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# TRIGGER WARNING:STRUCTURAL VIOLENCENov/Dec LD Neg

#### I affirm Resolved: A just government ought to recognize an unconditional right of workers to strike.

**Since ‘ought’ implies a moral obligation, I value morality.**

#### Morality can be best upheld by the criterion of maximizing the preservation of human lives. We have a moral duty to promote the conditions necessary for the existence of rational beings.

**Cummiskey explains in 90**

(David, Professor of Philosophy, Bates [Kantian Consequentialism, Ethics 100.3, p 601-2, p 606, JSTOR])

We must not obscure the issue by characterizing this type of case as the sacrifice of individuals for some abstract "social entity." It is not a question of some persons having to bear the cost for some elusive "overall social good." Instead, the question is whether some persons must bear the inescapable cost for the sake of other persons. Nozick, for example, argues that "to use a person in this way does not sufficiently respect and take account of the fact that he is a separate person, that his is the only life he has."30 Why, however, is this not equally true of all those that we do not save through our failure to act? By emphasizing solely the one who must bear the cost if we act, one fails to sufficiently respect and take account of the many other separate persons, each with only one life, who will bear the cost of our inaction. In such a situation, what would a conscientious Kantian agent, an agent motivated by the unconditional value of rational beings, choose? We have a duty to promote the conditions necessary for the existence of rational beings, but both choosing to act and choosing not to act will cost the life of a rational being. Since the basis of Kant's principle is "rational nature exists as an end-in-itself' (GMM, p. 429), the reasonable solution to such a dilemma involves promoting, insofar as one can, the conditions necessary for rational beings. If I sacrifice some for the sake of other rational beings, I do not use them arbitrarily and I do not deny the unconditional value of rational beings. **Persons** may **have "dignity**, an unconditional and incomparable value" that transcends any market value (GMM, p. 436), **but**, as rational beings, persons **also** have **a fundamental equality which dictates that some must** sometimes **give way for the sake of others**. The formula of the end-in-itself thus does not support the view that we may never force another to bear some cost in order to benefit others. If one focuses on the equal value of all rational beings, then equal consideration dictates that one sacrifice some to save many. [continues] According to Kant, the objective end of moral action is the existence of rational beings. Respect for rational beings requires that, in deciding what to do, one give appropriate practical consideration to the unconditional value of rational beings and to the conditional value of happiness. Since agent-centered constraints require a non-value-based rationale, the most natural interpretation of the demand that one give equal respect to all rational beings lead to a consequentialist normative theory. We have seen that there is no sound Kantian reason for abandoning this natural consequentialist interpretation. In particular, a consequentialist interpretation does not require sacrifices which a Kantian ought to consider unreasonable, and it does not involve doing evil so that good may come of it. It simply requires an uncompromising commitment to the equal value and equal claims of all rational beings and a recognition that, in the moral consideration of conduct, one's own subjective concerns do not have overriding importance.

#### Contention 1 is the Social Safety Net Counterplan

#### Text: A just government ought to

#### Require employers to pay a living wage

#### Provide universal pre-k and child care

#### Provide universal health care

#### Require paid sick and maternity leave

#### Offer tuition-free community college

#### Expand affordable housing programs

#### Expand publicly funded health care services and eligibility

#### The counterplan solves the aff while avoiding the disadvantages to strikes.

**Windham, 21**

(Lane, Ph.D., is the associate director of Georgetown University’s Kalmanovitz Initiative for Labor and the Working Poor, 9/2/21, “It's not a labor shortage — it's a wage and workers rights shortage,” https://thehill.com/opinion/finance/570441-its-not-a-labor-shortage-its-a-wage-and-worker-rights-shortage)

