### FW

#### Ethics must begin a priori:

#### [A] Naturalistic fallacy – experience only tells us what is since we can only perceive what is, not what ought to be. But it’s impossible to derive an ought from descriptive premises, so there needs to be additional a priori premises to make a moral theory.

#### [B] Constitutive Authority – practical reason is the only unescapable authority because to ask for why we should be reasoners concedes its authority since it uses reason – anything else is nonbinding and arbitrary.

#### [C] Action theory – only evaluating action through reason solves since reason is key to evaluate intent, otherwise we could infinitely divide actions. For example: If I was brewing tea, I could break up that one big action into multiple small actions. Only our intention, to brew tea unifies these actions if we were never able to unify action, we could never classify certain actions as moral or immoral since those actions would be infinitely divisible.

#### That justifies universality –a priori principles like reason apply to everyone since they are independent of human experience and – any non-universalizable norm justifies someone’s ability to impede on your ends i.e. if I want to eat ice cream, I must recognize that others may affect my pursuit of that end.

#### Thus, the standard is consistency with the categorical imperative. Prefer:

#### [1] Performativity—freedom is the key to the process of justification of arguments. Willing that we should abide by their ethical theory presupposes that we own ourselves in the first place. Thus, it is logically incoherent to justify a standard without first willing that we can pursue ends free from others.

#### [2] Consequences fail: a] Yes act/omission distinction – there are infinite events occurring over which you have no control, so you can never be moral b] Every action has infinite stemming consequences so we can’t predict. c] Induction is circular because it assumes nature will hold uniform d] aggregation impossible – impossible to measure pain and pleasure e] Every action is infinitely divisible, only intents unify

#### [3] Only universalizable reason can effectively explain the perspectives of agents – that’s the best method for combatting oppression.

Farr 02 Arnold Farr (prof of phil @ UKentucky, focusing on German idealism, philosophy of race, postmodernism, psychoanalysis, and liberation philosophy). “Can a Philosophy of Race Afford to Abandon the Kantian Categorical Imperative?” JOURNAL of SOCIAL PHILOSOPHY, Vol. 33 No. 1, Spring 2002, 17–32.

**One** of the most popular **criticism**s **of Kant’s moral philosophy is that it is too formalistic.**13 That is, the universal nature of the categorical imperative leaves it devoid of content. Such a principle is useless since moral decisions are made by concrete individuals in a concrete, historical, and social situation. This type of criticism lies behind Lewis Gordon’s rejection of any attempt to ground an antiracist position on Kantian principles. The rejection of universal principles for the sake of emphasizing the historical embeddedness of the human agent is widespread in recent philosophy and social theory. I will argue here on Kantian grounds that **although a distinction between the universal and the concrete is** a **valid** distinction, **the unity of the two is required for** an understanding of human **agency.** The attack on Kantian formalism began with Hegel’s criticism of the Kantian philosophy.14 The list of contemporary theorists who follow Hegel’s line of criticism is far too long to deal with in the scope of this paper. Although these theorists may approach the problem of Kantian formalism from a variety of angles, the spirit of their criticism is basically the same: The universality of the categorical imperative is an abstraction from one’s empirical conditions. **Kant is** often **accused of making the moral agent an abstract, empty**, noumenal **subject. Nothing could be further from the truth. The Kantian subject is** an embodied, empirical, concrete subject. However, this concrete subject has a dual nature. Kant claims in the Critique of Pure Reason as well as in the Grounding that human beings have an intelligible and empirical character.15 It is impossible to understand and do justice to Kant’s moral theory without taking seriously the relation between these two characters. The very concept of morality is impossible without the tension between the two. By “empirical character” Kant simply means that we have a sensual nature. We are physical creatures with physical drives or desires. **The** very **fact that I cannot simply satisfy my desires without considering the rightness** or wrongness **of my actions suggests that my empirical character must be held in check** by something, or else I behave like a Freudian id. My empiri- cal character must be held in check **by my intelligible character**, which is the legislative activity of practical reason. It is through our intelligible character that **we formulate principles that keep our** empirical **impulses in check.** The categorical imperative is the supreme principle of morality that is constructed by the moral agent in his/her moment of self-transcendence. What I have called self-transcendence may be best explained in the following passage by Onora O’Neill: In restricting our maxims to those that meet the test of the categorical imperative we refuse to base our lives on maxims that necessarily make our own case an exception. The reason why a universilizability criterion is morally signiﬁcant is that it makes our own case no special exception (G, IV, 404). In accepting the Categorical Imperative we accept the moral reality of other selves, and hence the possibility (not, note, the reality) of a moral community. **The Formula of Universal Law enjoins no more than that we act only on maxims that are open to others also.**16 O’Neill’s description of the universalizability criterion includes the notion of self-transcendence that I am working to explicate here to the extent that like self-transcendence, universalizable moral principles require that the individ- ual think beyond his or her own particular desires. The individual is not allowed to exclude others **as** rational **moral agents** who have the right to act as he acts in a given situation. For example, if I decide to use another person merely as a means for my own end I must recognize the other person’s right to do the same to me. I cannot consistently will that I use another as a means only and will that I not be used in the same manner by another. **Hence,** the **universalizability** criterion **is a principle of consistency and** a principle of **inclusion.** That is, in choosing my maxims **I** attempt to **include the perspective of other moral agents.**

#### [4] Ethical frameworks are topicality interpretations of the word ought so they must be theoretically justified. Prefer on resource disparities—focusing on evidence and statistics privileges debaters with the most preround prep excluding lone-wolfs who lack huge evidence files. A debater under my framework can easily be won without any prep since minimal evidence is required. That controls the internal link to other voters because a pre-req to debating is access to the activity.

#### [5] AFC – neg must concede the aff framework because anything else moots 6 mins of ac offense and b) allows us to focus the debate on the topic instead of abstract framework principles which ow bc we only have 2 weeks left to debate this topic

### Advocacy

#### Plan text: The member nations of the World Trade Organization ought to reduce intellectual property protections for medicines during pandemics.

### Offense

#### [1] IPP unjustifiably restricts agents from setting and pursuing ends in healthcare because patents prevent people from taking part in scientific advancements in medicine – that violates freedom in multiple ways

**Hale 18** (Zachary Hale, 4-4-2018, accessed on 8-22-2021, The Arkansas Journal of Social Change and Public Service, "Patently Unfair: The Tensions Between Human Rights and Intellectual Property Protection - The Arkansas Journal of Social Change and Public Service", <https://ualr.edu/socialchange/2018/04/04/patently-unfair/>) BHHS AK

Although the right to the protection of “moral and material interests resulting from any scientific, literary, or artistic production,”[32] is a human right as defined in the UDHR and the ICESCR, the current system of intellectual property protection conflicts with and even violates rights that are considered to be fundamental to human life. Although intellectual property instruments are certainly used to violate essential civil and political freedoms like the freedom of expression, and economic and social freedoms like the freedom to share in the scientific advancements of society, the most blatant violations of human rights caused by intellectual property protection occur in the fields of nutrition, healthcare, and culture.[33] Of these essential entitlements, the rights to food and health are made even more significant by their relationship to the most fundamental of all human rights: the right to life.

