# 1NC

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#### **Genocidal settlement is** a structure, not an event meaning ontological logic of elimination is an everyday manifestation that defines settler identity.

Rifkin 14, Mark. Settler common sense: Queerness and everyday colonialism in the American renaissance. U of Minnesota Press, 2014. (Associate Professor of English & WGS at UNC-Greensboro)//Elmer

If nineteenth-century American literary studies tends to focus on the ways Indians enter the narrative frame and the kinds of meanings and associa- tions they bear, recent **attempts to theorize settler colonialism** have sought to **shift attention from its effects** on Indigenous subjects **to** its **implications for nonnative political attachments**, forms of inhabitance, **and modes of being**, illuminating and tracking the pervasive operation of **settlement as a system**. In Settler Colonialism and the Transformation of Anthropology, Patrick Wolfe argues, “Settler colonies were (are) premised on the elimination of native societies. The split tensing reflects a determinate feature of settler colonization. The colonizers come to stay—invasion is **a structure not an event**” (2).6 He suggests that a “**logic** **of elimination” drives settler** governance and **sociality**, describing “the settler-colonial will” as “a historical force that ultimately derives from the primal drive to expansion that is generally glossed as capitalism” (167), and in “Settler Colonialism and the Elimination of the Native,” he observes that “elimination is an organizing principle of settler-colonial society rather than a one-off (and superceded) occurrence” (388). Rather than being superseded after an initial moment/ period of conquest, colonization persists since “the logic of elimination marks a return whereby the native repressed continues to structure settler- colonial society” (390). In Aileen Moreton-Robinson’s work, whiteness func- tions as the central way of understanding the domination and displacement of Indigenous peoples by nonnatives.7 In “Writing Off Indigenous Sover- eignty,” she argues, “As a regime of power, patriarchal white sovereignty operates ideologically, materially and discursively to reproduce and main- tain its investment in the nation as a white possession” (88), and in “Writ- ing Off Treaties,” she suggests, “**At an ontological level** the **structure of subjective possession** **occurs through** the **imposition of one’s will-to-be on the thing which is perceived to lack will,** thus it is open to being possessed,” such that “possession . . . forms part of **the ontological structure of white subjectivity**” (83–84). For Jodi Byrd, the deployment of Indianness as a mobile figure works as the principal mode of U.S. settler colonialism. She observes that “colonization and racialization . . . have often been conflated,” in ways that “tend to be sited along the axis of inclusion/exclusion” and that “misdirect and cloud attention from the underlying structures of settler colonialism” (xxiii, xvii). She argues that settlement works through the translation of indigeneity as Indianness, casting place-based political collec- tivities as (racialized) populations subject to U.S. jurisdiction and manage- ment: “the Indian is left nowhere and everywhere within the ontological premises through which U.S. empire orients, imagines, and critiques itself ”; “**ideas of** Indians and **Indianness** have **served as the ontological ground through which U.S. settler colonialism enacts itself** ” (xix).

#### That results in land exploitation and ecocide – specifically manifests in knowledge institutions making forefronting Settler Colonialism a prior question. Proven from 1ac tag “More affordable drugs are needed in order to make treatment accessible”

Paperson 17 la paperson or K. Wayne Yang, June 2017, “A Third University is Possible” (an associate professor of ethnic studies at the University of California, San Diego)//Elmer

Land is the prime concern of settler colonialism, contexts in which the colonizer comes to a “new” place not only to seize and exploit but to stay, making that “new” place his permanent hom e. Settler colonialism thus complicates the center–periphery model that was classically used to describe colonialism, wherein an imperial center, the “metropole,” dominates distant colonies, the “periphery.” Typically, one thinks of European colonization of Africa, India, the Caribbean, the Pacific Islands, in terms of external colonialism, also called exploitation colonialism, where land and human beings are recast as natural resources for primitive accumulation: coltan, petroleum, diamonds, water, salt, seeds, genetic material, chattel. Theories named as “settler colonial studies” had a resurgence beginning around 2006.[2] However, the analysis of settler colonialism is actually not new, only often ignored within Western critiques of empire.[3] The critical literatures of the colonized have long positioned the violence of settlement as a prime feature in colonial life as well as in global arrangements of power. We can see this in Franz Fanon’s foundational critiques of colonialism. Whereas Fanon’s work is often generalized for its diagnoses of anti/colonial violence and the racialized psychoses of colonization upon colonized and colonizer, Fanon is also talking about settlement as the particular feature of French colonization in Algeria. For Fanon, the violence of French colonization in Algeria arises from settlement as **a spatial immediacy of empire**: the geospatial collapse of metropole and colony into the same time and place. On the “selfsame land” are spatialized white immunity and racialized violation, non-Native desires for freedom, Black life, and Indigenous relations.[4] Settler colonialism is too often thought of as “what happened” to Indigenous people. This kind of thinking confines the experiences of Indigenous people, their critiques of settler colonialism, their decolonial imaginations, to an unwarranted historicizing parochialism, as if settler colonialism were a past event that “happened to” Native peoples and not generalizable to non-Natives. Actually, settler colonialism is something that “happened for” settlers. Indeed, it is happening for them/us right now. Wa Thiong’o’s question of how instead of why directs us to think of land tenancy laws, debt, and the privatization of land as settler colonial technologies that enable the “eventful” history of plunder and disappearance. Property law is a settler colonial technology. The weapons that enforce it, the knowledge institutions that legitimize it, the financial institutions that operationalize it, are also technologies. Like all technologies, they evolve and spread. Recasting land as property means severing Indigenous peoples from land. This separation, what Hortense Spillers describes as “the loss of Indigenous name/land” for Africans-turned-chattel, recasts Black Indigenous people as black bodies for biopolitical disposal: who will be moved where, who will be murdered how, who will be machinery for what, and who will be made property for whom.[5] In the alienation of land from life, alienable rights are produced: the right to own (property), the right to law (protection through legitimated violence), the right to govern (supremacist sovereignty), the right to have rights (humanity). In a word, what is produced is whiteness. Moreover, it is not just human beings who are refigured in the schism. Land and nonhumans become alienable properties, a move that first alienates land from its own sovereign life. Thus we can speak of the various technologies required to create and maintain these separations, these alienations: Black from Indigenous, human from nonhuman, land from life.[6] “How?” is a question you ask if you are concerned with the mechanisms, not just the motives, of colonization. Instead of settler colonialism as an ideology, or as a history, you might consider settler colonialism as a set of technologies —a frame that could help you to forecast colonial next operations and to plot decolonial directions. This chapter proceeds with the following insights. (1) The settler–native– slave triad does not describe identities. The triad—an analytic mainstay of settler colonial studies—digs a pitfall of identity that not only chills collaborations but also implies that the racial will be the solution. (2) Technologies are trafficked. Technologies generate patterns of social relations to land. Technologies mutate, and so do these relationships. Colonial technologies travel. In tracing technologies’ past and future trajectories, we can connect how settler colonial and antiblack technologies circulate in transnational arenas. (3) Land—not just people—is the biopolitical target.[7] The examples are many: fracking, biopiracy, damming of rivers and flooding of valleys, the carcasses of pigs that die from the feed additive ractopamine and are allowable for harvest by the U.S. Food and Drug Administration. The subjugation of land and nonhuman life to deathlike states in order to support “human” life is a “biopolitics” well beyond the Foucauldian conception of biopolitical as governmentality or the neoliberal disciplining of modern, bourgeois, “human” subject. (4) (Y)our task is to theorize in the break, that is, to refuse the master narrative that technology is loyal to the master, that (y)our theory has a Eurocentric origin. Black studies, Indigenous studies, and Othered studies have already made their breaks with Foucault (over biopolitics), with Deleuze and Guatarri (over assemblages and machines), and with Marx (over life and primitive accumulation). (5) Even when they are dangerous, understanding technologies provides us some pathways for decolonizing work. We can identify projects of collaboration on decolonial technologies. Colonizing mechanisms are evolving into new forms, and they might be subverted toward decolonizing operations. The Settler–Native–Slave Triad Does Not Describe Identities One of the main interventions of settler colonial studies has been to insist that the patterning of social relations is shaped by colonialism’s thirst for land and thus is shaped to fit modes of empire. Because colonialism is a perverted affair, our relationships are also warped into complicitous arrangements of violation, trespass, and collusion with its mechanisms. For Fanon, the psychosis of colonialism arises from the patterning of violence into the binary relationship between the immune humanity of the white settler and the impugned humanity of the native. For Fanon, the supremacist “right” to create settler space that is immune from violence, and the “right” to abuse the body of the Native to maintain white immunity, this is the spatial and fleshy immediacy of settler colonialism. Furthermore, the “humanity” of the settler is constructed upon his agency over the land and nature. As Maldonado- Torres explains, “I think, therefore I am” is actually an articulation of “I conquer, therefore I am,” a sense of identity posited upon the harnessing of nature and its “natural” people.[8] This creates a host of post+colonial problems that have come to define modernity. Because the humanity of the settler is predicated on his ability to “write the world,” to make history upon and over the natural world, the colonized is instructed to make her claim to humanity by similarly acting on the world or, more precisely, acting in his. Indeed, for Fanon, **it is the perverse ontology of settler becomings**—becoming landowner or becoming property, becoming killable or becoming a killer—and the mutual implication of tortured and torturer that mark the psychosis of colonialism. This problem of modernity and colonial psychosis is echoed in Jack Forbes’s writings: Columbus was a wétiko. He was mentally ill or insane, the carrier of a terribly contagious psychological disease, the wétiko psychosis. . . . The wétiko psychosis, and the problems it creates, have inspired many resistance movements and efforts at reform or revolution. Unfortunately, most of these efforts have failed because they have never diagnosed the wétiko.[9] Under Western modernity, becoming “free” means becoming a colonizer, and because of this, “the central contradiction of modernity is freedom.”[10] Critiques of settler colonialism, therefore, do not offer just another “type” of colonialism to add to the literature but a mode of analysis that has repercussions for any diagnosis of coloniality and for understanding the modern conditions of freedom. By modern conditions of freedom, I mean that Western freedom is a product of colonial modernity, and I mean that such freedom comes with conditions, with strings attached, most manifest as terms of unfreedom for nonhumans. As Cindi Mayweather says, “your freedom’s in a bind.”[11]

