### Overview

#### Srey – give me 30 speaks, anything else is arbitrary, supercharged cuz this tourney has 3-2 skews, and cuz my wiki is clean

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

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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. Resolved is defined as[[1]](#footnote-1) firm in purpose or intent; determined and I’m determined.

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.

#### 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.

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

#### Refer to me in theory violation as nathan– anything else justifies misnaming and destroys predictability since I don’t know what they refer to

#### Enforcement through eliminating product patents solve- empirically proven through India to lower prices, create generics, and foster innovation. No 2NR “I meet” arguments A] Skews theory ground because they’re each a NIB for me to winning theory which kills my ability to check abuse. B] Skews time, they can make three minutes of blippy I meets that I can’t cover because the 2AR is too short.

He 2019 He, Juan (Graduate Student Graduate School at Shenzhen Tsinghua University) . "Indian Patent Law and Its Impact on the Pharmaceutical Industry: What Can China Learn from India?." Innovation, Economic Development, and Intellectual Property in India and China. Springer, Singapore, 2019. 251-269./SJKS

The *Report on the Revision of the Patent Law* submitted by the Patent Law Amendment Commission in 1959,[34](https://link.springer.com/chapter/10.1007/978-981-13-8102-7_11#Fn34) which was led by Shri Justice N. Rajagopala Ayyangar, pointed out that at that time foreigners held 80% to 90% of India’s patents, of which 90% of the patented products were not manufactured in the Indian territory. Foreign companies could block the production of their patented drugs in India, causing the stagnation of the Indian domestic pharmaceutical industry. Thus, the Commission believed that the patent system had been used by multinational corporations to monopolize the market, especially in the food, pharmaceutical, and chemical industries. Market monopolies also led to high product prices. Therefore, the Commission recommended that only methods or processes in the abovementioned fields be patentable, as opposed to the Indian Patents and Designs Act of 1911, which granted patent to both product and process inventions in the pharmaceutical sector. This suggestion was adopted by the Patents Act of 1970, which has laid the foundation for the boom in India’s generic drug industry. According to the Patents Act of 1970, no patent shall be granted in respect of claims for substances intended for use or capable of being used as medicine or drug or relating to substances prepared or produced by chemical processes. The reason that the Patents Act of 1970 only grants method patents in the fields of pharmaceuticals and chemicals is because product patents have an inhibitory effect on other related research, as they can prevent others from obtaining the same products through different methods. Once product patents are granted to drugs, patentees can control the production of patented drugs and thereby unreasonably raise the prices of essential medicines.[35](https://link.springer.com/chapter/10.1007/978-981-13-8102-7_11#Fn35) Thus, the rejection of the drug product patents guaranteed that India’s generic companies could produce drugs with the same or similar composition through reverse engineering and avoid being accused of infringement. India denied product patents in the pharmaceutical sector until the expiration of the transition period of the TRIPS Agreement on January 1, 2005. The rejection of product patents in the pharmaceutical sector for more than 30 years has created an opportunity for the development of the generic drug industry in India. After comparing drug prices among India, the United Kingdom, Malaysia, and Nigeria, before and after the Indian Patents Act of 1970, R.B. Saxena, consultant at the Indian Council for Research on International Economic Relations, found[36](https://link.springer.com/chapter/10.1007/978-981-13-8102-7_11#Fn36) that the prices of pharmaceutical products in India were highest before the enactment of the Patents Act of 1970 and that in 1987 the prices in India for commonly used drugs, such as analgin tablets, doxycycline capsules, diazepam tablets, and metronidazole tablets, were low compared to those of other countries. The research also found that some of the important new drugs could be introduced into India with a time lag ranging between only 4 and 6 years. Thus, Saxena pointed out that the changes relating to process patenting incorporated in the Indian Patents Act of 1970 had benefited Indian consumers in terms of prices paid for drugs and medicines and, meanwhile, it also became possible to produce many new pharmaceutical products in India much faster than what could have been otherwise.

#### Fiat is good and there’s no distinction between pre and post. A] Sustains the concept of agency through influencing others, B] Motivates action which creates change, and C] Generates literature that we can discuss the harms about. The neg may not read meta-theory – I only have time to check abuse 1 time but you can do it in the NC and 2N, up-layering my attempt means we never get to the best norm. This means reject any reason why an aff spike is bad since they claim aff theory is unfair.