#### [2] IPP is inconsistent with free market principles

**Kinsella 11** (Stephan Kinsella, 5-25-2011, accessed on 8-23-2021, Foundation for Economic Education, "How Intellectual Property Hampers the Free Market | N. Stephan Kinsella", <https://fee.org/articles/how-intellectual-property-hampers-the-free-market/>) BHHS AK

But are they? There are good reasons to think that IP is not actually property—that it is actually antithetical to a private-property, free-market order. By intellectual property, I mean primarily patent and copyright. It’s important to understand the origins of these concepts. As law professor Eric E. Johnson notes, “The monopolies now understood as copyrights and patents were originally created by royal decree, bestowed as a form of favoritism and control. As the power of the monarchy dwindled, these chartered monopolies were reformed, and essentially by default, they wound up in the hands of authors and inventors.” Patents were exclusive monopolies to sell various goods and services for a limited time. The word patent, historian Patricia Seed explains, comes from the Latin patente, signifying open letters. Patents were “open letters” granted by the monarch authorizing someone to do something—to be, say, the only person to sell a certain good in a certain area, to homestead land in the New World on behalf of the crown, and so on. It’s interesting that many defenders of IP—such as patent lawyers and even some libertarians—get indignant if you call patents or copyright a monopoly. “It’s not a monopoly; it’s a property right,” they say. “If it’s a monopoly then your use of your car is a monopoly.” But patents are State grants of monopoly privilege. One of the first patent statutes was England’s Statute of Monopolies of 1624, a good example of truth in labeling. Granting patents was a way for the State to raise money without having to impose a tax. Dispensing them also helped secure the loyalty of favorites. The patentee in return received protection from competition. This was great for the State and the patentee but not for competition or the consumer. In today’s system we’ve democratized and institutionalized intellectual property. Now anyone can apply. You don’t have to go to the king or be his buddy. You can just go to the patent office. But the same thing happens. Some companies apply for patents just to keep the wolves at bay. After all, if you don’t have patents someone might sue you or reinvent and patent the same ideas you are using. If you have a patent arsenal, others are afraid to sue you. So companies spend millions of dollars to obtain patents for defensive purposes. Large companies rattle their sabers or sue each other, then make a deal, say, to cross-license their patents to each other. That’s fine for them because they have protection from each other’s competition. But what does it do to smaller companies? They don’t have big patent arsenals or a credible countersuit threat. So patents amount to a barrier to entry, the modern version of mercantilist protectionism. What about copyright? The roots literally lie in censorship. It was easy for State and church to control thought by controlling the scribes, but then the printing press came along, and the authorities worried that they couldn’t control official thought as easily. So Queen Mary created the Stationer’s Company in 1557, with the exclusive franchise over book publishing, to control the press and what information the people could access. When the charter of the Stationer’s Company expired, the publishers lobbied for an extension, but in the Statute of Anne (1710) Parliament gave copyright to authors instead. Authors liked this because it freed their works from State control. Nowadays they use copyright much as the State originally did: to censor and ban books. (More below.) IP, American Style The American system of IP began with the U.S. Constitution. Article 1, Section 8, Clause 8 authorizes (but doesn’t require) Congress “To promote the Progress of Science and useful Arts, by securing for limited Times to Authors and Inventors the exclusive Right to their respective Writings and Discoveries.” Despite modern IP proponents’ claims to the contrary, the American founders did not view intellectual property as a natural right but only as a policy tool to encourage innovation. Yet they were nervous about monopoly privilege, which is why patents and copyrights were authorized only for a limited time. Even John Locke, whose thought influenced the Founding Fathers, did not view copyright and patent as natural rights. Nor did he maintain that property homesteading applied to ideas. It applied only to scarce physical resources. Granted, some state constitutions had little versions of copyright before the American Constitution. (See Tom W. Bell, Intellectual Privilege: Copyright, Common Law, and the Common Good, part 1, chapter 3, section B.1.) On occasion, the language of natural rights was used to defend it, but this was just cover for the monopolies they granted to special interests. Natural rights do not expire after 15 years. Natural rights are not extended to Americans only. Natural rights wouldn’t exclude many types of innovation and intellectual creativity and cover only a few arbitrary types. And what is the result of this system? In the case of patents we have a modern statute administered by a huge federal bureaucracy that grants monopolies on the production and trade of various things, which means holders may ask the federal courts to order the use of force to stop competitors. But the competitors have not done anything that justifies force. They merely have used information to guide their actions with respect to their own property. Is that compatible with private property and the free market?

#### That affirms: Free market economies are the only ones that allow people to be free to pursue their own interests.

**Richman 12** [Sheldon Richman, 8-5-2012, "The Free Market Doesn't Need Government Regulation," Reason, <https://reason.com/2012/08/05/the-free-market-doesnt-need-government-r/>] // SJ AME

What regulates the conduct of these people? Market forces. (I keep specifying "in a freed market" because in a state-regulated economy, competitive market forces are diminished or suppressed.) Economically speaking, people cannot do whatever they want—and get away with it—in a freed market because other people are free to counteract them and it's in their interest to do so. That's part of what we mean by market forces. Just because the government doesn't stop a seller from charging $100 for an apple doesn't mean he or she can get that amount. Market forces regulate the seller as strictly as any bureaucrat could—even more so, because a bureaucrat can be bribed. Whom would you have to bribe to win an exemption from the law of supply and demand? (Well, you might bribe enough legislators to obtain protection from competition, but that would constitute an abrogation of the market.) It is no matter of indifference whether state operatives or market forces do the regulating. Bureaucrats, who necessarily have limited knowledge and perverse incentives, regulate by threat of physical force. In contrast, market forces operate peacefully through millions of cooperating participants, each with intimate knowledge of her own personal circumstances and looking out for her own well-being. Bureaucratic regulation is likely to be irrelevant or (more likely) inimical to what people in the market care about. Not so regulation by market forces.

### Underview

#### [1] Permissibility and Presumption: a] Statements are true before false since if I told you my name, you’d believe me. b] If anything is permissible, then so is the aff since there is nothing prohibiting us.

