### 1 – T-Reduce

#### 1] Interpretation – “Reduce” means to annul.

Black’s Law 90 Black’s Law Dictionary 2ND ED. “Reduce” <https://dictionary.thelaw.com/reduce/> //Elmer

In Scotch law. **To rescind or annul**.

#### That means the Aff has to cancel IP protections in their entirety, they can’t just modify it.

Black’s Law 90 Black’s Law Dictionary 2ND ED. “Annul” <https://thelawdictionary.org/annul/>

//Elmer

**To cancel**; **make void ; destroy.** To annul a judgment or judicial proceeding is to **deprive it of all force and operation**, either a6 initio or prospectively as to future transactions. Wait v. Wait, 4 Barb. (N. Y.) 205; Woodson v. Skinner, 22 Mo. 24; In re Morrow’s Estate, 204 Pa. 484, 54 Atl. 342.

#### 2] Violation – They don’t remove the IP, the Trade Secret still has the same protection under law, it cannot be disclosed unless disclosure is in the public interest – the Aff only shifts who has to prove that NOT the actual protection.

#### 3] Standards –

#### a] Limits – Allowing the Aff’s to deal with the enforcement of IP rather than the actual protection explodes the Topic – Affs can modify court proceedings, specify which courts hear the cases, how long those proceedings last, which agencies pursue legal action, etc. – it eviscerates a predictable stasis by shifting it away from IPP good/bad.

#### b] Neg Ground – Shifting the topic to enforcement means DAs like Innovation, Biotech Heg, Politics no longer apply since the Aff doesn’t have to reduce anything related to the IPP itself – proven by the fact we can’t read Trade Secrets Good vs this Aff since the 1AR will shift to the IP itself doesn’t change and if they were good, the Aff wouldn’t be enforced proving modifications are infinitely abusive.

#### 4] TVA – eliminate Trade Secret protection of Pharma to eliminate deterrent litigation against whistle-blowers since there’s no longer a legal basis for enforcement.

#### 5] Paradigm Issues –

#### a] Topicality is Drop the Debater – it’s a fundamental baseline for debate-ability.

#### b] Use Competing Interps – 1] Topicality is a yes/no question, you can’t be reasonably topical and 2] Reasonability invites arbitrary judge intervention and a race to the bottom of questionable argumentation.

### 2 – TRIPS CP

#### Text - The European Union ought to

#### increase intellectual property protections for medicines

#### designate intellectual property protections on medicines as adversely affecting the international transfer of technology.

#### The CP competes – 1] it increases IP protections and 2] it’s a temporary waiver NOT a permanent reduction.

#### Member states can waive IP rights if they hamper the international flow of medical technology.

WTO ’21 (World Trade Organization; 2021; “Obligations and exceptions”; World Trade Organization; Accessed: 8-30-2021; exact date not provided, but copyright was updated in 2021; AU)

Article 8 Principles […] 2. Appropriate measures, provided that they are consistent with the provisions of this Agreement, **may be needed** to prevent the abuse of intellectual property rights by right holders or the resort to practices which unreasonably restrain trade or **adversely affect** the **international transfer of technology**. SECTION 8: CONTROL OF ANTI-COMPETITIVE PRACTICES IN CONTRACTUAL LICENCES Article 40 1. Members agree that some licensing practices or conditions pertaining to intellectual property rights which restrain competition may have **adverse effects on trade** and **may impede** the **transfer and dissemination** of technology. 2. Nothing in this Agreement **shall prevent** Members from specifying in their legislation licensing practices or conditions that may in particular cases constitute an abuse of intellectual property rights having an adverse effect on competition in the relevant market. As provided above, a Member **may adopt**, consistently with the other provisions of this Agreement, **appropriate measures** to **prevent or control** such practices, which may include for example exclusive grantback conditions, conditions preventing challenges to validity and coercive package licensing, in the light of the relevant laws and regulations of that Member. […]

#### Designating IP protections as antithetical to the global health system revitalizes info-sharing.

Youde ’16 (Jeremy; writer for World Politics Review; 4-29-2016; “Technology **Transfer** Is a **Weak Link** in the Global Health System”; World Politics Review; <https://www.worldpoliticsreview.com/articles/18639/technology-transfer-is-a-weak-link-in-the-global-health-system>; Accessed: 8-30-2021; AU)

In mid-April, a spokesperson for the Ugandan government admitted that the country’s only functioning cancer treatment machine had broken earlier that month. The radiotherapy machine, donated by China to Uganda in 1995 and housed at Mulago Hospital in Kampala, is now considered beyond repair. While the government did acquire a second radiotherapy machine in 2013, it has not been operational because of delays in allocating 30 billion shillings—just shy of $9 million—to construct a new building to house it. The funding delay has lifted, but the machine won’t be up and running for at least six months. The government has announced plans to airlift some cancer patients to Nairobi for treatment, but that plan will only accommodate 400 of the estimated 17,000 to 33,000 cancer patients who need treatment annually in Uganda. This breakdown of technology is a human tragedy for the cancer patients from Uganda as well as elsewhere in East Africa that the radiotherapy machine helped treat. Beyond the personal level, though, the episode illustrates a larger shortcoming in global health. Total annual development assistance for health is approximately $36 billion, but that funding is overwhelmingly concentrated on specific infectious diseases. Noncommunicable diseases like cancer receive relatively little international funding—only 1.3 percent in 2015, and the dollar amount has declined since 2013. Funds to strengthen health systems, geared toward building and supporting a resilient health care system, are similarly low, making up only 7.3 percent of development assistance in 2015. Noncommunicable diseases kill more people every year than infectious diseases and accidents do, but this balance is not reflected in global health spending. ... These shortcomings also speak to larger problems in global health around issues of **technology transfers** and long-term **commitments** to keep that technology working. It’s one thing to provide necessary medical technologies in the first place; it’s another to ensure that those technologies are accessible and operational going forward. Despite the **importance** of technology transfers, questions of **long-term support** for them have received relatively little attention from the global health regime. As noncommunicable diseases like cancer cause an even-higher proportion of deaths each year, it will become all the more **imperative** that the international community address this gap in **sharing** and funding **crucial health care** technology. This does not mean that there are no efforts to facilitate technology transfers around the world. The Fogarty International Center, a part of the U.S. National Institutes of Health, has had an [Office of Technology Transfer](http://www.fic.nih.gov/News/GlobalHealthMatters/march-april-2014/Pages/technology-transfer-nih-ott.aspx) since 1989 to make medical innovations developed in the United States more widely available. The World Health Organization (WHO) also has a [Technology Transfer Initiative](http://www.who.int/phi/programme_technology_transfer/en/) to improve access to health care technologies in developing countries. These efforts are laudable, but their interpretation of technology transfer is almost entirely rooted in access to pharmaceuticals and vaccines. To be sure, that is a very important issue—but it only deals with one narrow element of technology transfer. The problems of global health technology transfers illustrated in Uganda underscore a larger issue: the need for a so-called fourth industrial revolution, what has been described as “blurring the real world with the technological world.” This idea gained prominence earlier this year when it served as the theme for the World Economic Forum in Davos. For global health, this means embracing technology to find low-cost ways to promote health, spread education, and reach communities whose access to the health care infrastructure is weak. It expands on the notion of telemedicine and eHealth to make it more encompassing. According to health care entrepreneur Jonathan Jackson, the fourth industrial revolution could change global health by encouraging a shift in focus “from healthcare to health promotion.” Moving from high-cost treatment to low-cost prevention, he has argued, will have significant and far-reaching positive economic implications for developing countries around the world. Its inspiring sense of technological optimism notwithstanding, this sort of approach cannot be the sole focus of technology transfers in global health. Prevention is indeed important, but the fact of the matter remains that people will get sick—and those sick people will need treatment. Mobile applications and electronic access to health care providers can be useful, but they cannot replace a radiotherapy machine. Understanding the root causes of noncommunicable diseases goes far beyond individual choices and intersects with the larger political, economic and social context, so we cannot assume that cybertechnology alone can stop cancer. It is also important to remember that the results of greater technological innovation and integration won’t be free. Sub-Saharan African states, on average, spend $200 per person per year on health care. Even if technology allows costs to decline, they are still likely to be out of reach for many people in most of these countries—in the same way that the purchase and maintenance of medical technologies are prohibitively expensive in these same states today. Technology in and of itself is not useful unless it can be maintained over the long term. This, then, is a weak link in the larger global health system: How do we ensure access to life-prolonging medical technologies beyond pharmaceuticals and vaccines in a sustainable way? Consider two ideas. First, development assistance for health must orient more of its resources toward treating noncommunicable diseases and strengthening health systems. These are the areas in which these technologies are likely to be used, but are not currently supported by the international system. The changing nature of health and disease will only make them even more important in the years to come. Second, longer-term funding commitments would provide a greater opportunity to incorporate medical technologies into health care systems sustainably. Machines will break down, and technologies will fail. That is inevitable. But the global health regime, from the WHO and its regional organizations like the Regional Office for Africa to major donors like the **U**nited **S**tates government and the Bill and Melinda Gates Foundation, needs to figure out how to ensure that these problems do not put **lives in peril**. Technology alone will not improve global health unless it is properly supported and funded.