#### Expansion of medical access is a form of settler colonial biomedical onslaught – humanitarian promotions of health proliferate genocidal assimilation.

Klausen 13, Jimmy Casas. "Reservations on hospitality: contact and vulnerability in Kant and indigenous action." Hospitality and World Politics. Palgrave Macmillan, London, 2013. 197-221. (Associate Professor in the Instituto de Relações Internacionais at the Pontifícia Universidade Católica do Rio de Janeiro)//Elmer

On the other hand and by contrast, the **governmental reach of public health initiatives** that would effect the improvement of isolated indigenous populations’ health **accords** with Kantian philanthropy – **with all the risks of violated freedom and smothered life** that entails. Public **health advocates** would **repair** the **disadvantaged morbidity profile of** isolated **indigenous groups through** a policy of initiating contact supported by the provision of modern **biomedical** health **care** services to ameliorate the epidemiological effects of contact. State-initiated contact without attendant health care has proved disastrous. Into the 1970s, FUNAI attempted to make friendly contact with isolated Indians. By relying on hired expert indigenous trackers, government contact expeditions located isolated groups and – demonstrating their interest in seeking commerce – enticed the latter with gifts of machetes and blankets. One FUNAI expedition to contact the Matis in 1978 resulted in high morbidity from pneumonia and other infectious diseases and killed one of every two Matis. 60 To correct such devastating policies, anthropologists Magdalena Hurtado, Kim Hill, Hillard Kaplan and Jane Lancaster have elaborated the following argument: Many anthropologists and indigenous-rights activists believe that uncontacted Indians should be left alone. These people are well-meaning, but they are wrong because they base their position on three incorrect assumptions. First, they assume that the Indians have chosen to remain isolated . . . . Those who oppose contact also assume that the Indians will inevitably be decimated by virgin-soil epidemics . . . . Finally, opponents of contact assume that isolated native groups will survive if not contacted. 61 However, even correcting for the fatal infelicities of past policy-driven, state-initiated contacts such as FUNAI’s, the preponderantly disadvantaged morbidity profile of such virgin-soil populations cannot be reduced by greater hospitality in the form of redoubled and more expert interventionary contacts. **Although public health efforts** like those advocated by Hurtado et al. **might reduce mortality**, highly **disease-vulnerable persons will still sicken** and will do so **through means that would pretend to foster life by actively disregarding how the people subject to these external machinations might** determine their own needs and **value their own health**. Isolated **indigenes’** biological **lives** would be **simultaneously fostered and risked**, while their free **personhood would count as nothing** morally–culturally. In short, there are serious political costs to be weighed in such an intervention. Because of – and not in spite of – their philanthropy, public health interventions of the type that Hurtado et al. advocate extend the reach of governmentality much more intrusively than land rights policies. Besides deciding on behalf of peoples in regard to the interpretation of their acts of self-quarantine, the advocated **public health policies surgically insert apparatuses of biomedicine directly into the contacted peoples’ living being**. Such policies thereby **displace** **indigenous norms of health and native cultural strategies** of living on with the norms and overall strategy embedded in the culture of scientific and clinical biomedicine. Though the pretence is that such acts demonstrate the hospitality of the wider national or global society, such health policy interventions cannot simply make a presentation for possible society; rather, qua philanthropy they initiate contact, which, because of the high degree of vulnerability of those contacted, must needs lead to the proliferation of contacts. It is not a hospitable policy of fostering life that Hurtado et al. support, not merely possible commerce but an obsessive philanthropy of biomedical life support and literally **unavoidable onslaught of commerce**, possibly forevermore. Most startlingly, such public health interventions presume as universal a standard of life that could certainly vary while retaining meaning and value. The anthropologist Tess Lea describes this universalising interventionary compulsion in withering words: When you are a helping bureau-professional, the **compulsion to** do something to **fix** the problems of **target populations** – those deemed as suffering from unequal and preventable conditions – exceeds all other impulses . . . . ‘They’ need our greater commitment. The idea that life might be lived differently with value and meaning or that ‘need’ might be conceived differently from the way in which we **calculate** it **through** our **interventionary lens**, becomes impossible to imagine. 62 Hurtado et al. assume that health professionals and policy makers must hospitably confer biomedically acquired immunity on heretofore isolated and now contacted virgin soil populations. Fostering indigenous lives by **imposing** an **alien conception of immunity**, they would inhospitably **destroy alternate strategies of living on**. Seeing through their interventionary lens, Hurtado et al. themselves become arbiters of successful and unsuccessful forms of life: they presume that self-quarantine cannot itself serve as an effective cultural strategy to immunise living bodies. Thus, ironically perhaps, these anthropologists choose biology above culture by seeing each from a standpoint authorised by the culture of biomedicine. From their interventionary lens and against Canguilhem’s admonition above, self-quarantine appears to be a failed strategy for living on because the immunity it would confer is imperfect or incomplete. Likewise, condoning self-isolation is imperfect or incomplete hospitality as against their more perfect interventionary hospitality in the name of life. Authorising themselves to make these judgements, they enact an altogether different collapse of morality into nature than the Kantian collapse I reconstruct above. Whereas Kant’s collapse of minimalism into abstentionism and moral duty into nature’s constraints opens hospitality and therefore strategies for living on, this other collapse binds moralising conceptions of ‘health’ to the biomedically conceived body. Yet if, according to Canguilhem, for humans especially, ‘health is precisely a certain latitude, a certain play in the norms of life and behavior’, 63 then it seems that the ‘**health’ that supposedly hospitable**, though strictly philanthropic, ‘life’-fostering interventionary contact **would impose** on the exuberance of self-quarantining **indigenous peoples** is **a sickness unto** that other perpetual peace Kant mentions: **death**.

#### Biomedicine itself is invested in colonial exploitation through testing done on indigenous communities to biopiracy and stealing indigenous knowledge.

