

the preamble be agreed to, the motion to reconsider be laid upon the table with no intervening action or debate, and any statements be printed in the RECORD.

The PRESIDING OFFICER. Without objection, it is so ordered.

The resolution (S. Res. 181) was agreed to.

The preamble was agreed to.

The resolution, with its preamble, reads as follows:

#### S. RES. 181

Whereas there are more than 2,000,000 miles of gas and hazardous liquid pipelines in the United States that are operated by more than 3,000 companies;

Whereas gas and hazardous liquid pipelines play a vital role in the lives of people in the United States by delivering the energy needed to heat homes, drive cars, cook food and operate businesses;

Whereas, during the last decade, significant new pipelines have been built to help move North American sources of oil and gas to refineries and markets;

Whereas, on June 10, 1999, a hazardous liquid pipeline ruptured and exploded in a park in Bellingham, Washington, killing 2 10-year-old boys and a young man, destroying a salmon stream, and causing hundreds of millions of dollars in damage and economic disruption;

Whereas, in response to the pipeline tragedy on June 10, 1999, Congress enacted significant new pipeline safety regulations, including in the Pipeline Safety Improvement Act of 2002 (Public Law 107-355; 116 Stat. 2985) and the Pipeline Inspection, Protection, Enforcement, and Safety Act of 2006 (Public Law 109-468; 120 Stat. 3486);

Whereas, during the last decade, the Pipelines and Hazardous Materials Safety Administration of the Department of Transportation, with support from a diverse group of stakeholders, has instituted a variety of important new rules and pipeline safety initiatives, such as the Common Ground Alliance, pipeline emergency training with the National Association of State Fire Marshals, and the Pipelines and Informed Planning Alliance;

Whereas, even with pipeline safety improvements, in 2008 there were 274 significant pipeline incidents that caused more than \$395,000,000 of damage to property and disrupted the economy;

Whereas, even though pipelines are the safest method to transport huge quantities of fuel, pipeline incidents are still occurring, including the pipeline explosion in Edison, New Jersey, in 1994 that left 100 people homeless, the butane pipeline explosion in Texas in 1996 that left 2 teenagers dead, the pipeline explosion near Carlsbad, New Mexico, in 2000 that killed 12 people in an extended family, the pipeline explosion in Walnut Creek, California, in 2004 that killed 5 workers, and the propane pipeline explosion in Mississippi in 2007 that killed a teenager and her grandmother;

Whereas the millions of miles of pipelines are still "out of sight", and therefore "out of mind" for the majority of people, local governments, and businesses in the United States, a situation that can lead to pipeline damage and a general lack of oversight of pipelines;

Whereas greater awareness of pipelines and pipeline safety can improve public safety;

Whereas a "National Pipeline Safety Day" can provide a focal point for creating greater pipeline safety awareness; and

Whereas June 10, 2009, is the 10th anniversary of the Bellingham, Washington, pipeline tragedy that was the impetus for many of

the safety improvements described in this resolution and is an appropriate day to designate as "National Pipeline Safety Day": Now, therefore, be it

*Resolved*, That the Senate—

(1) designates June 10, 2009, as "National Pipeline Safety Day";

(2) encourages State and local governments to observe the day with appropriate activities that promote pipeline safety;

(3) encourages all pipeline safety stakeholders to use the day to create greater public awareness of all the advancements that can lead to greater pipeline safety; and

(4) encourages individuals throughout the United States to become more aware of the pipelines that run through communities in the United States and to encourage safe practices and damage prevention relating to gas and hazardous liquid pipelines.

Mrs. MURRAY. I thank my Senate colleagues.

I remind all of us as Americans that we have to be vigilant about what is around us, and when we are, we can make a difference in the lives of many people. The tragedy that occurred in Bellingham, WA, 10 years ago today will remain with me always and with the families of Bellingham and everyone else. But if we do our work and we remain vigilant and we fund the Office of Pipeline Safety and we insist on strong protections, we can protect families in the future. That is what is important about today.