**[2] Aff gets 1AR theory – its dtd, ci, and the highest layer of the round – otherwise the neg can be infinitely abusive and there’s no way to check against this. The 1ars too short to rectify abuse and adequately cover substance**

### Advantage

#### COVID is getting worse and the upcoming ‘Twindemic’ disproves contrary models.

Roberts and Zimmerman 10/9 [Mark and Richard; 10/9/21; Mark S. Roberts is a distinguished professor of health policy and management at the University of Pittsburgh. Richard K. Zimmerman is a professor of family medicine at the University of Pittsburgh; “Opinion: Flu season could be worse this winter; paired with COVID, the U.S. risks a dangerous ‘twindemic’,” Market Watch, <https://www.marketwatch.com/story/flu-season-could-be-worse-this-winter-paired-with-covid-we-risk-a-dangerous-twindemic-11633708362>] Justin

No precedent exists for a ‘twindemic’ Given the limited spread of influenza in the general U.S. population last year, our research suggests that the U.S. could see a large epidemic of flu this season. Paired with the existing threat of the highly infectious delta variant, this could result in a dangerous combination of infectious diseases, or a “twindemic.” Models of COVID-19 and other infectious diseases have been at the forefront of predictions about the COVID-19 pandemic, and have often proved to be predictive of cases, hospitalizations and death. But there are no historical examples of this type of dual and simultaneous epidemics. As a result, traditional epidemiological and statistical methods are not well suited to project what may occur this season. Therefore, models that incorporate the mechanisms of how a virus spreads are better able to make predictions. We used two separate methods to forecast the potential impact from last year’s decrease in influenza cases on the current 2021-2022 flu season. In recent research of ours that has not yet been peer-reviewed, we applied a modeling system that simulates an actual population’s interactions at home and work, and in school and neighborhood settings. This model predicts that the U.S. could see a big spike in flu cases this season. In another preliminary study, we used a traditional infectious disease modeling tool that divides the population into people who are susceptible to infection, those infected, those recovered and those who have been hospitalized or have died. Based on our mathematical model, we predict that the U.S. could see as many as 102,000 additional hospitalizations above the hundreds of thousands that typically occur during flu season. Those numbers assume that there is no change from the usual flu vaccine uptake and effectiveness starting this fall and lasting through the flu season. Individual behaviors and vaccination matter A typical flu season usually produces 30 million to 40 million cases of symptomatic disease, between 400,000 and 800,000 hospitalizations and from 20,000 to 50,000 deaths. This prospect, paired with the ongoing battle against COVID-19, raises the possibility of a twindemic overwhelming the health care system as hospitals and ICUs in some parts of the country overflow with critically ill COVID-19 patients. Our research also highlighted how young children could be particularly at risk since they have lower exposure to previous seasons of influenza and thus haven’t yet developed broad immunity, compared with adults. In addition to the burden on children, childhood influenza is an important driver of influenza in the elderly as kids pass it on to grandparents and other elderly people. However, there is reason for optimism, since people’s behaviors can change these outcomes considerably. For instance, our simulation study incorporated people of all ages and found that increasing vaccination among children has the potential to cut infections in children by half. And we found that if only 25% more people than usual are vaccinated against influenza this year, that would be sufficient to reduce the infection rate to normal seasonal influenza levels. Across the U.S., there is a lot of variability in vaccination rates, adherence to social distancing recommendations and mask-wearing. So it is likely that the flu season will experience substantial variation state to state, just as we have seen with patterns of COVID-19 infection. All of this data suggests that although vaccination against influenza is important every year, it is of utmost importance this year to prevent a dramatic rise in influenza cases and to keep U.S. hospitals from becoming overwhelmed.

#### Only the plan can solve covid access – inequalities heighten the risk of mutations and uneven development – neg objections miss the boat.

Kumar 21 [Rajeesh; Associate Fellow at the Institute, currently working on a project titled “Emerging Powers and the Future of Global Governance: India and International Institutions.” He has PhD in International Organization from Jawaharlal Nehru University, New Delhi. Prior to joining MP-IDSA in 2016, he taught at JamiaMilliaIslamia, New Delhi (2010-11& 2015-16) and University of Calicut, Kerala (2007-08). His areas of research interest are International Organizations, India and Multilateralism, Global Governance, and International Humanitarian Law. He is the co-editor of two books;Eurozone Crisis and the Future of Europe: Political Economy of Further Integration and Governance (London: Palgrave Macmillan, 2014); and Islam, Islamist Movements and Democracy in the Middle East: Challenges, Opportunities and Responses (Delhi: Global Vision Publishing, 2013); “WTO TRIPS Waiver and COVID-19 Vaccine Equity,” IDSA Issue Briefs; <https://idsa.in/issuebrief/wto-trips-waiver-covid-vaccine-rkumar-120721>] Justin

