Framework

I negate.

I value consequentialism. The University of Texas ’17 explains,

University of Texas. "Consequentialism - Ethics Unwrapped." Ethics Unwrapped. University of Texas. 2017. Web. 25 Oct. 2017. http://ethicsunwrapped.utexas.edu/glossary/consequentialism

“Consequentialism is an ethical theory that judges whether or not something is right by what its consequences are. For instance, most people would agree that lying is wrong. But if telling a lie would help save a person’s life, consequentialism says it’s the right thing to do.”

Moral rights and wrongs are based on consequences – proves Consequentialism comes first. Johnson ‘85

Johnson, 85 (Conrad D. Johnson, 'The Authority of the Moral Agent', Journal of Philosophy 82, No 8 (August 1985), pp. 391)

If we follow the usual deontological conception, there are also well-known difficulties. If it is simply wrong to kill the innocent, the wrongness must in some way be connected to the consequences. That an innocent person is killed must be a consequence that has some important bearing on the wrongness of the action; else why be so concerned about the killing of an innocent? Further, if it is wrong in certain cases for the agent to weigh the consequences in deciding whether to kill or to break a promise, it is hard to deny that this has some connection to the consequences. Following one line of thought, it is consequentialist considerations of mistrust that stand behind such restrictions on what the agent may take into account.3 But then again it is hard to deal with that rare case in which the agent can truly claim that his judgement about the consequences is accurate, or, in that

Thus, the value criterion is minimizing harm.

Contention One: US Hegemony

Reduction in IPP allows China to leapfrog over the US in biopharma Lawder ‘21

[Lawder,Andrea, David. “U.S. Wants COVID Vaccine Patent Waiver to Benefit World, Not Boost China Biotech.” Reuters, Reuters, 8 May 2021, www.reuters.com/world/china/us-wants-covid-vaccine-patent-waiver-benefit-world-not-boost-china-biotech-2021-05-08/.] ZW Accessed 12 July 2021.

May 8 (Reuters) - The Biden administration is examining ways to ensure that a waiver of COVID-19 vaccine patents to aid poor countries will not hand sensitive U.S. biopharmaceutical technology to China and Russia, responding to a chorus of concerns, U.S. and industry officials say. President Joe Biden on Wednesday **backed the U.S. entering negotiations** at the World Trade Organization **for the waiver of intellectual property rights as a means to boost vaccine supplies** by allowing poorer countries to make their own. So far, vaccines have gone overwhelmingly to richer nations, which scooped up contracts for them earlier this year. COVID-19 infection rates in wealthy countries have dropped as vaccination rates increased this year, but infections are still rising in 36 countries, with India’s daily cases skyrocketing to nearly 400,000 a day. Western pharmaceutical companies, many of which have received government support to develop vaccines, strongly oppose the transfer of intellectual property to make them. They say poorer countries will be slow to set up manufacturing capacity and compete for scarce supplies, hitting production. Albert Bourla, CEO of Pfizer Inc, said on Friday that the proposed waiver would disrupt progress made so far in boosting vaccine supplies. “It will unleash a scramble for the critical inputs we require in order to make a safe and effective vaccine. Entities with little or no experience in manufacturing vaccines are likely to chase the very raw materials we require to scale our production, putting the safety and security of all at risk.” Many companies and now some U.S.