As we approach Labor Day, America’s working people are deep into a protracted general strike. Millions are refusing to go back into low-wage, no-benefits jobs that require they abandon dignity and rights at the workplace door. Their struggle has brewed for 40 years as wages stagnated, benefits vanished and public policy offered working families little reprieve. Employers complain that too few people are returning to work, but America’s “labor shortage” is really a shortage of good wages and workers rights on the job. Recent jobs reports show an uptick in the numbers of workers returning to work, but payroll tallies are still more than 5 million shy of pre-pandemic levels. Restaurants, retailers and hospitality firms say it is especially difficult to hire, and some blame generous unemployment checks. However, even those states that have rescinded supplemental unemployment benefits are finding that many people remain hesitant to take the sorts of jobs that are on offer. The pandemic shook up what workers want and expect from a job. America cheered front-line workers during the early days of the pandemic, banging pots and pans for health care workers, honking for delivery drivers, and thanking cashiers. But these workers’ wages remain too low to cover rising housing, education and health care costs. You’d need an average of $25 an hour to rent a modest two-bedroom apartment, according to the National Low Income Housing Coalition, and minimum wage workers can’t afford rent anywhere in the nation. An extra dollar or two more just isn’t cutting it for most people, especially when they’re putting their health on the line. Meanwhile, women are still shouldering the bulk of unpaid child and elder care, a balancing act that the pandemic has made nearly impossible. Nearly 2 million women dropped out of the labor force during the pandemic, and many did so in order to take care of their kids or sick parents. It’s no coincidence that the sectors having the most difficult time staffing up — food service and retail — are majority female occupations. Women are looking at their paltry options and voting with their feet by staying home. This isn’t the first time Americans withheld their labor to turn big societal changes in their favor. W.E.B. Du Bois posited in his masterful "Black Reconstruction in America" that enslaved people engaged in a general strike when they ran away from plantations, took up arms and sabotaged cotton production, forcing President Abraham Lincoln’s decision to end slavery. When President Franklin D. Roosevelt’s first Depression-era revision to labor law gave employers the upper hand, general strikes in San Francisco, Minneapolis and the textile industry helped convince him to pass the National Labor Relations Act. The U.S. is at another such historical crossroads due to the pandemic, and working people are weighing in by staying home. In the 1970s, employers started creating the kinds of bad jobs that are now the norm; they started hiring part-time, contract labor, lowering wages and benefits, and attacking workers unions with new vehemence. Meanwhile, U.S. policy didn’t keep up. It abandoned working people to the whims of corporations and the market. America’s working women and men are now looking at these bad jobs and the lack of governmental oversight and support, weighing the risks and personal costs, and deciding that they just aren’t doing it anymore. Working people’s reluctance to rush back into poorly paid and precarious jobs could help bolster Democrats’ chances of passing the $3.5 trillion budget resolution agreement, which marks a long-overdue expansion of the federal social safety net. This legislation could help get people back to work and keep them there because it gives workers many of the supports they need to navigate today’s economy. It would expand child care, create universal pre-K, boost affordable housing, offer free community college, enact paid family and medical leave, support long-term home care, and expand Medicare. Alongside higher wages, these wraparound supports would mean that people who wait tables, deliver packages and ring up customers can finally pay rent, afford health and child care, and even send kids to college. This Labor Day, working women and men are deeply fed up and ready for the kind of economic game changer that will improve their lives for decades to come. Until they see more rights and support, they might just choose to stay home.

#### The counterplan could be paid for by cutting wasteful spending, raising taxes, and creating new revenue streams with little to no harmful economic impact.

**Sawicky, 18**

(Max B., an economist and writer in the wilds of Virginia who has worked at the Government Accountability Office and the Economic Policy Institute, “Paying For Socialism,” https://jacobinmag.com/2018/09/paying-for-socialism-taxes-deficits-budget-policy)