According to Duke Global Health Innovation Center, which monitors COVID-19 vaccine purchases, rich nations representing just 14 per cent of the world population have bought up to 53 per cent of the most promising vaccines so far. As of 4 July 2021, the high-income countries (HICs) purchased more than half (6.16 billion) vaccine doses sold globally. At the same time, the low-income countries (LICs) received only 0.3 per cent of the vaccines produced. The low and middle-income countries (LMICs), which account for 81 per cent of the global adult population, purchased 33 per cent, and COVAX (COVID-19 Vaccines Global Access) has received 13 per cent.10 Many HICs bought enough doses to vaccinate their populations several times over. For instance, Canada procured 10.45 doses per person, while the UK, EU and the US procured 8.18, 6.89, and 4.60 doses per inhabitant, respectively.11 Consequently, there is a significant disparity between HICs and LICs in vaccine administration as well. As of 8 July 2021, 3.32 billion vaccine doses had been administered globally.12 Nonetheless, only one per cent of people in LICs have been given at least one dose. While in HICs almost one in four people have received the vaccine, in LICs, it is one in more than 500. The World Health Organization (WHO) notes that about 90 per cent of African countries will miss the September target to vaccinate at least 10 per cent of their populations as a third wave looms on the continent.13 South Africa, the most affected African country, for instance, has vaccinated less than two per cent of its population of about 59 million. This is in contrast with the US where almost 47.5 per cent of the population of more than 330 million has been fully vaccinated. In Sub-Saharan Africa, vaccine rollout remains the slowest in the world. According to the International Monetary Fund (IMF), at current rates, by the end of 2021, a massive global inequity will continue to exist, with Africa still experiencing meagre vaccination rates while other parts of the world move much closer to complete vaccination.14 This vaccine inequity is not only morally indefensible but also clinically counter-productive. If this situation prevails, LICs could be waiting until 2025 for vaccinating half of their people. Allowing most of the world’s population to go unvaccinated will also spawn new virus mutations, more contagious viruses leading to a steep rise in COVID-19 cases. Such a scenario could cause twice as many deaths as against distributing them globally, on a priority basis. Preventing this humanitarian catastrophe requires removing all barriers to the production and distribution of vaccines. TRIPS is one such barrier that prevents vaccine production in LMICs and hence its equitable distribution. TRIPS: Barrier to Equitable Health Care Access The opponents of the waiver proposal argue that IPR are not a significant barrier to equitable access to health care, and existing TRIPS flexibilities are sufficient to address the COVID-19 pandemic. However, history suggests the contrary. For instance, when South Africa passed the Medicines and Related Substances Act of 1997 to address the HIV/AIDS public health crisis, nearly 40 of world’s largest and influential pharma companies took the South African government to court over the violation of TRIPS. The Act, which invoked the compulsory licensing provision, allowed South Africa to produce affordable generic drugs.15 The Big Pharma also lobbied developed countries, particularly the US, to put bilateral trade sanctions against South Africa.16 Similarly, when Indian company Cipla decided to provide generic antiretrovirals (ARVs) to the African market at a lower cost, Big Pharma retaliated through patent litigations in Indian and international trade courts and branded Indian drug companies as thieves.17 Another instance was when Swiss company Roche initiated patent infringement proceedings against Cipla’s decision to launch a generic version of cancer drug, “erlotinib”. Though the Delhi High Court initially dismissed Roche's appeal by citing “public interest” and “affordability of medicines,” the continued to pressure the generic pharma companies over IPR. 18 Likewise, Pfizer’s aggressive patenting strategy prevented South Korea in developing pneumonia vaccines for children.19 A recent document by Médecins Sans Frontières (MSF), or Doctors Without Borders, highlights various instances of how IP hinders manufacturing and supply of diagnostics, medical equipment, treatments and vaccines during the COVID-19 pandemic. For instance, during the peak of the COVID-19 first wave in Europe, Roche rejected a request from the Netherlands to release the recipe of key chemical reagents needed to increase the production of diagnostic kits. Another example was patent holders threatening producers of 3D printing ventilators with patent infringement lawsuits in Italy.20 The MSF also found that patents pose a severe threat to access to affordable versions of newer vaccines.21 The opponents of the TRIPS waiver also argue that IP is the incentive for innovation and if it is undermined, future innovation will suffer. However, most of the COVID-19 medical innovations, particularly vaccines, are developed with public financing assistance. Governments spent billions of dollars for COVID-19 vaccine research. Notably, out of $6.1 billion in investment tracked up to July 2021, 98.12 per cent was public funding.22 The US and Germany are the largest investors in vaccine R&D with $2.2 billion and $1.5 billion funding. Private companies received 94.6 per cent of this funding; Moderna received the highest $956.3 million and Janssen $910.6 million. Moreover, governments also invested $50.9 billion for advance purchase agreements (APAs) as an incentive for vaccine development. A recent IMF working paper also notes that public research institutions were a key driver of the COVID-19 R&D effort—accounting for 70 per cent of all COVID-19 clinical trials globally.23 The argument is that vaccines are developed with the support of substantial public financing, hence there is a public right to the scientific achievements. Moreover, private companies reaped billions in profits from COVID-19 vaccines. One could argue that since the US, Germany and other HICs are spending money, their citizens are entitled to get vaccines first, hence vaccine nationalism is morally defensible. Nonetheless, it is not the case. The TRIPS Agreement includes several provisions which mandates promotion of technology transfer from developed countries to LDCs. For instance, Article 7 states that "the protection and enforcement of IP rights should contribute to the promotion of technological innovation and the transfer and dissemination of technology, to the mutual advantage of producers and users of technical knowledge and in a manner conducive to social and economic welfare, and to a balance of rights and obligations."24 Similarly, Article 66.2 also mandates the developed countries to transfer technologies to LDCs to enable them to create a sound and viable technological base. The LMICs opened their markets and amended domestic patent laws favouring developing countries’ products against this promise of technology transfer. Another argument against the proposed TRIPS waiver is that a waiver would not increase the manufacturing of COVID-19 vaccines. Indeed, one of the significant factors contributing to vaccine inequity is the lack of manufacturing capacity in the global south. Further, a TRIPS waiver will not automatically translate into improved manufacturing capacity. However, a waiver would be the first but essential step to increase manufacturing capacity worldwide. For instance, to export COVID-19 vaccine-related products, countries need to ensure that there are no IP restrictions at both ends – exporting and importing. The market for vaccine materials includes consumables, single-use reactors bags, filters, culture media, and vaccine ingredients. Export blockages on raw materials, equipment and finished products harm the overall output of the vaccine supply chain. If there is no TRIPS restriction, more governments and companies will invest in repurposing their facilities. Similarly, the arguments such as that no other manufacturers can carry out the complex manufacturing process of COVID-19 vaccines and generic manufacturing as that would jeopardise quality, have also been proven wrong in the past. For instance, in the early 1990s, when Indian company Shantha Biotechnics approached a Western firm for a technology transfer of Hepatitis B vaccine, the firm responded that “India cannot afford such high technology vaccines… And even if you can afford to buy the technology, your scientists cannot understand recombinant technology in the least.”25 Later, Shantha Biotechnics developed its own vaccine at $1 per dose, and the UNICEF (United Nations Children’s Emergency Fund) mass inoculation programme uses this vaccine against Hepatitis B. In 2009, Shantha sold over 120 million doses of vaccines globally. India also produces high-quality generic drugs for HIV/AIDS and cancer treatment and markets them across the globe. Now, a couple of Indian companies are in the last stage of producing mRNA (Messenger RNA) vaccines.26 Similarly, Bangladesh and Indonesia claimed that they could manufacture millions of COVID-19 vaccine doses a year if pharmaceutical companies share the know-how.27 Recently, Vietnam also said that the country could satisfy COVID-19 vaccine production requirements once it obtains vaccine patents.28 Countries like the United Arab Emirates (UAE), Turkey, Cuba, Brazil, Argentina and South Korea have the capacity to produce high-quality vaccines but lack technologies and know-how. However, Africa, Egypt, Morocco, Senegal, South Africa and Tunisia have limited manufacturing capacities, which could also produce COVID-19 vaccines after repurposing. Moreover, COVID-19 vaccine IPR runs across the entire value chain – vaccine development, production, use, etc. A mere patent waiver may not be enough to address the issues related to its production and distribution. What is more important here is to share the technical know-how and information such as trade secrets. Therefore, the existing TRIPS flexibilities, such as compulsory and voluntary licensing, are insufficient to address this crisis. Further, compulsory licensing and the domestic legal procedures it requires is cumbersome and not expedient in a public health crisis like the COVID-19 pandemic. India’s Role in Ensuring Vaccine Equity India's response to COVID-19 at the global level was primarily two-fold. First, its proactive engagements in the regional and international platforms. Second, its policies and programmes to provide therapeutics and vaccines to the world. Since the beginning of the COVID-19 pandemic, India has been advocating international cooperation and policy coordination in fighting it. For instance, in April 2020, India co-sponsored a UN resolution that called for fair and equitable access to essential medical supplies and future vaccines to COVID-19. Later, in October 2020, India also put pressure on developed countries with a joint WTO proposal for TRIPS waiver. India’s Vaccine Maitri initiative also aims vaccine equity. As of 29 May 2021, India has supplied 663.698 lakh doses of COVID-19 vaccines to 95 countries. It includes 107.15 lakh doses as a gift to more than 45 countries, 357.92 lakh doses by commercial sales, and 198.628 lakh doses to the COVAX facility.29 The COVAX initiative aims to ensure rapid and equitable access to COVID-19 vaccines for all countries, regardless of their income level. India has decided to supply 10 million doses of the vaccine to Africa and one million to the UN health workers under the COVAX facility. India has also removed the IPR of Covaxin that would help platforms like C-TAP once WHO and developed countries’ regulatory bodies approve the vaccine. If agreed, the waiver would benefit India in many ways. First, more vaccines will help the country to control the pandemic and its recurring waves. Second, it will be a boost to India's pharma industry, particularly the generic medicine industry. According to the Biotechnology Innovation Organization, 834 unique active compounds are involved in the current R&D of COVID-19 therapeutics, vaccines, and diagnostics. It means that thousands of new patents are awaited, and that will hinder India's ability to produce COVID-19 related medical products. Only through a waiver, this challenge can be addressed. Similarly, scientists note that mRNA is the future of vaccine technology. However, manufacturing mRNA vaccines involves complex processes and procedures. Only a very few Indian manufacturers have access to this technology; however, that too is limited. Once Indian companies have access to mRNA technology, it will help country’s generic medicine industry and boost India’s economy. Therefore, even if the WTO agrees on a waiver for a period shorter than proposed, India should accept it. In addition, mRNA vaccines can be produced in lesser time compared to the traditional vaccines. While traditional vaccines’ production takes four to five months, mRNA needs only six to eight weeks. Access to this technology will be vital for India in expediting the fight against COVID-19 and future pandemics. Finally, a waiver may strengthen India's diplomatic soft power. At present, what hinders India's Vaccine Maitri initiative is the scarcity of vaccines at home. On the other hand, China is increasing its standing in Africa, South America and the Pacific through vaccine diplomacy. The WHO approval of the Chinese vaccines and lack of access to vaccines by most developing countries, opens up huge space for China to do its vaccine diplomacy. Here, India should convince its Quad partners, particularly Australia and Japan, who oppose the waiver that vaccine production in developing countries through TRIPS waiver will enable the grouping to deliver its pledged billion doses of COVID-19 vaccine in the Indo-Pacific region. In short, the proposed waiver, if agreed, will help India in addressing the public health crisis by producing more vaccines and distributing them at home; economically, by boosting its generic pharmaceutical industry, and diplomatically, providing vaccines to the developing and least-developed countries. Therefore, India should use all available means and methods, from trade-offs to pressurising, to make the waiver happen.