officials fear the move **would allow China to leapfrog years of research and erode the U.S. advantage in biopharma**ceuticals. A senior Biden administration official said that while the priority is saving lives, the United States "would want to examine the effect of a waiver on China and Russia before it went into effect to ensure that it's fit for purpose." A question and answer document produced by the administration and shared with industry representatives also acknowledges concerns that **intellectual property sharing could damage the United State's competitive advantage over China**, an industry source familiar with the discussions told Reuters. The contents of the document read to a Reuters reporter by an industry representative said the Biden administration believes it can address those concerns through the WTO negotiations, but did not specify how. The source added that some agencies in the Biden administration have conflicting views of how to address the concerns in negotiations that are expected to take months. Spokespersons at the White House and U.S. Trade Representative's office had no immediate comment on the matter. Pfizer and Moderna spokespersons did not respond to requests for comment on technology transfer concerns, while a Novavax spokesperson referred Reuters to the company's statement opposing the waiver on Friday, which said proposals to **"weaken intellectual property protections would not achieve equitable vaccine access."** Enforcing limits on use of the technology could be very difficult, once handed over, some analysts say. Messenger RNA, used in COVID-19 vaccines by leaders Pfizer/BioNTech and Moderna, is a newly developed biotechnology that holds promise for treatments far beyond vaccines. **China** and Russia **have their own vaccines that do not use this biotech**nology. "It took Pfizer and Moderna years and years of research to develop these vaccines," said Gary Locke a former U.S. ambassador to China and U.S. Commerce Secretary. "China, Russia, India, South Africa and others want to gain access. **Their intention is to** get the underlying know-how so they can use it to **develop further vaccines**," Locke said. China's Fosun Pharma has struck a deal with BioNTech on COVID-19 vaccine product development, which would potentially give it access to some of the technology. China has high ambitions for its pharma industry and already is developing its own mRNA vaccine. Patents themselves are publicly accessible, noted James Pooley, intellectual property attorney and former deputy director general of the United Nations' World Intellectual Property Organization. But trade secrets developed by Pfizer/BioNTech, Moderna and others, "cook books" of manufacturing processes such as temperature and growing conditions, have not been made public.

US HEGE KEY TO PRODUCE FUTURE MEDS AND MAINTAIN INNOVATION -Lancu ‘21

Andrei Iancu. “Biden Is Trying to Undermine America’s World-Leading IP Protections.” *The Washington Times*, The Washington Times, 11 Aug. 2021, www.washingtontimes.com/news/2021/aug/11/biden-is-trying-to-undermine-americas-world-leadin/. Accessed 15 Sept. 2021.

In May of this year, the Biden administration announced its **support for a proposal at the World Trade Organization that would allow other countries to seize American intellectual property on COVID-19 technologies, including vaccines.** On cue, those countries promptly modified their ask. Whereas the original proposal called for the waiver to last a limited number of years, the new proposal makes **the waiver [is] effectively permanent.** And why not? If America is willing to hand over its crown jewels, it might as well demand to keep them forever. As a former Director of the U.S. Patent and Trademark Office, I know that **America’s** world-leading **IP protections laid the foundation for our economic success** and technological prowess. And as an immigrant from a communist nation, I know all too well how disrespect for private property rights undermines innovation and saps economic vitality. Since the Founding Fathers, Americans have understood that private property extends well beyond land, buildings, factories, and machines. The real source of America’s power and promise are ideas. Walls, locks, or guards can protect physical property, but the implementation of ideas — new songs, artificial intelligence, or medicines — requires special protections and trust in the rule of law. That’s why the Founders included intellectual property rights in the Constitution — in the form of an “exclusive right” for authors and inventors — to “promote the progress of science and useful arts.” Indeed, this is the only time the word “right” appears in the Constitution (amendments aside). The Founders knew that only the rule of law, and our respect for it, can protect and enable the development of these ideas. Yet, President Biden undermined that respect by signaling his support for the appropriation of America’s intangible assets. In doing so, he jeopardized America’s uniquely successful intellectual property system. The history of our nation — indeed, much of the history of the world — since 1789 has been the revolution in knowledge led by American ingenuity in agriculture, industry, medicine, and information technology. Progress like this does not just happen. Indeed, it didn’t, for the millennia of the entire human history until our nation’s founding a couple of hundred years ago! **It’s not a coincidence that the last two centuries of uninterrupted, IP-driven innovation — up to**