Lift Mode 17 3-10-2017 "Pharmaceutical Colonialism” <https://medium.com/@liftmode/pharmaceutical-colonialism-3-ways-that-western-medicine-takes-from-indigenous-communities-3a9339b4f24f> (We at Liftmode.com are a team of professionals from a variety of backgrounds, dedicated to the mission of providing the highest quality and highest purity nutritional health supplements on the market. We look specifically for the latest and most promising research in the fields of cognition enhancement, neuroscience and alternative health supplements, and develop commercial strategies to bring these technologies to the marketplace.)//Elmer

Does **modern medicine take from rural communities**? At first, this seems outrageous. However, on closer inspection, we find three main methods of poaching: **stealing indigenous knowledge**, ‘**biopiracy’**, and the sale of pharmaceuticals at exorbitant prices. Another example includes **using** **developing countries** and rural populations **as test subjects in unethical clinical trials** — for example on **AIDS patients in South Africa**.[1] This article examines three methods that Western medicine takes from rural communities. We also examine the emerging new forms of medicine and how many people are beginning to appreciate the medical knowledge of different cultures around the world. Traditional knowledge and culture is threatened by the expansive natural of the pharmaceutical industry 1. Pharmaceutical colonialism: Stealing Indigenous Knowledge First and foremost, what has been taken from indigenous communities for the last roughly 600 years is traditional knowledge about medicinal plants. It is interesting that the **major advancements in Western medicine** **coincide** very closely **to escalating global colonialism** by Western countries. It’s difficult to estimate the exact percentage of **modern drugs** that were **originally based on traditional plant sources**, because of the complex evolution of Western laboratory-made medicine. However, this percentage is known to be very high. In fact, a 2006 paper by Dr. A Gurib-Fakim states: “Natural products and their derivatives represent **more than 50%** of all the drugs in clinical use in the world. Higher plants contribute no less than 25% of the total.”[2] The extent to which traditional knowledge permeates through Western medicine is too broad to explain fully in a small article like this. We’d need to write an entire book to cover the full content! So, we will just take a look at one example below. How the West takes Indigenous knowledge: **Anti-Malaria Drugs** Mosquitoes are, by far, the world’s most dangerous animals, spreading a number of diseases including Dengue fever, Zika virus, and malaria. According to the World Health Organization, nearly half of the world’s population is at risk of malaria. In 2015, over 210 million people became infected with malaria, and a staggering 429 000 people died from the blood parasite.[3] To combat the infectious disease, scientists have developed two major classes of anti-malarial drugs. These are both based on indigenous knowledge of plant medicine: Mosquitos kill more people than any other animal every year 1. Quinine Quinine is extracted from the bark of the cinchona tree, native to South America. Contrary to propaganda by the Spanish inquisitors, which is still used in modern medicine today, Westerners did not ‘discover’ the cinchona tree. Indigenous Peruvian cultures had been using the bark of the cinchona tree for hundreds, possibly thousands, of years before the arrival of the colonial forces from the North. They crushed it up and mixed it with water to ‘relieve shivering’ — a major sign of the feverish symptoms of malaria.[4] Unlike traditional Chinese knowledge, which has survived until modern times, the ancient knowledge of South America cultures was almost completely destroyed by colonial forces. This makes tracing the historical use of the cinchona tree more difficult.[5] After the inquisition of most traditional cultures in South America, the cinchona bark was brought back to Western Europe and was hailed as one of the most exciting discoveries of modern medicine. The success of cinchona bark in Europe created a massive industry, initially run by the Spanish, but which was later overtaken by French and English industrialists.[6] It’s important to know that the ‘traditional’ use of cinchona bark in 18th century Europe was in exactly the same method as its original use in indigenous societies: crushing up the barking and mixing it with water. The chemical compound quinine was first extracted from cinchona bark in 1820 by two Frenchmen: Pierre Joseph Pelletier and Joseph Caventou. This allowed purified quinine to replace traditional cinchona extracts.[7] Interestingly, Western scientists have since discovered that cinchona bark actually contains several active components, which function in a synergistic relationship to kill the malaria parasite.[8] In modern times, a number of quinine-based drugs have been developed, with varying success. The issue becomes complex here because, while these drugs were developed by Western scientists using modern technological laboratories, if it hadn’t been for the original indigenous knowledge, these compounds could not have been developed at all. The quinine derivatives include Chloroquine, Pyrimethamine, and Mefloquine. Chloroquine was used as a spray along with DDT in the WHO’s malaria eradication plan (the efficacy and usefulness of this are still under debate: numerous countries that were sprayed with these chemicals soon developed strains of malaria that were resistant to the drugs).[9] 60411828 - workers are fogging for dengue control. mosquito borne diseases of zika virus. Quinine-based drugs were used in sprays to combat malaria around the world 2. Artemisinin **Artemisinin** is an active compound found in traditional Chinese medicine called Qinghao Su (sweet wormwood). This traditional Chinese medicine has been **used to treat fevers** for over a thousand years. It is currently still extracted from plant sources, the majority of which are grown in China, Vietnam and East Africa. Once the full-grown plants are harvested, the chemical is extracted, leaving the pure artemisinin at a highly variable market price of between $120 — $1200 per kilogram.[10] It’s interesting that the artemisinin-based drug combinations (ACTs) are the most expensive anti-malarial treatments available. This is despite the fact that it is one of the few malarial medications that are still mostly plant-based. However, **Western pharmaceutical** companies are now **developing synthetic** forms of **artemisinin**. The new forms of artemsinin are genetically engineered and have intellectual property rights attached, potentially bringing in big revenues for the companies involved. The proponents of the synthetic form of artemisinin claim that the synthetic form will be able to be sold for cheaper than the natural form. However, the average import price of natural artemsisin to India over the last ten years was around $370 per kilo — a fair amount cheaper than the price that the pharmaceutical companies are pushing for.[11] **Artemisinin farming** **sustains** the **livelihoods of** an estimated **100’000 farmers.** With **synthetic derivatives** being developed this **puts** the **livelihoods** of the farmers and their families **at risk of poverty** (estimated to be around 3–5 times the number of people as the farmers themselves).[12] The ironic and disturbing thing about the whole situation is that the artemisinin farmers themselves are the ones who are most at risk of contracting malaria. In effect, they stand to not only have their incomes stripped by Western pharmaceutical companies but also to become physically dependent on the products of those very companies. [13] 16118463 - portrait of a burmese woman with thanaka powdered face working in farm Farmers livelihoods are threatened by the use of synthetic chemicals 2. ‘**Biopiracy’** — **stealing natural resources and plants** The idea that modern medicine might be a form of colonialism seems at first to be quite outrageous! However, on closer inspection, it’s quite clear that a few nations continue to play the role of ‘missionary’, helping to save people in the ‘developing world’.[14] In some cases, though, the role of the ‘missionary’ becomes a little less clear. The second way that Western medicine takes from indigenous communities is something called ‘Biopiracy’. This is similar to the method we described above, however, in this case, what is taken is not knowledge but the actual plants and resources themselves. In biopiracy actions, plants and natural resources are stolen entirely from indigenous communities and are then used to develop drugs and medicines in the West. The indigenous communities benefit nothing from the theft of their resources. **Medicines** developed from **stolen** materials **are** often **sold back** to the very people from whom the original plant-sources were stolen — **at exorbitant prices**. Examples of medications that face biopiracy charges include: A **drug for diabetes developed** in the UK **from a Libyan plant**, Artemisia judaica A medicine for **immunosuppression** developed by GlaxoSmithKline which is **derived from** a **chemical found in termite hills** in Gambia An HIV treatment taken from bacteria found in central Uganda Antibiotic drugs developed from amoebas found in Mauritius and Venezuela Anti-diarrhea vaccines developed from Egyptian bacteria [15] According to Beth Burrows, president of Washington-based Edmond’s Institute: “Times have changed. It is no longer acceptable for the great white explorer to trawl across Africa or South America taking what they want for their own commercial benefit. It is no more than a new form of colonial pillaging. As there are internationally recognized rights for oil, so there should be for indigenous plants and knowledge.”[16] In an ideal world, knowledge and resources would be shared equitably. Both the indigenous cultures and the modern world would benefit from the sharing of knowledge and medicinal plants, which could leave the world a much better place. However, this is not the case in today’s world. More and more, we see evidence of **pharmaceutical companies using rural communities as customers and guinea-pigs for medicine** that was originally sourced from local knowledge.[17] Traditional medicine is pushed off the market and indigenous knowledge is ‘dumbed down’ through development programs. This forces the majority of the world to have to work through cartel-like pharmaceutical corporations who extract unbelievably large sums of money from people, which we’ll look at below.[18] 21736635 - shanty house in bangkok water canals along the river bank, thailand Those who benefit the least from pharmaceutical colonialism are the ones who need healthcare the most