One approach to preempting tax-phobia is to elaborate spending cuts that could offset spending increases. Without doubt, there is much regrettable spending in the existing federal budget, starting with defense and continuing with the “black budget” for secret, nefarious activities overseas (the kind of activities Putin engages in in the U.S.), not all of which are limited to intelligence-gathering. Lesser amounts are associated with agricultural subsidies, private prisons, and the criminal administration of U.S. immigration and border control. All these things share a few big features in common. One is that if you put them all together, you still couldn’t pay for Medicare For All or a substantial Universal Basic Income. Another is that all of them have powerful political support. A related gambit is to take up so-called “tax loopholes,” which are known in policy circles as “tax expenditures.” Eliminating these loopholes makes it possible to raise revenue without increasing actual tax rates. But common estimates of the magnitude of these potential revenue sources tend to be inflated, especially those related to the corporate income tax. As for the loopholes in the individual income tax, it is well known that their benefits are regressive – stacked to the advantage of higher-income households. Yet these benefits are also spread among a sizable number of people, well beyond the super-rich; examples include the deferral of taxes on contributions to retirement accounts and deductions for state income tax and mortgage interest. They are not politically invulnerable; they got dinged in Trump’s tax bill, for example. But they are not push-overs either. And incidentally, their benefits are stacked in favor of “blue states,” from which our most likely democratic socialist legislators will first emerge. It should also be remembered that the US collects very little in taxes compared to other countries. Measured correctly, the U.S. comes in near the bottom – our ratio of taxes to GDP is among the lowest of the world’s industrialized nations. The takeaway is that if taxes were raised substantially, by hook or by crook, there would seem to be no economic risk. Our relatively small public sector affords the US no important advantage in terms of labor productivity. Although we have higher GDP per worker, other countries have more leisure per worker. Output per hour is what matters and the U.S. is no superstar in this domain. One common but spurious rebuttal to this point invokes US corporate tax rates, which are higher than most other nations’ rates. But these are what are known as statutory, marginal rates, sometimes called “headline rates.” By contrast, average effective tax rates on corporate income — that is, the amounts corporations actually pay, after taking deductions, exclusions, and other goodies into account — are not out of line with those in other countries. On the micro level, there is also recent research showing that marginal rates in the individual income tax could be much higher with little resulting economic “damage” — meaning traditional economists’ concerns about disincentives to work, save, and invest. In his autobiography, Keith Richards noted that with tax rates sufficiently high, doing that extra concert became less compelling. So make up your minds, folks: socialism, or more geezer rock. Decisions, decisions! We could also consider entirely new sources of revenue. Perhaps the most urgent is a carbon tax, which represents one weapon against climate change, though not the only one. (I expect this would be a regressive tax, but there are ways to fix that, though at considerable cost in terms of net proceeds.) There is also a long-standing interest in “land value taxation” (LVT), going back to Henry George in the nineteenth century. I’m in favor of a land value tax, but would reserve it for state and local governments. There is also the option of a tax on stock market transactions. The estate tax, which has been substantially hollowed out over the years, could be rebuilt. Common property resources , such as the broadcast spectrum, departure and landing slots at airports, and forestry resources, could be exploited more for revenue.

#### Contention 2 is Health Care

#### Health care strikes cause millions of deaths from a lack of treatment in developing countries – poor people have no alternatives to public doctors.

**Aacharya and Varghese 16** [Ramesh P Aacharya, Department of Emergency and General Practice, Tribhuvan University Teaching Hospital, Institute of Medicine, and Sibichan Varghese, Department of Higher Secondary Education, Omanoor P.O. Malappuram, 2016, “Medical Doctors’ Strike: An Ethical Overview with Reference to the Indian Context,” Journal of Clinical Research & Bioethics, https://www.longdom.org/open-access/medical-doctors-strike-an-ethical-overview-with-reference-to-the-indiancontext-2155-9627-1000272.pdf]/Kankee

\*the original article is badly formatted when copying to MS Word, replacing “ff” with a special character and missing the capital “T” at the start of sentences – try OCR software or manual corrections if you want to fix it. Find and replace didn’t work