and including the miraculous creation in a record time of the Covid vaccines themselves — began when one nation finally committed itself to protect intangible assets as much as physical property. The reason is simple: knowledge is cumulative. Every new discovery becomes the basis for new research. The revolutionary mRNA technology behind Pfizer and Moderna's vaccines is, in fact, an evolutionary iteration of previous — patented — breakthroughs over the last two decades.Sen. Bernie Sanders, among others, turns up his nose at all this science, history, and progress. Like President Biden, he supports waiving vaccine patents because, he says, "We need a people's vaccine, not a profit vaccine." Ignore for a moment that many companies have agreed to sell their vaccines at non-profit prices for the duration of the pandemic, or that the vaccines are completely free for all patients at pharmacies nationwide, or that the federal government pays $19.50 per Pfizer dose, about $15 per Moderna dose, and $10 for the Johnson & Johnson shot — less than the cost of a pizza for medicines that are saving millions of lives and restoring our economy. Instead, focus on the fact that **intellectual property protections enabled the creation of "people's vaccines" in the first place. The choice isn't between cheap vaccines and even cheaper vaccines — it's between shots that are protected by strong IP laws or no shots at all.** The same goes for every industry. If President Biden doesn't protect the IP behind new vaccines, investors and inventors will ask, what other technologies are next? Will similar takings be imposed on climate change technologies, for example? Food processing? Essential semiconductor technologies? **Companies will scale back investments in medical devices,** microchips, energy, and everything in between **if they think the U.S. Government might waive IP protection after the fact so that others may copy their inventions with impunity.** Of immediate concern is the need for more treatments for Covid-19, especially as the pandemic keeps raging with new variants. Knowing that their IP may be appropriated as soon as it is developed, private industry — especially start-ups and smaller businesses that depend heavily on outside capital — may not invest the resources necessary to develop these new technologies that are desperately needed right now.Here's the reality: **remove patents and other forms of intellectual property, and private-sector investment in innovation dries up.** The government will then try to step in to fill the gap, inefficiently as always. Like the taking of factories to nationalize industry, this taking of intellectual property is effectively the nationalization of our innovation economy. The result will be the same as in every other socialist regime that nationalized its industries: the kind of poverty, corruption, and misery that my family escaped from decades ago. American innovation has cured diseases, enabled human flight, led to the development of computers, and made our nation the envy of the world. **Waiving intellectual property rights could forfeit it all.**

US Hegemony prevents war

Zhang and Shi 2011

[a researcher at the Carnegie Endowment for International Peace, Washington, D.C. ** Columbia University. She also serves as an independent consultant for the Eurasia Group and a consultant for the World Bank in Washington, D.C. "America's decline: A harbinger of conflict and rivalry"]http://www.eastasiaforum.org/2011/01/22/americas-decline-a-harbinger-of-conflict-and-rivalry/)

This does not necessarily mean that the US is in systemic decline, but it encompasses a trend that appears to be negative and perhaps alarming. Although the US still possesses incomparable military prowess and its economy remains the world's largest, the once seemingly indomitable chasm that separated America from anyone else is narrowing. Thus, the global distribution of power is shifting, and the inevitable result will be a world that is less peaceful, liberal and prosperous, burdened by a dearth of effective conflict regulation. Over the past two decades, no other state has had the ability to seriously challenge the US military. Under these circumstances, motivated by both opportunity and fear, many **actors have bandwagoned with US hegemony** and accepted a subordinate role. Canada, most of Western Europe, India, Japan, South Korea, Australia, Singapore and the Philippines have all joined the US, creating a status quo that has tended **to mute great power conflicts**. However, as the hegemony that drew these powers together withers, so will the pulling power behind the US alliance. The result will be an international order where power is more diffuse, **American interests and influence can be more readily challenged, and conflicts or wars may be harder to avoid**. As history attests, power decline and redistribution result in military confrontation. For example, in the late 19th century America's emergence as a regional power saw it launch its first overseas war of conquest towards Spain. By the turn of the 20th century, accompanying the increase in US power and waning of British power, the American Navy had begun to challenge the notion that Britain 'rules the waves.' Such a notion would eventually see the US attain the status of sole guardians of the Western Hemisphere's security to become the order-creating Leviathan shaping the international system with democracy and rule of law. Defining this US-centred system are three key characteristics: enforcement of property rights, constraints on the actions of powerful individuals and groups and some

degree of equal opportunities for broad segments of society. As a result of such **political stability**, free markets, liberal trade and flexible financial mechanisms have appeared. And, with this, many countries have sought opportunities to enter this system, proliferating **stable and cooperative relations**. However, what will happen to these advances as America's influence declines? Given that America's authority, although sullied at times, has benefited people across much of Latin America, Central and Eastern Europe, the Balkans, as well as parts of Africa and, quite extensively, Asia, the answer to this question could affect global society in a profoundly detrimental way. Public imagination and academia have anticipated that a post-hegemonic world would return to the problems of the 1930s: regional blocs, trade conflicts and **strategic rivalry**. Furthermore, multilateral institutions such as the IMF, the World Bank or the WTO might give way to regional organisations. For example, Europe and East Asia would each step forward to fill the vacuum left by Washington's withering leadership to pursue their own visions of regional political and economic orders. **Free markets** would become more politicised — and, well, less free — and major powers would compete for **supremacy**. Additionally, such power plays have **historically possessed a zero-sum element**. In the late 1960s and 1970s, US economic power declined relative to the rise of the Japanese and Western European economies, with the US dollar also becoming less attractive. And, **as American power eroded, so did international regimes** (such as the **Bretton Woods System** in 1973). **A world without American hegemony is one where great power wars re-emerge,** the liberal international system is supplanted by an authoritarian one, and trade protectionism devolves into restrictive, anti-globalisation barriers. This, at least, is one possibility we can forecast in a future that will inevitably be devoid of unrivalled US primacy.