I yield the floor, and I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mrs. MURRAY. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

#### HEALTH CARE

Mrs. MURRAY. Earlier this morning and, in fact, for the past several days, I have been interested to hear the comments from several of our Republican counterparts on the issue of health care. They are talking about Canada. Now, that is interesting. I appreciate that. Coming from a State close to Canada, we are very interested in what Canada does. But the discussion about what Canada does with its health care system has no bearing on what we are trying to do here in the Senate and Congress to reform the American health care system.

I guess, and I am only guessing, they want to talk about Canada because they do not want to talk about their real priority. Their real priority in coming out and inflating a discussion that should not even exist because it is not what we are talking about is simply because they want to protect the status quo. They want to protect the status quo in our health care system today. So they are out here talking about Canada. Well, that is not an option.

Let me tell you what we are doing because this is a very important dis-

cussion and a very important piece of legislation we are beginning our work on in the Senate. The status quo is not acceptable. This is an extraordinary moment of opportunity for real reform in health care. We here in the Senate are working very hard to come up with legislation that will reduce the cost for our families, for our businesses, and for our government.

Like all of my colleagues, I go home every weekend and I hear from individual families and people, from community leaders and businesses that the status quo is not acceptable. They will not tolerate a debate here in the Senate that goes for the status quo.

We here in the Senate are working on legislation that will protect people's choice of doctors, will protect their choice of hospitals, will protect their choice of insurance plan. If you like what you have today, that will be what you have when this legislation is passed. And that is very important. We are also working as a goal to assure that affordable, high-quality health care is available for every American. That is not the case today. Our work really builds on the existing employer-based system we have. We strengthen it. Again, if you like what you have, you will be able to keep it. Let me say this again: If you like what you have, when our legislation is passed and signed by the President, you will be able to keep it. But if you do not like what you have today in terms of your health care or if you do not have any health care insurance at all, we are going to provide new options for you so you have better health care.

Health care reform is not a luxury, it is an imperative today. Our health care system puts far too many Americans into crisis, and reforming it is an urgent necessity that demands our immediate attention. If we are going to restore the economy and secure our Nation's fiscal future, now is the time to make health care more affordable for American families and business and government at every level. Doing nothing is not an option.

As we move forward on this debate, I remind all of us, do not be distracted by superfluous arguments that do not apply to the bills we are discussing.

The bill on which we are going to move forward in the Senate makes sure that if you like what you have today, you are going to be able to keep it. But as you and I both know, Mr. President, too many people cannot afford their health care today or they are unable to get health insurance because their insurance company says: You have too many problems, we are not going to insure you, or they do not have insurance at all. We want to make sure health care is available to every American.

I am very proud of the effort that is going on as we speak. The health care committee is meeting today with our Republican colleagues to walk through our ideas we have now been putting together and get their input and ask for their options. We hope to work with

them side by side, and we are giving them every opportunity to do so, because health care has to work for all Americans.

So despite the rhetoric we heard on the floor this morning about Canada, which I love—Canada is a great country—that is not what we are doing here. We are moving forward on health care reform that is drastically needed. The status quo is not an option. Doing nothing is not an option. Stopping us from moving forward is not an option. This is an issue we are having the courage to take up and move forward on because America needs us to do that.

I yield the floor, and I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant bill clerk proceeded to call the roll.

Mr. DURBIN. I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER (Mr. BEGICH). Without objection, it is so ordered.

Mr. DURBIN. I ask unanimous consent to speak as in morning business.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. DURBIN. Mr. President, we are considering a bill that would allow the Food and Drug Administration to regulate one of the most deadly substances for sale in America, tobacco, a substance responsible for 400,000 deaths, more than HIV/AIDs, for example, each year, more deaths than illegal drug use, alcohol use, motor vehicle accidents, suicides and murders combined, a substance responsible for \$100 billion in health care costs every single year. I am glad we have finally reached this point. I hope we can pass this bill with a strong bipartisan vote. This moment has been coming for 20 years. There are Senators who deserve credit for where we are today in coming to this moment in history, none more than Senator TED KENNEDY. Senator KENNEDY has been our leader on this issue. Unfortunately, his personal health struggle prevents him from joining us regularly, and he may not be here for the vote today, but we wouldn't have reached this point without him. His dogged determination to reduce the number of tobacco-related deaths and illnesses in America has brought us to this moment in history. We will be voting with him in mind, as we should.

