# Delay After Covid CP

## Delay CP

#### Counter plan Text: Just governments should delay allowing a right to strike until the World Health Organization declares the Covid-19 Pandemic is over.

2 advtanges –

1] key to fighting delta variant -> pandemic -> extinction

2] key to strenghting WHO cred -> spills over to UN -> solves US Heg or sum other impact

Covid leads to unionization

### Scenario 1 – Delta Variant

#### The Counterplan K2 containing the Delta Variant – On Strike Nurses leads to unattended patients

Tahir 21  
[Darius Tahir & More, Darius Tahir is an eHealth reporter for POLITICO Pro. Before joining POLITICO, Darius worked for Modern Healthcare (where he covered health care technology) and the Gray Sheet (where he covered medical devices and digital health). Darius graduated from Stanford in 2009 — meaning he absorbed just enough sunshine and tech optimism to develop a fascination. “Walkouts and strikes hit hospitals in pandemic hot spots”, **Dated 10/20/2021**, https://www.politico.com/news/2021/10/20/hospitals-labor-shortage-covid-delta-516303]  
**Hospitals taxed by the pandemic over the last 20 months have a new problem: Labor strife and a wave of resignations have people waiting longer for care**. Months of marathon shifts, an onslaught of verbal and even physical abuse from patients and the public, and perennial complaints over low pay and staffing shortages are stirring unrest at a particularly critical moment in the pandemic. **There have been at least 30 strikes of health care workers so far this year, according to a tracker from Cornell University’s School of Industrial and Labor Relations. More than a half million health care workers quit in August, the last month for which data is available.** That’s the most in a single month in more than 20 years. **The resignations and strikes hit as hospitals are dealing with the Delta variant, an influx of chronically ill patients who postponed care last year and, in many states, bracing for the colder months when Covid cases are expected to rise and flu season grips the nation. The labor issues also come amid a broader staffing crunch that has forced health systems in regions hit hard by the Delta variant to rely evermore on expensive traveling nurses, the National Guard or state officials loosening licensing requirements to expand the pool of possible staff. The frustration is translating into organized walkouts across the country.** Thousands of workers are striking in some of the nation’s largest health systems, from Kaiser Permanente on the west coast to Catholic Health in Buffalo, N.Y. On Monday, 250 nurses in Chicago’s Community First Medical Center voted to go on strike. Multiple employees contacted by POLITICO said health care workers feel like they’ve gone from “heroes to zeroes” in the eyes of the public, making it harder to tolerate the underlying stresses of the job. “It got to the point where seeing signs outside the hospitals — “Heroes Work Here” — appeared a little hollow,” Denise Duncan, president of United Nurses of California/Union of Health Care Professionals, told POLITICO. “It’s almost like it’s been forgotten.” Health care workers who spoke with POLITICO say they had hoped to capitalize on the public goodwill they banked at the outset of the health crisis and seize this moment while demand for their services has never been higher**.** While they acknowledge they may incur public scorn for walking off the job in the middle of the pandemic, they say they have no choice but to exert what leverage they have. Even when they were feted with flyovers and salutes in the depths of the pandemic, they said they never got the protective equipment they needed. Now, on top of being burned out from nearly two years of fighting Covid, they’re being targeted threatened with physical violence. “We’re drowning here,” said Mike Pineda, a senior transport technician at Sutter Delta Medical Center in Antioch, Calif., and a steward for the hospital’s SEIU-UHW union, which recently went on strike, accusing management of understaffing and fostering a difficult work environment. “The wear and tear on everyone got to the point where people became frustrated,” Pineda said. “People would take leaves of absence because [their] body is just burnt out.” **Many staff members in Antioch — and across the country — say worker shortages mean it takes longer to admit people from the emergency room, and an increased risk of infections and accidents as fewer nurses care for more patients.** In a statement, Sutter Health said labor issues were largely avoided across its system, but acknowledged “longstanding staffing issues.” The United Nurses of California/Union of Health Care Professionals last week voted to authorize its 21,000 members to strike at Kaiser Permanente in Southern California over what they say is low pay and benefits particularly for new employees Another 3,400 Kaiser workers in Oregon, members of the Oregon Federation of Nurses and Healthcare Professionals, also voted to strike over similar concerns.Negotiations with management are ongoing. Whether it’s because of low staffing, inadequate pay or workplace conditions, health care employees, more than ever, are looking to wring concessions from management. “From our members, I’ve never heard the word ‘strike’ uttered so many times, whether they’re covered by a contract or not. Whether they’re in negotiations or not,” said Jamie Lucas, the Executive Director of the Wisconsin Federation of Nurses and Health Professionals. “They’re fed up. The reasons have always been there, but there’s a new realization that they have the upper hand.” While the vaccine mandates hospitals recently imposed have triggered some isolated walkouts and strike threats, leaders in the industry say the unrest is mainly fueled by the way the pandemic has exacerbated unacceptable working conditions. “It’s not fair to blame staff shortages on the vaccination requirements,” said President Randi Weingarten with the American Federation of Teachers, which represents tens of thousands of health workers around the country. “The lion’s share of people willingly got their shots. This unrest preceded and predated Covid and it has to do with terrible pay and working conditions.”