Contention Two: Innovation

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

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

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

TRIPS IP rights are key incentive for innovation

James **Bacchus 20**, adjunct scholar at CATO, "An Unnecessary Proposal: A WTO Waiver of Intellectual Property Rights for COVID-19 Vaccines," December 16th, 2020, https://www.cato.org/free-trade-bulletin/unnecessary-proposal-wto-waiver-intellectual-property-rights-covid-19-vaccines#does-novel-virus-present-novel-issues

Technically, IP rights are exceptions to free trade. A long-standing general discussion in the WTO has been about when these exceptions to free trade should be allowed and how far they should be extended. The continuing debate over IP rights in medicines is only the most emotional part of this overall conversation. Because developed countries have, historically, been the principal sources of IP rights, this lengthy WTO dispute has largely been between developed countries trying to uphold IP rights and developing countries trying to limit them. The debate over the discovery and the distribution of vaccines for COVID-19 is but the latest global occasion for this ongoing discussion. The primary justification for granting and protecting **IP rights** is that they are incentives for innovation, which is the main source for long-term economic growth and enhancements in the quality of human life. IP rights spark innovation by "**enabling innovators to capture** enough of the **benefits of their own innovative activity** to justify taking considerable risks."18 The **knowledge from** innovations inspired by **IP rights spills over** to inspire other innovations. The protection of **IP rights promotes** the **diffusion**, domestically and internationally, **of innovative technologies** and new know-how. Historically, the principal factors of production have been land, labor, and capital. In the new pandemic world, perhaps an even more vital factor is the creation of knowledge, which adds enormously to "the wealth of nations." Digital and other economic growth in the 21st century is increasingly ideas-based and knowledge intensive. **Without IP rights** as incentives, **there would be less new knowledge and thus less innovation**. In the short term, undermining private IP rights may accelerate distribution of goods and services—where the novel knowledge that went into making them already exists. But in the long term, undermining private IP rights would eliminate the incentives that inspire innovation, thus preventing the discovery and development of knowledge for new goods and services that the world needs. This widespread dismissal of the link between private IP rights and innovation is perhaps best reflected in the fact that although the United Nations Sustainable Development Goals for 2030 aspire to "foster innovation," they make no mention of IP rights.19

Pharma innovation is key to healthcare and fighting diseases. Reducing profits kills that. Winegarden '16

Wayne Winegarden (Ph.D. is a Sr. Fellow in Business and Economics at the Pacific Research Institute and a Contributing Editor to EconoSTATS.). 7-15-2016. "How To Encourage Pharmaceutical Innovation And Why It Is Important." Forbes. https://www.forbes.com/sites/econostats/2016/07/15/regulating-short-term-volatility-will-harm-pharmaceutical-innovation/

In misplaced attempts to address the problems with the U.S. healthcare industry, many analysts point to specific list price increases on specialty pharmaceutical drugs to claim that high drug prices are driving overall healthcare costs ever higher. Such proclamations misdiagnose the problem with the healthcare industry and risk future innovations that can address pressing healthcare needs. It is true that the average price of medicines grew faster than average over the past two years. **Over these two years, there was also a significant increase in new medicines. In 2015, 73 new brand name drugs were introduced, 43 of which were novel therapies. This followed 74 new brand name drugs being introduced in 2014, 45 of which were novel therapies. While troubling practices by the likes of Martin Shkreli of Turing Pharmaceuticals garnered headlines, it should be expected that higher innovation comes with higher costs. And the average drug price increases accelerated during 2014 and 2015 in concert with the increase in new drugs. It is also clear that many of these new drug innovations, such as Sovaldi and Harvoni, provide immense medical benefits to patients. Patients with hepatitis C** now **have access to a 12-week treatment with a 90% cure rate–prior to these drugs, there was no cure.** Periods of higher than average price increases, followed by periods of lower price increases, should also be expected–similar to our stock price examples, price volatility happens. Perhaps more important, over the longer-run, the cost of pharmaceutical drugs have maintained a stable share of overall healthcare expenditures. Accounting for both in-patient and out-patient pharm

