

[News](#)



Fr. Ed Reading on a day off at his house on the Jersey Shore in July (Camillo Barone)



by Camillo Barone

[View Author Profile](#)

[**Join the Conversation**](#)

Send your thoughts to *Letters to the Editor*. [Learn more](#)

Toms River, N.J. — August 15, 2024

[Share on Facebook](#)[Share on Twitter](#)[Email to a friend](#)[Print](#)

It was the fall of 1971 when Fr. Ed Reading, just ordained a transitional deacon at the age of 25 in the Diocese of Paterson in New Jersey, decided to spend his diaconate year serving in a recovery center for those with drug and alcohol addictions — the Mount Carmel Guild Social Service Center, today called [Straight & Narrow](#). In his seminary years before the diaconate, Reading, now 78, had done internships at the recovery center.

On the first night of his diaconate ministry placement, Reading received an urgent phone call from a local bishop who asked to be put in touch with the head of the center. But with Reading's arrival, the director had taken a vacation after years of running the center alone.

The bishop told Reading that as soon as possible he needed to send him a monsignor — a priest of high rank in the diocese — who had long been trapped inside a severe drinking addiction, which had recently taken a dangerous turn for the diocese, the lay community and himself.

Reading, who up to that point during his internships had only worked with lay patients, said he could not believe what he was hearing, but admitted the priest and began a path of recovery with him.

From that day forward, Reading continued to receive phone calls from bishops asking for help for their priests with alcohol and drug addictions.

Beginning in 1984, Reading specialized as a counselor in the treatment of physicians with alcohol or drug addictions, taking on the role (for the first time held by a priest and a nonphysician) for more than 20 years as assistant director at the Impaired Physicians' Program, today known as the Physicians' Health Program of the Medical Society of New Jersey.



Fr. Ed Reading in his studio in July holds icons of St. Maximilian Kolbe and Venerable Matt Talbot, protectors of recovering addicts. (Camillo Barone)

Over the last five decades, his experience in combating addiction has led Reading to become an esteemed national authority on the subject. In addition to five professional awards and 10 university professorships in New Jersey colleges, Reading serves as president of the International Coalition of Addiction Studies Educators (INCASE), a professional association of college and university faculty who teach addiction studies, and as commissioner to the National Addiction Studies Accreditation Commission. He also sits on the board of directors of Catholic Charities in the Paterson Diocese.

Although incardinated as a priest in the Paterson Diocese, Reading has never been a pastor at any parish, and has always carried out his priestly ministry as a counselor specializing in addiction recovery for physicians and priests, a ministry that he defines as "healing the healers."

After more than 50 years working in the field, Reading told NCR that he is finally ready to retire, albeit slowly.

Reading described his high school and seminary experience as "an outlier from the norm." Born and raised in a family that was not actively Catholic, Reading was the only seminarian in his class who came from a public high school, where his teachers set up Latin classes exclusively for him when he told them he wanted to become a priest. Those Latin classes, however, were not enough for Reading to feel comfortable and prepared in seminary among the other aspiring priests who came from Jesuit prep schools.

"I kind of barely made it. I did get my bachelor's degree in classical languages, which was Latin, Greek and Hebrew, but it's embarrassing — I can't even translate my diploma," Reading said.

He added that during those years his studies were also complicated by discovering he had dyslexia. Still, these challenges did not deter him from his goals.



Fr. Ed Reading looks at the view from the balcony of his home on the Jersey Shore in July. (Camillo Barone)

Reading was also the only one of the seminarians who asked his spiritual directors that he not do his yearlong diaconate internship at a parish in the diocese, but at the diocesan center specializing in addiction recovery.

"I found myself getting addicted to recovery. I got addicted to treating addicts," Reading told NCR.

Although at that time the professional positions of therapist and counselor had not yet been created, he spent his free time at the treatment center learning from the experts working in the field. Against seminary rules, for more than two years Reading spent his nights in an apartment at the treatment center, returning to the seminary each day for the 6 a.m. prayer, which led his superiors to believe he had been sleeping there every night.

Reading said it is likely that his passion for addiction recovery is intrinsically written into the story of his life and family. He shared how a routine dinner with his sister back in the 1970s at their favorite Italian restaurant in town turned into a profound revelation about their family's dynamics. Reading had just returned from a conference on children of alcoholics, and that night he gave his sister a one-page summary he had written at the end of the workshop, telling her it might come in handy in her work as a young teacher.

After reviewing it, his sister was visibly distraught. She told him in that summary on children of alcoholics she had glimpsed all the behavioral traits that she, Reading and their two other siblings had adopted in their childhood and adolescence.

'My parents were untreated children of alcoholics. I became an untreated child of children of alcoholics. So that's where my connection was coming with the addicts at the center.'

[Tweet this](#)

That episode prompted Reading to do a lengthy search of his family tree and discover that his grandfather had been an alcoholic, and that his father inherited

that addiction in his adult life as a workaholic.

"That's when I realized that I was much more connected to alcoholism in the family system than we ever knew. It took some time to bring that up with my family and get my family to understand that. My parents were untreated children of alcoholics. I became an untreated child of children of alcoholics. So that's where my connection was coming with the addicts at the center."