#### Vote negative to endorse a cartography of refusal

Day 15 Iyko, Associate Professor of English. Chair, Critical Social Thought. “Being or Nothingness: Indigeneity, Antiblackness, and Settler Colonial Critique.” Source: Critical Ethnic Studies, Vol. 1, No. 2 (Fall 2015), pp. 102-121 //Elmer

And so the potential relations that Wilderson sets up through a critique of sovereignty are at best irrelevant or at worse false in Sexton’s absolute claim that slavery stands alone as the “threshold of the political world.”45 I suggest that this wavering relation/nonrelation of antiblackness and Indigeneity exhibited in Wilderson’s and Sexton’s work reveal the problem in any totalizing approach to the heterogeneous constitution of racial difference in settler colonies. Beyond this inconsistency, the liberal multiculturalist agenda that Wilderson and Sexton project into Indigenous sovereignty willfully evacuates any Indigenous refusal of a colonial politics of recognition. Among other broad strokes, Sexton states, “as a rule, Native Studies reproduces the dominant liberal political narrative of emancipation and enfranchisement.”46 This provides a basis for Wilderson’s assertion that Indigenous sovereignty engages in a liberal politics of state legitimation through recognition because “treaties are forms of articulation” that buttress “the interlocutory life of America as a coherent (albeit genocidal) idea.”47 But such a depoliticized liberal project is frankly incompatible with Indigenous activism and scholarship that emerges from Native studies in North America. The main argument in Glen Sean Coulthard’s book Red Skin, White Masks is to categorically reject “the liberal recognition-based approach to Indigenous selfdetermination.”48 **This is not** a politics of **legitimizing** Indigenous nations **through state recognition** **but** rather **one of refusal**, a refusal to be **recognized and** thus **interpellated by the settler colonial nation-state**. Drawing on Fanon, Coulthard describes the “necessity on the part of the oppressed to ‘turn away’ from their other-oriented master-dependency, and to instead struggle for freedom on their own terms and in accordance with their own values.”49 It is also difficult to reconcile the depoliticized narrative of “resurgence and recovery” that Wilderson and Sexton attribute to Indigenous sovereignty in the face of **Idle No More**, the anticapitalist Indigenous sovereignty movement in Canada whose national railway and **highway** **blockades** have seriously **destabilized** the **expropriation of natural resources** for the global market. These are examples that Coulthard describes as “**direct action**” rather tjhan negotiation—in other words, antagonism, not conflict resolution: The [blockades] are a crucial act of negation insofar as they seek to impede or block the flow of resources currently being transported to international markets from oil and gas fields, refineries, lumber mills, mining operations, and hydroelectric facilities located on the dispossessed lands of Indigenous nations. These modes of direct action . . . seek to have **a negative impact on** the economic **infrastructure** that is **core to** the **colonial accumulation of capital in settler-political economies** like Canada’s.50 **These tactics are** part of what Audra Simpson calls a “**cartography of refusal” that “negates the authority of the other’s gaze**.”51 It is **impossible to frame** the **blockade movement**, which has become the greatest threat to Canada’s resource agenda,52 **as a struggle for “enfranchisement**.” **Idle No More is** not in “conflict” with the Canadian nation-state; it is in **a struggle against the very premise of settler colonial capitalism** that requires the elimination of Indigenous peoples. As Coulthard states unambiguously, “For Indigenous nations to live, capitalism must die.”

#### Reject Reformism or Plan Focus - Challenging the 1AC’s colonialist framework of interpretation is a prior question to whether or not the Aff is a good idea

Deloria Jr. 99 – Member of the Standing Rock Sioux Tribe and Professor at University of Colorado Boulder  
(Vine, also Former Executive Director for the National Congress of American Indians and former Professor of Political Science and Law at the University of Arizona, For This Land: Writing on Religion in America, p. 101-7)//Elmer  
If there were any serious concern about liberation, we would see thousands of people simply walk away from the vast economic, political, and intellectual machine we call Western civilization and refuse to be enticed to participate in it any longer. Liberation is not a difficult task when one no longer finds value in a set of institutions or beliefs. We are liberated from the burden of Santa Claus and the moral demand to be "good" when, as maturing adolescents, we reject the concept of Santa Claus. Thereafter we have no sense of guilt in late November that we have not behaved properly during the year, and no fear that a lump of coal rather than a gift will await us Christmas morning. In the same manner, we are freed and liberated once we realize the insanity and fantasy of the present manner of interpreting our experiences in the world. Liberation, in its most fundamental sense, requires a **rejection of everything we have been taught** and its replacement by only those things we have experienced as having values. But this replacement only begins the task of liberation. For the history of Western thinking in the past eight centuries **has been one of replacement of ideas** within a framework that has remained **basically unchanged** for nearly two millenia. Challenging this framework of interpretation means a rearrangement of our **manner of perceiving the world**, and it involves a reexamination of the body of human knowledge and its structural reconstruction into a new format, Such a task appears to be far from the struggles of the present. It seems abstract and meaningless in the face of contemporary suffering. And it suggests that people can be made to change their oppressive activity by intellectual reorientation alone. All these questions arise, however, because of the fundamental orientation of Western peoples toward the world. We assume that we know the structure of reality and must only make certain minor adjustments in the machinery that operates it in order to bring our institutions into line. Immediate suffering is thus placed in juxtaposition with abstract metaphysical conceptions of the world and, because we can see immediate suffering, **we feel impelled to change conditions quickly** to relieve tensions, never coming to **understand how the basic attitude toward life** and its derivative attitudes toward minority groups **continues to dominate** the goals and activities that appear designed to create reforms, Numerous examples can be cited to show that **our efforts to bring justice** into the world **have been short-circuited** by the passage of events, and that those efforts are unsuccessful because we have failed to consider the **basic framework within which we pose questions, analyze alternatives, and suggest solutions**. Consider the examples from our immediate past. In the early sixties college application forms included **a blank line** on which all prospective students were required **to indicate** their **race**. Such information was used to discriminate against those of a minority background, and so **reformers demanded** that the **question be dropped**. By the time all colleges had been forced to eliminate questions concerning the race of applicants, the Civil Rights Movement had so sensitized those involved in higher education that scholarships were made available in great numbers to people of minority races. **There was no way,** however, **to allocate** such **scholarships** **because college officials could no longer determine the racial background** of students on the basis of their applications for admission. Much of the impetus for **low-cost housing** in the cities was based upon the premise that in the twentieth century people should not have to live in hovels but that adequate housing should be constructed for them. Yet in the course of **tearing down** slums and building new housing projects, low-income housing areas were eliminated. The **construction cost** of the new projects **made** it necessary to charge hi**gher rentals**. **Former residents** of the lowincome areas **could not afford to live** in the new housing, so they moved to other parts of the city and created exactly the same conditions that had originally provoked the demand for low-rent housing. Government schools had a very difficult time teaching American Indian children the English language. (One reason was the assumption of teachers that all languages had Latin roots, and their inability to adapt the programs when they discovered that Indian languages were not so derived.) Hence programs in bilingual teaching methods were authorized that would use the native language to teach the children English, an underhanded way of eliminating the native language. Between the time that bilingual programs were conceived and the time that they were finally funded, other programs that concentrated on adequate housing had an unexpected effect on the educational process. Hundreds of new houses were built in agency towns, and Indians moved from remote areas of the different reservations into those towns where they could get good housing. Since they were primarily younger couples with young children, the housing development meant that most Indian children were now growing up in the agency communities and were learning English as a first language. Thus the bilingual programs, which began as a means of teaching English as a second language, became the method designed to preserve the native vernacular by teaching it as a second language to students who had grown up speaking English. Example after example could be cited, each testifying to the devastating effect of a general attitude toward the world that underlies the Western approach to human knowledge. The basis of this attitude is the assumption that the world operates in certain predetermined ways, that it operates continuously under certain natural laws, and that the nature of every species is homogeneous, with few real deviations.