aceutical spending, prescription drugs have been between 13% and 14% of total national health expenditures according to a study by the Altarum Institute. According to the Department of Health & Human Services (HHS), which estimates a slightly higher share of pharmaceutical spending, total drug spending has remained between 14% and 17% of total national health expenditures between 2009 and 2015. Moreover, based on the latest expenditure data from the Centers for Medicare and Medicaid Services data, longer-term prescription drug expenditures are growing similarly to longer-term national healthcare expenditures. Between 2006 and 2015, prescription drug expenditures grew 4.1% per year, compared to 4.5% per year for overall healthcare expenditures. And, despite the surge in prescription drug expenditures over the past two years, forecasts for longer-term spending expect pharmaceutical spending to remain around its historical share of total healthcare spending. For instance, HHS predicts prescription drugs will remain just below 17% of total expenditures through 2018. Accounting for discounts, IMS health projects that price increases will return to their historical average growing between 4% and 7% a year by 2020–around the typical cost projections for overall growth in healthcare costs. In light of these data, price control proposals are particularly troubling. **Pharmaceutical price controls** will **lessen** the **incentives for future drug innovation.** The likelihood that new therapies will be created to address diseases, such as Alzheimer's, cancer and diabetes will significantly diminish. **Pharma**ceutical **price controls will** also **not address the problems plaguing the U.S. healthcare system, therefore the problems of declining care, rising overall healthcare costs, and declining healthcare accessibility will continue unabated. Calls to target pharmaceutical drugs with price controls are misplaced. There are many problems with our current healthcare system that must be addressed. Setting long-term healthcare policies based on short-term price volatility will not effectively address these problem, however. Instead, reforms should start by restructuring the current third party payer system and focus on empowering consumers to enable a higher quality, lower cost healthcare system.**

Decline of medical innovation risks extinction

Sachs 8/17/**14**—Professor of Sustainable Development, Health Policy and Management @ Columbia University [Jeffrey D. Sachs (Director of the Earth Institute @ Columbia University and Special adviser to the United Nations Secretary-General on the Millennium Development Goals) "Important lessons from Ebola outbreak," Business World Online, August 17, 2014, http://tinyurl.com/kjgvyro]

Ebola is the latest of many recent epidemics, also including AIDS, SARS, H1N1 flu, H7N9 flu, and others. AIDS is the deadliest of these killers, claiming nearly 36 million lives since 1981. Of course, even **larger and more sudden epidemics are possible, such as the 1918 influenza** during World War I, **which claimed 50-100 million lives** (far more than the war itself). And, though the 2003 SARS outbreak was contained, causing fewer than 1,000 deaths, the disease was on the verge of deeply disrupting several East Asian economies including China's.There are four crucial facts to understand about Ebola and the other epidemics. First, most emerging infectious diseases are zoonoses, meaning that they start in animal populations, sometimes with a genetic mutation that enables the jump to humans. Ebola may have been transmitted from bats; HIV/AIDS emerged from chimpanzees; SARS most likely came from civets traded in animal markets in southern China; and influenza strains such as H1N1 and H7N9 arose from genetic re-combinations of viruses among wild and farm animals. **New zoonotic diseases are inevitable** as humanity pushes into new ecosystems (such as formerly remote forest regions); the food industry creates more conditions for genetic recombination; and climate change scrambles natural habitats and species interactions.Second, **once a new infectious disease appears, its spread** through airlines, ships, megacities, and trade in animal products **is likely to be extremely rapid**. These epidemic diseases are new markers of globalization, revealing through their chain of death how vulnerable the world has become from the pervasive movement of people and goods.Third, **the poor are the first to suffer and the worst affected**. The rural poor live closest to the infected animals that first transmit the disease. They often hunt and eat bushmeat, leaving them vulnerable to infection. Poor, often illiterate, individuals are generally unaware of how infectious diseases -- especially unfamiliar diseases -- are transmitted, making them much more likely to become infected and to infect others. Moreover, given **poor nutrition and lack of access to basic health services,** their **weaken**ed **immune systems are easily overcome by infections** that better nourished and treated individuals can survive. And "de-medicalized" conditions -- with few if any professional health workers to ensure an appropriate public-health response to an epidemic (such as isolation of infected individuals, tracing of contacts, surveillance, and so forth) -- make initial outbreaks more severe.Finally, **the required** medical responses, including diagnostic tools and effective **medications** and vaccines, inevitably lag behind the emerging diseases. In any event, such tools **must be continually replenished. This requires cutting-edge biotechnology, immunology, and** ultimately **bioengineering to create large-scale industrial responses** (such as millions of doses of vaccines or medicines in the case of large epidemics).

