Addiction is defined as a chronic relapsing brain disease that is characterized by compulsive drug seeking and use, despite harmful consequences. It is considered a brain disease because drugs change the brain—they change its structure and how it works. (makes sense)

The science of addiction has been a debate for years. After reading the NIH article by Dr. Nora D. Volkow it is spelled out very clear. Whether you believe it or not it is totally up to the person reading it. It always amazes me how we believe certain sciences but when it comes to addiction we would rather blame the addict. In the 1930’s when studies about addiction started, people thought addicts were morally flawed and lacking will power. They treated it as a morally flawed issue instead of a health problem or crisis. So most of society puts the emphasis on punishment rather than prevention and treatment. As a result of scientific research we know that addiction is a disease that affects both the brain and the behavior. The bottom line is, people today do not understand why people become addicted to drugs or how drugs change the brain. When you take a minute to think about it, people use drugs to change their brain. Why else would they use it? Most or should I say all people who use drugs don’t intend to get addicted, but they do. I was asked by a parent the other day “If you had a crystal ball what do you think or wish could happen with addiction.” I thought for a second and came up with a few things. Of course my biggest is education. If people were more educated about the disease concept, maybe many would understand it is not the fault of the addict. Another is the insurance companies understanding that treating addiction now, the correct way, will save them money in the long run. Understanding it is a brain disease is a hard thing to swallow for sure. But we believe science for everything else why can’t we believe that. There is no single factor that determines whether a person will become addicted to drugs.

How do drugs work in the brain? Drugs are chemicals that affect the brain by tapping into its communication system and interfering with the way neurons normally send, receive, and process information. Some drugs, such as marijuana and heroin, can activate neurons because their chemical structure mimics that of a natural neurotransmitter. This similarity in structure “fools” receptors and allows the drugs to attach onto and activate the neurons. Although these drugs mimic the brain’s own chemicals, they don’t activate neurons in the same way as a natural neurotransmitter, and they lead to abnormal messages being transmitted through the network. Other drugs, such as amphetamine or cocaine, can cause the neurons to release abnormally large amounts of natural neurotransmitters or prevent the normal recycling of these brain chemicals. This disruption produces a greatly amplified message, ultimately disrupting communication channels. How do drugs work in the brain to produce pleasure? Most drugs of abuse directly or indirectly target the brain’s reward system by flooding the circuit with dopamine. Dopamine is a neurotransmitter present in regions of the brain that regulate movement, emotion, motivation, and feelings of pleasure. When activated at normal levels, this system rewards our natural behaviors. Over-stimulating the system with drugs, however, produces euphoric effects, which strongly reinforce the behavior of drug use—teaching the user to repeat it.

This subject has been debatable for years and will continue for years to come. So whether you believe it is a brain disease or not, does it really matter? Who do we blame? The addict, the parents, the brain, the friends, the environment, who gives a damn? What we need are solutions; what we need are more beds; what we need is the understanding of insurance companies that ADDICT LIVES MATTER.
EMPLOYEE SPOTLIGHT
DONNA NELSON LAWLESS

It has been 1 year and 5 months since Donna went on medical leave. She has been fighting a battle with cancer and she has won. We have missed her and the company has missed her more. Donna was a student over 8 years ago, sat in the front row and was always smiling. She asked to volunteer with us, which she did, and I told her if I could, I will hire her. We did hire Donna several weeks later and it was the best thing we ever did. Between her laughing saying “God bless you all” her dancing and always being excited for our students she made everyone’s day bright. She had a bell and would ring it when anyone got a job. Under Donna, that rang bell a lot. She marketed our programs, she did graduations, and not to mention, she constantly worked to build up self esteem for all. Well, she is coming back June 1, 2016 for 3 days a week and we couldn’t be happier. Donna welcome back! NYC students get ready for the time of your life. (Donna, her daughter Melba, and Me)

HELPING MYSELF TO HELP OTHERS
STUDENT SPOTLIGHT-MOSES MCBRIDE

My name is Moses McBride and my first encounter with The Resource Training Center was during a “societal interruption” as instructor Annette so eloquently describes the experience of incarceration.