Shove and Walker 07 [Elizabeth Shove, prof of Sociology at Lancaster, and Gordon Walker, prof of Geography at Lancaster. 2007. “CAUTION! Transitions ahead: politics, practice, and sustainable transition management.”] //Nato

For academic readers, our commentary argues for loosening the intellectual grip of ‘innovation studies’, for backing off from the nested, hierarchical multi-level model as the only model in town, and for exploring other social scientific, but also systemic theories of change. The more we think about the politics and practicalities of reflexive transition management, the more complex the process appears: for a policy audience, our words of caution could be read as an invitation to abandon the whole endeavour. If agency, predictability and legitimacy are as limited as we’ve suggested, this might be the only sensible conclusion. However, we are with Rip (2006) in recognizing the value, productivity and everyday necessity of an ‘illusion of agency’, and of the working expectation that a difference can be made even in the face of so much evidence to the contrary. The outcomes of actions are unknowable, the system unsteerable and the effects of deliberate intervention inherently unpredictable and, ironically, it is this that sustains concepts of agency and management. As Rip argues ‘illusions are productive because they motivate action and repair work, and thus something (whatever) is achieved’ (Rip 2006: 94). Situated inside the systems they seek to influence, governance actors – and actors of other kinds as well - are part of the dynamics of change: even if they cannot steer from the outside they are necessary to processes within. This is, of course, also true of academic life. Here we are, busy critiquing and analysing transition management in the expectation that somebody somewhere is listening and maybe even taking notice. If we removed that illusion would we bother writing anything at all? Maybe we need such fictions to keep us going, and maybe – fiction or no - somewhere along the line something really does happen, but not in ways that we can anticipate or know.

**1] Aff gets 1AR theory and RVIs – otherwise the neg can be infinitely abusive and there’s no way to check against this –1AR theory is drop the debater, competing interps, and the highest layer of the round – the 1ARs too short to be able to rectify abuse and adequately cover substance – you must be punished.**

**3] Reject theory on spikes since it would be a contradiction since they indict each other but prefer mine since they are lexically prior. This means all contradiction flow aff since I spoke first which makes any contradictions their fault.**

**4] Evaluate the theory debate after the 1AR since a) the 6 min 2n can dump on theory making the 3 min 2AR impossible b) we both get 1 speech on theory.**

#### 5] no 2n responses – reciprocity – I can’t make new 2AR responses because there’s no 3N, so you shouldn’t be able to pin the aff to defense.

#### 6] Presumption and permissibility flow aff. 1] Theoretically- 13-7 rebuttal time skew and neg reactivity means a) if we’re tied, I’ve done the better debating and b) It’s fairer to give the aff the advantage of being able to win by eliminating all offense than the neg. 2] Textuality- To affirm is defined by Dictionary.com[[2]](#footnote-2) as

#### “to express agreement with or commitment to uphold; support” **meaning that we affirm if there is no negative offense because it can still be upheld. 3] Probability, 2 warrants: a)** We default to actions being right. To do otherwise would make actions that have no moral bearing such as breathing morally wrong, b) We intuitively assume statements to be true rather than false – if I told you my name you’d assume that statement true unless there was some counter evidence to prove otherwise.

#### 7] Evaluate the debate after the 1AC a) speeches are stressful and I care about your health so you should not respond to it b) Disregard the 1NC – since I’ve proven the resolution already, any evidence they bring up is just lying – analytics against this are self serving because the debate has already been evaluated after the ac

Sorensen 06 Sorensen, Roy, 6-21-2006, "Epistemic Paradoxes (Stanford Encyclopedia of Philosophy)," No Publication, <https://plato.stanford.edu/entries/epistemic-paradoxes/>.

Saul Kripke’s ruminations on the surprise test paradox led him to a paradox about dogmatism. He lectured on both paradoxes at Cambridge University to the Moral Sciences Club in 1972. (A descendent of this lecture now appears as Kripke 2011). Gilbert Harman transmitted Kripke’s new paradox as follows: If I know that h is true, I know that any evidence against h is evidence against something that is true; I know that such evidence is misleading. But I should disregard evidence that I know is misleading. So, once I know that h is true, I am in a position to disregard any future evidence that seems to tell against h. (1973, 148)

#### 8] There are infinite worlds, the aff is logical in one which is sufficient.

**Vaidman 2** Vaidman, Lev, 3-24-2002, "Many-Worlds Interpretation of Quantum Mechanics (Stanford Encyclopedia of Philosophy)," No Publication, <https://plato.stanford.edu/entries/qm-manyworlds/>

-MWI: Multiple Worlds Interpretation

**The reason for adopting the MWI is that it avoids the collapse of the quantum wave.** (Other non-collapse theories are not better than MWI for various reasons, e.g., nonlocality of Bohmian mechanics; and the disadvantage of all of them is that they have some additional structure.) **The collapse postulate is a physical law that differs from all known physics in two aspects: it is genuinely random and it involves some kind of action at a distance**. According to the collapse postulate the outcome of a **quantum experiment is not determined by the initial conditions** of the Universe prior to the experiment: **only the probabilities are governed by the initial state**. Moreover, Bell 1964 has shown that there cannot be a compatible local-variables theory that will make deterministic predictions**. There is no experimental evidence in favor of collapse and against the MWI.**

#### 9] Vote aff because it’s simple – evaluating responses to this is complicated so don’t. No neg analytics – 7-4-6 time skew means aff can never respond.

