### 1-T-REDUCE

#### Interpretation: “reduce” indicates permanency. The aff may not defend suspensions on intellectual property rights

#### Reduce indicates permanency – it’s distinct from “suspend” Prefer our evidence – legal and should o/w all other definitions. This is the only legal interpretation of reduce in the court system which means that it applies to all legal implementations of the plan

Reynolds 59 – Judge (In the Matter of Doris A. Montesani, Petitioner, v. Arthur Levitt, as Comptroller of the State of New York, et al., Respondents [NO NUMBER IN ORIGINAL] Supreme Court of New York, Appellate Division, Third Department 9 A.D.2d 51; 189 N.Y.S.2d 695; 1959 N.Y. App. Div. LEXIS 7391 August 13, 1959, lexis)

Section 83's counterpart with regard to nondisability pensioners, section 84, prescribes a reduction only if the pensioner should again take a public job. The disability pensioner is penalized if he takes any type of employment. The reason for the difference, of course, is that in one case the only reason pension benefits are available is because the pensioner is considered incapable of gainful employment, while in the other he has fully completed his "tour" and is considered as having earned his reward with almost no strings attached. It would be manifestly unfair to the ordinary retiree to accord the disability retiree the benefits of the System to which they both belong when the latter is otherwise capable of earning a living and had not fulfilled his service obligation. If it were to be held that withholdings under section 83 were payable whenever the pensioner died or stopped his other employment the whole purpose of the provision would be defeated, i.e., the System might just as well have continued payments during the other employment since it must later pay it anyway.  [\*\*\*13]  The section says "reduced", does not say that monthly payments shall be temporarily suspended; it says that the pension itself shall be reduced. The plain dictionary meaning of the word is to diminish, lower or degrade. The word "reduce" seems adequately to indicate permanency.

#### Violation –they violate because COVID-19 patent waivers are temporary – hold the line – don’t let them shift out by saying that they defend permanency, they should’ve specced that in the 1ac and their advantages say nothing about the permanent benefits of having waivers

#### Melimopoulos, 21 (Elizabeth Melimopoulos, 6-29-2021, accessed on 8-15-2021, Al Jazeera, "Explainer: What are patent waivers for COVID vaccines?", https://www.aljazeera.com/news/2021/6/29/explainer-what-are-covid-vaccine-patent-waivers)

What does an IP waiver do? A waiver temporarily “removes” the intellectual protections provided by the WTO

#### Vote neg –

#### 1 – Limits – they can cherrypick from multiple timeframes which means that a) they shift out of multiple DAs by saying the patents will be gone by then which moots neg offence and b) non-permanency kills NCs and Ks because they can just delink in the 1ar and forces us to start over c) this links to fairness and ed because we can’t have proper educative clash and they moot offence

#### 2 – Predictability – Not following the resolution legally allows them to come up with whatever plan they want and a) that destroys our ability to predict because they can just go with something random and there is no way we can prep for that before the first tourney on the topic

#### Fairness is a voter because debate is a competitive activity with a winner and a loser – Force them to answer as to why it’s a competition. Education is a voter because schools, educational institutions, pay for it.

#### No RVIs because its illogical – you wouldn’t win chess for playing properly – Prefer logic for it’s a litmus test for other arguments

#### Prefer competing interps because a) reasonability is a race to the bottom pushing the limits on how much abuse is justifiable b) reasonability is subjective and invites judge intervention

#### Drop the debater to deter future abuse

### 2- 1NC – CP

#### CP Text: Drug developers should enter into binding contractual agreements with generic producers to ensure the quality of generic products and establish royalty rates on generic sales. The member nations of the WTO should publicly declare their support of legitimate compulsory licensees in the cases where voluntary requests have been ignored.

Silverman 3/15 [Rachel Silverman is a policy fellow at the Center for Global Development where she leads policy-oriented research on global health financing and incentive structures. Silverman’s current research focuses on the practical application of results-based financing; global health transitions; efficient global health procurement; innovation models for global health; priority-setting for UHC; alignment and impact in international funding for family planning; and strategies to strengthen evidence and accountability. BA with distinction in international relations and economics from Stanford University.) “Waiving vaccine patents won’t help inoculate poorer nations” Washington Post, PostEverything Perspective, <https://www.washingtonpost.com/outlook/2021/03/15/vaccine-coronavirus-patents-waive-global-equity/>] RM

There are better options than broadly waiving IP rules — notably, encouraging (and pressuring) vaccine manufacturers to cooperate and share knowledge with partners across the globe. Voluntary licensing is one route: It’s a common arrangement in which developers enter into binding contractual agreements with generic producers. Generic manufacturers get permission, know-how and assistance from the patent-holder to produce the vaccine for sales in specified markets; in exchange, the patent-holder can ensure quality of the generic product and may receive royalties on its sales, usually representing less than 10 percent of sales value.

These royalties may be lower than the profit margin on direct sales; for example, Pfizer expects a 25 to 30 percent profit on its vaccine sales, or roughly $5 for every $19.50 dose. (The U.S. government has agreed to buy 300 million doses at that price.) But voluntary licensing deals offer a new revenue stream that would otherwise be captured by competitors — not to mention good publicity. Already, **voluntary licensing deals from AstraZeneca and Novavax are facilitating large-scale production in India, Japan and South Korea**; many of the resulting vaccines are destined for lower-income countries through Covax.

The best route to vaccine equity involves creating the conditions to facilitate more of these voluntary deals.

How can governments and activists help push things in the right direction? By lifting the export curbs on materials such as filters and bioreactor bags intended to protect domestic supply, countries can help lubricate supply chains, creating a better environment for cross-national collaboration. Governments and development-finance institutions can invest to build up the capabilities of potential vaccine manufacturing plants, making it easier for originators to say yes. Domestically, the Biden administration did something like this when it [invested](https://www.merck.com/news/merck-to-help-produce-johnson-barda-to-provide-merck-with-funding-to-expand-mercks-manufacturing-capacity-for-covid-19-vaccines-and-medicines/) $269 million under the Defense Production Act to prepare Merck’s manufacturing facilities to produce the Johnson & Johnson vaccine — a crucial plank of the [joint production deal](https://www.hhs.gov/about/news/2021/03/02/biden-administration-announces-historic-manufacturing-collaboration-between-merck-johnson-johnson-expand-production-covid-19-vaccines.html) announced this month. Similar efforts are underway abroad. On March 12, for example, the “Quad” — the United States, India, Japan and Australia — [announced](https://www.reuters.com/article/us-usa-asia/u-s-india-japan-and-australia-counter-china-with-billion-dose-vaccine-pact-idUSKBN2B40IP) a joint pledge to produce and disseminate 1 billion vaccine doses; as part of this effort, the Biden administration [announced](https://in.usembassy.gov/dfc-announces-support-for-manufacturing-of-vaccines-during-quad-summit/) that it would help finance an Indian generic manufacturer to make coronavirus vaccines, including the Johnson & Johnson product. The contractual language of licensing deals can explicitly protect IP from broader dissemination, helping originators feel more comfortable sharing commercially valuable information.

Sticks as well as carrots can facilitate partnerships. Under [existing World Trade Organization rules](https://www.wto.org/english/tratop_e/trips_e/public_health_faq_e.htm), countries already have the right to issue “compulsory licenses” in certain cases pertaining to public health, allowing them to produce or import generic health products without permission from the patent-holder. Advocates correctly point out that countries face potential retaliation from industry and wealthy governments when they try to use these tools — a strong disincentive. (In 2006-2007, Thailand’s use of compulsory licenses to access more affordable AIDS drugs led the United States to revoke preferential trade status for some Thai exports.) This should change. The Biden administration and other global leaders should make clear that they will support legitimate compulsory licensees of coronavirus vaccines in cases where a valid voluntary license request has been rejected or ignored.

**But compulsory licensing is vastly inferior to voluntary deals in the case of vaccines, because with the former the generic producer would still need to figure out how to make the vaccines without the originator’s assistance — again, an extraordinarily difficult task.** It is useful mainly as a threat held in reserve, paired with the “carrots” of subsidies to local plants and so on. **Firms may choose to play ball on voluntary licensing deals rather than face a mess of legal challenges and bad publicity.** This month, for example, Canadian biotech firm Biolyse Pharma publicly requested a voluntary license to manufacture the Johnson & Johnson vaccine for global distribution. If Johnson & Johnson is unwilling, Biolyse made clear in its announcement, the company will appeal to the Canadian government for a compulsory license. The ball is now in Johnson & Johnson’s court — but this seems like the type of offer it should choose to accept, **both for the global good and its self-interest**.

