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**New Zealand counsellors talk about ritual abuse:**  
**A discourse analysis**

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## Abstract

Research indicates that in the last five decades, claims of Satanic ritual abuse (RA), and the numbers of clients receiving counselling for RA, have increased in all Western countries. This has resulted in an increased corpus of related literature overseas, which includes studies in which facticity as well as aetiology, symptomology and treatment are debated. This present study focuses on a New Zealand context, and examines the talk of New Zealand counsellors in relation to their views regarding RA and the counselling of RA clients.

Social constructionist and positivist epistemologies were evaluated in terms of their suitability for this research, and the discourse analytic method developed by Potter and Wetherell (1987) chosen as the means by which participants' talk might be analysed in such a way as to allow the inclusion of multiple constructions and the emergence of the many discourses and conflicting ideas which occur in overseas literature. A broad selection of the literature was first critically analysed to give an understanding of the topic.

Nine counsellors gave interviews, eight women and one man, all Pakeha, six of whom were ACC-registered (Accident Compensation Commission, 2009). The participants constructed RA as a physical reality, which was justified by the use of the *credible client* discourse. A traditional linguistic repertoire furnished a discourse of *government backing*, which was employed to warrant voice. A moral stake in counselling, named *concern for the client*, was shown to be present in all arguments. The participants constructed three truths relative to context: a *legal truth*, the *counsellor's truth*, and the *client's truth*. Recovered memories were given a dual construction which legitimised correct and incorrect recall. DSM-IV (American Psychiatric Association, 2000) *labelling* was debated in a discourse of *ambivalence*. Finally in a discourse of *preparedness*, the participants constructed the therapeutic skills needed to treat RA clients. The thesis concludes by highlighting the participants' comments regarding the need for openness and awareness, and specialised literature and training for counsellors treating RA clients.

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