The AIDS crisis, for example, called forth tens of billions of dollars for research and development -- and similarly substantial commitments by the pharmaceutical industry -- to produce lifesaving antiretroviral drugs at global scale. Yet each breakthrough

inevitably leads to the pathogen's mutation, rendering previous treatments less effective. **There is no ultimate victory, only a constant arms race between humanity and disease-causing agents.**

ONTO OPPONENT'S CASE

C1: Inequality

Without changing capacity and technology, reducing IP protection cannot solve—COVID vaccines prove.

Mercurio '21 (Bryan Mercurio; Chinese University of Hong Kong - Faculty of Law, ; 2-12-2021; "Wto Waiver From Intellectual Property Protection For Covid-19 Vaccines And Treatments: A Critical Review (February 12, 2021)"; Virginia Journal Of International Law Online (Forthcoming 2021), Available At Ssrn: Https://Ssrn.Com/Abstract=3789820 Or Http://Dx.Doi.Org/10.2139/Ssrn.3789820"; https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3789820)

Second, **the proposed waiver will** do **not**hing to **address the problem of lack of capacity** or the transfer **of technology** and goodwill. **Pharma**ceutical companies **have not applied for patents in** the **majority of developing countries** – in such countries, **any manufacturer is free to produce and market the vaccine** inside the territory of that country or to export the vaccine to other countries where patents have not been filed.33 **Patents cannot be the problem in** the **countries where no patent** applications **have been filed**, but **the lack of production** in such countries **points to the real problem** – these **countries lack manufacturing capacity** and capability. While **advanced pharma**ceutical companies **will have** the **tech**nology, know-how and readiness to manufacture, store and transport complex vaccine formulations, such factories and logistics exist in only a handful of countries.34 **Regardless of whether an IP waiver is granted**, the **remaining countries will be left without enhanced vaccine access** and still reliant on imported supplies. With **prices for the vaccine already very low**, it is **doubtful that generic suppliers will be able to provide the vaccine at significantly lower prices**. Under such a scenario, the benefit of the waiver would go not to the countries in need but to the generic supplier who would not need to pay the licence fee or royalty to the innovator. Thus, **the waiver would** simply serve to **benefit advanced** generic **manufacturers,** most of which are located in a handful of countries, including China and Brazil as well as (unsurprisingly) India and South Africa. Countries would perhaps be better off obtaining the vaccine from suppliers that have negotiated a voluntary licence from the patent holder, as such licences include provisions for the transfer of technology, know-how and ongoing quality assurance support.

A2 GHI

TRIPS reduces global health inequality

Samir Raheem **Alsoodani 15**, ""The WTO Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) may offered an access to essential pharmaceutical drugs for developing countries," Journal Of the College of law /Al-Nahrain University 2015, Volume 17, Issue 2, Pages 393-410, https://www.iasj.net/iasj/article/109180

To conclude, it is beyond doubt that the TRIPS Agreement and its later, permanent amendment of 2005 attempted in good faith to address an urgent issue faced by many developing countries with regards to accessing essential medicine. To a certain extent in its basic tenets, **it has had a profound and positive effect on the system**, as it has made permanently possible the opportunity for the poorest countries to obtain medications more cheaply through manufacture in developing countries under a compulsory licensing system. Certain positive outcomes arguably include the fact that disputes have been brought under the jurisdiction of one regulatory body, and the least developed Members have found some **redress in the power balance** regarding costs paid to the pharmaceutical industries based in the wealthier, developed countries (even if this redress has only been to the extent of facilitating increased bargaining capability). This can be considered a **triumph from the perspective of universal human rights**.