Health is a very important human value and hence health care is a paramount social good. In this context doctors have more responsibility on health of every people [3]. In many countries health care workers including doctors are unsatisfied with factors like payments and with non-monetary aspects such as healthcare policy issues, security and safety issues, better working conditions and hospital’s physical and administrative infrastructure [4-12]. Doctors argue that they are compelled to action to make their needs or demands met, and that strikes may be chosen as an ultimate choice of action. Such collective actions by practicing doctors are occurring with increasing frequency worldwide [13-15]. In 2006, Frizelle pointed out that in the past two decades there has been strikes by medical doctors in many countries including Australia, Belgium, Canada, Chile, Finland, France, Germany, Ghana, India, Ireland, Israel, Italy, Korea, Malta, New Zealand, Peru, Serbia, Spain, Sri Lanka, Romania, USA, UK, Zambia and Zimbabwe [14]. Many of these strikes have been **harmful** to patients as strikes reduce patient’s access to care by **eliminating** or **delaying** **necessary care**, and may, at times **interfere** with the continuity of such care [16,17]. A doctors’ strike, regardless of the reason for it, receives a lot of media attention and meets a great deal of criticism and resistance from the general public as well as within the healthcare profession [18,19]. In fact, it arouses intense debate on the ethical justification of medical professionals failing to prioritise human life and their needs, and to find less harmful ways of negotiating their own needs without harming patients [20-22]. Many empirical **studies** and reviews on strikes indicate that in many instances, medical services are **badly affected** by doctors’ strikes [7,15]. The objections against medical strikes range from causing harm to patients, deterioration of physician-patient relationship to decrease of public’s respect for the medical profession [23]. In the recent past, a number of such strikes have been reported from many developing countries including India [4-7,10,24]. The **impact** of such strikes is **very destructive** in developing countries like India where medical insurance and health care systems are **very poor** and substandard. Pandya pointed out that “in such a (strike) situation, the **paralysis** of health care centres by striking doctors runs contrary to the raison d'être of the profession. It also violates the first dictum of medicine - Primum, non nocere” [25]. Although doctors usually put forward reasons to justify their strikes, such strikes need close ethical scrutiny. 6ignificantl\, striking doctors may feel psychological distress and ethical conflict regarding the consequences and impact of their strikes on patients [26]. In such a complex situation, various ethical dilemmas arise, like the legitimacy of doctors’ strikes while patients are harmed [18], which further questions whether a medical doctor has autonomy to engage in what he/she feels to be his/her right. In this context our question is whether doctors’ strikes can be ethically legitimate, especially in the Indian scenario? Do they have the right to strikes or work slowdowns, even if they have a genuine reason, which may put the lives of defenceless patients at serious danger? How can doctors genuinely press for their demands without making untoward eوٴects to human life? Нerefore, in this article we would like to discuss doctors’ strikes and its ethical reflection with special reference to India. Нis ethical debate is literature based for which various databases and online sources including PubMed, Web of Science, Google Scholar, Philosophers index etc. were used. Most of the full texts were accessed through Health Internetwork Access to Research Initiative (HINARI) currently named as HINARI Access to Research in Health Programme. Нe objective of this work is to study and describe reasons, modalities and impacts of the doctors’ strikes in India. Further, we try to develop an ethical reflection on doctors’ strikes and to evaluate the doctors’ strikes in India using these ethical reflections. Discussion 1. НH Indian situation with doctors’ strikes In India, strikes of junior as well as senior doctors have been more frequent in recent times which cause harm in diوٴerent dimensions of a patient’s life giving rise to ethical debates [21,22,27,28]. 