#### The Delta Variant is the most contagious variant of Covid & spreads faster than Smallpox. We need to act now.

Price 21  
[Shepard Price, Shepard Price has a Master’s degree in Journalism from the University of Texas and lives in St. Louis. They have been in journalism for more than four years. “What makes the delta variant so dangerous to public health”, Dated August 25, 2021, https://www.michigansthumb.com/news/article/What-makes-the-delta-variant-so-dangerous-to-16411070.php]  
**Coronavirus is seeing a surge across Michigan. That uptick is largely caused by the delta variant, which has become the dominant variant in the United States, surpassing the alpha variant. That's partly because the delta variant is more transmissible than the common cold and influenza, as well as the viruses that cause smallpox, MERS, SARS and Ebola, according to** [**Yale Medicine**](https://www.yalemedicine.org/news/5-things-to-know-delta-variant-covid)**.** Vaccinated people can also transmit the delta variant, as CDC-released data shows, which experts believe not to be the case with other variants. That has led to reinforced mask mandates in some places and mask recommendations in others. "**This delta variant is more contagious than the other versions we experienced up until a couple of months ago,**" said Dr. Steven Lawrence, a Washington University infectious disease physician at Barnes-Jewish Hospital in St. Louis. "If you have one person infected and other people exposed, in the same situation, more of those exposed people become infected than with the old virus. "There are a couple reasons, in those who have the virus, the virus reproduces and replicates at higher levels," Lawrence continued. "When we speak, sing, talk, cough, more virus comes out. That’s one part. There may be some additional advantage as well, **when the delta variant lands in somebody else’s mouth, nose, throat, it may be stickier and more likely to cause infection once inside. The combination of those two things are why we believe the delta variant is more infectious and easier to pass, twice as likely as previous variants.**" The delta variant is different than previous variants of coronavirus and the original strain because of mutations to the spike protein, which is what the virus uses to latch onto cells and which is the part of the virus used to create mRNA vaccines like the ones distributed in the United States, as well as other vaccines. "Think of a virus as a tiny little ball of genetic material, surrounded by a protein around it and then on the surface there are these little spikes, the spike proteins," Lawrence said. "They are super important for how the virus works and makes us sick. Those spike proteins are how the virus attaches to us, those spikes attach to cells within our nose or throat or mouth and once that attaches, our immune system generates an immune response that will attack the spike protein. "That’s the basis for the vaccines, our vaccines are only introducing the spike protein into those who get the vaccine, rather than the whole virus," Lawrence continued. "That’s the main part of the virus against which our body generates an immune response, once we develop antibodies against that spike protein, that protects us against future exposures." Spike protein mutations are not the only changes COVID-19 has gone through in different mutations and variants of the virus. Mutations occur when people are infecting each other, and it changes over time.

#### Pandemics risk Extinction

Steinbruner 98  
[Steinbruner, John D., Sr. Fellow, Brookings Institution, “Biological Weapons: A Plague Upon All Houses,” FOREIGN POLICY n. 109, Winter 1997/1998, pp. 85-96]  
It is a considerable comfort and undoubtedly a key to our survival that, so far, the main lines of defense against this threat have not depended on explicit policies or organized efforts. In the long course of evolution, the human body has developed physical barriers and a biochemical immune system whose sophistication and effectiveness exceed anything we could design or as yet even fully understand. But evolution is a sword that cuts both ways: **New diseases emerge, while old diseases mutate and adapt.** Throughout history, there have been epidemics during which human immunity has broken down on an epic scale. **An infectious agent believed to have been the plague bacterium killed an estimated 20 million people over a four-year period in the fourteenth century, including nearly one-quarter of Western Europe's population at the time**. Since its recognized appearance in 1981, some 20 variations of the HIV virus have infected an estimated 29.4 million worldwide, with 1.5 million people currently dying of AIDS each year. Malaria, tuberculosis, and cholera - once thought to be under control - are now making a comeback. **As we enter the twenty-first century, changing conditions have enhanced the potential for widespread contagion. The rapid growth rate of the total world population, the unprecedented freedom of movement across international borders, and scientific advances that expand the capability for the deliberate manipulation of pathogens are all cause for worry that the problem might be greater in the future than it has ever been in the past. The threat of infectious pathogens is not just an issue of public health, but a fundamental security problem for the species as a whole.**

#### Pandemics kill the economy – turns their Structural Violence AFF

Weinhold 4  
[Bob Weinhold, Environmental Health Perspectives, January 2004, Infectious Diseases: The Human Costs of our Environmental Errors, Volume 112, Number 1, http://ehp.niehs.nih.gov/members/2004/112-1/focus.html]  
**Costs from infectious diseases can be substantial worldwide**. The 2003 SARS outbreak cost China and Canada about 1% of their economies, primarily through lost tourism and travel revenues, the NIC reported in the August 2003 publication SARS: Down But Still a Threat. **In sub-Saharan Africa, workforce havoc wrought by HIV/AIDS and malaria alone are expected to reduce gross domestic product by 20% or more by 2010**, the NIC reported in Global Infectious Disease Threat. **In the United Kingdom**, cases of bovine spongiform encephalopathy and variant Creutzfeldt-Jakob **disease** in 1995 led to mass cattle slaughters and a three-year beef embargo, **cost**~~ing~~ **the British economy US$5.75 billion. Even the relatively low number of U.S. infectious disease cases costs more than $120 billion per year to treat, noted the NIAID in Microbes: In Sickness and in Health.**

## Scenario 2 – even needed?

Scenario 2 – Who Credability

First card:

Who Cred

<https://www.ilo.org/actrav/media-center/news/WCMS_776264/lang--en/index.htm>

<https://www.npr.org/2021/11/02/1051112806/strikes-labor-great-resignation-covid>

<https://news.bloomberglaw.com/daily-labor-report/unions-lost-members-in-2020-heres-where-the-hits-were-hardest>

<https://www.cnbc.com/2021/10/29/afl-cio-pushes-biden-for-more-worker-protections-in-vaccine-mandate-rule.html>

Who cred is important to UN importance