alarming scenario if no action is taken” (p. 1). We will return to that key last phase of the UN statement about the most alarming scenario. I could continue along these lines. Enter “10 million deaths antimicrobial resistance” into an Internet search engine, and you will find a plethora of examples like the news articles and programs cited above. The origin of this 10 million figure – what we’re on track to reach “at the current rate of spread”, what “will” happen, what “may” or “could” happen – is a 2014 report by panel, the Review on Antimicrobial Resistance (AMR Review), that then-UK Prime Minister David Cameron had established earlier that year, chaired by Jim O’Neill. And it certainly gives that impression. A figure taking up an entire page (p. 5) of its [December 2014 report](https://amr-review.org/sites/default/files/AMR%20Review%20Paper%20-%20Tackling%20a%20crisis%20for%20the%20health%20and%20wealth%20of%20nations_1.pdf) (several more reports would follow) is labeled “Deaths attributable to AMR every year compared to other major causes of death,” with AMR in 2050 and its 10 million figure highlighted. And the report states, “Initial research, looking only at part of the impact of AMR, shows that a continued rise in resistance by 2050 would lead to 10 million people dying every year” (p. 6). Without looking more carefully, the way this figure has been reported in the press seems more or less accurate with respect to how the AMR Review characterizes its findings. But keep reading, and the picture quickly becomes quite murky. The 10 million figure is drawn from two studies, which of which created possibly but hypothetical scenarios of what could happen in 2050. [One study](https://www.rand.org/pubs/research_reports/RR911.html), by the RAND Corporation, looked to three major infectious diseases and three bacteria where resistance is already a concern – AIDS, tuberculosis, and malaria, and *Escherichia coli* (*E. coli*), *Klebsiella pneumoniae* (*K. pneumoniae*), and *Staphylococcus aureus* (*S. aureus*) – and assumed in 15 years we would have no drugs to combat them. While resistance is a problem with all of these, there is no particular reason to believe that all drugs against them will cease to work, much less in fifteen years, which seems extremely unlikely – a “most alarming scenario” indeed, to use the UN interagency group’s words. The [other study](https://home.kpmg/content/dam/kpmg/pdf/2014/12/amr-report-final.pdf), by KPMG, was similarly limited to the same six diseases and bacteria, and considered four different scenarios, varying by degree of resistance (40% or 100%) and rate of infection (as now, or all except for malaria doubling). Among the two studies and multiple scenarios, the AMR Review fails to say exactly where its 10 million figure comes from. Review the two studies themselves, and you will not find that number. [One analysis](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5127510/) in *PLoS Medicine*, referring to the 10 million figure, observes: “The scenario that seems to be underlying the most often quoted line entails a sharp initial rise of current resistance rates by 40 percentage points, after which rates remain stable until 2050, and doubled infection rates.” This scenario, one of those from KPMG, does appear the most likely source to me as well; along with the RAND study, it is the scenario that the AMR Review itself highlights. Yet is that the most likely scenario? How much more likely is 10 million deaths than 5 million or 2 million – or are these or other lower tolls, in fact, actually (much?) more likely? Notably, contrary to the scenario that seems to underlie the 10 million figure, presently HIV and TB infection rates are falling, not rising. While hardly representative of the world, but indicative of the possibilities of progress even at today’s level of insufficient action, the Center for Disease Control and Prevention’s [best estimates](https://www.cdc.gov/drugresistance/pdf/threats-report/2019-ar-threats-report-508.pdf) (p. 16-17) indicate a slight decrease of annual antimicrobial resistance deaths in the United States, from 36,500 in 2012 to 35,900 in 2018. What are we to make of all of this? First, what is, importantly, not the take-away. That the 10 million death figure hardly reflects either current trends or is particularly more likely than millions fewer deaths (even as more deaths is conceivable as well) hardly means that antimicrobial resistance is not a major threat. It absolutely is, and with **the problem worsening globally, a death toll that reaches into the millions annually is well within the realm of possibility.**

### CP

#### CP Text: The member nations of the WTO should implement United Health Care

#### Universal Health Care solves for pandemic and covers those who can’t afford. Galvani 20

[Alison P. Galvani, Burnett and Stender Families Professor of Epidemiology at Yale, 6-1-2020, "The imperative for universal healthcare to curtail the COVID-19 outbreak in the USA," EClinicalMedicine, https://www.thelancet.com/journals/eclinm/article/PIIS2589-5370(20)30124-3/fulltext]