#### The Aff relegates indigenous possibility to reservation, accelerating death-making – only an orientation of refusal as generative can solve group the uv method cards. This the ROTB is to reject systems of settler colonialism.

King 17, Tiffany Lethabo. "Humans involved: Lurking in the lines of posthumanist flight." Critical Ethnic Studies 3.1 (2017): 162-185. (Assistant Professor of Women’s, Gender and Sexuality Studies at Georgia State)//GZ but re-cut by Elmer

Within Native feminist theorizing, ethnographic refusal can be traced to Audra Simpson’s 2007 article, “On Ethnographic Refusal.” In this seminal work, Simpson reflects on and gains inspiration from the tradition of refusal practiced by the people of Kahnawake.14 Simpson shares that Kahnawake refusals are at the core and spirit of her own ethnographic and ethical practices of refusal. I was interested in the larger picture, in the discursive, material and moral territory that was simultaneously historical and contemporary (this “national” space) and the ways in which *Kahnawakero:non*, the “people of Kahnawake,” had *refused* the authority of the state at almost every turn. The ways in which their formation of the initial membership code (now replaced by a lineage code and board of elders to implement the code and determine cases) was refused; the ways in which their interactions with border guards at the international boundary line were predicated upon a refusal; how refusal worked **in everyday encounters** to enunciate repeatedly to ourselves and to outsiders that “this is who we are, this is who you are, these are my rights.”15 Because Simpson was concerned with applying the political and everyday modes of Kahnawake refusal, she attended to the “collective limit” established by her and her Kahnawake participants.16 The collective limit was relationally and ethically determined by what was shared but more importantly by what was not shared. Simpson’s ability to discern the collective limit could only be achieved through a form of relational knowledge production that regards and cares for the other. Simpson recounts how one of her participants forced her to recognize a collective limit. Approaching and then arriving at the limit, Simpson experiences the following: And although I pushed him, hoping that there might be something explicit said from the space of his exclusion— or more explicit than he gave me— it was enough that he said what he said. “Enough” is certainly enough. “Enough,” I realised, was when I reached the limit of my own return and our collective arrival. Can I do this and still come home; what am I revealing here and why? Where will this get us? Who benefits from this and why? And “enough” was when they shut down (or told me to turn off the recorder), or told me outright funny things like “nobody seems to know”— when everybody *does* know and talks about it *all the time*. Dominion then has to be exercised over these representations, and that was determined when enough was said. The ethnographic limit then, was reached not just when it would cause harm (or extreme discomfort)—the limit was arrived at when the representation would bite all of us and compromise the *representational* territory that we have gained for ourselves in the past 100 years.17 Extending her discussion of ethnographic refusal beyond the bounds of ethnographic concerns, Simpson also ponders whether this enactment of refusal can be applied to theoretical work. Simpson outright poses a question: “What is theoretically generative about these refusals?”18 The question that Simpson asks in 2007 is clarified by Eve Tuck and K. Wayne Yang in the 2014 essay “R- Words: Refusing Research.” Arguing that modes of refusal extended into the theoretical and methodological terrains of knowledge production are productive and necessary, Tuck and Yang state: For the purposes of our discussion, the most important insight to draw from Simpson’s article is her emphasis that refusals are not subtractive, but are theoretically generative, expansive. Refusal is not just a “no,” but a redirection to ideas otherwise unacknowledged or unquestioned. Unlike a **settler colonial configuration of knowledge that is** petulantly exasperated and **resentful of limits**, a methodology of refusal regards limits on knowledge as productive, as indeed a good thing.19 In line with Simpson’s intervention, Tuck and Yang posit that “refusal itself could be developed into both method and theory.”20 For Tuck and Yang, a generative practice of refusal and a decolonial and abolitionist tradition is making Western thought “turn back upon itself as settler colonial knowledge, as opposed to universal, liberal, or neutral knowledge without horizon.”21 In fact, the coauthors suggest “making the settler colonial metanarrative the object of . . . research.”22 What this move effectively does is question the uninterrogated assumptions and exposes the violent particularities of the metanarrative. Scrutiny as a practice of refusal also slows down or perhaps halts the momentum of the machinery that allows, as Tuck and Yang argue, “knowledge to facilitate interdictions on Indigenous and Black life.”23

#### Top-Level on framing:

#### 1] Framing Issue – If we win our reps are good and that our ethical orientations come apriori, that means that we just have to win a risk of a link to prove that the plan is unethical.

#### 2] Equality – framing is not neutral – reject team on Imperial politics into events

Mignolo 7, Walter D. "The de-colonial option and the meaning of identity in politics." (2007). (Professor at Duke)//Elmer

The rhetoric of modernity (from the Christian mission since the sixteenth century, to the secular Civilizing mission, to development and modernization after WWII) occluded—under its triumphant rhetoric of salvation and the good life for all—**the perpetuation of** the logic of **coloniality**, that is, of massive appropriation of land (and today of natural resources), massive exploitation of labor (from open slavery from the sixteenth to the eighteenth century, to disguised slavery, up to the twenty first century), and the **dispensability of human lives** from the massive killing of people in the Inca and Aztec domains to the twenty million plus people from Saint Petersburg to the Ukraine during WWII killed in the so called Eastern Front.4 Unfortunately, not all the massive killings have been recorded with the **same value and the same visibility**. The unspoken criteria for the value of human lives is an obvious sign (from a de-colonial interpretation) of the hidden imperial identity politics: that is, the value of human lives to which the life of the enunciator belongs becomes the **measuring stick** to evaluate other human lives who do not have the intellectual option and institutional power to tell the story and to classify events according to a ranking of human lives; that is, according to a racist classification.5

#### 3] Calculability – Settler Colonialism is unable to be calculated on a consequentialist metric – it is both a spiritual and cultural genocide that leads to a psychological and emotional genocide that can’t be accounted for by body count or measure of violence vs another groups.

#### 4] Psychiatric Colonialism – Native Bodies are scientifically considered to have “dampened pain and pain signaling” meaning their pain is considered and evaluated differently to justify colonial actions that “won’t hurt as much” – means their starting point is violent.

#### 5] Ontology Outweighs - They can’t win any of their impacts in a word where they have conceded the libidinal economy and ontology which serves as a filter for their impacts.

## 2

### Case

#### 1] Patents are not key to HIV medication distribution – best study by WIPO shows that pre-TRIPS, HIV was extremely high.

Gillespie 2k White, Lee, and Paul Salmon. "Patent Protection and Access to HIV/AIDS Pharmaceuticals in Sub-Saharan Africa." (2000). (Researcher at WIPO)//Joey

4. Conclusions 4.1 The TRIPS Agreement is Not the Problem The TRIPS Agreement is not impeding access to medicines in sub-Saharan Africa. As outlined in Chapter 2 of this report, the TRIPS Agreement permits sufficient flexibility for African countries to expand access to HIV/AIDS drugs where other critical elements are in place, such as health care infrastructure and financing. Furthermore, for most sub-Saharan African countries, i.e., those that are designated as “least developed” by the United Nations, TRIPS obligations are not mandatory until 2006 at the earliest. The least developed countries in Sub-Saharan Africa include: - 8 of the 15 members of OAPI, namely Benin, Burkina Faso, Central African Republic, Guinea, Mauritania, Niger, Chad and Togo; - 7 of the 15 members of ARIPO, namely The Gambia, Lesotho, Malawi, Sierra Leone, Uganda, Tanzania, and Zambia; and - 9 of the 12 other countries of continental sub-Saharan Africa, namely Angola, Burundi, Democratic Republic of Congo, Djibouti, Equatorial Guinea, Eritrea, Ethiopia, Liberia, and Rwanda. Of the 16 sub-Saharan African countries in which more than one-tenth of the adult population is infected with HIV, 8 are least developed countries with no obligations under the TRIPS Agreement until at least 2006, namely Burundi, Central African Republic, Djibouti, Ethiopia, Lesotho, Malawi, Rwanda and Zambia. The lack of access to medicines in sub-Saharan Africa is the result of a wide and complex range of causes. Laying blame for the problem on the WTO and the TRIPS Agreement is overly simplistic and wrong, and does nothing to alleviate the crisis. 4.2 Patents are Not the Problem The patent issue, likewise, is dramatically overplayed in the discussions on access to HIV/AIDS medicines. The perception that patents are blocking access to HIV/AIDS drugs is also overly simplistic and incorrect. As discussed in Chapter 3 of this report, our patent surveys shows that most antiretroviral medications are not widely patented in Africa. In the majority of countries of sub-Saharan Africa where no patents exist, there is still a dramatic lack of access to drugs. Similarly, there are tremendous access problems with medicines long ago off patent Where patents do exist, the TRIPS Agreement permits a great deal of flexibility to seek compulsory licenses or parallel imports of drugs under patent. The United States and European Union have indicated that they will not oppose such practices consistent with the TRIPS Agreement. While it may be easy to use the drug industry as a scapegoat, patents are not blocking access to HIV/AIDS medications in sub-Saharan Africa. Even if antiretroviral HIV/AIDS drugs were made available free tomorrow, there is a lack of health care infrastructure to conduct testing, store and distribute medications, and monitor patient compliance with what are often very complicated regimens. Nils Daulaire, President of the Global Health Council, is among a growing chorus acknowledging that the challenge is much deeper than cheaper medications. “Even if AIDS drugs were free, no more than 10 to 20 percent of Africans would benefit as the health infrastructures do not exist to manage infections in each individual”, he said.79 Compounding the problem is the fact that in some countries, governments lack the political will to direct needed attention and resources to the problem of HIV/AIDS.