#### Yes scale-up for covid.

Erfani et al 21 [Parsa; Lawrence Gostin; Vanessa Kerry; Parsa Erfani is a Fogarty Global Health Scholar at Harvard Medical School and the University of Global Health Equity. Lawrence Gostin is a professor at Georgetown University Law Center, director of the school’s O’Neill Institute for National and Global Health Law, and director of the World Health Organization Center on National and Global Health Law. Vanessa Kerry is a critical care physician at Massachusetts General Hospital, director of the Program for Global Public Policy at Harvard Medical School, and CEO of Seed Global Health, a nonprofit that trains health workers in countries with critical shortages; “Beyond a symbolic gesture: What’s needed to turn the IP waiver into Covid-19 vaccines,” STAT; 5/19/21; <https://www.statnews.com/2021/05/19/beyond-a-symbolic-gesture-whats-needed-to-turn-the-ip-waiver-into-covid-19-vaccines/>] Justin

Currently many idle suppliers can’t begin vaccine production until they upgrade and repurpose existing manufacturing capacity for new technology. Opponents often argue that this step is the true barrier to rapid scale-up. One high-profile detractor, BIO President and CEO Michelle McMurry-Heath, argues that “handing [needy countries] the blueprint to construct a kitchen that — in optimal conditions — can take a year to build will not help us stop the emergence of dangerous new Covid variants.” This argument ignores two core truths: In many cases, manufacturing capacity needs only repurposing which can take mere months. And Covid-19, at the current global response and vaccination rates, will be a threat for years. Both truths suggest that we pass the blueprint and build the kitchen. Facilitating structures to transfer technology and capacity are already in place. The WHO launched the mRNA technology transfer hub model last month to provide manufacturers in low- and middle-income countries with the financial, training, and logistical support needed to scale up vaccine manufacturing capacity. Scores of manufacturers in these countries have already expressed interest. This initiative, however, requires recipient manufacturers to acquire the IP necessary for mRNA technologies— which is currently missing.

#### Vaccines are easy to make.

Gostin 9/27 [Lawrence; 9/27/21; Professor of global health law, Georgetown University, and directs the World Health Organization Center on Global Health Law; “Biden’s plan to vaccinate the world won’t work. Here’s a better one,” Washington Post, <https://www.washingtonpost.com/outlook/2021/09/27/biden-vaccines-globe-inequity-donations/>] Justin

The most likely vaccine candidates for regional production also happen to be the most technologically advanced. That’s because mRNA vaccines can be manufactured more rapidly, and at larger scale, more easily than traditional vaccine technologies, such as that used in the Johnson & Johnson vaccine. (MRNA vaccines are produced by small chemical reactions and don’t need living components, like the weakened or inactivated viruses used in traditional vaccines). They are also more easily adapted to target emerging variants, because it’s possible to replace one sequence of mRNA in the vaccine for another in a matter of weeks. But Pfizer-BioNTech and Moderna have thus far kept their intellectual property and trade secrets close to the chest. (Moderna has said it will not enforce its patents related to its coronavirus vaccine, but that doesn’t mean it will share its patented information with others, let alone its manufacturing know-how.)