Scaling up vaccine production is an imperative for equitable global access and an end to the pandemic**. But it is smart incentives for sharing knowledge, not the wholesale elimination of intellectual-property rights, that will get us to the finish line.**

### 3 – Biodiversity DA

#### The COVID epidemic has exposed massive flaws in biosecurity, lack of public health compliance, anti-vaxxers, and PPE shortages have shown unique vulnerabilities – the US is specifically exposed

Lyon 21 (Regan Lyon; 7/1/21; Military Medicine, Volume 186, Issue7-8, July-August 2021, Pages 193-196; *“The COVID-19 Response Has Uncovered and Increased Our Vulnerability to Biological Warfare”*; accessed 8/13/21; <https://academic.oup.com/milmed/article/186/7-8/193/6135020>; Department of Defense Analysis at the Naval Postgraduate School) HB \*We do not endorse the ableist language of the card\*

INTRODUCTION Biological warfare has been an unlikely, but serious, concern for military operations and national security. The 2018 National Biodefense Strategy (NBS) articulated a collaborative plan to prevent, detect, and respond to biological threats to the USA.1 The NBS highlights recent, isolated outbreaks of Systemic Acute Respiratory Syndrome (SARS), Ebola, and Zika viruses as warnings to nation states and justification for enhanced biological threat responses. Although these events are not considered deliberate threats, clandestine bioweapon programs and terrorist groups seeking such programs are known to exist and capitalize on such natural outbreaks.1 The NBS’s emphasis on prevention and response drives the requirement to enhance biological weapon deterrence and defense strategies to avert the employment of biological weapons on U.S. civilians or military personnel.1 The public health crisis that ensued with SARS-associated coronavirus-2 (SARS-CoV-2) has highlighted our nation’s bioweapon vulnerabilities on the international stage and has the potential for disastrous effects on national security. Previous questions regarding how the USA would respond to a large biological outbreak (or biological weapon) have now been answered for potential adversaries across the world. The ambiguity of both our capabilities and weaknesses, which provided deterrence to adversarial employment of biological weapons before the pandemic, no longer exists. This article will provide an overview on biological weapons and the concepts of deterrence and defense in the context of bioterrorism. Then, it will analyze how the national personal protective equipment (PPE) shortage, public resistance to public health measures, the anti-vaccination movement, and USNS (United States Navy Ship) Comfort deployment to New York City have increased our vulnerability to bioterror attack by impacting our deterrence and defense measures. Finally, it will offer recommendations to restore our bioterrorism security after the detrimental effects from the events unfolding in the USA. BIOLOGICAL WEAPONS REGULATIONS, DETERRENCE, AND DEFENSE Even though biological warfare is considered a “weapon of mass destruction” and is prohibited by a treaty drafted by the 1972 United Nations Biological Weapons Convention (BWC), not all adversaries adhere to these standards. Terrorist groups and covert operations have utilized biological weapons for small operations because the actors, by nature, are either non-eligible to ratify the treaty or would not do so if they could. Although there have been no intentional large-scale attacks, especially by adversarial nation states, this is not guaranteed to be the case in the future.2 The BWC does not prohibit ratified nations from having pathogens or toxins for peaceful purposes, such as the development of vaccines. After the natural outbreak of smallpox and its subsequent eradication accomplished by the World Health Organization in 1980, less virulent poxviruses have continued to be used in a variety of laboratories for research and development of vaccines for a variety of diseases.3 The original, more deadly strain of smallpox has been retained at two facilities in Russia and Atlanta.4 Because smallpox’s virology makes it an ideal biological weapon, the samples in Atlanta and Russia offer defense through researching countermeasures should an attack occur and simultaneously provide a repository from which a biological weapon can be acquired. “Deterrence” and “defense” are two concepts which are typically described in terms of nuclear warfare, but they can also be applied to national security from a biological attack.5 Deterrence is the ability to prevent an adversary from taking some action during peacetime.5 For biological warfare deterrence, vaccines and preventative medicine measures prevent susceptibility to a microbe. For a largely vaccinated and/or health-conscious population, the costs of production, storage, and dissemination of a bioweapon greatly outweighs the rare chance of the target contracting the disease. New Zealand’s robust public health measures, citizen compliance, and continued efforts to sustain a caseload under 20 since April is a strong deterrent for biological attack.6 Defense mechanisms decrease the effectiveness of the attack, putting a high cost-to-benefit burden on the adversary.5 A defense measure for bioterrorism would be an adequate medical treatment response to casualties of the bioweapon, decreasing mortality and the overall effectiveness of the weapon. COVID-19 PANDEMIC ANALYSIS The novel SARS-CoV-2 has several characteristics of an ideal biological weapon, including high transmission rate, long incubation period, airborne transmission, and significant morbidity/mortality.7 In fact, early in the pandemic, suspicion was cast that the virus was being developed as a biological weapon by a laboratory in Wuhan, China.8 Although these allegations have been deemed conspiracy theories as a result of misinformation operations, the resulting pandemic and the panicked public share similarities to a bioterror attack. The events occurring within the USA during the coronavirus disease 2019 (COVID-19) pandemic create a global narrative on how we respond to a biological crisis. The 2018 NBS emphasized the continued threat of biological weapons to national security and identified the need to deter and defend against bioterrorism acts.1 This section will analyze events in the USA during the pandemic, how they bolstered or negated our current bioterrorism deterrence or defense strategies, and offer areas for improvement to restore our bioterror security. Personal Protective Equipment Shortage The 2018 NBS mandates having a robust mobilization of PPE for frontline healthcare workers and an adequate communication plan on preventative health measures for the general public in the event of an attack.1 The ability to provide sufficient quantities of PPE for medical personnel is a vital defense tactic as it increases the efficiency of the healthcare system to treat casualties in response to a biological outbreak. Having the ability to mobilize these resources to hospitals strengthens bioterror deterrence by demonstrating to a potential adversary that a bioterror attack would have a limited effect on a population given the healthcare preparedness. As conflicting information was published across multiple media platforms from January to March, panic spread that the virus was more dangerous than originally believed. Citizens flooded stores in town and online, buying “essential items” in preparation for a lockdown. Items such as masks, gloves, and sanitizers were out of stock everywhere, including healthcare supply chains. More importantly, citizens heard N95 masks could prevent contracting the virus, suddenly increasing N95 demand.9 Demand exceeded supply quickly, and healthcare workers began complaining of the nation-wide shortage of appropriate PPE required to care for infected patients.10 The inability to acquire necessary PPE supplies due to crippled supply chains and general public hoarding caused a ripple effect within the healthcare system. As a result, hospitals began to institute resource conservation measures, attempting to extend the life of supplies intended for one-time use. These PPE conservation measures, however, were interpreted by some healthcare workers as putting their lives in jeopardy and instigated lobbying and campaigning for government involvement. News reports flourished of disgruntled healthcare workers who were at risk of infection due to a lack of PPE. Such reports of general public hoarding, inadequate PPE logistical chains, and inappropriate PPE conservation measures by hospitals demonstrate the USA’s poor public health response. The NBS calls for an extensive mobilization of adequate PPE in response to a biological outbreak to decrease the pathogen spread, minimize its effects, and improve our resiliency.1 The capability to decrease the pathogen’s effects increases an attacker’s “sunk costs” should they choose to release a biological weapon. An impaired, or presumably impaired, capability adversely affects our defense strategy. In addition, the decrease in cost-to-risk ratio impairs our deterrence measures by showing worsened biological denial. The rapid healthcare PPE disappearance secondary to pandemic panic demonstrated a critical vulnerability in one of the most important defense strategies for a bioterror attack. To improve our defense capability, our healthcare workers must have an adequate supply of PPE, which can be mobilized expeditiously. Bioweapons have a high transmission rate and are easily disseminated, which make airborne and droplet transmission favorable. Public health experts should retrospectively analyze the types and amounts of PPE utilized in areas highly impacted by SARS-CoV-2. With these data, models can be created to make recommendations for phase-based mobilization of PPE and to determine the size of stockpile needed for immediate release. Government agencies need to establish agreements with PPE manufacturers to prioritize production in declared biological emergencies. Anti-Vaccination Movements Non-compliance with recommended public health and protective measures, including vaccines, also cripples our nation’s biodefense. Public health measures such as social distancing, aggressive sanitation, and mask mandates are examples of defense tactics for the COVID-19 pandemic. The individualistic U.S. culture fueled widespread non-compliance with these measures and has had significant effect on our ability to “flatten the curve” compared to other countries.11 The preference for “freedom…without interference from the state” is present in 58% of U.S. citizens, compared to 30-38% of European countries.11 The USA’s inability to uniformly employ these measures and decrease the virus spread compared to other countries signals to adversaries a weakness in our defense to decrease the effects of a biological outbreak. Furthermore, the speculation and conspiracy theories surrounding COVID-19 vaccines suggest an inevitable resistance to receiving the vaccine when available. Resistance to vaccinations is nothing new and caused challenges for vaccination against smallpox in the 19th-century U.K. epidemic.12 Then in 2019, the U.S. measles outbreak was amplified by anti-vaxxer campaigns.13 Since early in the COVID-19 pandemic, social media posts have warned that future coronavirus vaccines contain either tracking devices for the U.S. government or toxic chemicals.13,14 This unopposed and contagious anti-vax movement directly affects future biological deterrence because our adversaries know that the population will not be universally compliant with vaccination and will be susceptible to certain pathogens. Recent polls indicate that one-third of U.S. citizens,14 compared to 14% of U.K. citizens,12 would avoid receiving a SARS-CoV-2 vaccine, even if available and affordable. A poor vaccination rate increases a population’s disease susceptibility and decreases biological weapon deterrence by denial. The anti-vaccination movement has caught traction from massive information operations and propaganda on multiple media platforms. Since May 2020, anti-vaxxers have been propagating lies about the side effects of the coronavirus vaccine, but as of June, the Centers for Disease Control, which is responsible for vaccine education, had only a “plan” to counter such anti-vaccine campaigns.14 When the first vaccines were being administered to healthcare workers in the USA in December 2020, multiple social media efforts were started to promote the vaccine.15 Hashtags such as #vaxup, #IGotTheShot, #vaccineswork, and many more were used with social media posts of doctors, nurses, and other medical personnel receiving their vaccine.16 Some posts continued with threads of updates on any side effects encountered to quell public concerns. Information operations such as these may be more effective to counter the anti-vaccination propaganda than government-sponsored campaigns and require further research by public health officials.