TRIPS enhances human rights

Samir Raheem **Alsoodani 15**, ""The WTO Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) may offered an access to essential pharmaceutical drugs for developing countries," Journal Of the College of law /Al-Nahrain University 2015, Volume 17, Issue 2, Pages 393-410, https://www.iasj.net/iasj/article/109180

In contrast, Anderson and Wager (2006) believe that the **TRIPS** Agreement provisions **enhanced human rights principles**, because of the many features throughout the TRIPS Agreement, such as the emphasis on the need for a balance between the advantages, the commitments, and the rights for both the users and the producers of the invention. Other examples include **nondiscrimination treatment**, and the stipulation that all disputes must be settled under the WTO system, which **secures the rule of law** governing international trade. The **TRIPS Agreement has favoured the least developed countries** with **distinctive and more lenient treatment**, as these countries have until 2016 to enforce protection of patent rights with regards to undisclosed data relating to pharmaceutical products.

C2: INNOVATION, CROSSIPLY MY CONTENTION 2 To theirs: judge, the last one and a half years have been completely changed the way which our world operates. My opponents most recent evidence is from 2019, which doesn't account for COVID. MY cards are more recent, prefer my evidence.

C3: Insulin: AFF GET's CIRCUMVENTED, NO SOLVENCY

The WTO can't enforce the aff because it has no jurisdiction Lamp 19

[Nicholas; Assistant Professor of Law at Queen's University; "What Just Happened at the WTO? Everything You Need to Know, Brink News," 12/16/19; https://www.brinknews.com/what-just-happened-at-the-wto-everything-you-need-to-know/]

Nicolas Lamp: For the first time **since the establishment of the WTO in 1995, the Appellate Body cannot accept any new appeals, and that has knock-on effects on the whole global trade dispute settlement system. When a member appeals a WTO panel report, it goes to the Appellate Body, but if there is no Appellate Body, it means that that panel report will not become binding and will not attain legal force**.

The absence of the Appellate Body means that **members can now effectively block the dispute settlement proceedings by what has been called appealing panel reports "into the void."**

The WTO panels will continue to function as normal. **When a panel issues a report, it will normally be automatically adopted — unless it is appealed. And so, even though the panel is working, the respondent in a dispute now has the option of blocking the adoption of the panel's report. It can, thereby, shield itself from the legal consequences of a report that finds that the member has acted inconsistently with its WTO obligations.**

The aff may claim to increase supply, but LDCs don't have the infrastructure to distribute medicines anyways. Therefore, even if prices were to go down on insulin, governments wouldn't have the capability to distribute it.

NPR Cookie Consent and Choices (2021). Available at: https://www.npr.org/sections/goatsandsoda/2021/05/05/991684096/they-desperately-need-covid-vaccines-so-why-are-some-countries-throwing-out-dose (Accessed: 29 August 2021).

It seems incredible: At **a time when low-income nations are clamoring for vaccines against COVID-19, at** least three **countries** — Democratic Republic of Congo, Malawi and South Sudan — **are either discarding doses or giving them to other countries.** What's going on? The answer is something of a paradox. On one hand, with the wealthiest countries snapping up vaccines against COVID-19, the poorest ones remain largely shut out — receiving less than 1% of the global supply thus far. And that's not expected to change any time soon, even with the news on Wednesday that the Biden administration will support lifting patent protections on existing vaccines in a bid to increase their production. Yet at the same time, some of these low-income countries are struggling to get even the few doses they have received into people's arms before the vaccines expire Emily Janoch, with the aid group CARE, has been tracking what's happened to the COVID vaccine doses that have been trickling into low- and middle-income countries since February through COVAX (the initiative led by the World Health Organization), as well as, in case of African nations, a similar, but separate purchasing effort by the African Union. Janoch says that while several of the countries, such as Ghana and Rwanda, gave their shots to people almost immediately, quite a number of others are taking a while. "What we found is that **a lot of countries have received doses, but haven't administered them yet, or haven't administered a significant proportion of them yet,"** says Janoch. For instance**, 24 countries, almost all in Africa, report using less than a third of their vaccines to date. Of those, 15 report using less than a fourth.** Officials and aid groups involved in vaccine deployment in these countries point to two main reasons: There hasn't been enough international help to cover the logistical costs of vaccination. And there's been a surge in distrust