#### 2] Turn - Patents help establish critical infrastructure in Africa which solves their impact

Zainol 11, Zinatul A., et al. "Pharmaceutical patents and access to essential medicines in sub-Saharan Africa." African Journal of Biotechnology 10.58 (2011): 12376-12388. (Social Impact of Biotechnology Development in Malaysia Research Group (SIMBIO). Universiti Kebangsaan Malaysia, 43600 UKM Bangi, Selangor, Malaysia.)//Joey

But presenting the flip side to the debate are those who argue, equally strongly, that pharmaceutical patents do not really deny people in poor countries access to essential medicines. For example, the former Chairman of GlaxoSmithKline, Sir Richard Sykes (2002), insists that pharmaceutical patents do not prevent developing countries from accessing the medicines they need. Instead, patent protection helps those developing countries that have the necessary technological capacity to establish their own pharmaceutical industry. Proponents of this view also maintain that patents are not usually sought in small and technologically-disadvantaged developing countries, such as those in sub-Saharan Africa. Even when patents are sought, they do not affect costs or access.

#### Circumvention and they don’t solve – even if they say “durable fiat”, they have not defined the scope of the plan in the 1AC so you don’t know what the plan would materially look like

Mercurio 6/24 [Simon F.S. Li Professor of Law, The Chinese University of Hong Kong, Shatin, Hong Kong. June 24, 2021. “The IP Waiver for COVID-19: Bad Policy, Bad Precedent” <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/> Accessed 8/25 //gord0]

The role of intellectual property rights (IPRs) and access to medicines is contentious. On the one hand, IPRs encourage investment, innovation and the advancement of health science. On the other hand, the limited-term monopoly rights can result in artificially high prices and become a barrier to access to medicines. While the wisdom of the IPRs system has at times been tested, it has proven its value in the current COVID-19 pandemic as IPRs played a large role in the rapid (and unprecedented) development and availability of multiple vaccines. Despite the success, India and South Africa proposed that the World Trade Organization (WTO) waive IPRs under the Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS Agreement) in order to increase access to vaccines and other COVID-19-related technologies.[1](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn1) The proposal, tabled at a meeting of the TRIPS Council in October 2020, calls on Members to waive IPRs relating to and having an impact on the “prevention, containment or treatment of COVID-19”.[2](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn2) The proposal attracted support from the majority of developing country Members,[3](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn3) but was opposed by a handful of Members including the United States (US).[4](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn4) Given that consensus could not be reached within the deadline of 90 days as set out in Art. IX:3 of the Agreement Establishing the WTO, Members agreed to keep the waiver proposal on the agenda of the TRIPS Council in 2021.[5](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn5) On 5 May 2021, the US reversed its position and announced that it would support a waiver for COVID-19 vaccines.[6](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn6) To be clear, this does not mean that the US supported the waiver as proposed by India and South Africa. Instead, the US has simply agreed to negotiate the perimeters of a waiver. Others, including the European Union (EU), Canada, Australia, Norway, Switzerland, the United Kingdom (UK) and even leading developing countries such as Brazil, Chile and Mexico remain opposed or lukewarm on the waiver.[7](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn7) The US dropping opposition does not mean the concerns of other Members will simply disappear – one would hope that these nations opposed the waiver for valid reasons and did not simply blindly follow the US. Indeed, many of the above-listed Members remain unconvinced that even such a draconian step as a waiver of IPRs would accomplish the goal of increased vaccine production.[8](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn8) For its part, the EU continues to favour an approach which makes better use of existing flexibilities available in the TRIPS Agreement.[9](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn9) Thus, those expecting quick agreement on the waiver will be disappointed. Negotiations at the WTO are always difficult and lengthy, and US Trade Representative Katherine Tai acknowledged that the “negotiations will take time given the consensus-based nature of the institution and the complexity of the issues involved”.[10](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn10) Issues of negotiation will include the scope of the waiver. Whereas the original proposal and its amended form extend the waiver beyond patents and vaccines to include nearly all forms of IP (i.e. copyright,[11](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn11) industrial designs and trade secrets) as well as to all “health products and technologies including diagnostics, therapeutics, vaccines, medical devices, personal protective equipment, their materials or components, and their methods and means of manufacture for the prevention, treatment or containment of COVID-19”[12](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn12) (with no requirement on how or the extent to which they are related to or useful in combatting COVID-19), the US and others seem to support a waiver limited to patents and vaccines.[13](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn13) The length of the waiver will also be a contentious negotiating issue, with proponents seeking a virtual indefinite waiver lasting until the Membership agrees by consensus that it is no longer required – meaning even a single Member’s objection to ending the waiver would mean the waiver continues to remain in force[14](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn14) – as will the request that any action claimed to be taken under the waiver is outside the scope of the WTO’s dispute settlement mechanism.[15](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn15) These provisions will almost certainly be opposed by other Members, who would perhaps agree to a time-limited waiver which could be extended rather than an unchallengeable indefinite waiver which will be difficult to reverse. The proposal also fails to mention anything in relation to transparency and notification requirements and lacks safeguards against abuse or diversion. These points will likely also prove contentious in the negotiations. With so many initial divergences and as yet undiscussed issues, the negotiations at best could be completed by the time of the next WTO Ministerial Conference, scheduled to begin on 20 November 2021. There is precedent in this regard, as previous TRIPS negotiations involving IP and pharmaceuticals were not fully resolved until the days before the Ministerial Conferences (in 2003 and 2005).[16](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn16) There is also a chance that the negotiations will continue past the calendar year 2021. The chance for a swift negotiation diminished with the release of a revised proposal by India and South Africa on 22 May 2021. As mentioned above, the proposal contains no limit as to product coverage, scope, notification requirements or safeguards and proposes that the waiver will remain in effect for what could be an indefinite period. This was not a proposal designed to engender quick negotiations and a solution. Instead, the proposal perhaps reveals India’s and South Africa’s true intent to use the COVID-19 pandemic as an excuse to roll-back IPRs rather than a good-faith effort to rapidly increase access to lifesaving vaccines and treatments around the world. It is not only the length of time which is an issue but also the ultimate impact of the waiver. A waiver simply means that a WTO Member would not be in violation of its WTO obligations if it does not protect and enforce the COVID-19-related IPRs for the duration of the waiver. The waiver would thus allow Members to deviate from their international obligations but not obligate Members to suspend protection and enforcement of the IPRs. Members like the US who support the waiver may not implement the necessary domestic legislation to waive IPRs within the jurisdiction. It is questionable whether the US could even legally implement the waiver given that IPRs are a matter of constitutional law.[17](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn17) The US announcement remains meaningful, however, for two reasons. First, it signals a departure from the longstanding and bipartisan support for the pharmaceutical industry, which for decades has been instrumental in setting the IP and trade agenda.[18](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn18) Second, it sends a strong signal that the US does not oppose others from waiving patent protection for vaccines. This shift may also be part of a broader and alternative strategy to increase vaccine production and distribution, whereby the US is not viewing or supporting waiver negotiations as a legal tool but more so as a threat to encourage vaccine innovators to increase production. In essence, the desired reaction would be that the IP holders increase efforts to license, transfer technology and expand manufacturing – exactly what the world needs at this time. Alan Beattie, writing in the Financial Times, believes that even the proponents of the waiver desire this outcome: “having talked to the proponents, [the original proposal] was always a tactical position designed to start a debate, identify possible support and flush out opponents rather than a likely outcome. To that end, it seems to have worked rather well.”[19](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn19) India’s negotiator to the TRIPS Agreement and longtime WTO staffer, Jayashree Watal, agrees, stating the proposal is an “indirect attempt to put pressure on the original manufacturers to cooperate [and license production to companies in their countries]”.[20](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn20) This view makes sense, as the proponents (and their supporters) have not even pointed to one credible instance where IPRs have blocked the production of a COVID-19 vaccine. Moreover, it is well known that the leading vaccines using mRNA are difficult to reproduce and having the “blueprints” does not guarantee safe and effective production. Simply stated, if a pastry chef provides instructions on how to bake a cake, the cake they bake is still going to be better than cakes baked by novices using the exact same recipe. The know-how and trade secrets are the key ingredient to the manufacture of quality, safe and effective pharmaceuticals or vaccines, and not only is it not transferred through compulsory licenses but it is hard to imagine how any government would force the transfer of such information even under a waiver. For this reason, instead of encouraging production everywhere – including in locations where safety and efficacy standards are virtually nonexistent – and accepting that there will be a flood of substandard vaccines coming onto the world market (with devastating effects) it is much more sensible to find out where potential manufacturing capabilities exist and find ways to exploit them and scale them up. When asked if a waiver would improve vaccine availability and equity, Watal responded: “No. It won’t. That’s clear.”[21](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn21) I share Watal’s view and do not support a TRIPS waiver for IPRs or even a limited waiver for patents. With evidence mounting that “what the proposal … will definitely not achieve is speeding up the Covid-19 vaccination rate in India or other parts of the Global South”[22](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn22) I refuse to sacrifice academic integrity by supporting a proposal simply because it is gaining traction in some circles.[23](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn23) IPRs played a key role in delivering vaccines within a year of the discovery of a new pathogen; it seems inexplicable that the world would abandon the system without any evidence that IPRs are limiting during the current crisis.[24](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8223179/#Fn24) Moreover, innovators have been generous in licensing technology transfer and production and one would be hard-pressed to find credible reports of qualified generic producers being refused a license. This is not surprising, since multiple competing vaccines are on the market it simply does not make economic sense for innovators to refuse a license – the generic manufacturer would simply obtain a license (and market share) and pay royalties to a competitor. Instead, I support efforts to enable prompt and effective use of existing flexibilities in the TRIPS Agreement and concerted and coordinated efforts involving governments and the private sector to ensure all qualified generic producers willing and capable of manufacturing vaccines are doing so and to create supply by working to bring more facilities up to standard. Cooperation will not only lead us out of this pandemic but also put us in a better position to deal with the next one. Killing the goose that laid the golden egg may seem appealing to some in the short term but will only ensure that no eggs are delivered in the next pandemic.