#### International collaboration’s key to check future pandemics – otherwise, extinction.

Dulaney ’20 [Michael; digital journalist with the ABC June 2020; "'A question of when, not if': Another pandemic is coming – and sooner than we think", No Publication; https://www.abc.net.au/news/science/2020-06-07/a-matter-of-when-not-if-the-next-pandemic-is-around-the-corner/12313372, accessed 4-12-2021]

And as recently as September last year — just a few months before COVID-19 was detected in China — an independent watchdog set up by the WHO warned the world was "grossly" unprepared for the "very real threat" of a pandemic. But even more alarming is what the new coronavirus indicates about the future. Researchers say human impacts on the natural world are causing new infectious diseases to emerge more frequently than ever before, meaning the next pandemic — one perhaps even worse than COVID-19 — is only a matter of time. "We know that it's a probability, not a possibility," Dr Reid says. "The roulette wheel will start to spin again. "If you don't resolve the conditions that generated the problem, then we sit waiting for the next probability equation to come through. "And it will, and sadly it's possible that it's in our lifetime." The growing threat to human health Nearly all emerging pathogens like COVID-19 come from "zoonotic transfer" — essentially, when a virus present in animals jumps to infect humans. The US Centers for Disease Control and Prevention estimates three out of every four new infectious diseases, and nearly all pandemics, emerge this way. Researchers have counted around 200 infectious diseases that have broken out more than 12,000 times over the past three decades. On average, one new infectious disease jumps to humans every four months. Animal species like civet cats (SARS), camels (MERS), horses (Hendra), pigs (Nipah) and chimpanzees (HIV) have all been implicated in the spread of new viruses at different times.

### 3 – Innovation DA

#### Strong current IP guarantees causes massive Pharma innovation.

* Answers Evergreening/Me-Too Drugs

Stevens and Ezell 20 Philip Stevens and Stephen Ezell 2-3-2020 "Delinkage Debunked: Why Replacing Patents With Prizes for Drug Development Won’t Work" <https://itif.org/publications/2020/02/03/delinkage-debunked-why-replacing-patents-prizes-drug-development-wont-work> (Philip founded Geneva Network in 2015. His main research interests are the intersection of intellectual property, trade, and health policy. Formerly he was an official at the World Intellectual Property Organization (WIPO) in Geneva, where he worked in its Global Challenges Division on a range of IP and health issues. Prior to his time with WIPO, Philip worked as director of policy for International Policy Network, a UK-based think tank, as well as holding research positions with the Adam Smith Institute and Reform, both in London. He has also worked as a political risk consultant and a management consultant. He is a regular columnist in a wide range of international newspapers and has published a number of academic studies. He holds degrees from the London School of Economics and Durham University (UK).)//Elmer