The COVID-19 outbreak in the United States is growing steeply and spreading widely. As of March 26, national incidence surpassed every other country, and as of April 28 has reported over a million cases. The COVID-19 crisis is exposing the systemic frailties in our healthcare system. More than 78 million people in America do not have access to adequate health insurance [[1]]. Given that health insurance in the US is typically provided by employers, millions more are at risk of losing their healthcare coverage as unemployment surges. Here we discuss how the pervasive healthcare insecurity in the US hampers control of COVID-19. Further, we argue that universal healthcare would alleviate the cost barriers that are impeding control of this pandemic. Outbreak **mitigation relies on prompt diagnosis and case-isolation**, in which mild cases are quarantined at home and more severe cases are hospitalized. These measures must be implemented **rapidly** in order **to be effective**. However, **for the millions** of people who Are either **uninsured** or underinsured, **concern about** the medical Expenses that could be incurred **delays diagnosis and treatment**. While the Families First Coronavirus Response Act recently approved by Congress stipulates that COVID-19 diagnostic testing is nominally free for everyone, **treatment is not covered. Those who are hospitalized may face major medical expenses**. For instance, the cost of 12 days in the ICU on ventilation would likely exceed US $80,000 [[2],[3]], even without considering the additional hospital care before and after ICU admission. In addition to the burden on the uninsured, the under-insured are obligated to pay substantial out-of-pocket sums, including thousands of dollars in deductibles and copays. Although the Coronavirus Aid, Relief, and Economic Security Act has invested $100 billion into the Public Health and Social Service Emergency Fund for healthcare providers, less than one third of this sum can be used to fund the treatment of uninsured COVID-19 patients. Compounding the crisis, legal action being pursued by the current Administration is jeopardizing the Affordable Care Act, which would lead to the loss of health insurance for as many as 30 million people [[4]]. The COVID-19 pandemic also underscores the precariousness of a system in which insurance is linked to employment. Initial unemployment claims rose from 282,000 for the week ending March 14 to 6.6 million, 5.2 million and 4.4 million, for the weeks ending April 4, April 11, and April 18, respectively, compared with a previous record high of 695,000 from 1982 [[5]]. Many of these newly unemployed individuals will lose their health insurance. Although they are permitted to purchase insurance on the federal exchange, switching networks disrupts continuity of care, which is particularly detrimental for those living with chronic health conditions. Furthermore, the majority of **families are unable to afford health insurance upon becoming unemployed, given that more than half of American families live paycheck to paycheck** [[6]]. Racial and economic disparities in the US healthcare system are being magnified by the pandemic. Rates of adequate health insurance coverage are much lower among people of color [[7]]. With less access to preventative healthcare, people of color are disproportionately affected by comorbidities, such as diabetes, obesity, asthma, and cardiovascular disease. These comorbidities exacerbate the severity of COVID-19 clinical outcomes, including death [[8]], as does delay in seeking care due to concerns about medical bills. COVID-19 is widening socioeconomic fissures facing people of color as well. Since the start of the outbreak, Latino populations have reported much higher rates of job and wage loss than Americans at large [[9]]. The solution to these challenges is the provision of comprehensive healthcare as a human right. Further, universal healthcare will be most cost-effectively achieved by a single-payer system, such as that proposed in the Medicare for All Act [[1]]. Not only would Medicare-for-All save lives, it would resolve costly inefficiencies that currently make our healthcare system the most expensive in the world. Among the major sources of savings, a single-payer system would consolidate administrative costs, reduce overhead, empower pharmaceutical price negotiations, and truncate executive pay. A single-payer system is also incentivized to invest in cost-effective **preventative services** that can avert life-threatening clinical outcomes and expensive downstream treatment. Another advantage of **Medicare-for-Al**l during this pandemic **would** be its **implement**ation of a **standard billing and payment** system, **which would accelerate** COVID-19 case reporting. Billing procedures currently vary across dozens of insurers, and for private insurance is proprietary. Within a consolidated system, patterns in the billing data can signal outbreak hotspots to public health surveillance officials. This consideration is not hypothetical – the single-payer system in Taiwan has facilitated exhaustive COVID-19 data collection and reporting [[10]]. Universal healthcare is fundamental to the continued prosperity of our country in the wake of this and future infectious disease threats. **Obstacles to prompt diagnosis and case isolation** not only impact the individual, but **pose a** broader **societal risk**. A pandemic illustrates an omnipresent truth: that we are each only as safe as the most vulnerable member of our society. We urge investment now in the common good of healthcare security, by extending comprehensive insurance to all who currently lack it. Then, we should move swiftly to create a single-payer system, such as Medicare for All, which is the more efficient way to provide universal coverage [[1]]. **By eliminating financial obstacles to healthcare, we can** pave the way for more efficient outbreak **control**, in both **this pandemic** and the next.