#### Patents are the key to preventing bioweapon development – they prevent technology from being accessible to hostile state and non-state actors

Finlay 10 (Brian Finlay; Summer 2010; The Fletcher Forum of World Affairs, *“The Bioterror Pipeline: Big Pharma, Patent Expirations, and New Challenges to Global Security”*; accessed 8/13/21; Brian Finlay is a senior associate at the Stimson Center in Washington, DC, where he directs the Managing Across Boundaries Program. He has worked at the Brookings Institution, the Century Foundation, and Canadas Laboratory Center for Disease Control/Health Canada; pages 54-58; ask me for the pdf) HB

NEW CHALLENGES: THE BIOTECH REVOLUTION AND THE ROLE OF THE PRIVATE SECTOR Myriad private sector actors, ranging from single-employee enterprises to major multinational pharmaceutical giants dominate today's biopharmaceutical marketplace. Privately owned companies not only develop, produce, and operate the lion's share of biological industrial equipment, but carry out the greatest share of the scientific research and development for the relevant technologies, goods, and methods of application. University and other non-profit research is often commercially-funded, and many governments around the globe have built public-private partnerships, even in some of the most sensitive areas of biotechnology, to capitalize on cost reductions and innovation. According to a recent Ernest and Young study of the industry, today more than 80 percent of biotechnology firms-and, thus, the technologies they innovate-are in the hands of the private sector." In the United States, the industry's compound annual growth rate has historically hovered around 15 percent, yielding aggregate revenues of more than $70 billion in 2008.18 With fortunes to be made, unprecedented new applications to be discovered, and practically unlimited possibilities for growth, the biopharmaceutical industry has swelled dramatically over the past decade. It is estimated that the biotech sector supports about 3.2 million jobs across the U.S. economy-a little more than one job for every 100 Americans.' 9 In Europe, publicly traded biotech companies' revenues increased 17 percent in one year, from f9.6 billion in 2007 to £11.2 billion in 2008. And although the recent global financial crisis had a negative impact, the product pipelines of European industry are growing across all phases of clinical development.20 By virtually any measure, the United States and Europe remain unmatched global hubs for biotechnological investment and innovation. For national security analysts, this reality has long provided some measure of comfort. Although the system of security assurances mandated by technologically advanced (principally Western) governments is far from a panacea against biothreats, the absence of similarly robust legal barriers in many countries raises serious international security concerns. 2' For instance, although the United States, Canada, the United Kingdom, Germany, and Singapore have all introduced strict regulations on pathogenic agents that may be of interest to committed bioterrorists, most countries have not. Similarly, export controls and enforcement over many sensitive technologies are often extremely lax, particularly in countries of the Global South.22 And because terrorists and proliferant states may shop for pathogens and dual-use production technologies where controls are the weakest, this uneven patchwork of regulations leaves open a significant gap in global biosecurity standards.23 It was in this porous regulatory environment that President Obama released his National Strategy for Countering Biological Threats in November 2009. His plan cited both unparalleled innovations in the life sciences and imperfections in existing control regimes as the principle motivations for a new strategy that seeks to prevent biotechnology products from being used for harmful purposes.24 However, while the President's plan presented a more forward-leaning agenda to counter the rising risk of proliferation by explicitly leveraging public health in support of international security, at its root, the strategy extends the traditional state-centric approaches to a problem that is increasingly one of the private sector. A proper approach to the issue-and its solution set-must place industry at its epicenter. In short, the Obama strategy exemplifies the continued mismatch between governments' near singular focus on regulation of the industry on the one hand, and the elusive nature of privately-driven biotech innovation on the other. Beyond encouraging the industry to adopt more stringent security standards in the public interest, governments have generally proven bereft of innovative ideas that more directly link these measures to the private sector's enlightened self-interest. This mismatch is aggravated by the reality that the biotech and pharmaceutical community stands on the brink of yet another grand transformation that will render traditional control efforts, however effective they may have proven in the past, even more anachronistic. Over the course of the coming decade, the traditional drug development strategies employed so successfully by Western biopharmaceutical companies in the past will run headlong into two realities that will fundamentally alter biopharmaceuticals' business model: continued and rampant globalization of the life sciences and big pharma's patent expiration challenges. These forces will have profound implications on the future of drug development and the internationalization of intellectual property. Further, it threatens to open a new era of biological weapons proliferation by pushing bio-innovation into regions that are ill-prepared to manage the leakage of sensitive knowledge and equipment to those intent on developing biological weapons. Accelerating Globalization of the Life Sciences As globalization began to take firm root in the 1980s, virtually every industrial sector across the Western world sought to capitalize upon its underlying forces to promote efficiency and financial gain. Conceptions of tightly integrated firms whose product development was bound by national borders gave way to an internationalization of R&D, production, and supply chains. Expedited global trade, hastened by advances in everything from information to transportation technologies, allowed profit and efficiency to be maximized through outsourcing, off-shoring, supply-chaining, and other activities that drove intellectual and manufacturing capacity far beyond Western shores. The corresponding transfer of information, processes, and technology generated new local enterprises, including subsidiary operations that collaborated with or competed for global market share. This dynamic, in turn, created a virtuous cycle that accelerated the biotechnological competencies of these new markets. Soon, states that were seen to have lacked the indigenous expertise to perform complex R&D and manufacturing operations began to develop advanced, competitive industrial sectors.25 By the late 1990s, the spread of biotechnological knowledge and equipment allowed even more companies, universities, and research institutes around the world to benefit from advances in the life sciences. Today, developing countries nurture competitive industrial sectors that challenge traditional suppliers in Western Europe. According to the United Nations, many developing countries, including Argentina, Brazil, China, Cuba, Egypt, India, Mexico, and South Africa are already approaching the leading edge of biotechnological applications and have "significant" research capacity in the biosciences.26 In aggregate, this can only be seen as a significant boon to global development. As in the North, the developing South is putting these biotech capacities to work for peaceful purposes. Recent technological breakthroughs are indicative of this new geographic diversity of biological talent: the first vaccine against meningitis B was developed in Cuba; South Africa was the first country involved in HIV-C strain preventive treatment; India is the world's largest producer of the hepatitis B vaccine; and China was the first country to license gene therapy.27 Meanwhile, biotechnology is providing an infusion of high-skilled, stable, and lucrative jobs, and endowing struggling economies with critical growth and diversification. For the security conscious, however, the globalization of biotechnology has also expanded the locus of the bioproliferation challenge from technologically advanced countries of the North into far-flung places around the globe.28 Thus, even as humankind reaps the benefits of the biotech revolution, governments around the world are increasingly challenged by the confluence of rapidly advancing science and technology and by globalization itself. High technical hurdles to isolation and weaponization of dangerous pathogens once confined fears about the development and use of biological weapons to advanced industrial states. But now, the spread of dual-use biotechnologies means that a growing number of countries-and even terrorist groups-may gain access to the capacities necessary to develop a bioweapon.

#### Bioweapons destroy biodiversity – targeting, interspecies spread, and fungal adaptation

Abboud 18 (Nura Abboud; 9/22/18; EcoMENA; *“Catastrophic Impacts of Biological Warfare on Biodiversity”*; accessed 8/15/21; <https://www.ecomena.org/impacts-of-biological-warfare-on-biodiversity/>; Nura A. Abboud is an environmental activist and Founder of the Jordanian Society for Microbial Biodiversity (JMB), the only NGO in the Middle East concerning the microbial biodiversity. Nura specializes in molecular biology, biological sciences, microbial biodiversity, genetic fingerprinting and medical technologies. Her vision is to establish an eco-research center in the astonishing desert south of Jordan. She has received several scholarships and awards including honorary doctorate in Environmental leadership) HB