I thank Senator CHRIS DODD, who once again has stepped in, in an extraordinary way, as he did with credit card reform, passing a bill that had been decades in the making. Senator DODD, at the last moment, has been called in by Senator KENNEDY and has done a spectacular job to move this bill forward. I am hoping we can pass it and get it enacted into law. It will save lives. But we can't blame tobacco for all the faults in our health care system. There are many parts that need to be addressed.

The United States spends about 17 percent of its GDP, gross domestic

product, on health care. This amounts to \$7,400 per person on health care each year. We spend more than twice as much as any other country on Earth when it comes to health care. As of 2006, health spending in the United States was 90 percent higher than any other industrialized country. Health insurance premium increases consistently outpace inflation and the growth in family earnings. About 30 percent of America's poor people spend more than 10 percent of their income on health care. Since the beginning of this decade, health insurance premiums have gone up by 78 percent. Everybody knows this. No matter who one works for—private business, public entity—we know the cost of health insurance keeps skyrocketing. Wages have only gone up 15 percent in that period. People and families cannot keep up. Overall, 46 million Americans have lost their insurance. Many lose their insurance for periods during the course of a year because of changing jobs and losing jobs.

With the amount of money our country dedicates to health, the facts don't line up. Yesterday my colleague from Arizona, the Senate Republican whip, JON KYL, spoke about the problems with our health care system. I am glad he agreed there are problems to address. I need to clarify at least my view as to some of the things he said. Democrats in Congress are committed to working with President Obama to ensure that Americans can keep the health care they have, if that is their choice. Yesterday, Senator KYL said:

If you are an employee of a small business, for example, when your insurance contract runs out—and those contracts are usually 1 year or 2 years—the bottom line is, even though you may like it, at the end of the next year, when the contract runs out, you don't get to keep it.

That is not accurate. I have to say Senator KYL is saying something that doesn't reflect the position of the President, nor any Democrat I know in Congress. We believe—and we stand by this—if you like your current health insurance plan, you will be able to keep it, plain and simple, straightforward.

Senator KYL alluded to specific frustrations felt by small business owners across the country. Believe me, I understand that issue better than some. I have been working with Senator BLANCHE LINCOLN of Arkansas, Senator SNOWE of Maine, and Senator KLOBUCHAR of Minnesota to come up with a plan so small business owners will be able to afford health insurance. I am happy to say that, at least at this moment, there is an indication the Finance Committee is considering our bill as part of their overall work product. As important as keeping your health plan, if you like it, if you are a small business owner, you find health premiums have increased 200 percent because you had one sick employee or one sick baby born to a family of one of your employees, we want to make sure you are no longer subject to the unfair

practice of raising premiums for that situation. In today's system, at the end of the contract, small businesses are at the mercy of insurance companies that are in it for profit.

Earlier this week, I talked about a small businessman in Springfield, my hometown, who, in a span of just a few years, has seen his insurance premiums increase by 500 percent, though he has never turned in a claim. He has been forced to change his health care plan repeatedly. Because he is a small business owner, he has no bargaining power. What we are trying to do is ensure Americans are protected from this kind of price increase and that promised services are there when they need them.

My colleagues on the other side of the aisle continue to raise tactics of fear and concern to steer us away from the real issues at hand. Yesterday the Senator from Arizona talked about "a new regime of regulation for the insurance companies." He expressed concern that Democrats in Congress are trying to control what health insurance companies are doing. If the Senator is talking about trying to take under control some of the practices of health insurance companies today, I would say it is long overdue. People know what happens when their health insurance premiums go up dramatically, even though they haven't turned in a claim. Folks know when health insurance companies say they are going to exclude preexisting conditions and your health insurance policy is virtually worthless because the problems you face in life can't then be covered. Folks know what it is to call that health insurance company and bargain or argue with some clerk over coverage. Changing those things, if that is what regulation is all about, is long overdue. It is time that customers, consumers, families, and businesses had a fighting chance when it came to health insurance companies.

We will hear plenty of speeches in the Congress in opposition to health care reform from a lot of people who are speaking for the health insurance companies. Why don't they come up and say it. If they want to come to the floor and say: We like the current system; we don't believe it needs to be changed; we don't believe there is a crisis facing us in terms of cost; we believe that health insurance companies are doing a great job and shouldn't have to change their ways, let that be their position. But it is a position that is indefensible with the vast majority of the American people. They understand we should be focusing on the best interests of patients and families, not the best interests of health insurance companies, nor the best interest of the Federal Government.