1a. Reasons for doctors’ strike in India: Considering inadequate Indian public health care system, doctors argue that there are good reasons for carrying out strikes. Нe\ also argue that they deploy such activities when situations are hopeless and helpless, especially when dissatisfaction has become substantially worse. Нe major reasons can be categorised as follows: Low wages: Нe main discontent for majority of doctors relates to a ‘fair wage’ [29]. Нe ‘stipend’ given to resident doctors are very low and they need to work increasingly longer hours and thus junior doctors are exploited by the administration bypassing all labour laws in the name of training. For this reason junior or resident doctors are leading groups to strike all over the world including India. Most of the senior doctors also receive a relatively low salary compared to their time at work, risks and expertise. Failure to fulfil their expectations has contributed to a ‘brain drain’ to the rich and developed countries. Lack of security and safety at work places: Another reason for doctor’s strike is increasing incidents of attacks on doctors [6,7], by relatives of certain unfortunate patients who lost their lives during the course of treatment. Such incidents increase the lack of security and safety in their working environments. Health care policy issues: Another main reason for doctors’ strikes is related with health care policy issues adopted by central or state governments [4,5,10,24], which hamper the opportunity of a majority of talented and committed doctors to further their academic or professional and financial advancement. Upgrading of institutional capacity: A number of strikes were also reported for better working conditions and for hospital infrastructure development [6,7]. Нe infrastructures in hospitals including professional resources are inadequate to accommodate the needs of all patients seeking for public hospital services. Нe number of medical staوٴ is lower in every public hospital than is required. In many hospitals, many posts for medical staوٴ remain vacant, and the attempts to get new recruits are inadequate and ineوٴective. Despite the fact that medical education infrastructure has grown rapidly during the last decade enrolling 46,456 medical students in 2014 [30] which is 64% increment compared to 2005, the doctor-patient ratio is unsatisfactory with one government doctor for every 11,528 people [31]. Нerefore, overcrowded public hospitals are very common in India, putting more pressure on the shoulders of public hospital doctors. 1b. Modes of Strike: Unlike what workers oіen do in other strikes, most striking doctors do not begin by sudden abandoning of patients in critical conditions [32]. Rather, the usual course is starting from simple work slow-down and then, gradual increase in intensity to strong actions. Initially, they may stop indoor admissions, not attend medical boards meetings. Later, they may deny services to out-patients and also exclude surgeries. However, in most cases, emergency departments are attended by some doctors during the strike. Most of such strikes last for one day to a few weeks, and the modes of striking diوٴer from one situation to other. Doctors conduct demonstration [6], sit-in, absenteeism and some of them even undergo hunger strikes [5,29,33]. 1c. Impact of doctors’ strikes: Нe impact of such strikes varies depending on a number of factors such as the duration, cases under treatment and mode of strike [2]. Most patients who come from poor backgrounds and seek for free healthcare, they are **harmed greatly** because they have neither medical insurance nor social security insurance. According to United Nation's Millennium Development Goal (MGD) programme **21 percent** out of India's population of **1.29** **billion** are living below the **poverty line** [34]. Further, in India, only less than 10 per cent of people have comprehensive health insurance coverage. This worsens their poor condition ending in sometimes **very fatal** results because they cannot financially afford to go to private hospitals. Thus outcomes of physicians’ strikes are likely to affect patients and their vulnerability to illness makes patients relatively **powerless** in relationship to the health care system, and influencing patients’ attitudes (of **trust**) towards medical doctors [1,26,35]. In India, there is a system of employing part time or alternative service especially doctors from army during periods of strike. Нe relatively small number of such part-time and/or full-time consultants in most departments is insuٹcient in comparison to the patients’ load of those who are seriously ill requiring hospital care. According to Pandya “…. If doctors in such hospitals go on strike, the **only option** open to these patients is to turn their faces to the wall, sicken further, and, in some instances, **die**. These are compounded, **avoidable tragedies**, all the more terrible as they follow **no fault of their**” [25]. Нis statement clearly illustrates the depth of the consequences of doctors’ strikes in India, which, in concluding this section, brings us back to our former question of whether it is ethically justifiable for doctors to demand to strike. Нe professional virtues behind such strikes raise moral and ethical questions. 2. Doctors’ strike: a general ethical reflection