#### Corona escalates security threats that cause extinction – cooperation thesis is wrong.

Recna 21 [Research Center for Nuclear Weapon Abolition; Nagasaki, Japan; “Pandemic Futures and Nuclear Weapon Risks: The Nagasaki 75th Anniversary pandemic-nuclear nexus scenarios final report,” Journal for Peace and Nuclear Disarmament; 5/28/21; <https://www.tandfonline.com/doi/full/10.1080/25751654.2021.1890867>] Justin

The Challenge: Multiple Existential Threats The relationship between pandemics and war is as long as human history. Past pandemics have set the scene for wars by weakening societies, undermining resilience, and exacerbating civil and inter-state conflict. Other disease outbreaks have erupted during wars, in part due to the appalling public health and battlefield conditions resulting from war, in turn sowing the seeds for new conflicts. In the post-Cold War era, pandemics have spread with unprecedented speed due to increased mobility created by globalization, especially between urbanized areas. Although there are positive signs that scientific advances and rapid innovation can help us manage pandemics, it is likely that deadly infectious viruses will be a challenge for years to come. The COVID-19 is the most demonic pandemic threat in modern history. It has erupted at a juncture of other existential global threats, most importantly, accelerating climate change and resurgent nuclear threat-making. The most important issue, therefore, is how the coronavirus (and future pandemics) will increase or decrease the risks associated with these twin threats, climate change effects, and the next use of nuclear weapons in war.5 Today, the nine nuclear weapons arsenals not only can annihilate hundreds of cities, but also cause nuclear winter and mass starvation of a billion or more people, if not the entire human species. Concurrently, climate change is enveloping the planet with more frequent and intense storms, accelerating sea level rise, and advancing rapid ecological change, expressed in unprecedented forest fires across the world. Already stretched to a breaking point in many countries, the current pandemic may overcome resilience to the point of near or actual collapse of social, economic, and political order. In this extraordinary moment, it is timely to reflect on the existence and possible uses of weapons of mass destruction under pandemic conditions – most importantly, nuclear weapons, but also chemical and biological weapons. Moments of extreme crisis and vulnerability can prompt aggressive and counterintuitive actions that in turn may destabilize already precariously balanced threat systems, underpinned by conventional and nuclear weapons, as well as the threat of weaponized chemical and biological technologies. Consequently, the risk of the use of weapons of mass destruction (WMD), especially nuclear weapons, increases at such times, possibly sharply. The COVID-19 pandemic is clearly driving massive, rapid, and unpredictable changes that will redefine every aspect of the human condition, including WMD – just as the world wars of the first half of the 20th century led to a revolution in international affairs and entirely new ways of organizing societies, economies, and international relations, in part based on nuclear weapons and their threatened use. In a world reshaped by pandemics, nuclear weapons – as well as correlated non-nuclear WMD, nuclear alliances, “deterrence” doctrines, operational and declaratory policies, nuclear extended deterrence, organizational practices, and the **existential risks** posed by retaining these capabilities – are all up for redefinition. A pandemic has potential to destabilize a nuclear-prone conflict by incapacitating the supreme nuclear commander or commanders who have to issue nuclear strike orders, creating uncertainty as to who is in charge, how to handle nuclear mistakes (such as errors, accidents, technological failures, and entanglement with conventional operations gone awry), and opening a brief opportunity for a first strike at a time when the COVID-infected state may not be able to retaliate efficiently – or at all – due to leadership confusion. In some nuclear-laden conflicts, a state might use a pandemic as a cover for political or military provocations in the belief that the adversary is distracted and partly disabled by the pandemic, increasing the risk of war in a nuclear-prone conflict. At the same time, a pandemic may lead nuclear armed states to increase the isolation and sanctions against a nuclear adversary, making it even harder to stop the spread of the disease, in turn creating a pandemic reservoir and transmission risk back to the nuclear armed state or its allies. In principle, the common threat of the pandemic might induce nuclear-armed states to reduce the tension in a nuclear-prone conflict and thereby the risk of nuclear war. It may cause nuclear adversaries or their umbrella states to seek to resolve conflicts in a cooperative and collaborative manner by creating habits of communication, engagement, and mutual learning that come into play in the nuclear-military sphere. For example, militaries may cooperate to control pandemic transmission, including by working together against criminal-terrorist non-state actors that are trafficking people or by joining forces to ensure that a new pathogen is not developed as a bioweapon. To date, however, the COVID-19 pandemic has increased the isolation of some nuclear-armed states and provided a textbook case of the failure of states to cooperate to overcome the pandemic. Borders have slammed shut, trade shut down, and budgets blown out, creating enormous pressure to focus on immediate domestic priorities. Foreign policies have become markedly more nationalistic. Dependence on nuclear weapons may increase as states seek to buttress a global re-spatialization6 of all dimensions of human interaction at all levels to manage pandemics. The effect of nuclear threats on leaders may make it less likely – or even impossible – to achieve the kind of concert at a global level needed to respond to and administer an effective vaccine, making it harder and even impossible to revert to pre-pandemic international relations. The result is that some states may proliferate their own nuclear weapons, further reinforcing the spiral of conflicts contained by nuclear threat, with cascading effects on the risk of nuclear war.

#### Prefer our ev—your stats won’t evaluate long term consequences.

Ide 21 [Tobias; April 2021; School of Geography, The University of Melbourne, 221 Bouverie St, Carlton, VIC 3053, Australia Institute of International Relations, Brunswick University of Technology, Bienroder Weg 97, 38106 Brunswick, Germany; “COVID-19 and armed conflict,” Elsevier Public Health Emergency Collection, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7833329/>] Justin

4. Discussion and conclusion Besides its immediate health and economic effects, COVID-19 can also impact armed conflict risks, with these conflicts themselves being an important obstacle in dealing with the pandemic. This article provided an assessment of the impact of COVID-19 on armed conflict based on data from the first six months of 2020. Theoretically, the pandemic could affect conflict risks through increased grievances, possibilities to demonstrate solidarity, or modified opportunity structures for armed groups. Results show that in four of the nine countries under study, the number of armed conflict events declined after the onset of the COVID-19 crisis. These declines are mostly related to strategic decisions and less favourable opportunity structures for armed groups, such as logistical difficulties and attempts to increase popular support. They offer few prospects for health diplomacy and sustainable peacebuilding. In places like Afghanistan, where the Taliban restrained their military activities to gain local support, the initial decline might even set the stage for a later escalation of the armed conflict. Similar concerns exist regarding recruitment in Colombia and India. In five of the nine countries analysed, armed conflict prevalence increased in the face of the pandemic. This is further evidence that health diplomacy approaches demonstrating goodwill and reducing grievances have little impact during the pandemic (Polo, 2020). COVID-19 did not change the root causes or principal dynamics of the armed conflicts in any of these five countries, but it accelerated existing trends and provided strategic opportunities for armed groups to exploit. Two factors are particularly relevant here: The weakening of state institutions (providing incentives for rebels to intensify military pressure) and a lack of (international) public attention (allowing to extend military operations without backlashes). While short-term rises in armed conflict risks related to the pandemic are mostly driven by changed opportunity structures, grievances could play a more prominent role when longer time horizons are considered. The economic repercussions associated with the current global spike in infections could exceed the coping capacities of households that did relatively well during the first COVID-19 wave. In coincidence with ethnic or religious cleavages, this could raise discontent to a level at which armed conflicts erupt. However, grievances usually take time to translate into organised armed activities. Declining levels of democracy as states claim emergency powers to combat COVID-19 are also a risk factor. Countries with a medium level of democracy and highly repressive regimes are empirically much more likely to experience civil wars than consolidated democracies (Cederman & Vogt, 2017). Armed conflict can have tremendous negative effects on human security and health governance. It is therefore of crucial importance to monitor the impact of COVID-19 on armed conflict risks and to develop adequate policy responses, such as sanctioning armed groups trying to exploit the pandemic.