Biological weapons are considered the most dangerous of all known weapons of mass destruction. They are used to deliberately cause epidemics among humans; destroy the environmental components, including water, air, and soil; and target crops and livestock. Examples of diseases used in biological warfare include anthrax, smallpox, plague, cholera, and avian flu. In addition to the catastrophic effects of biological warfare on the biodiversity and the environment, their danger lies in their low cost and rapid spread, as well as their easy preparation, transport, and use. Unlike nuclear and chemical bombs, biological bombs are without odor or color and therefore cannot be detected. Additionally, bioweapons are dangerous because of their effects on untargeted organisms in a military attack, and the clinical symptoms they create may be difficult to distinguish from normal diseases. Bioweapon pathogens remain in nature for several years and are able to survive in harsh environmental conditions. Threat to Natural Resources Bioweapons spread germs that contaminate air, food, water, and the environment, causing epidemiological diseases for different living organisms. Air: A wide variety of germs can contaminate air and are used in biological warfare. Fungi are the most common, and they travel by air over long distances to infect healthy plants. Food: Food contamination is also one of the most powerful methods used to carry out biological warfare attacks. Disease is transmitted either directly to humans through contaminated food or drink or indirectly by hosts. Water: Water can spread a number of lethal infectious agents as well. For example, one gram of Clostridium tetani poison is able to kill eight million people within six hours. Threats to Biodiversity Diseases are one of the main drivers of extinction in endangered species; therefore, disease control is fundamental to preserve biodiversity. Despite the presence of vaccines and drugs for most bioweapons, they may not be available in adequate quantities to cope with an epidemiological disease outbreak. Biological attacks pose a threat to naturally rare wild plants and animals and to species whose natural habitats have been degraded by human activities. Furthermore, diseases that humans, domestic animals, and domestic plants have been able to develop immunity to can be fatal in wild animals and plants. Bioweapons are not only having direct effects on the genetic biodiversity of indigenous species but also are having direct and indirect catastrophic effects on vital plant and animal communities. Threats to Animal Biodiversity Conservation of livestock breeds is essential to maintaining genetic diversity, which in turn is vital to increasing the ability of living organisms to adapt to environmental changes. The danger of bioweapons regarding animal biodiversity is summarized in three main points: The direct impact of diseases on wild species Some deadly diseases in humans or domestic animals can infect wild animals. For instance, an epidemic destructive impact on endangered species is reflected in the effects of Canine distemper, a natural viral disease that infects wild dogs and wild animals belonging to the same group. Canine distemper was also developed in bioweapon laboratories. Over the past decade, the spread of this disease has resulted in habitat loss and in the extinction of a large number of wild species in North America. Additionally, it led to the elimination of about one-third of the lion population in Tanzania and had serious impacts on the endangered leopard population. Invasive species The history of rinderpest in Africa provides a model for predicting the potential effects of lethal diseases on wild species and livestock. In 1887, European colonial armies introduced the rinderpest virus to Africa through imported cattle, which led to a rinderpest outbreak among domestic cattle breeds and wild species, killing an estimated 90–95% of African cattle and buffaloes within three years. To control the epidemic, African herds and buffaloes have been destroyed in most parts of Africa. Despite efforts to combat rinderpest over the past century, the disease is still strong, and its outbreak in the region occurs frequently. Elimination of animal species, hosts, and vectors Threatened species may be destroyed in areas that have been subjected to biological attacks with the aim of eradicating the disease. For example, in the United States, programs to control brucellosis in livestock have resulted in killing large numbers of wild animals, including the Bison and the white tailed deer. Threats to Plant Biodiversity Microbes can be used in crop destruction. For instance, “Rice blast” is a disease affecting rice and therefore leads to crop destruction and genetic changes in the plant. Conclusion and Recommendations The discussion about controlling destructive bioweapons is growing, as they pose a vast danger to both humanity and the environment alike. Any failure to prevent biological attacks can lead to the deterioration of genetic diversity in animals and plants, the extinction of endangered species, and the destruction of human livelihoods and traditional cultures. Biotechnology has increased the economical value of genetic diversity of living organisms; hence, it has increased the risk of eliminating genetic diversity through the use of GMO bioweapons. Most of all, the environment will be the silent victim of this war.

#### Biodiversity loss causes extinction—turns and outweighs everything

Torres 16 (Phil Biologist, conservationist, science advocate & educator. 2 years based in Amazon rainforest, now exploring science around the world. “[Biodiversity Loss: An Existential Risk Comparable to Climate Change](http://futureoflife.org/2016/05/20/biodiversity-loss/)” http://futureoflife.org/2016/05/20/biodiversity-loss/)

The repercussions of biodiversity loss are potentially as severe as those anticipated from climate change, or even a nuclear conflict. For example, according to a 2015 [study](http://www.ncbi.nlm.nih.gov/pubmed/26601195) published in Science Advances, the best available evidence reveals “an exceptionally rapid loss of biodiversity over the last few centuries, indicating that a sixth mass extinction is already under way.” This conclusion holds, even on the most optimistic assumptions about the background rate of species losses and the current rate of vertebrate extinctions. The group classified as “vertebrates” includes mammals, birds, reptiles, fish, and all other creatures with a backbone. The article argues that, using its conservative figures, the average loss of vertebrate species was 100 times higher in the past century relative to the background rate of extinction. (Other scientists have suggested that the current extinction rate could be as much as 10,000 times higher than normal.) As the authors write, “The evidence is incontrovertible that recent extinction rates are unprecedented in human history and highly unusual in Earth’s history.” Perhaps the term “Big Six” should enter the popular lexicon—to add the current extinction to the previous “Big Five,” the last of which wiped out the dinosaurs 66 million years ago. But the concept of biodiversity encompasses more than just the total number of species on the planet. It also refers to the size of different populations of species. With respect to this phenomenon, multiple studies have confirmed that wild populations around the world are dwindling and disappearing at an alarming rate. For example, the 2010 [Global Biodiversity Outlook](https://www.cbd.int/gbo3) report found that the population of wild vertebrates living in the tropics dropped by 59 percent between 1970 and 2006. The report also found that the population of farmland birds in Europe has dropped by 50 percent since 1980; bird populations in the grasslands of North America declined by almost 40 percent between 1968 and 2003; and the population of birds in North American arid lands has fallen by almost 30 percent since the 1960s. Similarly, 42 percent of all amphibian species (a type of vertebrate that is sometimes called an “ecological indicator”) are undergoing population declines, and 23 percent of all plant species “are estimated to be threatened with extinction.” [Other studies](http://commondreams.org/views/2016/02/10/biodiversity-loss-and-doomsday-clock-invisible-disaster-almost-no-one-talking-about) have found that some 20 percent of all reptile species, 48 percent of the world’s primates, and 50 percent of freshwater turtles are threatened. Underwater, about 10 percent of all coral reefs are now dead, and another 60 percent are in danger of dying. Consistent with these data, the 2014 [Living Planet Report](http://bit.ly/1ssxx5m) shows that the global population of wild vertebrates dropped by 52 percent in only four decades—from 1970 to 2010. While biologists often avoid projecting historical trends into the future because of the complexity of ecological systems, it’s tempting to extrapolate this figure to, say, the year 2050, which is four decades from 2010. As it happens, a 2006[study](http://science.sciencemag.org/content/314/5800/787) published in Science does precisely this: It projects past trends of marine biodiversity loss into the 21st century, concluding that, unless significant changes are made to patterns of human activity, there will be virtually no more wild-caught seafood by 2048. 48% of the world’s primates are threatened with extinction. Catastrophic consequences for civilization. The consequences of this rapid pruning of the evolutionary tree of life extend beyond the obvious. There could be surprising effects of biodiversity loss that scientists are unable to fully anticipate in advance. For example, prior research has shown that localized ecosystems can undergo abrupt and irreversible shifts when they reach a tipping point. According to a 2012 [paper](http://www.nature.com/nature/journal/v486/n7401/full/nature11018.html) published in Nature, there are reasons for thinking that we may be approaching a tipping point of this sort in the global ecosystem, beyond which the consequences could be catastrophic for civilization. As the authors write, a planetary-scale transition could precipitate “substantial losses of ecosystem services required to sustain the human population.” An ecosystem service is any ecological process that benefits humanity, such as food production and crop pollination. If the global ecosystem were to cross a tipping point and substantial ecosystem services were lost, the results could be *“*widespread social unrest, economic instability, and loss of human life.” According to Missouri Botanical Garden ecologist Adam Smith, one of the paper’s co-authors, this could occur in a matter of decades—far more quickly than most of the expected consequences of climate change,yet equally destructive. Biodiversity loss is a “threat multiplier” that, by pushing societies to the brink of collapse, will exacerbate existing conflicts and introduce entirely new struggles between state and non-state actors. Indeed, it could even fuel the rise of terrorism. (After all, climate change has been [linked](http://thebulletin.org/climate-change-and-syrian-uprising) to the emergence of ISIS in Syria, and multiple high-ranking US officials, such as former US Defense Secretary [Chuck Hagel](http://www.defense.gov/News-Article-View/Article/603441)and CIA director [John Brennan](http://www.cnsnews.com/news/article/cnsnewscom-staff/cia-director-cites-impact-climate-change-deeper-cause-global), have affirmed that climate change and terrorism are connected.) The reality is that we are entering the sixth mass extinction in the 3.8-billion-year history of life on Earth, and the impact of this event could be felt by civilization “in as little as three human lifetimes,” as the aforementioned 2012 Nature paper notes. Furthermore, the widespread decline of biological populations could plausibly initiate a dramatic transformation of the global ecosystem on an even faster timescale: perhaps a single human lifetime. The unavoidable conclusion is that biodiversity loss constitutes an existential threat in its own right. As such, it ought to be considered alongside climate change and nuclear weapons as one of the most significant contemporary risks to human prosperity and survival.

### 4 – WHO CP

#### CP: Member nations of the World Trade Organization should enter into a prior and binding consultation with the World Health Organization over reducing intellectual property protections for COVID-19 related medicines.

#### WHO says yes – it supports increasing the availability of generics and limiting TRIPS

Hoen 03 [(Ellen T., researcher at the University Medical Centre at the University of Groningen, The Netherlands who has been listed as one of the 50 most influential people in intellectual property by the journal Managing Intellectual Property, PhD from the University of Groningen) “TRIPS, Pharmaceutical Patents and Access to Essential Medicines: Seattle, Doha and Beyond,” Chicago Journal of International Law, 2003] JL

However, subsequent resolutions of the World Health Assembly have strengthened the WHO’s mandate in the trade arena. In 2001, the World Health Assembly adopted two resolutions in particular that had a bearing on the debate over TRIPS [30]. The resolutions addressed:

– the need to strengthen policies to increase the availability of generic drugs;

– and the need to evaluate the impact of TRIPS on access to drugs, local manufacturing capacity, and the development of new drugs

#### Consultation displays strong leadership, authority, and cohesion among member states which are key to WHO legitimacy

Gostin et al 15 [(Lawrence O., Linda D. & Timothy J. O’Neill Professor of Global Health Law at Georgetown University, Faculty Director of the O’Neill Institute for National & Global Health Law, Director of the World Health Organization Collaborating Center on Public Health Law & Human Rights, JD from Duke University) “The Normative Authority of the World Health Organization,” Georgetown University Law Center, 5/2/2015] JL

Members want the WHO to exert leadership, harmonize disparate activities, and set priorities. Yet they resist intrusions into their sovereignty, and want to exert control. In other words, ‘everyone desires coordination, but no one wants to be coordinated.’ States often ardently defend their geostrategic interests. As the Indonesian virus-sharing episode illustrates, the WHO is pulled between power blocs, with North America and Europe (the primary funders) on one side and emerging economies such as Brazil, China, and India on the other. An inherent tension exists between richer ‘net contributor’ states and poorer ‘net recipient’ states, with the former seeking smaller WHO budgets and the latter larger budgets.