The **Current System** Has **Produced a Tremendous Amount of Life-Sciences Innovation** The frontier for biomedical innovation is seemingly limitless, and the challenges remain numerous—whether it comes to diseases that afflict millions, such as cancer or malaria, or the estimated 7,000 rare diseases that afflict fewer than 200,000 patients.24 And while certainly citizens in developed and developing nations confront differing health challenges, those challenges are increasingly converging. For instance, as of this year, analysts expect that **noncommunicable** diseases such as cardiovascular disease and diabetes will account for 70 percent of natural fatalities **in developing countries**.25 Citizens of low- and middle-income countries bear 80 percent of the world’s death burden from cardiovascular disease.26 Forty-six percent of Africans over 25 suffer from hypertension, more than anywhere else in the world. Similarly, 85 percent of the disease burden of cervical cancer is borne by individuals living in low- and middle-income countries.27 To develop treatments or cures for these conditions, novel biomedical innovation **will be needed from everywhere**. Yet tremendous progress has been made in recent decades. To tackle these challenges, the global pharmaceutical industry invested over **$1.36 trillion in R&D** in the decade from 2007 to 2016—and it’s expected that annual R&D investment by the global pharmaceutical industry will reach $181 billion by 2022.28 In no small part due to that investment, **943 new active substances have been introduced** globally over the prior 25 years.29 The U.S. Food and Drug Administration (FDA) has approved more than **500 new medicines since 2000** alone. And these medicines are getting to more individuals: Global medicine use **in 2020 will reach 4.5 trillion doses**, up 24 percent from 2015.30 Moreover, there are an estimated 7,000 new medicines under development globally (about half of them in the United States), with 74 percent being potentially first in class, meaning they use a new and unique mechanism of action for treating a medical condition.31 In the United States, over 85 percent of all drugs sold are generics (only 10 percent of U.S. prescriptions are filled by brand-name drugs).32 And while some assert that biotechnology companies focus too often on “me-too” drugs that compete with other treatments already on the market, the reality is many drugs currently under development are meant to tackle some of the **world’s most intractable diseases**, **including cancer and Alzheimer’s**.33 Moreover, such arguments miss that many of the drugs developed in recent years have in fact been first of their kind. For instance, in 2014, the FDA approved **41 new medicines** (at that point, the most since 1996) many of which were first-in-class medicines.34 In that year, 28 of the 41 drugs approved were considered biologic or specialty agents, and 41 percent of medicines approved were intended to treat rare diseases.35 Yet even when a new drug isn’t first of its kind, it can still produce benefits for patients, both through **enhanced clinical efficacy** (for instance, taking the treatment as a pill rather than an injection, with a superior dosing regimen, **or better treatment** for some individuals who don’t respond well to the original drug) and by generating competition that exerts downward price pressures. For example, a patient needing a cholesterol drug has a host of statins from which to choose, which is important because some statins produce harmful side effects for some patients. Similarly, patients with osteoporosis can choose from Actonel, Boniva, or Fosomax. Or take for example Hepatitis C, which until recently was an incurable disease eventually requiring a liver transplant for many patients. In 2013, a revolutionary new treatment called Solvadi was released that boosted cure rates to 90 percent. This was followed in 2014 by an improved treatment called Harvoni, which cures the Hepatitis C variant left untouched by Solvadi. Since then, an astonishing six new treatments for the disease have received FDA approval, opening up a wide range of treatment options that take into account patients’ liver and kidney status, co-infections, potential drug interactions, previous treatment failures, and the genotype of HCV virus.36 “If you have to have Hepatitis C, now is the time to have it,” as Douglas Dieterich, a liver specialist at the Icahn School of Medicine at Mount Sinai Hospital in New York, told the Financial Times. “We have these marvellous drugs we can treat you with right now, without side effects,” he added. “And this time next year, we’ll have another round of drugs available.”37 Moreover, the financial potential of this new product category has led to multiple competing products entering the market in quick succession, in turn placing downward pressure on prices.38 As Geoffrey Dusheiko and Charles Gore write in The Lancet, “The market has done its work for HCV treatments: after competing antiviral regimens entered the market, competition and innovative price negotiations have driven costs down from the initially high list prices in developed countries.”39 As noted previously, opponents of the current market- and IP-based system contend patents enable their holders to exploit a (temporary) market monopoly by inflating prices many multiples beyond the marginal cost of production. But rather than a conventional neoclassical analysis, an analysis based on “innovation economics” finds it is exactly this “distortion” that is required for innovation to progress. As William Baumol has pointed out, “Prices above marginal costs and price discrimination become the norm rather than the exception because … without such deviations from behaviour in the perfectly competitive model, innovation outlays and other unavoidable and repeated sunk outlays cannot be recouped.”40 Or, as the U.S. Congressional Office of Technology Assessment found, “Pharmaceutical R&D is a risky investment; therefore, high financial returns are necessary **to induce companies to invest** in researching new chemical entities.”41 This is also why, in 2018, the U.S. Congressional Budget Office estimated that because of high failure rates, biopharmaceutical **companies would need to earn a 61.8 percent rate of return on their successful new drug R&D projects in order to match a 4.8 percent after-tax rate of return on their investment**s.42 Indeed, **it’s the ability to recoup fixed costs, not just marginal** costs, through mechanisms such as patent protection that lies at the heart of all innovation-based industries and indeed all innovation and related economic progress. If companies could not find a way to pay for their R&D costs, and could only charge for the costs of producing the compound, **there would be no new drugs developed**, just as there would be no new products developed in any industry. Innovating in the life sciences remains expensive, risky, difficult, and uncertain. Just 1 in 5,000 drug candidates make it all the way from discovery to market.43 A 2018 study by the Deloitte Center for Health Solutions, “Unlocking R&D productivity: Measuring the return from pharmaceutical innovation 2018,” found that “the average cost to develop an asset [an innovative life-sciences drug] including the cost of failure, has increased in six out of eight years,” and that the average cost to create a new drug has risen to $2.8 billion.44 Related research has found the development of new drugs requires years of painstaking, risky, and expensive research that, for a new pharmaceutical compound, takes an average of 11.5 to 15 years of research, development, and clinical trials, at a cost of $1.7 billion to $**3.2 billion**.45 IP rights—including patents, copyrights, and data exclusivity protections—give innovators, whether in the life sciences or other sectors, the **confidence** to undertake the risky and expensive process of innovation, secure in the knowledge they’ll be able to capture a share of the gains from their efforts. And these gains are often only a small fraction of the true value created. For instance, Yale University economist William Nordhaus estimated inventors capture just 4 percent of the total social gains from their innovations; the rest spill over to other companies and society as a whole.46 Without adequate IP protection, private investors would never find it viable to fund advanced research because lower-cost copiers would be in a position to undercut the legitimate prices (and profits) of innovators, even while still generating substantial profits on their own.47 As the report “Wealth, Health and International Trade in the 21st Century” concludes, “Conferring robust intellectual property rights is, in the pharmaceutical and other technological-development contexts, **in the global public’s long-term interests.** Without adequate mechanisms for directly and indirectly securing the private and public funding of medicines and vaccines, research and development communities across the world will lose future benefits that would far outweigh the development costs involved.”48 Put simply, the current market- and IP-based life-sciences innovation system is producing life-changing biomedical innovation. As Jack Scannell, a senior fellow at Oxford University’s Center for the Advancement of Sustainable Medical Innovation has explained, “I would guess that one can buy today, at rock bottom generic prices, a set of small-molecule drugs that has greater medical utility than the entire set available to anyone, anywhere, at any price in 1995.” He continued, “Nearly all the generic medicine chest was created by firms who invested in R&D to win future profits that they tried pretty hard to maximize; short-term financial gain building a long-term common good.”49 For example, on September 14, 2017, the FDA approved Mvasi, the first biosimilar for Roche’s Avastin, a breakthrough anticancer drug when it came out in the mid-1990s for lung, cervical, and colorectal cancer.50 In other words, a medicine to treat forms of cancer that barely existed 20 years ago is now available as a generic drug today. It’s this dynamic that enables us to imagine a situation wherein drugs to treat diseases that aren’t available anywhere at any price today (for instance, treatments for Alzheimer’s or Parkinson’s) might be available as generics in 20 years. But that will only be the case if we preserve (and improve where possible) a life-sciences innovation system that is generally working. The current system does not require wholesale replacement by a prize-based system that—notwithstanding a meaningful success here or there—has produced nowhere near a similar level of novel biomedical innovation.

#### Trade Secrets are key to incentivize competitive Innovation – specifically key to protect start-ups.

Gutfleisch 18, Georg. "Employment issues under the European Trade Secrets Directive: Promising opportunity or burden for European companies." European Company Law Journal 15 (2018): 175-181. (working as an Associate with Brandl & Talos Rechtsanwälte GmbH in Vienna, Austria, and recently studied in the LL.M. (International and European Business Law) program at Trinity College Dublin, Ireland.)//Elmer

The **protection of trade secrets** can be **considered** as a **prerequisite for the continuous growth and success of European companies as well as the** general (**technological) advancement and competitiveness of the European economy**.7 Trade secrets can basically be described as secret information that is of value for its owner because of its secrecy. Trade secrets must be differentiated from other (registered) intellectual property rights, such as patents, designs or trademarks. They are not publicly registered and do not grant the trade secret owner an exclusive right against third parties. Most legal systems rank trade secret protection as part of unfair-competition law rather than intellectual property law.8 However, trade secrets are nevertheless related to intellectual property rights. In particular, they could be considered as a **preliminary** step or by-product **to** the **i**ntellectual **p**roperty rights **creation**. Further, trade secrets could also be maintained as permanent alternative to (registered) intellectual property rights. They do not involve costs for the application or subsequent prolongations with the competent authorities and do not impose risks of disclosure during such proceedings.9 Especially **small- and medium-sized enterprises** and start-ups **in** the **research and engineering** business often **rely on the confidentiality of sensitive information as basis of their existence**.10 The **importance** **of** effective **trade secret protection** has been **acknowledged by lawmakers globally.** Back in 1994, the member states of the World Trade Organisation (WTO) entered into the international Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS Agreement),11 which mandates the WTO member states to ensure the protection of undisclosed information without consent in a manner contrary to honest commercial practices. In addition, the Paris Convention on the protection of industrial property of 20 March 1883 (CUP Agreement)12 provides another international legal framework, which some scholars argue does afford protection to trade secrets.13 However, the rather vague minimum requirements of the TRIPS Agreement and the CUP Agreement resulted in significant differences in the national levels of trade secret protection, especially within the member states of the European Union (EU).14 The European Commission acknowledged this situation and started to actively engage with the issue of trade secret protection in the EU. In November 2013, the European Commission introduced its proposal for the TSD (together with an impact assessment and implementation plan).15 The TSD was then enacted in June 2016 after further input from the European Economic and Social Committee16 and the European Parliament Committee on Legal Affairs.17 The TSD has been based on two main reasons.18 On the one hand, it has been argued that the different levels of protection in Europe caused companies to refrain from exchanging confidential information across borders and hindered the proper development of research and innovation. On the other hand, **European companies** regularly **faced** **competitive disadvantages when their trade secrets are misappropriated**.