#### Health Care is affordable. Galvani et al. 20

#### [Alison P Galvani, PhD, Alyssa S Parpia, MPH, Eric M Foster, Burton H Singer, PhD, and Meagan C Fitzpatrick, PhD, 02-15-2020, “Improving the prognosis of health care in the USA,” Lancet, https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(19)33019-3/fulltext#%20]

The bottom line of Medicare for All Through the mechanisms detailed previously, we predict that a single-payer **health-care** system **would require $3·034 trillion annually** (figure 3; appendix p 5), $**458 billion less than national** health-care **expenditure in 2017**.40 Even after accounting for the increased costs of coverage expansion, our data-driven base case includes $59 billion savings on hospital care, $23 billion on physician and clinical services, $217 billion on overheads, and $177 billion on prescription drugs (figure 3; appendix p 11). Consequent**ly, annual expenditure per capita would decrease from** $**107396 to** $**9330, equivalent to a 13·1% reduction**. The **expectation of savings is robust** and remains following variation in the input parameters. For example, **if overhead costs only dropped to 6% of total** health **expenditure**—rather than Medicare’s current 2·2%—the **M**edicare **for A**ll Act **would** still **reduce costs by 10·3%**. Conversely, **savings would increase** beyond our base case **if our model overestimates the unfulfilled demand in people who do not have insurance** or are underinsured. Given that $2261 billion is already allocated to health care by existing governmental and philanthropic sources (appendix p 5), a further $773 billion must be collected by the government to fully fund the Medicare for All Act. Restructuring health-care expenditure by employers, individuals, and as a country

#### UHC ensures wellbeing and increases market size. WHO 21:

“Universal Health COVERAGE (UHC).” *World Health Organization*, World Health Organization, 1 Apr. 2021, www.who.int/news-room/fact-sheets/detail/universal-health-coverage-(uhc). [Founded in 1948](https://www.who.int/about/who-we-are/history), WHO is the United Nations agency that connects nations, partners and people to promote health, keep the world safe and serve the vulnerable – so everyone, everywhere can attain the highest level of health. WHO leads global efforts to expand universal health coverage. We direct and coordinate the world’s response to health emergencies. And we promote healthier lives – from pregnancy care through old age.

**WHO** contributes to achieving the Thirteenth General Programme of Work 2025 **target** that **1 billion** more **people** **benefit** **from** **UHC**, while **also contributing** **to** the **2** other **billion** **targets** **of** **1 billion** more **people** **better** **protected** **from** **health** **emergencies** and **1** **billion**more **people** enjoying **better** **health** and **well-being**. It also contributes to WHO’s mission of the right to the highest attainable standard of health, to Health for All and the SDGs.

#### Market size increases lead to increased innovation/this turns the aff. Blume-Kohout et. Al 13:

Blume-Kohout, Margaret E, and Neeraj Sood. “Market Size and INNOVATION: Effects of Medicare Part D on Pharmaceutical Research and Development.” *Journal of Public Economics*, U.S. National Library of Medicine, Jan. 2013, www.ncbi.nlm.nih.gov/pmc/articles/PMC3711884/. Professor Blume-Kohout is a data scientist *qua* economist who employs theory and quantitative modeling approaches drawn from multiple disciplines—economics, psychology, sociology, statistics, and computer science—to answer public policy questions. Her research examines how government interventions impact STEM workforce participation, higher education, scientific R&D efforts and innovation, and entrepreneurial outcomes. Neeraj Sood, PhD, is professor and vice dean for research at the USC Price School of Public Policy and a founding member the USC Schaeffer Center. His research focuses on economic epidemiology, infectious diseases, pharmaceutical markets, health insurance, economics of innovation, Medicare, and global health. He is currently leading a study on COVID-19 in collaboration with Los Angeles County Department of Public Health. He has published over 100 papers in peer-reviewed journals in economics, medicine, and policy.