#### COVID is a definitive determiner of conflict – negative statistics are short-term and don’t evaluate long-term impacts of instability.

ICG 20 [International Crises Group; 3/24/2020; The International Crisis Group is an independent organisation working to prevent wars and shape policies that will build a more peaceful world. We sound the alarm to prevent deadly conflict. We build support for the good governance and inclusive politics that enable societies to flourish. We engage directly with a range of conflict actors to seek and share information, and to encourage intelligent action for peace; “COVID-19 and Conflict: Seven Trends to Watch,” ICG, <https://www.crisisgroup.org/global/sb4-covid-19-and-conflict-seven-trends-watch>] Justin

II. Damage to International Crisis Management and Conflict Resolution Mechanisms One reason why refugee and IDP populations are likely to be especially vulnerable to COVID-19 is that the disease could severely weaken the capacity of international institutions to serve conflict-affected areas. WHO and other international officials fear that restrictions associated with the disease will impede humanitarian supply chains. But humanitarian agencies are not the only parts of the multilateral system under pressure due to the pandemic, which is also likely to curb peacemaking. Travel restrictions have begun to weigh on international mediation efforts. UN envoys working in the Middle East have been blocked from travelling to and within the region due to airport closures. Regional organisations have suspended diplomatic initiatives in areas ranging from the South Caucasus to West Africa, while the envoy of the International Contact Group on Venezuela – a group of European and Latin American states looking for a diplomatic solution to the crisis there – had to cancel an already long-delayed trip to Caracas in early March for COVID-related reasons. The disease could affect crucial intra-Afghan peace talks planned as a follow-up to the February preliminary agreement between the U.S. and the Taliban, at least reducing the number of those who can participate (although limiting the group to real decision-makers and essential support staff could be conducive to serious talks). Covid-19 means that international leaders, focused as they are on dramatic domestic issues, have little or no time to devote to conflicts or peace processes More broadly, the disease means that international leaders, focused as they are on dramatic domestic issues, have little or no time to devote to conflicts or peace processes. European officials say that efforts to secure a ceasefire in Libya (a priority for Berlin and Brussels in February) are no longer receiving high-level attention. Diplomats working to prevent a deadly showdown in northern Yemen desperately need the time and energy of senior Saudi and U.S. officials but report that meetings with both are being cancelled or curtailed. Kenya’s president Uhuru Kenyatta called off a 16 March summit with counterparts from Ethiopia and Somalia that aimed to defuse dangerously escalating tensions between Nairobi and Mogadishu, with Kenyan officials citing their need to focus on efforts to halt the virus’s potential spread. A summit between leaders of the EU and the “G5 Sahel countries” (Burkina Faso, Chad, Mali, Mauritania and Niger) will also be cancelled, dealing a blow to efforts to boost counter-terrorism operations in the region. The disease could also affect multinational peacekeeping and security assistance efforts. In early March, the UN secretariat asked a group of nine peacekeeping troop contributors – including China and Italy – to suspend some or all unit rotations to blue helmet operations due to concerns about the spread of COVID-19. UN operations have announced further limits to rotations since then, meaning that peacekeepers’ tours of duty will be extended for at least three months in tough mission settings such as the Central African Republic and South Sudan, potentially affecting their morale and effectiveness. A Security Council decision on setting up a new political mission to support Sudan’s transition to civilian rule appears likely to be postponed due to constraints on the Council’s meeting schedule to which its members agreed as part of virus containment measures. While these diplomatic and operational decisions will have no immediate impact on UN operations, a prolonged pandemic could make it difficult to find and deploy fresh forces and civilian personnel, wearing down missions. If international organisations may struggle to handle the crisis, media outlets and NGOs may also find it hard to report on conflict and crises due to travel restrictions, even as many readers and viewers are likely at least temporarily to lose interest in non-COVID-19-related stories. Some authoritarian governments seem ready to use the crisis to limit media access. Egypt has, for example, censured Western reporters for their coverage of the disease inside the country – removing the credentials of a Guardian reporter – while China has sent home a number of leading U.S. correspondents. Crisis Group itself has had to place significant limits on our analysts’ ability to travel during the pandemic for their own safety. As this briefing illustrates, we are determined to keep a spotlight on conflicts – whether related to COVID-19 or not – and provide the best coverage possible, but our work will face inevitable constraints. III. Risks to Social Order COVID-19 could place great stress on societies and political systems, creating the potential for new outbreaks of violence. In the short term, the threat of disease is likely acting as a deterrent to popular unrest, as protesters avoid large gatherings. COVID-19’s emergence in China precipitated a decline in anti-Beijing protests in Hong Kong (although public discomfort with radical elements of the protest movement may also have been a factor). There has been a decline, too, in the numbers of protesters taking to the streets in Algeria to challenge government corruption. The Russian opposition largely acquiesced in the authorities’ move, ostensibly justified on health grounds, to block protests against President Vladimir Putin’s decision to rewrite the constitution to extend his tenure in office. At least one exception to this general caution occurred in Niger, where demonstrators took to the streets against rules barring protest, which the government extended by invoking COVID-19. Three civilians were killed by security forces on 15 March. Yet the quiet in the streets may be a temporary and misleading phenomenon. The pandemic’s public health and economic consequences are liable to strain relations between governments and citizens, especially where health services buckle; preserving public order could prove challenging when security forces are overstretched and populations become increasingly frustrated with the government’s response to the disease. Early signs of social disorder already can be seen. In Ukraine, protesters attacked buses carrying Ukrainian evacuees from Wuhan, China, in response to allegations that some were carrying the disease. Prison breaks have been reported in Venezuela, Brazil and Italy, with inmates reacting violently to new restrictions associated with COVID-19, while in Colombia prison riots and a reported jailbreak over the perceived lack of protection from the disease resulted in the death of 23 inmates at La Modelo jail on 21 March. In Colombia as well, looters attacked food trucks headed for Venezuela, at least in part to protest the economic effects of the decision taken by both Bogotá and Caracas to close the Colombian-Venezuelan border for health reasons. Even reasonable precautions may inspire angry responses. In Peru, the authorities have arrested hundreds of citizens for breaking quarantine rules, in some cases leading to violence. The disease’s catastrophic economic impact could well sow the seeds of future disorder. More broadly, the disease’s catastrophic economic impact could well sow the seeds of future disorder. It could do so whether or not the countries in question have experienced major outbreaks of the