#### Yes Link – the thesis of the Aff is mean to help ease burden of whistleblowers in winning suits to expose Trade Secrets – the mere threat of a weakening IPR and Secret Protection deters investment.

Ezell et al. ’19 (Stephen; vice president of global innovation policy at the Information Technology and Innovation Foundation; 4-25-2019; “The Way Forward for Intellectual Property Internationally”; Information Technology and Innovation Foundation; <https://itif.org/publications/2019/04/25/way-forward-intellectual-property-internationally>; Accessed: 8-31-2021; AU)

**IPR** reforms also introduce **strong incentives** for domestic innovation. Sherwood, using case studies from 18 developing countries, concluded that **poor provision** of intellectual property rights **deters local innovation** and risk-taking.47 In contrast, IPR reform has been associated with **increased innovative activity**, as measured by domestic patent filings, albeit with some variation across countries and sectors.48 For example, Ryan, in a study of biomedical innovations and patent reform in Brazil, found that patents provided incentives for innovation investments and facilitated the functioning of technology markets.49 Park and Lippoldt also observed that the provision of adequate **protection for IPRs** can help to **stimulate** local innovation, in some cases building on the transfer of technologies that provide inputs and spillovers.50 In other words, local innovators are introduced to technologies first through the technology transfer that takes place in an environment wherein **protection** of IPRs is **assured**; then, they may build on those ideas to create an evolved product or develop alternate approaches (i.e., to innovate). Related research finds that trade in technology—through channels including imports, foreign direct investment, and technology licensing—improves the quality of developing-country innovation by increasing the pool of ideas and efficiency of innovation by encouraging the division of innovative labor and specialization.51 However, Maskus notes that **without protection** from potential abuse of their newly developed technologies, foreign enterprises may be less willing to reveal technical information associated with their innovations.52 The protection of **patents and trade secrets** provides **necessary legal assurances** for firms wishing to reveal proprietary characteristics of technologies to subsidiaries and licensees via contracts. The relationship between IPR rights and innovation can also be seen in studies of how the introduction of stronger IPR laws, with regard to patents, copyrights, and trademarks, affect R&D activity in an economy. Studies by Varsakelis and by Kanwar and Evenson found that R&D to GDP ratios are positively related to the strength of patent rights, and are conditional on other factors.53 Cavazos Cepeda et al. found a **positive influence** of IPRs on the level of R&D in an economy, with each 1 percent increase in the level of protection of IPRs in an economy (as measured by improvements to a country’s score in the Patent Rights Index) equating to, on average, a 0.7 percent increase in the domestic level of R&D.54 Likewise, a 1 percent increase in copyright protection was associated with a 3.3 percent increase in domestic R&D. Similarly, when trademark protection increased by 1 percent, there was an associated R&D increase of 1.4 percent. As the authors concluded, “Increases in the protection of the IPRs carried **economic benefits** in the form of higher inflows of FDI, and increases in the levels of both domestically conducted R&D and service imports as measured by licensing fees.”55 As Jackson summarized, regarding the relationship between IPR reform and both innovation and R&D, and FDI, “In addition to spurring domestic innovation, strong intellectual property rights can increase incentives for foreign direct investment which in turn also leads to economic growth.”56

#### Pharma innovation solves Pandemics, ABR, and Bioterrorism – only Private Firms have the ability for preparedness and reaction.

Marjanovic and Feijao 20 Sonja Marjanovic and Carolina Feijao May 2020 "Pharmaceutical Innovation for Infectious Disease Management" <https://www.rand.org/content/dam/rand/pubs/perspectives/PEA400/PEA407-1/RAND_PEA407-1.pdf> (directs RAND Europe's portfolio of research in the field of healthcare innovation, industry and policy)//Re-cut by Elmer

As key actors in the healthcare innovation landscape, pharmaceutical and life sci-ences companies have been called on to develop medicines, vaccines and diagnostics for pressing public health challenges. The COVID-19 crisis is one such challenge, but there are many others. For example, MERS, SARS, Ebola, Zika and avian and swine flu are also infectious diseases that represent public health threats. **Infectious agents such as** **anthrax, smallpox and tularemia could** **present threats in** a **bioterrorism** con-text.1 The general **threat to public health** that is posed **by antimicrobial resistance** is also well-recognised as an area in **need of pharmaceutical innovation**. Innovating in response to these challenges does not always align well with pharmaceutical industry commercial models, shareholder expectations and compe-tition within the industry. However, the **expertise, networks and infrastructure** that **industry has** within its reach, as well as public expectations and the moral imperative, **make pharmaceutical companies** and the wider life sciences sector an **indispensable** partner **in** the **search for solutions** that save lives. This perspective argues for the need to establish more sustainable and scalable ways of incentivising pharmaceu-tical innovation in response to infectious disease threats to public health. It considers both past and current examples of efforts to mobilise pharmaceutical innovation in high commercial risk areas, including in the context of current efforts to respond to the COVID-19 pandemic. In global pandemic crises like COVID-19, the urgency and scale of the crisis – as well as the spotlight placed on pharmaceutical companies – mean that contributing to the search for effective medicines, vaccines or diagnostics is essential for socially responsible companies in the sec-tor.2 It is therefore unsurprising that we are seeing indus-try-wide efforts unfold at unprecedented scale and pace. Whereas there is always scope for more activity, industry is currently contributing in a variety of ways. Examples include pharmaceutical companies donating existing com-pounds to assess their utility in the fight against COVID-19; screening existing compound libraries in-house or with partners to see if they can be repurposed; accelerating tri-als for potentially effective medicine or vaccine candidates; and in some cases rapidly accelerating in-house research and development to discover new treatments or vaccine agents and develop diagnostics tests.3,4 Pharmaceutical companies are collaborating with each other in some of these efforts and participating in global R&D partnerships (such as the Innovative Medicines Initiative effort to accel-erate the development of potential therapies for COVID-19) and supporting national efforts to expand diagnosis and testing capacity and ensure affordable and ready access to potential solutions.3,5,6 The primary purpose of such **innovation** is to **benefit** patients and **wider population health**. Although there are also reputational benefits from involvement that can be realised across the industry, there are likely to be rela-tively few companies that are ‘commercial’ winners. Those who might gain substantial revenues will be under pres-sure not to be seen as profiting from the pandemic. In the United Kingdom for example, GSK has stated that it does not expect to profit from its COVID-19 related activities and that any gains will be invested in supporting research and long-term pandemic preparedness, as well as in developing products that would be affordable in the world’s poorest countries.7 Similarly, in the United States AbbVie has waived intellectual property rights for an existing com-bination product that is being tested for therapeutic poten-tial against COVID-19, which would support affordability and allow for a supply of generics.8,9 Johnson & Johnson has stated that its potential vaccine – which is expected to begin trials – will be available on a not-for-profit basis during the pandemic.10 Pharma is mobilising substantial efforts to rise to the COVID-19 challenge at hand. However, we need to consider how pharmaceutical innovation for responding to emerging infectious diseases can best be enabled beyond the current crisis. Many public health threats (including those associated with other **infectious diseases, bioterrorism** agents **and antimicrobial resistance**) are urgently in **need** of **pharmaceutical innovation**, even if their impacts are not as visible to society as COVID-19 is in the imme-diate term. The pharmaceutical industry has responded to previous public health emergencies associated with infec-tious disease in recent times – for example those associated with Ebola and Zika outbreaks.11 However, it has done so to a lesser scale than for COVID-19 and with contribu-tions from fewer companies. Similarly, levels of activity in response to the threat of antimicrobial resistance are still low.12 There are important policy questions as to whether – and how – industry could engage with such public health threats to an even greater extent under improved innova-tion conditions.