in the wake of recent news about extremely rare but potentially deadly side effects from some of the vaccines available to the continent. In Malawi, for example, demand for the vaccine seemed high at first, says Amos Zaindi, CARE's country director. He remembers driving around the capital, Lilongwe, and seeing people waiting in long lines outside the vaccination centers. "In those days when vaccination was at the peak, you could go to the vaccination center and it would take you two to three, even four hours [to get a shot]," he says. Then came the news in early March that several European governments were suspending use of the AstraZeneca vaccine over reports of blood clots in a small number of people. AstraZeneca is the vaccine Malawi is using. Among people there — particularly young, social media-savvy people — the news of Europe's doubts "spread like wildfire," says Zaindi. "You know it's a global village. When information is generated in Europe or in the Americas, it generally takes a matter of seconds [to reach Africa]. Everyone gets it. And that discouraged many of our young people." Seemingly overnight, says Zaindi, the lines outside the vaccination centers in the capital evaporated. Since then, Europe's regulatory agency has advised that AstraZeneca is still safe and effective — and that its benefits far outweigh its risks. Zaindi thinks that's all the more true for Malawi, where AstraZeneca is currently the only option. Yet people in Malawi remain so distrustful, Zaindi says he's having a hard time convincing even his own staffers at CARE to get vaccinated. So far only about 40% have done so. "These are staff that are educated, that are learned," says Zaindi. "But they're still getting all these confusing statements from Europe and the Americas. And it's confusing them in terms of making a decision." Emily Bancroft, CEO of VillageReach, a nonprofit that partners with various African countries including Malawi to help with vaccine delivery logistics, says the **skepticism around the vaccine exacerbated the other big difficulty facing Malawi: limited funding to prepare for the rollout.** Ideally, notes Bancroft, before low-income governments launch vaccination campaigns they lay the groundwork. This includes everything from educating the population to setting up the systems needed to anticipate and track how many doses will be needed among different distribution sites. But that kind of advance preparation was hard to do given the ad hoc nature of vaccine distribution to low-income countries — with doses being distributed in fits and starts and with little clarity on how much Malawi could count on the international community for operational funding. "It's hard to prioritize planning — and to mobilize the resources — when it's not clear what the sources of funding will be," says Bancroft. So this slowed down the rollout. **The upshot of that delay, combined with the hesitancy problem: Malawi's government recently had to destroy 16,000 doses of vaccine that expired before they could be used.** CARE's Zaindi says he was in his office when heard the news from an official at Malawi's ministry of health. "I was like, Oh my God, we have just lost 16,000 lives that could have been saved. It's so painful!" Adding to the drama, the vaccine's manufacturer, Serum Institute of India, announced that the official expiration could actually be safely extended. But Bancroft said their advisory came too late. "Unfortunately health workers had already taken the vaccine out of the cold chain to be destroyed."Still, Malawi has at least managed to use about 60% of its vaccine supply. Even more dire is the situation in **the Democratic Republic of Congo.** Its government**received 1.7 million doses of AstraZeneca in early March,** but held off on using them while waiting for new guidance after the blood clot issue. Ultimately, Congolese authorities determined that it still makes sense to use the vaccine. **But** by that time, **they estimated that it would be logistically impossible to give most of Congo's shots in the few weeks before they were set to expire. Congo's health system**, explains Janoch, **is not a strong one.** "It's not one that has had many long-term, big investments. And it is hard to mobilize this kind of a massive campaign with a completely new population that typically doesn't get vaccinated in such a short time." Congo says it will hand over about three-fourths of its vaccine to other countries. South Sudan, in a similar bind, has announced it will discard 60,000 doses that have already expired. It's worth noting, adds Janoch, that these difficulties have arisen at a stage when African countries have received only a tiny fraction of the vaccines they need. She says it suggests the delays and disruptions could be far worse once African countries can finally obtain more reasonable quantities. The takeaway, says Janoch, is **that wealthy donor countries and organizations need to put a lot more money and effort not only into purchasing vaccines for low-income countries — but into funding the logistical side of vaccine delivery once the doses are on the ground. "About half of that [funding for logistics] needs to go to health care workers — to their salaries, to supporting them, to training them**," adds Janoch, who has authored a report estimating the likely cost. A big problem says Janoch is that those expenses are hard to calculate and were largely left out when the major multilateral organizations involved in the COVAX initiative — including not just the WHO, but UNICEF and GAVI — estimated the operational costs. Instead, when it came to the delivery side, they have mostly focused on raising money for bolstering the cold chain capabilities of poor nations. And to date, even those far more modest targets have barely been funded.