According to Reading, the vocation to the priesthood and the vocation to be a physician are similar, as are the personality structures of those drawn to those vocations, which is why he never found it unusual to be specialized in addiction recovery for these two specific categories.

"Physicians only want to go to the best doctor they know, and, unfortunately, because of their narcissism, the best doctor they know is themselves. Doctors are taught they're not supposed to treat themselves, but they do it anyway," he said.

He added, "Much of the same way that priests should have a spiritual director, but they only want to go to the best spiritual director they know, and most priests think that they are the best spiritual director they know. Most priests that develop a mental health or addiction problem, in my experience, do not have a spiritual director. One of the questions I ask them is, 'Who is your spiritual director?' And they basically say they have none."

Advertisement

Observing his patients extensively and conducting dozens of studies on their experiences, Reading was one of the early forerunners of the theory that addictions are primarily genetic brain diseases, while the so-called "behavior problem" is only secondary.

To fall into an addiction to alcohol or drugs, besides genetic predisposition, there generally needs to be a "reason to use the drug," he said. According to Reading, for both priests and doctors, the reasons are usually stress over the high moral responsibilities in people's lives, the "contractualization" of their missions, loneliness and disenchantment with what they do.

"Especially the older physicians, they went into medicine as a vocation. Medicine was not their job, but an expression of who they are. Now, the bureaucracy of the health care system has changed it to being a job," he said. "They find themselves no longer fulfilled in the same way that they used to be fulfilled. The doctor-patient relationship is a contract relationship. It is no longer an interpersonal relationship. As early as they can retire, they get out."

Similarly, the pressures of modern life and the challenge of finding meaning in their ministry are significant contributors to addiction among priests.

With the current shortage of priests, many find themselves overwhelmed by responsibilities typically outside their spiritual calling. Instead of focusing on their primary role as spiritual leaders, priests are often burdened with administrative tasks, such as managing parish finances, overseeing maintenance and addressing operational concerns. These duties, for which they are not trained, add considerable stress and detract from their ministerial work.

'I have to help convince priests that it is a normal human experience to become an addict, that that's humanity. That's part of the Incarnation.'

[Tweet this](#)

What Reading has found is most difficult for a priest to accept, however, is that God himself can be present in his life even if he has fallen into an addiction.

"I have to help convince priests that it is a normal human experience to become an addict, that that's humanity. That's part of the Incarnation," Reading said.

"Since they're hiding it from other people, as well as from themselves, they're not accepting the Incarnation, which means that they're separating themselves from the presence of God. I used to tell them, 'If you don't accept your human condition, then you're playing God. You're creating yourself as a deity that is separate from the human condition.' "

In the case of Catholic priests, managing celibacy and sexuality can play a decisive role in the fall into addiction, said Reading. To fully understand the human condition, one must also understand their sexual identity, he said.

Reading highlighted how important the teaching of the distinction between "active sexuality" and "celibate sexuality" is, acknowledging that seminary training has historically failed to adequately address this complexity. In his experience, young seminarians are often told to "sublimate" their sexual desires without any practical guidance, which he says is unrealistic and unhelpful.

"The tradition of the church has been that a priest should take his sexuality, put it in a box, put it in his back pocket, and believe it doesn't exist," he said. "That's wrong."

Part of the problem is that much of the discourse on sexuality is dictated by older men who may not fully grasp the nuances of sexual development, said Reading. He argues that a proper understanding of sexuality, beginning early in human development, is crucial for those called to celibacy.



Fr. Ed Reading in his studio in Toms River, New Jersey, in July (Camillo Barone)

However, he believes that celibacy should be a genuine calling rather than an imposed requirement, as the latter creates inner conflict for individuals trying to reconcile their human condition with their spiritual commitments. Failing to abide by these commitments, he said, could lead genetically predisposed priests to fall into alcohol and drug addictions.

And Reading has other concerns regarding the new generation of priests, the vast majority of whom, he said, seem to want to join the clergy in order to take refuge in an abstract and ancient institution that privileges liturgical rituals over people.

Talking to his patients, he said, he could see how a new communication gap between younger and older priests has been emerging. He noted that younger conservative priests often view older priests, particularly those associated with the reforms of the Second Vatican Council, as the ones who "screwed up" the church and they are determined to correct these perceived mistakes.

For this reason, one of the main pieces of advice Reading gives his priest patients is to be as open and transparent as they can with their parishioners about their own status as recovering or recovered from addiction. He said priests who share their journeys with their communities have a higher recovery rate and often enjoy a newfound sense of purpose and happiness in their ministries.

"I used to have as a patient an alcoholic pastor who had in the basement of his own parish Alcoholic Anonymous meetings every week, but he didn't want anybody in the parish to know about his addiction, so he used to drive two counties away to go to another AA meeting. One day, he called me up, and said that because of a snowstorm he didn't know how to attend his AA meeting," Reading said.

"I told him it was time for him to go to his own parish's AA meeting," said Reading. "As soon as he walked in, the whole AA group started clapping. They already knew, even before he told them. The parish loved him more, because he accepted his brokenness and his healing."