#### Tons of alt causes to health inequality – access, structural wealth inequality, private monopolies

#### Squo solves – plan increases price of scarce materials and results in costly, ineffective facilities

Mcmurry-Heath 8/18 (Michelle Mcmurry-Heath, [physician-scientist and president and CEO of the Biotechnology Innovation Organization.], 8-18-2021, “Waiving intellectual property rights would harm global vaccination“, STAT, accessed: 8-19-2021, https://www.statnews.com/2021/08/18/waiving-intellectual-property-rights-compromise-global-vaccination-efforts/) ajs

Covid-19 vaccines are already remarkably cheap, and companies are offering them at low or no cost to low-income countries. Poor access to clinics and transportation are barriers in some countries, but the expense of the shot itself is not. In fact, if the World Trade Organization grants the IP waiver, it could make these vaccines more expensive.

Here’s why. Before Covid-19 emerged, the world produced at most [5.5 billion doses](https://www.barrons.com/articles/a-plan-to-break-the-vaccine-manufacturing-bottleneck-51621952245) of various vaccines every year. Now the world needs an additional [11 billion doses](https://www.who.int/director-general/speeches/detail/director-general-s-opening-remarks-at-the-g7-summit---12-june-2021) — including billions of doses of mRNA vaccines that no one had ever mass-manufactured before — to fully vaccinate every eligible person on the planet against the new disease.

Even as Covid-19 vaccines were still being developed, pharmaceutical companies began retrofitting and upgrading existing facilities to produce Covid-19 vaccines, at a cost of $40 to $100 million each. Vaccine developers also licensed their technologies to well-established manufacturers, like the Serum Institute of India, to further increase production. As a result, almost every facility in the world that can quickly and safely make Covid-19 vaccines is already doing so, or will be in the next few months.

#### Techno-utopic DA - Imaginaries direct funds and structure engineering projects - Causes Imperial Warfare

Atanasoski & Vora 19 (Neda, Prof. Feminist Studies & Critical, Race, and Ethnic Studies & Legal Studies @ UC Santa Cruz, and Kalindi, Assoc. Prof Gender, Sexuality and Women’s Studies and Dir., Feminist Research Institute, *Surrogate Humanity: Race, Robots, and the Politics of Technological Futures*, pp. 23-6//ak47 – RKS Wake Joey)