The bottom line is, we have to come up with health care reform which starts to reduce the cost of health care, making it more affordable, preserving quality, creating incentives for good health care outcomes, and focusing on

the family and the patient, not on the government agency.

I am encouraged my colleague from Arizona raised the issue of insurance contracts, given his concern with small businesses and access to health care. I think he would want attention paid to what insurance companies are doing to these small businesses. Earlier this year, the GAO released a report showing how little competition there is and what a tough time small businesses have to find health insurance. The medium market share of the largest carrier of the small group market was about 47 percent, ranging from 21 percent in Arizona to about 96 percent in Alabama. This leaves American small businesses with few choices. We want to change that. Those who come to the floor of the Senate defending the health insurance companies and saying they want no change in the health care system have to defend the indefensible. How do they explain what small businesses and families are facing now when they are trying to find affordable, quality health insurance?

If my colleague from Arizona wants to help small businesses, let him join us in the bipartisan bill Senators LINCOLN, SNOWE, KLOBUCHAR, and I are offering, the SHOP Act. By doing so, he will be working with us in committees to make a positive change.

I also wish to clarify one thing. Time and again, Senator MCCONNELL, on the Republican side, and Senator KYL have come to argue against government health care. They talk about it in the most general terms. What they are actually arguing against is a public option. What we hope to see come from all this debate about health care reform is lots of opportunities for America's families and businesses to shop for health insurance from private insurance companies but to have, in some circumstances, the option of a government-run plan they can choose, if they wish—voluntary choice. Of all the criticism heard on the floor about government health insurance, I have yet to hear Senator MCCONNELL or Senator KYL criticize Medicare. Why? Because 40 million Americans count on it. They know that were it not for Medicare, they couldn't afford health insurance. People live a whole lifetime without health insurance protection. Finally, when they hit age 65, they have Medicare, and they thank the Lord for that day.

Medicare does a great job. Medicare is a proven success. For over 40 years, Medicare has provided quality care to America's seniors and disabled, and we have seen the longevity, the life expectancy of seniors increase every year and their independence increase because they don't end up with a mountain of health debt to pass on to their children or have to exhaust their savings. If the Senator from Kentucky and the Senator from Arizona want to come to the floor and argue against Medicare, I welcome the debate. I wish to be here when they say that govern-

ment health insurance program has failed us. It has not. It has worked. To create a public option for those across the country as part of health care reform is long overdue. We need to build on and improve Medicare, and we can do that.

We also have to make sure our health care system is based on science and the best outcomes, that we encourage preventive care, that we see those elements in our society where people can do things to make their own health care better.

Time and again you will hear the Republicans come to the floor as if they are part of the Travel Channel. They do not want to talk about America and the problems we face. They want to talk about England, New Zealand, Australia, Canada. They do not want to talk about the United States of America.

Well, it is time for them to come home and recognize that we can improve our health care system, letting Americans keep the health insurance they have if they want to keep it, making sure we start to bring costs down, making quality health insurance available, giving families the peace of mind that the cost of health insurance is not going to go through the roof and beyond their means. That is part of this debate.

Democrats are working to ensure Americans have real choice when it comes to their health care.

My colleague from the other side of the aisle referred to the public option as government-run insurance. He believes that the insurance industry is already regulated enough and that a public option is unnecessary.

I can tell the Senator that when I am receiving hundreds of letters and phone calls from constituents who cannot afford health insurance and who are seeing their premiums increase at alarming rates then I know our current health care insurance industry is not working for everybody.

In fact, according to a survey by the Kaiser Family Foundation, two-thirds of Americans support a public health insurance option similar to Medicare to compete with private health insurance plans.

Republicans want to preserve a broken system—one with escalating costs and no guarantee that policies won't be cancelled.

Rather than help insurance companies, Democrats want to put American families first and help those struggling with high health care costs.

A public option for health insurance offers the American people the security that the government is looking out for their best interests—just like Medicare does for our seniors.