#### Bioterrorism and future pandemics cause extinction.

de Bretton-Gordon 20, Hamish. "Biosecurity in the wake of COVID-19: the urgent action needed." (2020). (Director at DBG Defense)//C.VC

Policymakers around the world did not grasp just how large the impact of a bio threat could be. Beyond the enormous human and economic impact, the current pandemic has exposed the weakness, lack of preparedness, and poor responsiveness of healthcare systems of even highly developed countries like the United States and the United Kingdom. And the virus has inflicted carnage, even though SARS-CoV-2 (the virus that causes COVID-19) is not especially virulent. The **world may be confronted with** other **viruses** in the future **whose combination of virulence** (the harm a pathogen does to its host), **transmissibility, and other characteristics pose much greater danger**. While overwhelming evidence points to SARS-CoV-2 spontaneously spreading to humans, the **advances in synthetic biology** and the growth in the number of Level 3 and 4 biocontainment facilities around the world storing deadly viruses1 **mean** there is also the very **real possibility** **that** in the future, **bad actors will** try to **engineer or steal**/obtain **a** **highly transmissible and** highly **virulent** **virus** **and unleash it onto the world**. **Another risk is accidental releases** from such biocontainment facilities. COVID-19, a highly transmissible but not very virulent pathogen, has had a devastating global impact, a fact that will not have gone unnoticed by rogue states and terror organizations. Advances in synthetic biology have created tools that could be put to malevolent use. In the last two decades, scientists synthesized the poliovirus from its genetic sequence,2 recreated the 1918 Spanish flu virus,3 and succeeded in modifying the H5N1 avian flu virus so that it resulted (in a research laboratory) in airborne transmission among mammals.4 In the future, **we should think of weaponized biology as no less of an existential threat to the planet than weaponized atomic science**. It should also be noted that the fear and panic that **even a medium-scale bioterror attack** **could create** could have **dangerous implications** that may rival or even surpass the immediate loss of life. The Need to Rethink Likelihood Given the fact that in late 2019 when, as far as is known, COVID-19 cases first started emerging in China, it had been more than a century since the previous catastrophic outbreak (the 1918-1919 “Spanish flu” pandemic),d it was unsurprising that many thought of such pandemics as a one-in-a-100-year event. Such assumptions should no longer hold. The encroachment of human settlements into areas that had previously been sanctuaries for wildlife5 and the popularity in some parts of the world of markets where people and wild animals are brought into proximity have made it more likely viruses will make the species leap to human beings.e And when they do, as the COVID-19 pandemic illustrated, the **interconnectedness** of a world in which millions of people fly each day6 **means** they can **spread** very **rapidly**. There is also growing concern about engineered viruses. Not only have advances in synthetic biology (SynBio) created growing capacity for extremely dangerous viruses to be engineered in a laboratory, but the **number of people with** access to potentially dangerous ‘**dual use’ technology** has greatly **expanded** and continues to expand, making malevolent use of such technology ever more likely. In the August 2020 issue of this publication, scientists at the U.S. Military Academy at West Point warned that: The wide availability of the protocols, procedures, and techniques necessary to produce and modify living organisms combined with an exponential increase in the availability of genetic data is leading to a revolution in science affecting the threat landscape that can be rivaled only by the development of the atomic bomb. As the technology improves, the level of education and skills necessary to engineer biological agents decreases. Whereas only state actors historically had the resources to develop and employ biological weapons, SynBio is changing the threat paradigm. The cost threshold of engineering viruses is also lowering, with the West Point scientists warning that synthetic biology has “placed the ability to recreate some of the deadliest infectious diseases known well within the grasp of the state-sponsored terrorist and the talented non-state actor.”7 As already noted, another source of vulnerability is that deadly viruses could be stolen from or escape from a research laboratory. There are now around 50 Biosafety Level 4f facilities around the world, where the deadliest pathogens are stored and worked on, and this figure is set to increase in the next few years.g This is a large increase over the last 30 years, creating bigger risk of a breach. Of equal, if not greater concern are the thousands of Biosafety Level 3 labs globally,8 which handle deadly pathogens like COVID-19.9 Given what has been outlined above, the risk of a future destructive biological attack or another devastating global pandemic should no longer be seen as low. From this point forward, **there should no higher priority** for the international community **than biosecurity**.

### Whisteblowing

#### Top-Level – this Advantage is missing uniqueness – they have card zero that whistleblowers are high now – they just don’t want to due to Trade Secrets – threats of getting fired, being paid off, etc. are all huge alt causes to the Aff that thump this to zero.

#### DA turn this Advantage – 1] 1AC Dreyfus and Galizzi cite protective equipment or supplies – Innovation is key to making better, more effective medical tools to fight pandemics and 2] 1AC Mooney proves our arg – we need new Vaccine Preparedness

Mooney 21 — (Tom Mooney, Senior Communications & Advocacy Manager for the Coalition for Epidemic Preparedness Innovations, “Preparing for the next “Disease X””, CEPI, 2-1-21, Available Online at <https://cepi.net/news_cepi/preparing-for-the-next-disease-x/>, accessed 9-10-21, HKR-AM)//Re-cut by Elmer

We cannot develop vaccines against all potential viral threats, but **we could produce a library of prototype vaccines** **and other biological interventions** against representative pathogens **from each** of these 25 **viral families**. **Having such a library** of prototype vaccines, which **could be ‘pulled** off the shelf’, **and advanced** into clinical testing **as soon as** a related **threat emerges** would dramatically accelerate the development of vaccines. We also know that beta coronaviruses that cause SARS and MERS are associated with case fatality rates of 10-35% (25-88 times worse than COVID-19) and that coronaviruses circulate widely in animal reservoirs. The emergence of a coronavirus variant combining the transmissibility of COVID-19 with the lethality of SARS or MERS would be utterly devastating. **We must minimise** **this threat** as a matter of urgency. One **way to do this** in the long-term **would be to develop a vaccine that provides broad protection** against coronaviruses in general. If we can produce vaccines against Disease X in a matter of months instead of a year or more, we could revolutionise the world’s ability to respond to epidemic and pandemic diseases. Disease X and other emerging infectious diseases pose an existential threat to humanity. But for the first time in history, with the right level of financial commitment and political will, we could credibly aim to eliminate the risk of epidemics and pandemics.