Baker 04’ [Baker, Alan, 10-29-2004, "Simplicity (Stanford Encyclopedia of Philosophy)," <https://plato.stanford.edu/entries/simplicity/>]

With respect to question (ii), there is an important distinction to be made between two sorts of simplicity principle. Occam's Razor may be formulated as an epistemic principle: if theory T is simpler than theory T\*, then it is rational (other things being equal) to believe T rather than T\*. Or it may be formulated as a methodological principle: if T is simpler than T\* then it is rational to adopt T as one's working theory for scientific purposes. These two conceptions of Occam's Razor require different sorts of justification in answer to question (iii). In analyzing simplicity, it can be difficult to keep its two facets—elegance and parsimony—apart. Principles such as Occam's Razor are frequently stated in a way which is ambiguous between the two notions, for example, “Don't multiply postulations beyond necessity.” Here it is unclear whether ‘postulation’ refers to the entities being postulated, or the hypotheses which are doing the postulating, or both. The first reading corresponds to parsimony, the second to elegance. Examples of both sorts of simplicity principle can be found in the quotations given earlier in this section.

#### 10] The rules of logic claim that the only time a statement is invalid is if the antecedent is true, but the consequent is false.

SEP [Stanford Encyclopedia of Philosophy.] “An Introduction to Philosophy.” Stanford University. <https://web.stanford.edu/~bobonich/dictionary/dictionary.html> TG Massa

Conditional statement: an “if p, then q” compound statement (ex. If I throw this ball into the air, it will come down); p is called the antecedent, and q is the consequent. A conditional asserts that if its antecedent is true, its consequent is also true; any conditional with a true antecedent and a false consequent must be false.  For any other combination of true and false antecedents and consequents, the conditional statement is true.

#### If the aff is winning, they get the ballot is a tacit ballot conditional which means denying the premise proves the conclusion that I should get the ballot.

#### 11] Affirm because either the neg is true meaning its bad for us to clash w/ it because it turns us into Fake News people OR it’s not meaning it’s a lie that you can’t vote on for ethics. No neg arguments -

#### 12] Overthinking paradox- the 1NC is a form of unnecessary overthinking that prevents decisions to be made so don’t evaluate it

**Wikipedia** [Brackets Original. “Analysis Paralysis”. Wikipedia. No Date. <https://en.wikipedia.org/wiki/Bonini%27s_paradox>]

Analysis paralysis (or paralysis by analysis) describes an individual or group process when overanalyzing or overthinking a situation can cause forward motion or decision-making to become [frozen] "paralyzed", meaning that no solution or course of action is decided upon. A situation may be deemed too complicated and a decision is never made, due to the fear that a potentially larger problem may arise. A person may desire a perfect solution, but may fear making a decision that could result in error, while on the way to a better solution. Equally, a person may hold that a superior solution is a short step away, and stall in its endless pursuit, with no concept of diminishing returns. On the opposite end of the time spectrum is the phrase extinct by instinct, which is making a fatal decision based on hasty judgment or a gut reaction.

#### 13] Bonini’s Paradox – expanding debate’s parameters to the 1NC and onward makes the round irresolvable due to a lack of understanding so just vote aff. Negating affirms because it assumes that the 1ac is a statement that is worthy of contestation which means are arguments are legitimate.

**Wikipedia** [Brackets Original. “Bonini's paradox”. Wikipedia. No Date. <https://en.wikipedia.org/wiki/Bonini%27s_paradox> ]

In modern discourse, the paradox was articulated by John M. Dutton and William H. Starbuck[2] "As a model of a complex system becomes more complete, it becomes less understandable. Alternatively, as a model grows more realistic, it also becomes just as difficult to understand as the real-world processes it represents".[3] This paradox may be used by researchers to explain why complete models of the human brain and thinking processes have not been created and will undoubtedly remain difficult for years to come. This same paradox was observed earlier from a quote by philosopher-poet Paul Valéry, "Ce qui est simple est toujours faux. Ce qui ne l’est pas est inutilisable".[4] ("A simple statement is bound to be untrue. One that is not simple cannot be utilized."[5]) Also, the same topic has been discussed by Richard Levins in his classic essay "The Strategy of Model Building in Population Biology", in stating that complex models have 'too many parameters to measure, leading to analytically insoluble equations that would exceed the capacity of our computers, but the results would have no meaning for us even if they could be solved.[6] (See Orzack and Sober, 1993; Odenbaugh, 2006)

1. http://www.dictionary.com/browse/resolved [↑](#footnote-ref-1)
2. http://dictionary.reference.com/browse/affirm?s=t [↑](#footnote-ref-2)