My colleague is correct in that the Medicare Program needs some changes. I hope he will be supportive of the changes we will include in the health reform package.

Yes, we need to streamline the Medicare Program, restructure the delivery

of care, and emphasize quality. We will do it and save costs. But we should build on what works, and despite what my colleague says, Medicare works.

According to a study by the Commonwealth Fund, 61 percent of elderly Medicare beneficiaries said they had received excellent or very good care, compared to only half of those with employer-sponsored healthcare.

This health care debate is Congress's opportunity to improve what we have and cut costs for the future.

Comparative effectiveness research will help us do just that. Senator KYL claims that the government may misuse comparative effectiveness research as a tool to ration or deny health care. His use of the word "rationing" is only a veiled attempt to defend the status quo no matter how ineffective.

Comparative effectiveness is a tool to expand Americans' access to high-quality health care, not restrict it. When we know which treatments are more effective than other treatments, people will want the best and avoid what is ineffective. But we need this research in order to distinguish the best from the not so good.

Our health care system rations care today based on ability to pay. If we reform our health system and identify which treatments are most effective, we can reduce that hidden rationing by making health care more affordable for everyone.

We need to learn what works and empower providers and patients to use that information. That is rationing—is a sensible component of the effort to build a high-quality, value-based, results-oriented health system.

We have serious problems in our health care system. This is America, and America needs a uniquely American solution to our Nation's health care problems. This is what Senate Democrats are committed to enacting.

Mr. KYL told some tragic stories of individuals in Canada and Britain whose experience with their country's health care system was not what we would define as quality health care.

I am sure we would like to think my colleagues on the other side of the aisle are sincerely concerned with the quality of health care around the globe, but I am more inclined to believe that this is their scare tactics trying to cloud the important issues once again.

In fact, Mr. KYL is following the specific instructions of Republican political consultant Frank Luntz.

Here it is, on page 2, talking point No. 5 from a memo given to my Republican colleagues to guide their way of framing the health care debate:

(5) The healthcare denial horror stories from Canada & Co. do resonate, but you have to humanize them. You'll notice we recommend the phrase "government takeover" rather than "government run" or "government controlled." It's because too many politicians say "we don't want a government run healthcare system like Canada or Great Britain" without explaining those consequences. There is a better approach. "In countries with government run healthcare,

politicians make your healthcare decisions. They decide if you'll get the procedure you need, or if you are disqualified because the treatment is too expensive or because you are too old. We can't have that in America."

This debate is not about talking points or messaging or even other countries. Countries such as Canada and Britain have government-run healthcare and each has their unique set of good and bad aspects to the system. But, what we need to focus on is the people in our country. In our system today, insurance companies make the decisions and decide for people if they can get the procedure they need, or if they are disqualified because the treatment is too expensive. We can do better than that in America.

Patients and their doctors make the best decisions for a patient's health and wellbeing.

Every Senator in this Chamber can agree: Our health care reform efforts should be patient-centered.

I hope my colleagues on the other side of the aisle will work with Democrats to ensure a strong health care package for the American people.

Mr. President, I see two of my colleagues are on the floor. I yield the floor.

The PRESIDING OFFICER. The Senator from New York.

Mr. SCHUMER. First, Mr. President, I wish to thank my colleague and friend from Illinois for his outstanding words once again on health care, and on the fact that we need some kind of check on the insurance companies. Our colleagues offer none. They just point to Canada and England, as he mentioned, which is a totally different system than we are focusing on.

Second, I wish to thank my colleague from Oregon, who is doing a great job in his first year in the Senate, for his generosity so I could speak for a brief moment and share with my colleagues some words about an act of bravery that occurred in my State yesterday.

#### TRIBUTE TO KEN MITCHELL

Mr. SCHUMER. Mr. President, as the Senate right now debates some of the biggest national issues of our time, it is important to sometimes take a step back and look to some of the great acts that are happening every day in our towns, cities, and States. So I wish to call attention to an act of personal heroism—and that is the appropriate word; this man is a true hero—that took place in my home State of New York.

Yesterday morning, at the South Orangetown Middle School in Blauvelt, NY—a town in Rockland County about 45 minutes from New York City—a disgruntled man with a gun stormed into the office of the school superintendent. He grabbed the superintendent, Ken Mitchell, by the necktie and started threatening him and making demands. At least three gunshots were fired.