**And, medical strikes increased mortality for children by 75% and result in preventable deaths for the poor on a massive scale. There was no corresponding change to the system, only attempts to deal with the aftermath.**

**Waithaka et al., ‘20** [Dennis Waithaka is currently doing a Postgraduate Diploma in Research Methodology at KEMRI-Wellcome Trust, Published: 2/10/20, “Prolonged health worker strikes in Kenya- perspectives and experiences of frontline health managers and local communities in Kilifi County” International Journal for Equity in Health, https://link.springer.com/article/10.1186/s12939-020-1131-y ] /Triumph Debate

**Beyond impoverishment, interviewees talked in dramatic terms about negative health-outcomes linked to the strikes, including deaths, with the poor again being the worst affected. A recent analysis of the effects of six previous nation-wide Kenyan strikes on mortality data in Kilifi County (before the 100 days doctors and the 150 days nurses strike) found a 75% increase in mortality among children aged 12–59months during the strike period, but no change in overall mortality** [24]. The authors noted that the lack of change in overall mortality could have been because the strikes between 2010 and 2016 were relatively short, with only one lasting for more than a month (42 days). **Evidence from other settings suggests that the effects of strikes on health outcomes are increased where emergency services are not available or the affected populations are not able to access viable (available and affordable) alternate healthcare services** [1, 3, 19, 67, 68]. **In Kenya, the Irimu et al (2018) study reviewing admissions in 13 public hospitals during the 2017 doctors’ and nurses strikes noted that ‘preventable deaths likely occurred on a massive scale’, particularly for the poor** [27]. We identified similar perceptions in our study, but this may be in contrast with the more modest effects reported for prior strikes [24] . **Given that the Kenyan public health system has faced a series of shocks and stressors over the decades, additional research that can provide more detailed data on the impact of the prolonged strikes on mortality over time is important. An ‘everyday resilience’ lens is relevant for analyzing the strategies adopted by managers in response to strikes, and for considering the impact of the prolonged strikes on the Kenyan health system. Everyday resilience can be defined as the ability of the system to maintain positive adjustment in the context of chronic shocks and stressors in ways that allow the organization to emerge from those conditions strengthened and more resourceful** [43]. Whether everyday resilience is observed and built in the face of chronic and acute stressors depends on the nature of the strategies enacted by health system actors, and the capacities that they can draw upon. **Absorptive strategies buffer the system from shocks and return the system to its state with little or no change in structure; adaptive strategies result in some limited adjustments in the system structure or processes; while transformative strategies result in significant functional or structural changes** [43, 69]. During the nurses’ strike in Kenya, we observed that middle level managers enacted a range of absorptive strategies in their efforts to keep services open, including mobilizing financial, infrastructural and human resources to support continuity of some essential services. **Adaptive strategies included some reorganization of staff and services offered, but more significant functional or structural changes - transformative strategies - were not observed during the strike. Across all the strategies observed, managers drew on their social networks and alliances to persuade and negotiate with various actors across the public health system to assist. They also demonstrated creativity in ways of working with others such as the local private facilities and NGOs. To keep key services running, managers drew on a long history of working together and coping with diverse everyday stressors in health service delivery** [28, 41, 43]. Their relationships – or the ‘intangible resources’ they were able to draw upon were sometimes invaluable in helping them cope with the shock of the strike. However, there was little to suggest that the broader system was undergoing positive adjustment to minimise the likelihood of future strikes or build preparedness in the event of any such strikes. Thus, there is little evidence that everyday resilience was being built over the course of the strike. Indeed, tensions between health system actors, including conflicts between striking and non-striking nurses (as also observed in South Africa [7], may have lasting negative implications for health system preparedness for and prevention of strikes. **Our study did not include views from private facility health managers, but private facilities were frequently mentioned by community members and health managers as places where the public sought alternative care. A potential future research question might therefore be to examine if and how private providers can contribute to building resilience capacities that the health system can draw on in response to future strikes.**

#### Contention 3 is Military Readiness

#### Soldiers in the military are workers. Allowing military unions to strike would wreck civilian military relations and US hegemony

**Caforio 18** [Giuseppe Caforio, Brigadier General with degrees in law, political science, and strategic studies (FYI, the author died ~2015, but this was republished in 2018 in an anthology book), 5-20-2018, "Unionisation of the Military: Representation of the Interests of Military Personnel," SpringerLink, https://link.springer.com/chapter/10.1007/978-3-319-71602-2\_19]/Kankee