**Understanding** the **responsiveness of innovation to expected future revenues** and **market expansions** is **central** **to understanding** the **behavior of private sector innovative firms**, **and** is also critical for **evaluating** the **welfare** **effects** **of** **public policies** such as insurance expansions, price controls, and patent protection. Although **previous** **studies** have **shown** that **increases** **inmarket size** are **significant drivers of pharmaceutical innovation**, If **pharmaceutical** **companies** **respond** **to** the **increases** **in** **market** **size** **as** **predicted**, then all else equal we would **expect** to see an**increase** **in** the **flow** **of** **drugs** **entering** **preclinical** and **clinical** **development**.

### CASE

#### Aff only exacerbates the problem – causes ingredient shortages, decreases accessibility

Senate RPC 20

https://www.rpc.senate.gov/policy-papers/waivers-for-vaccine-ip-folly-masquerading-as-charity

Taking away IP protections for U.S. companies like Pfizer and Moderna would hurt those companies and their employees, but due to the nature of the vaccine supply chain, would-be recipients could also be harmed by the waiver. According to some scientific authorities, the most important bottleneck in producing vaccines is not intellectual property, but a shortage of essential ingredients like nucleotides, enzymes, and lipids. At issue with the waiver are mRNA vaccines, a new type of vaccine that represents the culmination of more than two decades of research. But developing the vaccines is only one part of the process of producing them. Because of their revolutionary nature, they are not simple to make. There are a number of highly complicated aspects to their production that cannot be easily transferred, duplicated, or taught. Other companies tooling up to produce the vaccines would take raw materials away from the existing, proven producers. The new producers would invariably waste resources as they learn best practices. The current producers are already shipping vaccines outside of the United States. Pfizer alone has shipped 430 million doses to 91 countries. U.S. manufacturers are on track to produce 12 billion doses of vaccine by the end of 2022, enough to satisfy global demand. Inviting resource shortages by waiving IP will jeopardize that goal. Because of these supply problems, giving away vaccine technology and creating new producers would take years to help anyone. During that time, many would suffer from the shortage in vaccines. CHINA AND RUSSIA BENEFIT FROM A WAIVER Russia and China would stand to gain from access to mRNA vaccine technology. Both countries developed their own COVID-19 vaccines, Sputnik V and Sinovac, but they use older technology and are generally less effective. The two countries have exported vaccines en masse in an effort to build influence around the world. Though they are behind the U.S. in vaccine technology, free access to U.S. trade secrets would allow them to catch up and eventually offer their own mRNA vaccines. They could then supercharge their vaccines-for-influence campaigns.

#### No guarantee that producers will reveal trade secrets – no solvency for the AFF

Bloomberg law 21

https://news.bloomberglaw.com/ip-law/waive-pharmas-vaccine-rights-what-that-would-mean-quicktake

They could acquire information that their national health regulators received in confidence to assess the safety of vaccines. That data includes things like vaccine ingredients, manufacturing details and clinical trial information that can be useful in replicating a vaccine. If a vaccine maker has a facility in the country or a manufacturing partner, authorities could pressure those entities to turn over trade secrets that weren’t given to regulators. Governments could also ask other countries to obtain that information. Companies that refuse to turn over information could face various consequences. A big question is whether the U.S. and Germany, where many of the Covid-19 vaccine developers are located, would be willing to force home-grown companies to reveal their secret sauce. The U.S. has been silent on that issue, while Germany has come out against the waiver altogether. Even if governments get the information needed to replicate vaccines, it’s unclear what would happen next. Factories would have to be built or modified, and there’s already a shortage of the raw materials needed for Covid vaccines. There’s also the difficult matter of ensuring any new manufacturers produce vaccines that are as safe as the originals.