#### Zero Inherency or Uniqueness – the EU passed a Whistleblower Directive in 2019 – note they have card zero more recent – only card is 1AC HAI et Al 14 which doesn’t assume recent changes.

Sandeen and Mylly 20 Sharon K. Sandeen & Ulla-Maija Mylly 20, Trade Secrets and the Right to Information: A Comparative Analysis of E.U. and U.S. Approaches to Freedom of Expression and Whistleblowing, 21 N.C. J.L. & TECH. 1 (2020). Available at: https://scholarship.law.unc.edu/ncjolt/vol21/iss3/2 //sid

The E.U. adopted a Directive for the protection of whistleblowers (“Whistleblower Directive”) in April 2019.199 The objective of the Directive is to give further protection to whistleblowers to prevent breaches of law which are harmful to the public interest (Recital 1). The material scope of the Whistleblower Directive covers among others the following areas of E.U. law: food and feed safety, transport safety, consumer protection, nuclear safety, public health, environmental protection, public procurement, financial services and protection of privacy (Article 2). Thus, even though the Whistleblower Directive covers many areas of E.U. law, the approach is still sector specific, which is similar to the U.S. approach albeit in the U.S. there are different laws for different situations and sectors. Before the introduction of the Whistleblower Directive, some urged a need for a horizontal approach. But the E.U. does not have a power to legislate in all areas of law, which ruled out a horizontal approach.200 Moreover, the material scope of the Whistleblower Directive does not cover all breaches of Union law, but only breaches in the areas of Union law which are explicitly mentioned under Article 2. From the recitals of the Whistleblower Directive, one can learn that areas selected are the ones where breaches may cause serious harm to public interest and welfare of society.201 However, E.U. Member States are allowed to extend the application of the Directive to other areas of law. Moreover, the Whistleblower Directive does not have an impact on legislation already at place in the Member States for reporting wrongdoings in some specific areas of law. Under Article 21(7) of the Whistleblower Directive, if there is a need to disclose trade secrets, when reporting or disclosing information, which falls within the scope of the Whistleblower Directive, such disclosures are considered to be lawful disclosures under Article 3(2) of the Trade Secret Directive. Consequently, the Whistleblower Directive is a lex specialis within the scope of the Whistleblower Directive. However, these two Directives are understood as complementing each other and it is clearly highlighted that when cases do not belong to the scope of the Whistleblower Directive, the exceptions provided in the Trade Secret Directive remain applicable (Recital 100); for instance, freedom of expression exceptions may apply. However, the introduction of the Whistleblower Directive may have an impact on interpretations of the Trade Secret Directive. For example, the material scope of the Whistleblower Directive can provide some guidance when analyzing when there is a public interest in disclosing misconduct, wrongdoing or illegal activity under the Trade Secret Directive. But the interpretation of the exceptions in the Trade Secret Directive should not become more limited, even though there might be less need to rely on provisions of the Trade Secret Directive, as the material and the personal scopes of the Whistleblower Directive are very broad. The personal scope of the Whistleblower Directive is quite all- encompassing. Even though the provision refers to the persons who learn the information in work-related situations, the definitions applied also cover job-applicants, trainees, freelancers, sub-contractors and different type of collaborators who could face some harmful consequences due to disclosures. In addition, it is applicable both to public and private sectors (Article 4). Also, in the Trade Secret Directive the personal scope of the whistleblowing provision is wide, but it has been reached through defining the exception to cover the disclosure activity without making any reference to the personal scope of the exception. In accordance with the Whistleblower Directive, Member States are obligated to set up procedures for internal and external reporting. The Whistleblower Directive clearly refers to and draws upon the ECtHR’s practice on this issue (Recital 32). Under the Trade Secret Directive, the recitals only referred to the Charter provisions, but in the Whistleblower Directive there is a direct reference also to the ECHR. Moreover, one can see the impact of the ECtHR’s case law in the structuring of the internal and external reporting channels. How an entity’s internal reporting channels and relevant public authorities should be preferred before disclosing the wrongdoing to the general public seems to stem from the case law of the ECtHR. This preference is also illustrated in the cases discussed above. The disclosure to the public should always be the last resort. However, the Directive also provides some flexibility for cases when these preferred reporting channels are deemed to be impractical. In such cases the wrongdoings could be reported directly to the public. Article 15 sets up specific conditions when public disclosures are allowed. First, one is allowed to disclose information to the public, if they first have used internal and/or external reporting channels, but there has been no action taken within the timeframes set in the Whistleblower Directive. Moreover, one is allowed to disclose information to the public when one has reasonable grounds to believe that there is an imminent or manifest danger to the public interest. Likewise, public disclosure is allowed in cases of external reporting if one believes that because of the specific circumstances of the case there is a risk of retaliation or low prospect of the case being addressed, such as that evidence may be concealed or destroyed or that an authority is in collusion with the perpetrator of the breach or involved in the breach. This provision defines the conditions in a quite detailed manner.

#### Final wording of the EU Trade Secrets Directive doesn’t require that defendants prove they acted in the public interest, but only that they had reasonable cause to believe they did.

Sandeen and Mylly 20 Sharon K. Sandeen & Ulla-Maija Mylly 20, Trade Secrets and the Right to Information: A Comparative Analysis of E.U. and U.S. Approaches to Freedom of Expression and Whistleblowing, 21 N.C. J.L. & TECH. 1 (2020). Available at: https://scholarship.law.unc.edu/ncjolt/vol21/iss3/2 //sid

The final wording of the whistleblowing provision is different to the one proposed by the Commission. In the initial version it was further required that the disclosure of the trade secret should be “necessary” for revealing the misconduct. The initial proposal was interpreted to mean that even though some disclosures would be in the public interest, they might not always be necessary.188 The final wording seems to set a somewhat more lenient requirement for disclosures.189 However, when read together with preamble 20, “insofar as directly relevant misconduct [] is revealed,” the end result of the interpretation comes very close to the initial wording of Article 5 (b). Some have been concerned that whistleblowers may still be in a vulnerable situation because they have the burden of proof that their disclosure activities are in the public interest.191 However, it should be recognized that in accordance with preamble 20, national authorities are allowed to apply the whistleblower exception also in cases where “the respondent had every reason to believe in good faith that his or her conduct satisfied the appropriate criteria set out in this Directive.” Consequently, it seems that the burden of proof is not overly heavy, at least if this flexibility is utilized. Moreover, the personal scope of the applicability is not limited in any way. Therefore, it is applicable beyond work-related situations and extends both to private and public sectors. As previously noted, when analyzing the Trade Secret Directive and comparing it with the Information Society Directive, one might be puzzled that freedom of expression is provided as a direct exception to trade secret protection. Article 5(a) exempts remedies when acquisition, use or disclosure of the trade secret was carried out “for exercising the right to freedom of expression and information as set out in the Charter, including respect for the freedom and pluralism of the media.”192 This is very different from the exceptions provided in the Information Society Directive for copyright protection. One could, for example, find a freedom of expression fundamental right behind the parody exception for copyright (as the Deckmyn case discussed above illustrates), but none of the exceptions in the Information Society Directive implicate fundamental rights as directly as under the Trade Secret Directive. The case law of the CJEU on freedom of expression and copyright suggests that even though some legal provision under copyright legislation (or trade secret legislation) may be understood as an exception, it still has to be interpreted in a manner to give full effect to the rule and which would at the same fully adhere to the fundamental rights under the Charter, interpreted in the light of the ECtHR case law.193 Yet, the most recent case law from the CJEU in fact limits the room of interpretation in the copyright context in two important ways, as already discussed above. Firstly, the interpretation has to be in compliance with the wording of the specific exception. Secondly, the Member States need to apply the three-step test in accordance with Article 5(5) of the Information Society Directive when implementing and interpreting copyright exceptions.

