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**Why the genetic brain disease model of schizophrenia is scientifically incorrect**

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**Learning Goal:**

Participants will be able to describe how the genetic brain disease model creates a gap between a person with a diagnosis of schizophrenia and everyone else, and explain why research on the genetics of schizophrenia proves that schizophrenia is not a "genetic brain disease."

**Abstract Text:**

The genetic brain disease model of schizophrenia dominates psychiatry today. However, the data in the literature on the genetics of schizophrenia prove conclusively that: schizophrenia is at most only a little bit genetic; there is no specific genetic profile for schizophrenia; hundreds of genes contribute to the genetic risk for schizophrenia, but each gene by itself contributes only 1%-2% of the risk; altogether these genes contribute only a small amount to the overall causes of schizophrenia; and most of the causes of schizophrenia come from the environment. The presenter will review twin studies, adoption studies, heritability estimates, high expressed emotion studies, genome-wide association studies and polygenic risk scores to prove that schizophrenia is not very genetic. He will also explain how statistics are used by researchers to make schizophrenia seem more genetic than it actually is. The genetic brain disease model is not completely wrong - genes do contribute a little bit - but the effects of the model are a diversion of research funds away from trauma and environmental causes and treatments. Also, the genetic disease model puts people with schizophrenia in a different category from "normal" people, defines them as defective and abnormal to the core, and thereby creates a gap between patients and everyone else. It contributes to alienation, isolation and hopelessness. How else would someone feel, after being told that they are genetically abnormal? So-called genetic counseling for schizophrenia needs to include much more emphasis on trauma and the environment. Treatment needs to involve less emphasis on medications and more emphasis on psychotherapy and social interventions.

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