THE OPPOSITION TO UNIONIZATION OF THE ARMED FORCES But if a convergence between the military establishment and civil society is in progress and has brought the two areas of life and work much closer together, why is there a unionization issue for the armed forces? Why is there opposition to a collective bargaining system for military personnel? The fundamental reason must be sought in the specificity of the military, which is summarized thusly by David R. Segal: Because of its unique social function—the legitimate management of violence—the military requires of its personnel a degree of commitment that differs from that required by other modern organizations. Military personnel, unlike their civilian counterparts, enter into a contract of **unlimited liability** with their employer. They cannot unilaterally terminate their employment any time they wish. They are subject to moving and working in any environment where the service decides they are needed. They are required to place the needs of service above the needs of their families, and must frequently endure long periods of separation. They are often called upon to work more than an eight-hour day, for which they receive no additional compensation. And in time of war, they must face prolonged danger, and may even forfeit their lives. Obviously, the man on **the firing line** **is** required to make a commitment of a **different** order **from** that made by the worker on **the assembly line**. (D. Segal and Kramer, 1977, p. 28). Bernhard Boene, in a study devoted to a different research topic (Boene, 1990), is both precise and efficacious in differentiating military "work" from civilian work. Military specificity, writes Boene, does not lie only in the area of the risks to which one supposes the combatant is exposed, but also in the limits of application of common rationality in combat and in the situation of habitual transgression of social norms that it entails. This implies a particular type of socialization. Notwithstanding partial analogies, according to Boene, civil emergencies belong to a different reality than military ones do. An officer, in particular, is not an ordinary civil servant: he must respond to a "call," consisting of a particular interest in military things, dedication to the common welfare, acceptance of risking his life, and submission to a series of obligations that are peculiar to the military profession. SOME THEORETICAL POSITIONS ON THE ISSUE Discussing a sample survey, David Segal observes that in the United States, in the absence of a union for military personnel, there is a considerable "misfit" between soldiers' perception of the characteristics of their role and the preferred characteristics, while in an analogous sample of civilian manpower this misfit is much smaller. In examining the attempted remedies, Segal states: "Any change to be achieved through organizational interventions, however, is likely to be incremental, and not to resolve the discrepancy between the characteristics that military personnel would like in their jobs and the characteristics that they perceived their jobs to have" (D. Segal and Kramer, 1977, p. 46). According to Segal, unionization can solve this problem, but it presents two dangers that must be carefully weighed: the first is that it tends to extend its influence also to aspects of management and direction of the military apparatus; the second is that it involves a politicisation of the personnel. Gwyn Harries Jenkins examines the consequences that unionisation would have on the operational efficiency of the armed forces and identifies three fundamental ones: 1. The creation of a dual authority structure: Since there has been a change in the basis of authority and discipline in the military establishment and a shift from authoritarian domination to greater reliance on manipulation, persuasion and group consensus, unionization extends the boundaries of these changes: it brings into armed forces the full effects of the organizational revolution which pervades contemporary society, creating a **dual authority** structure while modifying the traditional basis of **compliance**. (H. Jenkins, 1977, p. 70) 2. A much greater resemblance of the style of military command to that of civilian management. The new tasks and the introduction of unionization would require commanders to possess skills and orientations more and more like those of civilian managers. 3. An abdication by the officer of his traditional image. Indeed, if the officer "wishes to retain his self-image and ideas of honor, then the introduction of trade unions into the military creates a conflict situation with **substantial dysfunctional consequences**" (H.Jenkins, 1977, p. 71). Harries Jenkins concludes, however, by affirming that, as a radical criticism of the existing military system, "the unionization of the armed forces can only result in an improvement to an otherwise defective situation" (H. Jenkins, 1977, p. 69). According to William Taylor and Roger Arango (Taylor et al., 1977b), many reasons offered in the United States for or against the unionization of military personnel appear to be rhetorical and not sufficiently investigated. Those who take a negative critical stance, for example, contend that unionization would lead to a **breakdown in discipline**; **threaten the chain of command**; and, especially, **undermine** the military's **ability** to carry out its assigned mission. Through a concrete field analysis, these authors believe they can shed light on the advantages and disadvantages of this process. Among the advantages are the acquisition of a greater sense of individual security, a valorization of the dignity of individuals, improved social communication, and greater competitiveness with other occupations and professions in recruiting personnel. The real **drawbacks** would essentially be reduced to two: a risk of **divisiveness** within units, due to acquired **strife** between personnel categories; and an increase in **personnel costs**. Carlo Jean (Jean, 1981) states that in itself, the creation of unions would inevitably produce increased **confrontation**; without it, the union representatives would have neither prestige nor **credibility**. He does not believe, however, that the biggest drawback that would derive from it would be that of undermining the internal cohesiveness of the armed forces and their operational capacity. According to this author military leaders would align themselves with the union's demands out of necessity to avoid internal breakup. An unacceptable corporative force would be produced that sooner or later would inevitably oppose it to the political power. The danger that a union of military personnel involves for civil society is, in his opinion, much greater than its negative implications on the efficiency of the military itself. Along the same line is the fear expressed by Sen. Thurmond (reported by David Cortright, cited essay) that unionization might **reinforce** the military **establishment** and increase its **influence** over society at large, decreasing the capacity for political control. This issue had already been treated by Cortright in another essay (Cortright and Thurmond, 1977b), where on the one hand he argued that unionization in the armed forces would help to prevent any form of separateness from civil society while noting on the other that little attention was given to the possibility that unionization substantially strengthens the military's ability to **wield** **influence**. Thurmond, again, judges the European experience negatively and asks himself how unionized troops would respond in battle. However, to remain faithful to his position, Thurmond conceives the armed forces as a separate body from civil society, argues that military personnel are not comparable to other labor force categories, and advances the fear that union representation of the interests of military personnel would bring the defence budget to unacceptable levels. Of the countries included in our study, unions for military personnel exist in Denmark, Sweden, Norway, Finland, Germany, Switzerland, Austria, Belgium, and The Netherlands. Unionization is prohibited in England, the United States, Canada, France, Portugal, Turkey, and Greece. Strikes are allowed only in Austria and Sweden. ANALYSIS OF HISTORICAL EXPERIENCES THROUGH THE THOUGHT OF VARIOUS AUTHORS