Overall, national politics drive self-interest, with states resisting externally imposed obligations for funding and action. Some political leaders express antipathy to, even distrust of, UN institutions, viewing them as bureaucratic and inefficient. In this political environment, it is unsurprising that members fail to act as shareholders. Ebola placed into stark relief the failure of the international community to increase capacities as required by the IHR. Guinea, Liberia and Sierra Leone had some of the world's weakest health systems, with little capacity to either monitor or respond to the Ebola epidemic.20 This caused enormous suffering in West Africa and placed countries throughout the region e and the world e at risk. Member states should recognize that the health of their citizens depends on strengthening others' capacity. The WHO has a central role in creating systems to facilitate and encourage such cooperation.

The WHO cannot succeed unless members act as shareholders, foregoing a measure of sovereignty for the global common good. It is in all states' interests to have a strong global health leader, safeguarding health security, building health systems, and reducing health inequalities. But that will not happen unless members fund the Organization generously, grant it authority and flexibility, and hold it accountable.

#### WHO is critical to disease prevention – it is the only international institution that can disperse information, standardize global public health, and facilitate public-private cooperation

Murtugudde 20 [(Raghu, professor of atmospheric and oceanic science at the University of Maryland, PhD in mechanical engineering from Columbia University) “Why We Need the World Health Organization Now More Than Ever,” Science, 4/19/2020] JL

WHO continues to play an indispensable role during the current COVID-19 outbreak itself. In November 2018, the US National Academies of Sciences, Engineering and Medicine organised a workshop to explore lessons from past influenza outbreaks and so develop recommendations for pandemic preparedness for 2030. The salient findings serve well to underscore the critical role of WHO for humankind.

The world’s influenza burden has only increased in the last two decades, a period in which there have also been 30 new zoonotic diseases. A warming world with increasing humidity, lost habitats and industrial livestock/poultry farming has many opportunities for pathogens to move from animals and birds to humans. Increasing global connectivity simply catalyses this process, as much as it catalyses economic growth.

WHO coordinates health research, clinical trials, drug safety, vaccine development, surveillance, virus sharing, etc. The importance of WHO’s work on immunisation across the globe, especially with HIV, can hardly be overstated. It has a rich track record of collaborating with private-sector organisations to advance research and development of health solutions and improving their access in the global south.

It discharges its duties while maintaining a dynamic equilibrium between such diverse and powerful forces as national securities, economic interests, human rights and ethics. COVID-19 has highlighted how political calculations can hamper data-sharing and mitigation efforts within and across national borders, and WHO often simply becomes a convenient political scapegoat in such situations.

International Health Regulations, a 2005 agreement between 196 countries to work together for global health security, focuses on detection, assessment and reporting of public health events, and also includes non-pharmaceutical interventions such as travel and trade restrictions. WHO coordinates and helps build capacity to implement IHR.

#### WHO diplomacy solves great power conflict

Murphy 20 [(Chris, U.S. senator from Connecticut serving on the U.S. Senate Foreign Relations Committee) “The Answer is to Empower, Not Attack, the World Health Organization,” War on the Rocks, 4/21/2020] JL

The World Health Organization is critical to stopping disease outbreaks and strengthening public health systems in developing countries, where COVID-19 is starting to appear. Yemen announced its first infection earlier this month, and other countries in Africa, Asia and the Middle East are at severe risk. Millions of refugees rely on the World Health Organization for their health care, and millions of children rely on the WHO and UNICEF to access vaccines.

The World Health Organization is not perfect, but its team of doctors and public health experts have had major successes. Their most impressive claim to fame is the eradication of smallpox – no small feat. More recently, the World Health Organization has led an effort to rid the world of two of the three strains of polio, and they are close to completing the trifecta.

These investments are not just the right thing to do; they benefit the United States. Improving health outcomes abroad provides greater political and economic stability, increasing demand for U.S. exports. And, as we are all learning now, it is in America’s national security interest for countries to effectively detect and respond to potential pandemics before they reach our shores.

As the United States looks to develop a new global system of pandemic prevention, there is absolutely no way to do that job without the World Health Organization. Uniquely, it puts traditional adversaries – like Russia and the United States, India and Pakistan, or Iran and Saudi Arabia – all around the same big table to take on global health challenges. It has relationships with the public health leaders of every nation, decades of experience in tackling viruses and diseases, and the ability to bring countries together to tackle big projects. This ability to bridge divides and work across borders cannot be torn down and recreated – not in today’s environment of major power competition – and so there is simply no way to build an effective international anti-pandemic infrastructure without the World Health Organization at the center.

#### Ought means should

Merriam Webster, No Date – Merriam Webster’s Learner’s Dictionary, “ought”, <http://www.learnersdictionary.com/definition/ought>  
ought /ˈɑːt/ verb  
Learner's definition of OUGHT [modal verb] 1 ◊ Ought is almost always followed by to and the infinitive form of a verb. The phrase ought to has the same meaning as should and is used in the same ways, but it is less common and somewhat more formal. The negative forms ought not and oughtn't are often used without a following to. — used to indicate what is expected They ought to be here by now. You ought to be able to read this book. There ought to be a gas station on the way. 2 — used to say or suggest what should be done You ought to get some rest. That leak ought to be fixed. You ought to do your homework.

#### Should means must and is immediate

Summers 94 (Justice – Oklahoma Supreme Court, “Kelsey v. Dollarsaver Food Warehouse of Durant”, 1994 OK 123, 11-8, http://www.oscn.net/applications/oscn/DeliverDocument.asp?CiteID=20287#marker3fn13)

¶4 The legal question to be resolved by the court is whether the word "should"[13](http://www.oscn.net/applications/oscn/DeliverDocument.asp?CiteID=20287#marker3fn13) in the May 18 order connotes futurity or may be deemed a ruling in praesenti.[14](http://www.oscn.net/applications/oscn/DeliverDocument.asp?CiteID=20287#marker3fn14) The answer to this query is not to be divined from rules of grammar;[15](http://www.oscn.net/applications/oscn/DeliverDocument.asp?CiteID=20287#marker3fn15) it must be governed by the age-old practice culture of legal professionals and its immemorial language usage. To determine if the omission (from the critical May 18 entry) of the turgid phrase, "and the same hereby is", (1) makes it an in futuro ruling - i.e., an expression of what the judge will or would do at a later stage - or (2) constitutes an in in praesenti resolution of a disputed law issue, the trial judge's intent must be garnered from the four corners of the entire record.[16](http://www.oscn.net/applications/oscn/DeliverDocument.asp?CiteID=20287#marker3fn16) [CONTINUES – TO FOOTNOTE] [13](http://www.oscn.net/applications/oscn/DeliverDocument.asp?CiteID=20287#marker2fn13) "*Should*" not only is used as a "present indicative" synonymous with *ought* but also is the past tense of "shall" with various shades of meaning not always easy to analyze. See 57 C.J. Shall § 9, Judgments § 121 (1932). O. JESPERSEN, GROWTH AND STRUCTURE OF THE ENGLISH LANGUAGE (1984); St. Louis & S.F.R. Co. v. Brown, 45 Okl. 143, 144 P. 1075, 1080-81 (1914). For a more detailed explanation, see the Partridge quotation infra note 15. Certain contexts mandate a construction of the term "should" as more than merely indicating preference or desirability. Brown, supra at 1080-81 (jury instructions stating that jurors "should" reduce the amount of damages in proportion to the amount of contributory negligence of the plaintiff was held to imply an *obligation* *and to be more than advisory*); Carrigan v. California Horse Racing Board, 60 Wash. App. 79, [802 P.2d 813](http://www.oscn.net/applications/oscn/deliverdocument.asp?box1=802&box2=P.2D&box3=813) (1990) (one of the Rules of Appellate Procedure requiring that a party "should devote a section of the brief to the request for the fee or expenses" was interpreted to mean that a party is under an *obligation* to include the requested segment); State v. Rack, 318 S.W.2d 211, 215 (Mo. 1958) ("should" would mean the same as "shall" or "must" when used in an instruction to the jury which tells the triers they "should disregard false testimony"). [14](http://www.oscn.net/applications/oscn/DeliverDocument.asp?CiteID=20287#marker2fn14) In praesenti means literally "at the present time." BLACK'S LAW DICTIONARY 792 (6th Ed. 1990). In legal parlance the phrase denotes that which in law is presently or immediately effective, as opposed to something that will or would become effective in the future *[in futurol*]. See Van Wyck v. Knevals, [106 U.S. 360](http://www.oscn.net/applications/oscn/deliverdocument.asp?box1=106&box2=U.S.&box3=360), 365, 1 S.Ct. 336, 337, 27 L.Ed. 201 (1882).

## Case

#### The counter-standard is minimizing suffering.

#### All of their impacts implicitly rely on util. Their cards comment on particular ways we should think about death, but they still agree that pain is bad and that more pain is worse than less pain. Death forceloses the ability to live any life, which is the best metric because value to life is subjective. Any non-utilitarian framework is necessarily commodifying because it decides arbitrarily what is valuable, which is paternalistic; only util views all humans with equal ontological worth.