Dominant **techno-utopic imaginaries** direct funds and structure engineering **research labs** around the world, and therefore also impact the distribution of differential conditions of comfort versus misery in the present along vectors of race, gender, class, and other social hierarchies. The surrogate human effect explains how difference continues to inform what subjects become legible as human through technology design imaginaries that respond to market values by **focusing on innovating** and **improving**, rather than challenging, social and cultural structures and processes that are predicated by categories of gendered racial hierarchy. To this end, Denise da Silva offers the concept of “knowing (at) the limits of justice,” a practice that “unsettles what has become but offers no guidance for what has yet to become.”59 To insist on “knowing at the limits” of representational categories of difference, we must ask: If the predominant fantasies of systemic social change in mainstream Euro-American public discourse dwell upon the techno-utopics of a world in which all of those who are already human and already subjects ascend into the realm of those whose lives are supported by “human-free” or “**unmanned” technological infrastructures** of service (whether in factories, in the military, or in the nursing home), then how do we think about the relationship of new technologies to possible fields of political protest or action? The dissident technological imaginaries we include in each chapter take up categories that challenge those of **technoliberal capitalism** and its projected futures. We read these design imaginaries as exploring the possibilities of technology to break from historically sedimented dynamics of freedom and unfreedom woven into the fabric of technological modernity. In addition to offering critique, each chapter thinks through how such design imaginaries can push at the limits of what is possible, disrupting the confining notions of (technoliberal capitalist) possibility housed in the engineering imaginaries we critique. We explore these questions through juxtaposing engineering imaginaries that embrace the surrogate effect, thereby advancing the infrastructure of technoliberal futures, with imaginaries that do not. Using examples of robotic technologies intended to replace human bodies and functions from the early twentieth century to the present day, the first chapter foregrounds the postlabor and postrace imaginary of present-day “technoliberalism” as a reinvigoration of the historical imbrications of liberalism and fascism—the twin pillars of US economic, social, and geopolitical supremacy. Rather than posit a break between the liberal and fascist logics of automation, we insist on their codependence. We survey the ways in which automation in both the liberal-capitalist and totalitarian-fascist bents depends upon a fantasy of robotics tied to the history of racial slavery and the myth of a worker who cannot rebel. We track this foundational fantasy through Cold War discourses of automation as mediating the distinction between democratic liberalism and totalitarianism as the prehistory of contemporary discourses around robotics and white loss in the era of the Trump presidency. Building on our analysis of how liberalism and fascism have deployed and constructed fantasies of the fully human through and against capitalist logics of automation, the second chapter turns to present-day technoliberalism’s appropriation of socialist imaginaries of the commons, sharing, and collaboration. These three terms have become the buzzwords used to describe the economic transformations marking the so-called fourth industrial revolution and second machine age. While making claims to radical shifts toward an economy where commodities can be shared, and where 3d printers can even lead to the end of capitalism as we know it, as we argue, such technoliberal progress narratives in fact mask the **acceleration of exploitation** under the conditions of racial capitalism. Critiquing such appropriative moves in collaborative robotics, the sharing economy, and the creative commons, we also read alternate genealogies and visions of collaboration, sharing, and technology in collectivist and decolonial feminisms. In the next chapter, we extend this discussion of the acceleration of exploitation by turning our attention to the ways in which claims that technology is displacing human labor invisibilize the growing workforce of casualized and devalued laborers performing tasks that we are encouraged to imagine as performed for us by robots and ai. Addressing the relationship between service and the promises of technoliberal futurity, we assess how present-day disappearances of human bodies take place through platforms specifically designed to disguise human labor as machine labor. Focusing on the labor politics, design, and infrastructures of service, we argue that platforms like Alfred and Amazon Mechanical Turk enact the surrogate effect for consumers through the erasure of human workers. Consumers therefore consume the assurance of their own humanity along with the services provided. Following from this discussion of the erasure of the potential physical and social encounter between worker and consumer through digital platforms, chapter 4 turns to robots that are designed to take up a different kind of social relation with the human: so- called sociable emotional robots. We argue that machine sociality preserves the effect of human uniqueness, as the social function of the robot is continually reduced to service performed through the correct display of obeyance and eager responsiveness to human needs. Focusing on the robot Kismet, which is considered the first sociable emotional robot, we draw attention to the imperial and racial legacies of a Darwinian emotion-evolution map, which was the model for Kismet’s emotional drives. We analyze how sociable emotional robots are designed as a mirror to prove to us that the apex of human evolution, resulting from these racial legacies, is the ability to perform the existence of an interior psyche to the social world. The next two chapters continue the discussion of service, human–machine relations, and the technoliberal racial engineering of robotics in the automation of warfare. Chapter 6 addresses drones (semiautonomous weapons) and so-called killer robots (autonomous lethal weapons) as technologies that conjure the dangerous specter of machine autonomy in US public debates about the potential threat to humanity posed by ai. This chapter contends with the configuration of autonomy within military technologies that produces killable populations as “targets,” and builds on post-Enlightenment imperial tools of spatial and temporal command to **refigure contemporary warfare** as “unmanned.” We assert that both autonomous and semiautonomous weapons are in fact not “unmanned,” but cobots, in the sense that they are about human– machine coproduction. The chapter thus problematizes conceptions of autonomy that at once produce myths of unmanned warfare and the racialized objecthood tethered to servitude within technoliberalism. The final chapter elaborates our analysis of how speculation about the future of lethal autonomous weapons engenders present-day fears around machine autonomy in ways that continue to conceive historical agency in relation to the racialized inheritances defining objecthood, property, and self-possession. We argue that the killer robot is a technology that enables a description of what it means to feel human within technoliberal imperialism. To do so, we turn to attempts by human rights organizations and ngos to ban killer robots (autonomous weapons that could make decisions about taking human life without human oversight). These groups argue that killer robots are a human rights violation in the future tense, since fully autonomous lethal weapons are not currently operational in the field of war. Against the specter of the killer robot as an a priori human rights violation, humanity is rendered as the capacity to feel empathy and recognize the right to life of killable others, while reifying the human as the rights-based liberal subject.

#### Framing DA- Their framings of resistance of Medical speheres sustain neoliberal crisis—turns the case necessitates psychological violence

McKeown et al 2017. Dr. M McKeown is Reader in Democratic Mental Health, School of Nursing, University of Central Lancashire. Dr. K Wright is the head of School of Nursing, University of Central Lancashire, Lancashire. Dr. D. Mercer Lecturer, School of Health Sciences, University of Liverpool. “Care planning: a neoliberal three cardtrick.” Volume 24, Special Issue on Care Planning and Co-ordination

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Listening for a squawk of resistance

Where then is the squawk from beleaguered nurses and other psy-professionals? There are some notable exemplars: the Critical Psychiatry Network, Psychologists Against Austerity, and the Critical Mental Health Nursing Network, amongst a few. Similarly, health and public service trade unions are often vociferous campaigners against cuts, but arguably require a more sophisticated politics of mental health and somewhat less hubris to forge the necessary alliances with survivor and service user activism required to pursue change (McKeown et al. 2014a). Notwithstanding the energies put into various campaigns, or grassroots rumblings of discontent, any collective squawk from mental health nurses seems to be very much muted at present but has great potential to grow into something more powerfully meaningful. Under neoliberalism, Western democracies, their health care services and trade unions face a multiplicity of interconnected legitimacy shortcomings. An inevitable consequence is the precipitation of protest and contemplation of alternative futures. The various crises of legitimation include democratic deficits in the state at national and local levels, a crisis in care and alleged lack of compassion amongst the workforce (Francis 2013), and trade union decline associated with loss of faith in internal democratic structures (Hyman 2007). Bauman (2000) posits a state of liquid modernity that has come to typify the experience of life under mature capitalistic societies. Public services in particular suffer predictably negative consequences of marketization and privatisation, including heightened uncertainties and insecurities for the workforce with subsequent damage in terms of continuity and fragmentation of caring relationships (Randall & McKeown 2013). Mental health services are perennially starved of resources and organised around a medical model that upholds mass compulsion and coerced treatment, precipitating specific criticisms and pro-active consideration of alternatives. Thus bio-psychiatry is subject to a quite particular legitimacy crisis, subject to powerful questioning on its own scientific terms with credible critique of the evidence for treatments such as medication (Moncreiff 2008, Whittaker 2010). The resource squeeze on public services has significantly contributed to a workforce crisis, with disquiet over establishment of safe staffing levels. Such concerns have largely referenced general adult healthcare; with mental health services (perhaps conveniently) neglected in much of the discussion. In some regards this has resulted in the beginnings of a squawk, but arguably the levels and volume of dissent have been insufficient or energies side-tracked into circular debates regarding the calibration or evidencing of staffing profiles. Neoliberal regimes favour elaborate mechanisms for scrutiny and calculation that promulgate a strange admixture of illusory confidence and abject anxieties concerning staffing-levels. The pretence of systematisation fosters a veneer of safety to present to auditors and commissioners whilst a necessity of defensive practice is reinforced in the face of insufficiencies and high turnover of staff. Taken together, these crises have provoked critical thinking to frame alternative forms of care that hold promise to meet Sedgwick’s demand for large-scale responses to mental distress. A number of these, such as Soteria, earlier thinking around Therapeutic Communities and the more recent Open Dialogue, whilst not panaceas, share a common characteristic of privileging democracy, and if at all possible, minimising coercion and medication (Mosher 1999, Seikkula et al. 2011, Spandler 2009, Winship 2013). The notion of user voice has achieved, at least at the level of rhetoric, a certain prominence in policy and practice, with examples of involvement extending beyond direct care into education and research (Lowes & Hulatt 2013, McKeown & Jones 2014, Terry 2012). Somewhat paradoxically, critically minded service users have capitalised on a distinctly consumerist turn in social policy attendant on neoliberal assertions of the primacy of individualism and personal choice. A consumerist framing perhaps explains both the general lack of transformative impact of what passes for standard user involvement initiatives (see Suzanne Hodge 2005, 2009) and the ever present hazard of co-option. Cooke & Kothari (2002) view such participation as akin to a new form of tyranny, too readily incorporated into established systems of governance and control. Yet, whilst not yet revolutionary there are also undoubted contemporaneous successes of more creative and deliberative forms (McKeown et al. 2014b). To some extent this supports the view of commentators such as Clarke (2007) who defy pessimism regarding the possibilities for overthrowing neo-liberal hegemony, highlighting the potential of recalcitrant positioning within the cracks and interstices of public services. Similarly, Saario (2012) has noted the subtle ways in which mental health nurses can resist unwanted aspects of new managerialism. We turn now to consider opportunities for moving beyond a rhetoric of participation and voice towards a logic of democratisation that involves staff and service users in shaping the very ways in which care work is organised. Within such a frame, the very idea of individualised care planning may become redundant, or at least credibly questioned, in a context of more collectivised intervention