disease, although the danger in those that have will be magnified. A global recession of as yet unknown scope lies ahead; pandemic-related transport restrictions will disrupt trade and food supplies; countless businesses will be forced to shut down; and unemployment levels are likely to soar. Governments that have close trading ties with China, especially some in Africa, are feeling the pain of the slowdown emanating from the original Wuhan outbreak. Oil producers are already struggling with the collapse of energy prices. Countries like Nigeria, which has strong import/export links to China and relies on oil prices to prop up its public finances, are suffering. Abuja has reportedly considered cutting expenditures by 10 per cent in 2020, meaning that authorities may have to default on promises to raise the minimum wage. Such austerity measures, combined with other economic effects of COVID-19 – such as the disappearance of tourists in areas that depend heavily on foreign visitors – could lead to economic shocks that last well beyond the immediate crisis, creating the potential for prolonged labour disturbances and social instability. As Crisis Group noted at the start of 2020, the raucous protests of 2019 stemmed from a “pervasive sense of economic injustice” that could “set more cities ablaze this year”. Anger over the effects of COVID-19 – and perceptions that governments are mismanaging them – could eventually trigger new demonstrations. The economic decline will have even more immediate effects on societies in low-income countries. Across large swathes of sub-Saharan Africa in particular, millions depend on their daily income to feed their families. An extended lockdown could rapidly create widespread desperation and disorder. One further reason for worry is COVID-19’s clear potential to unleash xenophobic sentiment, especially in countries with large immigrant communities. Early in the crisis, Chinese labourers in Kenya faced harassment linked to suspicions that China Southern Airline flights were bringing the coronavirus into the country. Some Western politicians, notably U.S. President Donald Trump, have attempted to whip up resentment of Beijing with jibes about the “Chinese virus”. There is anecdotal evidence of an increase in prejudice toward people of Chinese ethnicity in the U.S. and other Western countries, and a serious risk that the diseases will fuel more racist and anti-foreigner violence. IV. Political Exploitation of the Crisis Against this background of social pressures, there is ample room for political leaders to try to exploit COVID-19, either to solidify power at home or pursue their interests abroad. In the short term, many governments seem confused by the speed, reach and danger of the outbreak and, in some cases, the disease has infected political elites. An outbreak in Brazil’s isolated capital, Brasilia, has sickened a large number of officials and politicians. In Iran, there have been dozens of cases among senior officials and parliamentarians. In Burkina Faso, where the government is already struggling with the collapse of state authority in large parts of the country, a rash of cases has hit cabinet members. The secondvice president of the parliament was the first recorded fatality in sub-Saharan Africa. In such instances, the disease is more likely to weaken authorities’ ability to make decisions about both health issues and other pressing crises. Nonetheless, as the crisis goes on, some leaders could order restrictive measures that make public health sense at the peak of the crisis and then extend them in the hope of quashing dissent once the disease declines. Such measures could include indefinite bans on large public gatherings – which many governments have already instituted to stop community spread of COVID-19 – to prevent public protests. Here again there are precedents from West Africa’s Ebola crisis: local civil society groups and opposition parties claim that the authorities prohibited meetings for longer than necessary as a way of suppressing legitimate protests. A harbinger of what is to come may have appeared in Hungary, where Prime Minister Viktor Orban asked parliament on 21 March to indefinitely extend a state of emergency that prescribes five-year prison sentences for those disseminating false information or obstructing the state’s crisis response. There is ample room for political leaders to try to exploit COVID-19. Elections scheduled for the first half of 2020, and perhaps later, are also liable to be postponed; here too, the immediate public health justification may be valid but the temptation to use the virus as a pretext for further delays and narrowing of political space could well exist. Indeed, there are likely to be good practical reasons for delaying voting in such cases. In addition to complicating domestic planning, the pandemic will obstruct the deployment of international electoral support and, where planned, observation missions. Still, opposition parties are likely to suspect foul play, especially in countries where political trust is low, there has been recent instability, or the government enjoys dubious legitimacy or has a history of manipulating electoral calendars. Again, there are already examples. The interim president in Bolivia, Jeanine Añez, announced on 21 March that the presidential election planned for 3 May to find a full-time replacement for Evo Morales – whom the military ousted after controversial polls in 2019 – would be delayed to an unspecified future date. In Sri Lanka, an Election Commission decision to postpone parliamentary elections for public health reasons could grant President Gotabaya Rajapaksa – a hardline nationalist associated with human rights abuses directed at minorities and political critics – enhanced powers. Although Rajapaksa initially wanted the polls to go ahead (reflecting expectations of a landslide victory), should he refuse to recall parliament while elections remain on hold, the length and legality of his interim powers may well stir controversy. Some leaders may also see COVID-19 as cover to embark on destabilising foreign adventures, whether to deflect domestic discontent or because they sense they will face little pushback amid the global health crisis. No such case has yet surfaced, and there is a risk that analysts will now attribute crises to COVID-19 that are better explained by other factors. Still, at a time when the pandemic is distracting major powers and multilateral organisations, some leaders may surmise that they can assert themselves in ways that they would otherwise deem too risky. A spate of attacks against U.S. targets by Iranian-backed Shiite militias in Iraq may well be part of a pre-existing effort by Tehran to push the U.S. out of the Middle East. But with Iran’s leadership already under enormous domestic pressure, the toll taken by the coronavirus might also affect its calculus. As we wrote, “feeling besieged and with no obvious diplomatic exit ramp, Iran might conclude that only a confrontation with the United States might change a trajectory that’s heading in a very dangerous direction”. Similarly, the crisis may create openings for jihadist groups to launch new offensives against weakened governments in Africa and the Middle East. To date, neither ISIS nor any of al-Qaeda’s various branches has displayed a clear strategic vision relating to the pandemic (although ISIS has circulated health guidance to its militants on how to deal with the disease based on sayings by the Prophet Muhammad). Nonetheless, as Crisis Group has previously argued, jihadist forces tend to “exploit disorder”, gaining territory and adherents where conflicts already exist or weak states face social turmoil. ISIS, for example, used the post-2011 chaos in Syria to gain a level of power that would otherwise have been impossible. It is possible that social and political disorder may create similar openings for jihadist actors as the crisis goes on. Conversely, those groups – such as al-Shabaab in Somalia – that control significant swathes of territory could, like governments, face a surge of public discontent if they cannot keep COVID-19 in check.