#### Group their education offense— they don’t solve; huge alt causes to debaters subjectivity—education, families, religion, etc. One ballot won’t change anything!

#### Any plausible moral theory must prioritize extinction.

Pummer 15 [Theron, Junior Research Fellow in Philosophy at St. Anne's College, University of Oxford. “Moral Agreement on Saving the World” Practical Ethics, University of Oxford. May 18, 2015] AT

There appears to be lot of disagreement in moral philosophy. Whether these many apparent disagreements are deep and irresolvable, I believe there is at least one thing it is reasonable to agree on right now, whatever general moral view we adopt: that it is very important to reduce the risk that all intelligent beings on this planet are eliminated by an enormous catastrophe, such as a nuclear war. How we might in fact try to reduce such existential risks is discussed elsewhere. My claim here is only that we – whether we’re consequentialists, deontologists, or virtue ethicists – should all agree that we should try to save the world. According to consequentialism, we should maximize the good, where this is taken to be the goodness, from an impartial perspective, of outcomes. Clearly one thing that makes an outcome good is that the people in it are doing well. There is little disagreement here. If the happiness or well-being of possible future people is just as important as that of people who already exist, and if they would have good lives, it is not hard to see how reducing existential risk is easily the most important thing in the whole world. This is for the familiar reason that there are so many people who could exist in the future – there are trillions upon trillions… upon trillions. There are so many possible future people that reducing existential risk is arguably the most important thing in the world, even if the well-being of these possible people were given only 0.001% as much weight as that of existing people. Even on a wholly person-affecting view – according to which there’s nothing (apart from effects on existing people) to be said in favor of creating happy people – the case for reducing existential risk is very strong. As noted in this seminal paper, this case is strengthened by the fact that there’s a good chance that many existing people will, with the aid of life-extension technology, live very long and very high quality lives. You might think what I have just argued applies to consequentialists only. There is a tendency to assume that, if an argument appeals to consequentialist considerations (the goodness of outcomes), it is irrelevant to non-consequentialists. But that is a huge mistake. Non-consequentialism is the view that there’s more that determines rightness than the goodness of consequences or outcomes; it is not the view that the latter don’t matter. Even John Rawls wrote, “All ethical doctrines worth our attention take consequences into account in judging rightness. One which did not would simply be irrational, crazy.” Minimally plausible versions of deontology and virtue ethics must be concerned in part with promoting the good, from an impartial point of view. They’d thus imply very strong reasons to reduce existential risk, at least when this doesn’t significantly involve doing harm to others or damaging one’s character. What’s even more surprising, perhaps, is that even if our own good (or that of those near and dear to us) has much greater weight than goodness from the impartial “point of view of the universe,” indeed even if the latter is entirely morally irrelevant, we may nonetheless have very strong reasons to reduce existential risk. Even egoism, the view that each agent should maximize her own good, might imply strong reasons to reduce existential risk. It will depend, among other things, on what one’s own good consists in. If well-being consisted in pleasure only, it is somewhat harder to argue that egoism would imply strong reasons to reduce existential risk – perhaps we could argue that one would maximize her expected hedonic well-being by funding life extension technology or by having herself cryogenically frozen at the time of her bodily death as well as giving money to reduce existential risk (so that there is a world for her to live in!). I am not sure, however, how strong the reasons to do this would be. But views which imply that, if I don’t care about other people, I have no or very little reason to help them are not even minimally plausible views (in addition to hedonistic egoism, I here have in mind views that imply that one has no reason to perform an act unless one actually desires to do that act). To be minimally plausible, egoism will need to be paired with a more sophisticated account of well-being. To see this, it is enough to consider, as Plato did, the possibility of a ring of invisibility – suppose that, while wearing it, Ayn could derive some pleasure by helping the poor, but instead could derive just a bit more by severely harming them. Hedonistic egoism would absurdly imply she should do the latter. To avoid this implication, egoists would need to build something like the meaningfulness of a life into well-being, in some robust way, where this would to a significant extent be a function of other-regarding concerns (see chapter 12 of this classic intro to ethics). But once these elements are included, we can (roughly, as above) argue that this sort of egoism will imply strong reasons to reduce existential risk. Add to all of this Samuel Scheffler’s recent intriguing arguments (quick podcast version available here) that most of what makes our lives go well would be undermined if there were no future generations of intelligent persons. On his view, my life would contain vastly less well-being if (say) a year after my death the world came to an end. So obviously if Scheffler were right I’d have very strong reason to reduce existential risk. We should also take into account moral uncertainty. What is it reasonable for one to do, when one is uncertain not (only) about the empirical facts, but also about the moral facts? I’ve just argued that there’s agreement among minimally plausible ethical views that we have strong reason to reduce existential risk – not only consequentialists, but also deontologists, virtue ethicists, and sophisticated egoists should agree. But even those (hedonistic egoists) who disagree should have a significant level of confidence that they are mistaken, and that one of the above views is correct. Even if they were 90% sure that their view is the correct one (and 10% sure that one of these other ones is correct), they would have pretty strong reason, from the standpoint of moral uncertainty, to reduce existential risk. Perhaps most disturbingly still, even if we are only 1% sure that the well-being of possible future people matters, it is at least arguable that, from the standpoint of moral uncertainty, reducing existential risk is the most important thing in the world. Again, this is largely for the reason that there are so many people who could exist in the future – there are trillions upon trillions… upon trillions. (For more on this and other related issues, see this excellent dissertation). Of course, it is uncertain whether these untold trillions would, in general, have good lives. It’s possible they’ll be miserable. It is enough for my claim that there is moral agreement in the relevant sense if, at least given certain empirical claims about what future lives would most likely be like, all minimally plausible moral views would converge on the conclusion that we should try to save the world. While there are some non-crazy views that place significantly greater moral weight on avoiding suffering than on promoting happiness, for reasons others have offered (and for independent reasons I won’t get into here unless requested to), they nonetheless seem to be fairly implausible views. And even if things did not go well for our ancestors, I am optimistic that they will overall go fantastically well for our descendants, if we allow them to. I suspect that most of us alive today – at least those of us not suffering from extreme illness or poverty – have lives that are well worth living, and that things will continue to improve. Derek Parfit, whose work has emphasized future generations as well as agreement in ethics, described our situation clearly and accurately: “We live during the hinge of history. Given the scientific and technological discoveries of the last two centuries, the world has never changed as fast. We shall soon have even greater powers to transform, not only our surroundings, but ourselves and our successors. If we act wisely in the next few centuries, humanity will survive its most dangerous and decisive period. Our descendants could, if necessary, go elsewhere, spreading through this galaxy…. Our descendants might, I believe, make the further future very good. But that good future may also depend in part on us. If our selfish recklessness ends human history, we would be acting very wrongly.” (From chapter 36 of On What Matters)

#### Vote neg on presumption – the compulsory licensing clause and exception in TRIPS is the same as the aff—proves no solvency b/c generic vaccines havent been made

### Plan already done

#### WTO already did the AFF – Doha Declaration nullifies medical patents for developing countries struggling with pricing

**World Trade Organization 17** (World Trade Organization – you should know who this is, “WTO IP rules amended to ease poor countries’ access to affordable medicines”, <https://www.wto.org/english/news_e/news17_e/trip_23jan17_e.htm>, 23 January 2017, EmmieeM)

**An amendment to** the agreement on **intellectual property entered** into force today (23 January) **securing for developing countries a legal pathway to access affordable medicines under WTO rules**.

The amendment to the WTO Trade Related Aspects of Intellectual Property Rights (TRIPS) Agreement marks the first time since the organization opened its doors in 1995 that WTO accords have been amended.

The WTO Secretariat has received in recent days notifications from five members that they have ratified the protocol amending the WTO TRIPS Agreement. These notifications — from Burkina Faso, Nigeria, Liechtenstein, the United Arab Emirates and Viet Nam — brought to two-thirds the number of WTO members which have now ratified the amendment. The two-thirds threshold was needed to formally bring the amendment into the TRIPS Agreement.

Members took the decision to amend the TRIPS Agreement **specifically to adapt** the **rules** of the global trading system **to the public health needs of people in poor countries**. This action follows repeated calls from the multilateral system for acceptance of the amendment, most recently by the United Nations General Assembly High-Level Meeting on Ending AIDS in June 2016.

“This is an **extremely important amendment**. It **gives legal certainty that generic medicines can be exported at reasonable prices to satisfy the needs of countries with** no pharmaceutical production capacity, or those with **limited capacity**. By doing so, **it helps the most vulnerable** access the drugs that meet their needs, helping to deal with diseases such as HIV/AIDS, tuberculosis or malaria, as well as other epidemics. I am delighted that WTO members have now followed through on their commitment and brought this important measure into force,” said WTO Director-General Roberto Azevêdo. In video statements available here, some of the key players share their thoughts on the TRIPS amendment.

Unanimously adopted by WTO members in 2005, the protocol amending the TRIPS Agreement **makes permanent a mechanism to ease poorer WTO members’ access to affordable generic medicines produced in other countries**. The amendment **empowers** importing **developing and least-developed countries facing public health problems and lacking** the **capacity to produce drugs** generically to seek such medicines from third country producers under "compulsory licensing" arrangements. Normally, most medicines produced under compulsory licences can only be provided to the domestic market in the country where they are produced. This amendment allows exporting countries to grant compulsory licences to generic suppliers exclusively for the purpose of manufacturing and exporting needed medicines to countries lacking production capacity.

“As important as trade policy is, health and well-being must take precedence,” said Amina Mohamed, Kenya’s Foreign Minister who chaired the WTO General Council at the time when the amendment was approved in December 2005. “WTO members recognise this and have proven how seriously they take health issues by ratifying and putting into force an amendment to WTO rules which will facilitate access to essential medicines in low income countries.”