This is the kind of situation that would have scared most everyone. But,

as we have learned now, Ken Mitchell is no ordinary person.

With his safety and the safety of his students on the line, he showed remarkable courage and wrestled the gunman down to the ground. He was able to grab the gun, kick it out of the way, and get the gunman pinned on the ground.

Usually when a SWAT team arrives at the scene of a crime, they are the ones to do the serious crime fighting. But this time, by the time they got there, they walked in on the school superintendent, who had already disarmed and pinned to the ground the dangerous criminal. To top it all off, Superintendent Mitchell even recognized one of the SWAT team members he had once coached as a kid on the local hockey team.

According to people on the scene, Mr. Mitchell was ready to get back to his office. As his brother-in-law said: "his tie wasn't even messed up"—just another day on the job for another great New Yorker.

It should be no secret to anyone that this incident could very quickly have turned into something unspeakable. While the headlines today are ones of praise, they could have easily been ones of grief. And praise God they were not.

But as one of New York's Senators, I want to rise publicly and congratulate Ken Mitchell for his act of bravery and heroism. As a parent myself, I know what it is like to send kids off to school in the morning and hope and pray they will come back home safely.

It is people such as Ken Mitchell who make it easy for parents to know their kids are in good hands when they wave goodbye on the schoolbus and send Johnny or Jill off to school.

Ken Mitchell is a reminder that every minute of every day Americans are engaging in personal, quiet acts of heroism and bravery about which we should all be grateful. I am proud he is from my State. And I am proud that, if even for one moment, I can give him some of the recognition he deserves.

I am sure Superintendent Mitchell is back at work right now as if nothing happened. However, Superintendent Ken Mitchell, on behalf of all New Yorkers, all Americans, and parents everywhere, we say thank you. It is Americans like you that make us proud.

Mr. President, I yield the floor and once again thank my colleague from Oregon for yielding.

The PRESIDING OFFICER. The Senator from Oregon.

#### HEALTH CARE REFORM

Mr. MERKLEY. Mr. President, in the coming weeks we are going to be taking up what is probably one of the most vexing policy challenges of the last 50 years: how to reform our health care system and provide affordable, accessible health care to every single American. The goal could not be more

straightforward: to guarantee access for every American—and the stakes could not be higher.

Our small businesses are collapsing under the weight of health insurance premiums. Last month, Oregon's largest insurer announced that the small business premium was going up 14.7 percent. That is on top of a 26-percent increase the previous year.

Large employers have the challenge as well. In a global economy, our broken health care system is a major competitive disadvantage. A greater share of the price of each car in the United States goes to health care than goes to steel. Mr. President, \$1,500 of the cost of a car goes to health care, while across the border in Canada that price is zero. If we are going to compete in the world, we need a competitive, cost-effective health care system.

Of course, the biggest impact of our expensive, ineffective health care is most acutely felt around the kitchen table by our working families. With unemployment skyrocketing, virtually every family is reminded of how tenuous its connection is to health care—just one pink slip away from losing health care for their family.

Even those with insurance find health costs out of reach. Nearly half of the personal bankruptcies are by folks who have health insurance but who still could not manage all the health care costs because of when they became ill.

So this is what it boils down to: Working families in America, if they have health care, are concerned about the copays, they are concerned about being underinsured, and they are concerned about losing their insurance with the loss of a job. Those working families without health care are worried about getting sick and how they are going to get well if they are already sick.

This does not have to be the case. Health care is already devouring a large portion of our economy—18 percent of our gross domestic product—driving long-term Federal deficits and crowding out important State investments in education, in infrastructure, in social services, and pretty much everything else, and it is only projected to get worse as our population ages and health care inflation runs rampant year after year.

Put simply, if we do not reform our health care system, our economy will not thrive. That is a stark choice. Our economy and health care are tied together.

I know none of this is news to the Presiding Officer or to any Members of this esteemed Chamber. In fact, since President Truman, 60 years ago, called for health care for every working American as a national priority, we have been struggling to achieve that goal, and we have not yet gotten there. We have been periodically trying to fix up a fragmented, expensive, unfair system. But the fear of change has always overtaken the sense of possibility.