#### Also prohibits Intimidation Lawsuits - here’s your CEO Evidence

CEO 17 — (Corporate Europe Observatory, non-profit research and campaign group whose declared aim is to "expose any effects of corporate lobbying on EU policy making"., “Adapting the EU Directive on Trade Secrets ‘Protection’ into National Law”, February 2017, Available Online at <https://corporateeurope.org/sites/default/files/attachments/trade_secrets_protection_directive_-_a_transposition_briefing.pdf>, accessed 9-9-21, HKR-AM)//re-cut by SidK

Analysis of Article 7 Since the main threat posed by the Directive to indi- viduals is the risk of the Directive being used by companies to deter competitors and public interest scrutiny, this arti- cle is very important to watch during the transposition. As a matter of fact, member states have the obligation to ena- ble their courts to penalise abusive litigation such as cases of “strategic lawsuit against public participation (SLAPP)”.a This is otherwise expressed in the Directive’s Recital 22: The smooth-functioning of the internal market would be un- dermined if the measures, procedures and remedies provided for were used to pursue illegitimate intents incompatible with the objectives of this Directive. Therefore, it is important to empower judicial authorities to adopt appropriate measures with regard to applicants who act abusively or in bad faith and submit manifestly unfounded applications with, for example, the aim of unfairly delaying or restricting the respondent’s ac- cess to the market or otherwise intimidating or harassing the respondent. Depending on each national framework’s need for it, it is very important that national legislators use strong language penalising abusive litigation using trade secrets protection.

#### This means zero Aff – their arg will be that there’s a risk that Abusive Litigation Lawsuits exist – the Aff doesn’t solve that – their change is on the burden structure BUT if status quo protections that explicitly ban intimidation suits don’t work, then burden shifts definitely doesn’t work either.

#### No EU spill-over warrant for Pandemics – your 1AC only effects the EU – 1AC Dreyfus and Galizzi are about China and Global Whistleblower Protection – means Pandemics starting is inevitable if the Aff’s Internal Link and Uniqueness is true.

#### Can’t solve 1AC Dreyfus and Galizzi – it’s about health workers who lack proper protective equipment or supply chains or medical supplies, which isn’t medicine – that means Trade Secret Protections for those aren’t affected since the Plan only affects medicines – independently the 1AC I/L is about Hospitals NOT Pharmaceutical Companies.

American Heritage Dictionary of Medicine 18 The American Heritage Dictionary of Medicine 2018 by Houghton Mifflin Harcourt Publishing Company //Elmer

"A **substance**, **especially a drug**, **used to treat** the signs and symptoms of a **disease**, condition, or injury."

### Uniformity

#### DA turns this Advantage – Two Warrants:

#### 1] Trade Secret confidentiality is key for European Tech Competitiveness – that’s 1NC Gutfleisch.

#### 2] EU Pharma Innovation staves off collapse.

Griffiths 13 Jane Griffiths, 2013. Investing in European health R&D, A pathway to sustained innovation and stronger economies, Jane Griffiths, Company Group Chairman Janssen Pharmaceutical Companies of Johnson & Johnson Europe, Middle East & Africa. <http://www.janssen-emea.com/sites/default/files/Janssen_RnD_Study_Report.pdf>

The collaborative research efforts of academia and the pharmaceutical industry in developing new treatments have resulted in the most spectacular increase in life expectancy and quality of life in the history of mankind. It has been estimated that around 40% of the increase in life expectancy in the last decades is because of the introduction of innovative new drugs46. Yet, for the first time in recent years, there is a stagnation in health R&D funding, both by public and by private organisations, as you can read in this report. This is extremely worrying if we consider that for the last decade the cost of conducting clinical research has increased by 10% on average per year.88 It is even more worrying in the context of the increasing burden of disease and an ageing population in Europe, and the millions of people whose health cannot be improved without new therapeutic approaches. The development of new pharmaceuticals is crucial to meeting these challenges, and while pharmaceuticals in general only represent around 17% of healthcare budgets 27, their innovative value has a much greater impact, helping to reduce overall treatment costs significantly across many areas of care. Pharmaceutical R&D expenditure is typically generated from company revenue, rather than from public funding. At Janssen R&D investments represent 21% of our sales, and as our business grew, so did our R&D investments, reaching more than $5.3 billion last year. Pharmaceutical research is primarily encouraged by offering the appropriate price to innovative new drugs. Very few industries incur the same financial risks as the innovative pharmaceutical industry, and with on average only 4% to 6% of early development (phase I) compounds ever reaching the market, it is critical that a fair reward system is in place for those molecules that actually become medicines. Today, with effective treatments being available for many diseases, we are moving into an era of transformational innovation, trying to tackle diseases of very high complexity, where breakthrough science is needed to deliver value to patients. All this comes at a price, but the initial cost of innovation to society is small compared to the long term economic benefits of having new treatments. Europe as a whole has historically lagged behind the US in terms of investment in research and development (R&D) in healthcare and life sciences technologies. Since the start of the economic crisis in 2007/8, R&D investments in Europe – from both public and private sources – have been under further pressure. Janssen commissioned this study from Deloitte’s European Center on Health Economics and Outcomes Research to draw together the relevant data and information into one document and to evaluate this issue in detail. The aim was to present a thorough analysis of the potential consequences of current trends and, based on the evidence, to explore possible scenarios for the future with relevant stakeholders. R&D investments in health have generated substantial and positive outcomes for us today. The most self-evident direct benefit of investing in health R&D is the subsequent improvement in health outcomes and longevity. There are numerous examples over recent decades of how new medical interventions have greatly improved population health and wellbeing. In addition, there are also several other benefits of health R&D, such as improving the efficiency of healthcare provision, gains in productivity as a result of the improved health status of the working age population, and the positive contributions of health R&D to overall economic growth and to the knowledge economy in Europe. Each of these benefits has been documented and demonstrated to be crucial by various commentators, academics, clinicians, health policy experts and patients alike.

#### Top-Level – They don’t solve any of this Advantage –

#### 1] ZERO Medicine Key Warrant – 1AC Junge is about Trade Secrets writ large – they have no reason Medicine is a totalizing issue nor a spill-over argument – that zaps the Advantage to literally zero since both pieces of 1AC Junge evidence says total uniform consistency matters which trade secret protection over non-medicines still causes gaps in consistency

#### 2] The Plan doesn’t uniform all Trade Secrets – they reform one issue but it doesn’t affect all other Trade Secret Exemptions since their 1AC Junge evidence takes issue with the floor not a ceiling approach that the Aff doesn’t resolve – shit ton of alt causes – here’s 1AC Junge

Junge 16 — (Fabian Junge, Law @ Maastricht University, “THE NECESSITY OF EUROPEAN HARMONIZATION IN THE AREA OF TRADE SECRETS”, MAASTRICHT EUROPEAN PRIVATE LAW INSTITUTE WORKING PAPER No. 2016/04, Available Online at <https://papers.ssrn.com/sol3/papers.cfm?abstract_id=2839693>, accessed 9-8-21, HKR-AM)//Re-cut by Elmer

**By relying on different definitions of trade secrets, prohibited acts or possible defendants, by applying different methods of incorporating the TRIPS-mandated trade secret protection**, by **unequally classifying trade secrets and** by **basing enforcement mechanisms predominantly in national law,** the **EU** and its Member States **created a situation of legal uncertainty** for European businesses and subverted the incentives for relying on trade secret protection. Especially trade secrets holders are hampered with their ability to fully engage on the internal market and to take advantage of the benefits of trade secret protection.