The amendment provides **a secure and sustained legal basis for** both potential exporters and importers to adopt legislation and establish the means needed to allow **countries** with limited or no production capacity **to import affordable generics from countries where pharmaceuticals are patented**. More and more WTO members are taking practical steps to implement the system in their laws. The bulk of global medicine exports is covered by laws enabling exports under this system, opening up new options for potential beneficiaries to access a wider range of potential suppliers and enabling new, innovative procurement strategies.

### AT Developing Countries

#### It doesn’t solve – there are tons of barriers to access to vaccines, especially in developing countries. Even if it’s legal to make generics, lack of raw materials, expertise, and production facilities mean the plan is a drop in the bucket for responding to global covid

Herper et al 21 [Matthew Herper Senior Writer, Medicine, Editorial Director of Events at STAT. "Waiver of patent rights on Covid-19 vaccines, in near term, may be more symbolic than substantive." https://www.statnews.com/2021/05/06/waiver-of-patent-rights-on-covid-19-vaccines-in-near-term-may-be-more-symbolic-than-substantive/]

Prashant Yadav, a supply chain expert and senior fellow at the Center for Global Development, said the biggest barrier to increasing the global vaccine supply is a lack of raw materials and facilities that manufacture the billions of doses the world needs. Temporarily suspending some intellectual property, as the U.S. proposes to do, would have little effect on those problems, he said.

“My take is: By itself, it will not get us much benefit in increased manufacturing capacity,” Yadav said. “But as part of a larger package, it can.”

That larger package would include wealthy nations like the U.S. mounting an Operation Warp Speed-style effort to invest in manufacturing in low-income countries, he said, using their vast financial resources to actually produce vaccine doses rather than solely targeting patents.

Lawrence Gostin, director of the O’Neill Institute for National and Global Health Law at Georgetown Law, said the waiver is necessary but hardly sufficient. It will likely take months of international infighting before the proposal would take effect, he said, months during which would-be manufacturers would not have the right to start producing vaccines.

“We’re not talking about any immediate help for India or Latin America or other countries going through an enormous spread of the virus,” Gostin said. “While they’re going to be negotiating the text, the virus will be mutating.”

#### IP is insufficient for imitation; originators will challenge with intense litigation, and nations don’t have necessary ingredients and materials. Independently, the plan will cause companies to disengage from global efforts.

Silverman 3/15 [Rachel Silverman is a policy fellow at the Center for Global Development where she leads policy-oriented research on global health financing and incentive structures. Silverman’s current research focuses on the practical application of results-based financing; global health transitions; efficient global health procurement; innovation models for global health; priority-setting for UHC; alignment and impact in international funding for family planning; and strategies to strengthen evidence and accountability. BA with distinction in international relations and economics from Stanford University.) “Waiving vaccine patents won’t help inoculate poorer nations” Washington Post, PostEverything Perspective, <https://www.washingtonpost.com/outlook/2021/03/15/vaccine-coronavirus-patents-waive-global-equity/>] RM

According to some activists, the solution to this inequity is relatively simple: By suspending protections on covid-19 vaccine patents, the international community “could help break Big Pharma monopolies and increase supplies so there are enough doses for everyone, everywhere,” [claims](https://peoplesvaccine.org/take-action/)the People’s Vaccine Alliance. Indeed, 58 low- and middle-income countries have mobilized in support of a proposed World Trade Organization [waiver](https://docs.wto.org/dol2fe/Pages/SS/directdoc.aspx?filename=q:/IP/C/W669.pdf&Open=True) that would temporarily exempt [coronavirus](https://www.washingtonpost.com/coronavirus/?itid=lk_inline_manual_4)-related intellectual property from normal international rules and protections. And while the effort to waive IP protections has been a global health hot topic for months, it gained a high-profile endorsement in the United States recently from Sen. Bernie Sanders (I-Vt.). In a March 10 video statement, Sanders [called upon President Biden](https://twitter.com/GlobalJusticeUK/status/1369734275818549252?s=20) to support the IP suspension while slamming “huge, multibillion-dollar pharmaceutical companies [that] continue to prioritize profits by protecting their monopolies.”

The logic of the argument seems clear and intuitive — at first. Without patents, which serve narrow commercial interests, companies all over the world could freely produce the vaccine. Sure, Big Pharma would lose money — but this is a pandemic, and human life comes before private profit, especially when vaccines receive substantial public financing to support research and development. As with HIV drugs in years past, widespread generic production would dramatically increase supply and drive down prices to levels affordable even in the developing world.

Reality is more complicated, however. Because of the technical complexity of manufacturing coronavirus vaccines, waiving intellectual-property rights, by itself, would have little effect**.** **It could even backfire, with companies using the move as an excuse to disengage from global access efforts**. **There are more effective ways to entice — and to pressure — companies to license and share their intellectual property and the associated know-how, without broadly nullifying patents.**

The Moderna vaccine illustrates the limits of freeing up intellectual property. Moderna [announced in October](https://investors.modernatx.com/news-releases/news-release-details/statement-moderna-intellectual-property-matters-during-covid-19) that it would not enforce IP rights on its coronavirus vaccine — and yet it has taken no steps to share information about the vaccine’s design or manufacture, citing commercial interests in the underlying technology. Five months later, production of the Moderna vaccine remains entirely under the company’s direct control within its owned and contracted facilities. Notably, Moderna is also the only manufacturer of a U.S.- or British-approved vaccine [not yet participating in Covax](https://www.washingtonpost.com/world/coronavirus-vaccine-access-poor-countries-moderna/2021/02/12/0586e532-6712-11eb-bf81-c618c88ed605_story.html?itid=lk_inline_manual_9), a global-aid-funded effort (including a [pledged $4 billion from the United States](https://www.npr.org/2021/02/18/969145224/biden-to-announce-4-billion-for-global-covid-19-vaccine-effort)) to purchase vaccines for use in low- and middle-income countries.

It is true, however, that activist pressure — including threats to infringe upon IP rights — can encourage originators to enter into voluntary licensing arrangements. So the global movement to liberate the vaccine patents may be useful, even if some advocates make exaggerated claims about the effects of waivers on their own.

One reason patent waivers are unlikely to help much in this case is that vaccines are harder to make than ordinary drugs. Because most drugs are simple chemical compounds, and because the composition of the compounds is easily analyzable, competent chemists can usually reverse-engineer a production process with relative ease. When a drug patent expires, therefore — or is waived — generic companies can readily enter the market and produce competitive products, [lowering prices dramatically](https://www.fda.gov/about-fda/center-drug-evaluation-and-research-cder/generic-competition-and-drug-prices).

Vaccines, in contrast, are complex biological products. Observing their contents is insufficient to allow for imitation. **Instead, to produce the vaccine, manufacturers need access to the developer’s “soft” IP — the proprietary recipe, cell lines, manufacturing processes and so forth**. While some of this information is confidentially submitted to regulators and might theoretically be released in an extraordinary situation (though not without legal challenge), manufacturers are at an enormous disadvantage without the originator’s cooperation to help them set up their process and kick-start production. Even with the nonconsensual release of the soft IP held by the regulator, the process of trial and error would cause long delays in a best-case scenario. Most likely, the effort would end in expensive failure. Manufacturers also need certain raw ingredients and other materials, like glass vials and filtration equipment; overwhelming demand, paired with disruptive export restrictions, has constricted the global availability of some of these items.

#### Underinvestment and regulation drive drug inefficiency---licenses are already available

Tabarrok 5/6/21 [Alex Tabarrok is Bartley J. Madden Chair in Economics at the Mercatus Center and a professor of economics at George Mason University. Along with Tyler Cowen, he is the co-author of the popular economics blog Marginal Revolution and co-founder of Marginal Revolution University. He is the author of numerous academic papers in the fields of law and economics, criminology, regulatory policy, voting theory and other areas in political economy. He is co-author with Tyler of Modern Principles of Economics, a widely used introductory textbook. He gave a TED talk in 2009. His articles have appeared in the New York Times, the Washington Post, the Wall Street Journal, and many other publications.) “Patents are not the problem!” Marginal Revolution University, 5/6/21, Current Affairs, Economics, Law, Medicine, <https://marginalrevolution.com/marginalrevolution/2021/05/ip-is-not-the-constraint.html>] RM

For the last year and a half I have been shouting from the rooftops, “invest in capacity, build more factories, shore up the supply lines, spend billions to save trillions.” Fortunately, some boffins in the Biden administration have found a better way, “the US supports the waiver of IP protections on COVID-19 vaccines to help end the pandemic.”

Waive IP protections. So simple. Why didn’t I think of that???

**Patents are not the problem**. All of the vaccine manufacturers are trying to increase supply as quickly as possible. Billions of doses are being produced–more than ever before in the history of the world. Licenses are widely available. **AstraZeneca have licensed their vaccine for production with manufactures around the world, including in India, Brazil, Mexico, Argentina, China and South Africa**. J&J’s vaccine has been licensed for production by multiple firms in the United States as well as with firms in Spain, South Africa and France. Sputnik has been licensed for production by firms in India, China, South Korea, Brazil and pending EMA approval with firms in Germany and France. Sinopharm has been licensed in the UAE, Egypt and Bangladesh. Novavax has licensed its vaccine for production in South Korea, India, and Japan and it is desperate to find other licensees but t**echnology transfer isn’t easy and there are limited supplies of raw materials:**

Virtually overnight, [Novavax] set up a network of outside manufacturers more ambitious than one outside executive said he’s ever seen, but they struggled at times to transfer their technology there amid pandemic travel restrictions. They were kicked out of one factory by the same government that’s bankrolled their effort. Competing with larger competitors, they’ve found themselves short on raw materials as diverse as Chilean tree bark and bioreactor bags. They signed a deal with India’s Serum Institute to produce many of their COVAX doses but now face the realistic chance that even when Serum gets to full capacity — and they are behind — India’s government, dealing with the world’s worst active outbreak, won’t let the shots leave the country.