#### Absent U.S. hegemony, the impact is extinction

**Barnett 11**

**(Thomas P.M., Former Senior Strategic Researcher and Professor in the Warfare Analysis & Research Department, Center for Naval Warfare Studies, U.S. Naval War College American military geostrategist and Chief Analyst at Wikistrat., worked as the Assistant for Strategic Futures in the Office of Force Transformation in the Department of Defense, “The New Rules: Leadership Fatigue Puts U.S., and Globalization, at Crossroads,”)**

Events in Libya are a further reminder for Americans that we stand at a crossroads in our continuing evolution as the world's sole full-service superpower. Unfortunately**,** we are increasingly seeking change without cost, and shirking from risk because we are tired of the responsibility. We don't know who we are anymore, and our president is a big part of that problem. Instead of leading us, he explains to us. Barack Obama would have us believe that he is practicing strategic patience. But many experts and ordinary citizens alike have concluded that he is actually beset by strategic incoherence -- in effect, a man overmatched by the job. It is worth first examining the larger picture: We live in a time of arguably the greatest structural change in the global order yet endured, with this historical moment's most amazing feature being its relative and absolute lack of mass violence. That is something to consider when Americans contemplate military intervention in Libya, because if we do take the step to prevent larger-scale killing by engaging in some killing of our own, we will not be adding to some fantastically imagined global death count stemming from the ongoing "megalomania" and "evil" of American "empire." We'll be engaging in the same sort of system-administering activity that has marked our stunningly successful stewardship of global order since World War II. Let me be more blunt: As the guardian of globalization, the U.S. military has been the greatest force for peace the world has ever known. Had America been removed from the global dynamics that governed the 20th century, the mass murder never would have ended. Indeed, it's entirely conceivable there would now be no identifiable human civilization left, once nuclear weapons entered the killing equation. But the world did not keep sliding down that path of perpetual war. Instead, America stepped up and changed everything by ushering in our now-perpetual great-power peace. We introduced the international liberal trade order known as globalization and played loyal Leviathan over its spread. What resulted was the collapse of empires, an explosion of democracy, the persistent spread of human rights, the liberation of women, the doubling of life expectancy, a roughly 10-fold increase in adjusted global GDP and a profound and persistent reduction in battle deaths from state-based conflicts. That is what American "hubris" actually delivered. Please remember that the next time some TV pundit sells you the image of "unbridled" American military power as the cause of global disorder instead of its cure. With self-deprecation bordering on self-loathing, we now imagine a post-American world that is anything but. Just watch who scatters and who steps up as the Facebook revolutions erupt across the Arab world. While we might imagine ourselves the status quo power, we remain the world's most vigorously revisionist force. As for the sheer "evil" that is our military-industrial complex, again, let's examine what the world looked like before that establishment reared its ugly head. The last great period of global structural change was the first half of the 20th century, a period that saw a death toll of about 100 million across two world wars. That comes to an average of 2 million deaths a year in a world of approximately 2 billion souls. Today, with far more comprehensive worldwide reporting, researchers report an average of less than 100,000 battle deaths annually in a world fast approaching 7 billion people. Though admittedly crude, these calculations suggest a 90 percent absolute drop and a 99 percent relative drop in deaths due to war.We are clearly headed for a world order characterized by multipolarity, something the American-birthed system was designed to both encourage and accommodate. But given how things turned out the last time we collectively faced such a fluid structure, we would do well to keep U.S. power, in all of its forms, deeply embedded in the geometry to come. To continue the historical survey, after salvaging Western Europe from its half-century of civil war, the U.S. emerged as the progenitor of a new, far more just form of globalization -- one based on actual free trade rather than colonialism. America then successfully replicated globalization further in East Asia over the second half of the 20th century, setting the stage for the Pacific Century now unfolding.

#### Now to my opponent’s case…

#### Prefer my value <explain why>

#### Also, prefer my criterion <explain why>

#### On to their 1st contention <make some arguments>

#### On to their 2nd contention <make some arguments>

#### <Keep attacking their contentions if they have more>