A friend of mine was excited about a free distant learning addictions counseling course called DYSO administered by The Resource Training Center. At the time, there was a limited amount of openings for enrollment and my friend felt it was his duty to pass this precious information on to a select few who would really benefit from and appreciate the training. When he first introduced me to the course, I thought it wasn’t accredited by a licensed state agency and so I had delayed my enrollment. That delay would cost me because the distant learning course had gotten suspended just as I began my initial 6 sessions.

Fortunately, I had another friend who became very close with Ms. Dona Pagan, and who in turn encouraged me to sign up again. After the laborious process of getting the funding from Acess-VR, I was able to start the process. I was living in Newburgh, New York and had applied to the Beacon/Fishkill location. Ironically, Ms. Pagan had been willing to give me a scholarship if I had lived in the city of New York. Turns out New York City was in my future, as was my eventual meeting of Dona Pagan herself.

Training in the Manhattan school was not stressful, most of the time it was extremely fun. Working in the field with special populations made the training more useful because I would take information learned the night before and introduce it in my class and witness its effectiveness. So, my learning had an immediate impact on me and the population I serve.
WHAT’S NEW AT TRTC/TRCC

The construction is over and our school has moved to the store front of the building. It is bigger brighter and is just incredible. The staff loves it and the students as well. The entire space is open and warm.

The Detox is still waiting for a permit to start building, it has been an endless battle between us and the Department of Buildings. Hopefully we are still looking at opening in September 2016.

OASAS and the Governors office came to TRCC to film part of a documentary about recovery that will be coming out in October 2016. They interviewed staff as well as clients. It is an interesting positive concept. Mostly it is about being in recovery and how positive life can be.

We are on our 5th donation from Jack Threads for clothes, shoes, jackets and bags. All the clothes are new and are given to the clients and students. Thanks Alex for being so generous.

We picked up our van from Assemblymen Felix Ortiz. Felix wanted it in Larry’s memory. Thanks Felix you have always been such a great supporter of ours.

HEROIN IS EVERYONE’S PROBLEM

STATEN ISLAND, N.Y. -- Nine people have died of a drug-related overdose on Staten Island in the month since the district attorney's office announced a plan to closely investigate suspected overdose deaths, said a spokesman for the D.A.’s office. There have been 10 reported overdoses on Staten Island since February 22, 2016. Last month, District Attorney Michael E. McMahon unveiled the Overdose Response Initiative, a law enforcement program designed to attack the drug plight at its source — identifying the dealers and suppliers who sell heroin, cocaine and pills around the borough and putting them behind bars.
WHEN IS A PARENT HELD RESPONSIBLE?

This question probably has been asked one thousand times by various people. When is a parent held responsible for their child’s behavior? A friend of mine’s son came home drunk at age 14. He was drinking at a friend’s house with the mom upstairs while the kids were outside in the garage. The mother of the young man drinking wanted to call the mother who allowed such behavior. Is that mother responsible? Well this writer says 100 percent responsible. I don’t know about you but, if I have kids at my house I will notice if they are drinking unless of course, I was drinking myself. You have to be really dumb not to notice a 14 year old is drunk. I can tell when a 40 year old is drunk. So what are the laws? What are the responsibilities of that parent? What are our responsibilities of the other parents? How effective are these laws, which can impose fines or jail time for parents? Some parents believe it is better to have teenagers party at home so that adults can monitor the event and take the car keys rather than have kids drinking elsewhere unsupervised. Is this a bad idea? Is there an alternative to social host laws? I guess if you asked 20 different parents you will get 20 different answers. So what I decided was to ask. We will number the responses for you:

1. What I don’t know won’t hurt me
2. Yes I would rather have them home drinking so I could watch them
3. It is only alcohol
4. I would kill my kid and then call the other mother
5. Hey weren’t you young once
6. At least it is not drugs

So ask yourselves how you would answer. Let’s change the scenario. Your kid goes out and sleeps at a friend’s house. There is drinking and he has too much to drink, goes to bed, and chokes to death on his vomit. Oh, now you got it. One decision can change all of our lives in a second. How many parents have said “not my kid?” Every 19 minutes a person dies of an overdose. Whether it is pills, heroin, cocaine or alcohol it still kills. Here is a concept. Don’t let the child sleep over anyone’s house without checking in and before they go to bed. If it doesn’t feel right take a ride over there. Sounds easy doesn’t it? But it is not. I would rather have my kid mad at me for spying on them than not mad at me because they are dead.

Teen Usage of Alcohol

- More than half of American youths ages 12-20 have tried alcohol.
- Underage drinking is risky and dangerous because it can lead to car accidents, alcohol poisoning, and other health problems.
- Drug use can have a lot of negative consequences including an increase of risk of serious drug use, poor judgment, poor school work, violence, brain damage, memory loss, problems at home, loss of friends, suicide, and unplanned and unsafe sex which may indicate to teen pregnancy or sexually transmitted disease.
- Car crashes are the leading cause of death for teens and about one third of these are alcohol related.
- If you drink at a young age you increase the risk of developing alcohol problems later in life.
We certainly are seeing how the need for Substance Abuse counselors continues to grow with the opiate epidemic. Here in Erie County since January we have been averaging 10 overdose deaths a week, lengthy waiting lists for appropriate treatment, and a shortage of qualified individuals to work in the field. The CASAC class need increased as employers require this credential and have been supporting those enrolled through tuition coverage and adjusted work schedules. We have a passionate group that will be graduating at the end of November.

The Impaired Driver Program stays consistent with 2-3 days a week. With the use of the feedback sheets the motorists report being satisfied with our professional level of customer service often resulting in referrals of friends/family.

We have a small but excellent group of people working here Joshua Kellick, Donna Lepore, (I have so many Donna’s in my life), Marie Chapman, and Laura Zubricky so I feel blessed.

THE STRUGGLE

Hello, I would like to introduce myself. My name is Emilio Quiles . . . It was once said before that "struggle comes before success in life and in the dictionary." In life you will go through many obstacles that may seem impossible. Many things will try to bring you down. It is up to you to let these situations make you or break you. Here is how I can relate to this. My addiction started at the age of 15 with marijuana and alcohol. I didn't have a care in the world at the time. I just wanted to do whatever I wanted whenever I wanted, until it got much worse. One day I found myself no longer wanting it but had a need for it, a need to sleep, eat, and feel good, or so I thought. There were times I attempted to stop smoking but used drinking as a substitute which got me nowhere. I was lost in a world where I was fighting my own demons everyday. Then . . . there it happened at the age of 29, I found myself in prison. Being away from everything that I loved made me think a lot. This is when I really put my foot down on what I wanted for myself. I immediately embraced the substance abuse treatment I received while incarcerated. As my release drew near I met Michelle Gonzalez at Queensboro Correctional Facility. Upon my release, Michelle and her team at The Resource Counseling Center located in Brooklyn, gradually helped me get to where I am today, which I'm so thankful for. I guess the reason why I'm telling you my story is because I AM YOU . . . It's okay to be afraid to change and become someone different, trust me I was on the same boat. What I did was, put my best foot forward and trusted the people that happily changed me to a better person. Knowing what I know
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Our Clinics

• Individual Counseling

• Group Counseling

• Adolescent Track (12-14 years old)

• Teen Track (15-17 years old)

• Ambulatory Detox

• LGBTQ Track

• Criminal Justice Track

• Recovery Coaches & Recovery Living Room

• Vocational Counseling

• Family Counseling

• DWI Assessments

• Relapse Prevention