Plastic bags are a bigger bottleneck than patents. The US embargo on vaccine supplies to India was precisely that the Biden administration used the DPA to prioritize things like bioreactor bags and filters to US suppliers and that meant that India’s Serum Institute was having trouble getting its production lines ready for Novavax. CureVac, another potential mRNA vaccine, is also finding it difficult to find supplies due to US restrictions (which means supplies are short everywhere). As Derek Lowe said:

Abolishing patents will not provide more shaker bags or more Chilean tree bark, nor provide more of the key filtration materials needed for production. These processes have a lot of potential choke points and rate-limiting steps in them, and there is no wand that will wave that complexity away.

Technology transfer has been difficult for AstraZeneca–which is one reason they have had production difficulties–and their vaccine uses relatively well understood technology. The mRNA technology is new and has never before been used to produce at scale. Pfizer and Moderna had to build factories and distribution systems from scratch. There are no mRNA factories idling on the sidelines. If there were, Moderna or Pfizer would be happy to license since they are producing in their own factories 24 hours a day, seven days a week (monopolies restrict supply, remember?). **Why do you think China hasn’t yet produced an mRNA vaccine? Hint: it isn’t fear about violating IP**. Moreover, even Moderna and Pfizer don’t yet fully understand their production technology, they are learning by doing every single day. **Moderna has said that they won’t enforce their patents during the pandemic but no one has stepped up to produce because no one else can.**

The US trade representative’s announcement is virtue signaling to the anti-market left and will do little to nothing to increase supply.

What can we do to increase supply? Sorry, there is no quick and cheap solution. We must spend. Trump’s Operation Warp Speed spent on the order of $15 billion. If we want more, we need to spend more and on similar scale. The Biden administration paid $269 million to Merck to retool its factories to make the J&J vaccine. That was a good start. We could also offer Pfizer and Moderna say $100 a dose to produce in excess of their current production and maybe with those resources there is more they could do. South Africa and India and every other country in the world should offer the same (India hasn’t even approved the Pfizer vaccine and they are complaining about IP!??) We should ease up on the DPA and invest more in the supply chain–let’s get CureVac and the Serum Institute what they need. We should work like hell to find a substitute for Chilean tree bark. See my piece in Science co-authored with Michael Kremer et. al. for more ideas. (Note also that these ideas are better at dealing with current supply constraints and they also increase the incentive to produce future vaccines, unlike shortsighted patent abrogation.)

Bottom line is that producing more takes real resources not waving magic patent wands.

You may have gathered that I am angry. I am indeed angry that the people in power think they can solve real problems on the cheap and at someone else’s expense. This is not serious. I am also angry that they are sending the wrong message about business, profits and capitalism. So let me end on positive note. Like the Apollo program and Dunkirk, the creation of the mRNA vaccines by Pfizer and Moderna should be lauded with Nobel prizes and major movies. Churchill called the rescue at Dunkirk a “miracle of deliverance,” well the miracle of Moderna will rescue many more. Not only was a vaccine designed in under a year, an entirely new production process was set up to produce billions of doses to rescue the world. The creation of the mRNA vaccines was a triumph of science, logistics, and management and it was done at a speed that I had thought possible only for past generations.

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On May 5, U.S. Trade Representative Katherine Tai announced that the Biden administration would support a waiver of intellectual property (IP) restrictions for coronavirus vaccines to enable low-income countries to vaccinate their populations. While such a waiver is necessary to stem the global COVID-19 pandemic, it is not sufficient. What is missing from discussions of intellectual property is that **few of the countries with the potential to produce sophisticated pharmaceutical products currently have the technological capacity to manufacture mRNA and adenovirus vaccines to global standards.** This is because of the highly concentrated nature of the global pharmaceutical industry, which has impeded the transfer of production technology beyond a handful of countries.

Even after U.S. support of the IP waiver, significant obstacles to increased vaccine production and distribution remain. Primary among them is continuing resistance by profit-concerned pharmaceutical companies to sharing their technological expertise more broadly with capable partners, and the governments in high-income countries that support these strategies.

Corporations argue that, particularly for the mRNA vaccines, **wider distribution and production are prohibitively difficult due to the complex and relatively new technology involved.**

There is some truth in this. The genetic sequence of the virus is already publicly available. The safe transfer of this sequence to human bodies, via mRNA or an inactivated adenovirus, by contrast, is a complicated and sophisticated operation. Pharmaceutical companies argue this process needs to be kept in capable hands. They argue that they are the only ones with this capacity, and have received and continue to receive tremendous public funding as a result. None are offering up their expertise and, in particular, technology that they deem trade secrets, for wider public use, which would dramatically widen production and distribution capability beyond wealthy countries.

However, in light of the significant public funding already invested, the windfall profits already achieved and the significant public interest at stake, we can and should do more than support an intellectual property waiver to enable capacity building for pharmaceutical manufacturing and distribution in low-income countries. Vaccine producers are essentially realizing their profits as government contractors, and it is in the interest of the U.S. government for the pandemic to end globally, not just in the U.S. This will occur only if low-income countries can make and distribute vaccines.

We already see some examples of production beyond the West. The Serum Institute of India already produces a large proportion of the AstraZeneca vaccine bound for Europe. There is no reason why it and other Indian manufacturers, and those in other countries with emerging scientific and technological capacity, could not produce much more for the developing world over the next year. This was envisioned by the WHO’s C-TAP program. But Pfizer and Moderna, with the backing of the Trump administration, opposed this program.

Yet given the global threat — a threat which will not truly diminish locally until it diminishes globally — we should create incentives for them to lend their expertise and support to manufacturing partners of their own choosing in low-income countries to radically expand production capacity.

#### 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.

#### TRIPS alone is too ambiguous to serve as a sufficient legal standard

Halaijan 13

Dina Halaijan (JD, Brooklyn Law School). “Inadequacy of TRIPS & the Compulsory License: Why Broad Compulsory Licensing is Not a Viable Solution to the Access Medicine Problem.” Brooklyn Journal of International Law. Volume 38, Issue 3, Article 7 (2013). JDN. <https://brooklynworks.brooklaw.edu/cgi/viewcontent.cgi?article=1050&context=bjil>

3. Definitional Ambiguities & Ambiguities in Scope

Ambiguities in the interpretation of TRIPS due to the lack of substantive guidelines or definitions also hinder its effective use by **increasing the risk of litigation.**111 The Doha Declaration merely stated that individual countries have “the right to determine what constitutes a national emergency or other circumstances of extreme urgency” in deciding to grant a compulsory license, and thus did little to ameliorate the different interpretive approaches of developed and developing countries.112 **The flexible scope** of compulsory licenses **lends to abuse which further instills resistance and suspicion** from pharmaceutical companies.113 For example, Egypt’s compulsory license for Pfizer’s Viagra tarnishes the reputation of compulsory licensing because erectile dysfunction is clearly a less dire situation and one likely not intended to be covered by the public health exception of TRIPS.114 Such excessive abuse and over-use of compulsory licensing likely encourages pharmaceutical companies to aggressively resist valid uses of compulsory licenses to prevent **over-expansion of scope.**

115 In addition to ambiguity in the scope of intended diseases, conflicting interpretations exist in the type of pharmaceutical products intended for compulsory licensing.116 The scope of countries that should benefit from compulsory licensing remains another area of contention.117 Not limiting the scope of applicable nations may create a **chilling effect** on the types of drugs pharmaceutical companies choose to invest in and develop to avoid the potential for a compulsory license, **which hurts developing nations most in need of help.**118 Interpreting the morality exclusion in Article 27(2) also proves difficult, as **there is no universally accepted definition.**119 In addition to causing differing interpretations between countries, the lack of concrete definitions allows countries to alter their position to fit their self-interest and creates potential for abuse.120 For example, despite the United States’ narrow interpretation of TRIPS flexibilities, the United States contradicted itself during the 2001 anthrax scare by suggesting use of a compulsory license for Cipro, a drug that combats the effects of anthrax.121 On a related note, as India’s government and pharmaceutical industry’s capabilities grow, the future of India’s willingness to grant compulsory licenses and produce cheap generic drugs for export to other developing countries is questionable.122 Indian companies may opt to serve their selfinterest and become “innovator companies” to compete globally with other large pharmaceutical companies.123 The vagueness of Article 30, which allowed a narrow interpretation to be given by the WTO dispute resolution panel, is a further impediment to increasing access to medicines.124 Calculating adequate remuneration for payment to the patent holder when a compulsory license is issued is another obstacle to successful use of TRIPS flexibilities and is further complicated by the requirement to take the economic value of the authorization into account, as TRIPS does not provide guidance to determine what is ‘adequate’ and what is the authorization’s ‘value.’125 The WTO members’ inability to reach a decision regarding parallel importation created a “fundamental flaw” of ambiguity.126 In regard to compulsory licensing under the Paragraph 6 Decision, drugs made for export must be distinguishable by special labels, colors, or shapes to prevent trade diversion.127 However, lack of monitoring guidelines and repercussions makes the re-exportation issue troubling.128