#### Junge’s biggest issue is lack of standard definition of Trade Secrets which nothing in the Plan resolves.

#### The 3rd Junge Card – 1] You don’t access this – you are not a Maximization – you affect literally one law and 2] Can’t enforce – end of the card

Junge 16 — (Fabian Junge, Law @ Maastricht University, “THE NECESSITY OF EUROPEAN HARMONIZATION IN THE AREA OF TRADE SECRETS”, MAASTRICHT EUROPEAN PRIVATE LAW INSTITUTE WORKING PAPER No. 2016/04, Available Online at <https://papers.ssrn.com/sol3/papers.cfm?abstract_id=2839693>, accessed 9-8-21, HKR-AM)//Re-cut by Elmer

Notwithstanding the fact that harmonization can be beneficial even when only achieving a minimum common level of protection, the decision to opt for minimum harmonization comprises downsides by its inherent inability to fully abolish national differences. Although the national provisions on trade secret protection are approximated, they are still embedded into different domestic legal regimes. By allowing Member States to go beyond what the Trade Secrets Directive requires the level of protection in the EU will still vary and certain barriers to cross-border activities will inevitably remain due to the inconsistent harmonization processes in the various Member States. As a result, businesses in the EU are protected in every Member State at least to the extent set out in the Trade Secrets Directive, but will still have to deal with 28 different legal regimes. Ultimately, this limits the benefits of the approximation for trade secret protection.102 It will be interesting to see how the Member States implement the provisions of the Trade Secrets Directive and how different the transposition approaches will be. Doubtfully, any Member State can refer solely to its existing laws to comply with the Trade Secrets Directive. Presumably, as a first step most Member States will amend their existing legislation to be in accordance with the Trade Secrets Directive before evaluating whether a separate legislative act on trade secrets, e.g. as in Sweden, can improve the rules further. Conflicts might arise when Member States have to introduce definitions or concepts entailed in the Trade Secrets Directive, which have not been used or which had a different scope before. Another issue will certainly occur, if Member States are not able to implement the Trade Secret Directive satisfactory without weakening their existing legal regimes, e.g. with respect to criminal sanctions. The main risk involved with harmonizing trade secret protection to a minimum extent remains the possibility that the outcome will eventually be comparable to the post-TRIPS implementation phase - namely that the laws of the Member States have de facto been approximated, but not sufficiently enough to achieve the envisaged aims. Therefore, contrary to the European Commission’s initial finding and to underline this risk, this Thesis will point out subsequently several issues arising out of the adopted harmonizing approach, which likely will lead to national and EU litigation to correct the situation. **Relying on maximum harmonization**, either by means of a regulation or a directive, **could have facilitated** **the aim** of the Trade Secrets Directive even more, **but might have been politically unenforceable**.

#### EU Harmonization Now

Maughan 17 Alistair Maughan 8-1-2017 "Harmonization of Trade Secrets in Europe and New U.S. Trade Secrets Law Gets the Green Light" <https://www.mofo.com/resources/insights/170801-harmonization-of-trade-secrets.html> (Partner at Morriston Forster)//Elmer

A **harmonized trade secrets protection regime is coming to Europe** and the U.S. Until now, the approach to trade secrets across Europe has been fragmented, with some countries having specific trade secrets legislation and others relying on unfair competition, tort, or contract law. Trade secret protection in the U.S. has been somewhat less fragmented, as almost every state (New York and Massachusetts being notable exceptions) has adopted some version of the Uniform Trade Secrets Act (“Uniform Act”). On May 11, 2016, President Obama signed into law the Defend Trade Secrets Act (“US DTSA”), which creates a federal cause of action with substantive elements that are very similar to the Uniform Act. For practical considerations regarding the US DTSA, see our recent publication. In November 2013, the European Commission proposed a **new trade secrets directive** with the aim of **harmonizing the law** in the EU and thereby encouraging European cross-border investment, competition, and innovation. Following much debate, the “Directive (EU) 2016/943 of the European Parliament and of the Council of 8 June 2016 on the protection of undisclosed know-how and business information (trade secrets) against their unlawful acquisition, use and disclosure” (the “EU Directive”) entered into force on 5 July 2016. **EU Member States must implement the EU Directive** into their national laws **by** 9 June **2018**.

#### The Abazi Card – the 1AR will go for this to Link Turn Innovation – it doesn’t apply since it’s not about Trade Secret Whistleblowing which is our Link – Abazi is about “whistleblowing protection … for possible insider dealing and market manipulation”, not about the literal lifeblood of corporate innovation- the plan doesn’t mandate revealing of corruption, it gives plaintiffs the power to sue for all trade secret info.

#### Zero impact Uniqueness for Wright – the European Economy isn’t growing – it’s headed for a literal doom loop.

Bloomberg 4-1 4-1-2021 “Europe Is Heading Toward a New Financial Crisis” <https://www.bloomberg.com/opinion/articles/2021-04-12/europe-is-heading-toward-a-new-financial-crisis> //Elmer

**Europe** faces a predicament. Even as it **struggles to contain** the **Covid**-19 pandemic, it’s **setting itself up for another crisis — this one financial**. To ensure the viability of the common currency at the heart of the European project, the EU’s leaders will have to cooperate in ways they’ve so far resisted. Adopting the single currency has yielded great benefits, from frictionless trade to improved global competitiveness. But **the euro** also **obliged** **member states to relinquish** the **independent monetary policies that** can help **backstop** **national debts and financial systems**. One result is that distress at banks presents a **heightened threat to** individual governments’ **finances**, and vice versa — the so-called “**doom loop” that** **played out** in spectacular fashion **during the early 2010s**, when the euro area nearly broke apart. In 2012, European leaders agreed on what should have been a big part of the solution. They envisaged a full banking union, in which governments would take joint responsibility for supervising financial institutions — and, most important, for dismantling or recapitalizing banks when necessary, and for making depositors whole. Progress has been excruciatingly slow. Although the European Central Bank now oversees the region’s largest banks, individual governments still bear the cost of rescues, as bailouts in Italy and Germany have demonstrated. Mutual deposit insurance remains no more than a proposal. The pandemic has aggravated the problem, with governments taking on ever more debt in their efforts to provide economic relief. The International Monetary Fund estimates that general **government debt in the euro area will exceed 98% of g**ross **d**omestic **p**roduct **by the end of 2021**, up from 84% at the end of 2019. Worse, individual countries’ obligations are accumulating on the balance sheets of their banks. At the end of February, Italian banks’ holdings of Italian government debt amounted to 124% of their capital and loss reserves, rendering them extremely vulnerable in the event of fiscal distress.

#### Wright is 1] 9 years old – doesn’t account for COVID’s worst financial recession ever and 2] reliant on generic economy impact warrants – those are not true.