A Summary of the
Flaws in Genetic Behavioral Research
Faye Snyder, PsyD

How do they determine genes instruct behavior? The same techniques are used again and again. There is nothing new under the sun. For actual cites, see my book, The Search for the Unholy Grail (to be released).

1. They infer genetics from pathology amongst relatives, when there is abundant research demonstrating that behaviors are learned and imprinted. In answer to these critiques, they develop adoption studies and twin studies to prove environment isn’t a factor. Then, when the findings don’t support their hypotheses (always), they manipulate the information and the statistics.

2. Or, they infer genetics from chemical imbalance, assuming that the only thing which can create a chemical imbalance is genes, while major research is available to demonstrate that environment changes chemistry.

3. They assume that if a medication works that it means there was a shortage. (So, if aspirin works, we could infer there was a shortage or aspirin.)

4. They take DNA samples, identify a gene, hold a press conference, and then, when the study cannot be replicated, the public remembers it anyway.

ALL IN THE FAMILY

5. They claim that when pathology runs in the family, it demonstrates genetics. They don’t consider that clusters in the family result from parenting. They don’t rule out environment. They don’t even collect information on parenting, attachment and trauma history.

6. When scientists speak of schizophrenics in the family, they actually have re-defined who is schizophrenic, so they can increase their statistics into the realm of meaningful. They now have broadened definitions and invented the “schizophrenic spectrum of disorders,” people who are not schizophrenic, to include categories of which clinicians have never heard: “borderline state, inadequate personality, uncertain schizophrenia, and uncertain borderline state.” Even though schizophrenia is supposed to be a different gene from bi-polar, they often include bi-polar too in order to boost the statistics.

7. Contrary to implied results, most schizophrenia studies have few, one or no actual schizophrenics in their purportedly meaningful results. Rarely does a real schizophrenic subject come from schizophrenic birth parents.

8. When they document pathology in the grown child reared by adoptive parents, scientists fail to acknowledge that the grown children who were most symptomatic were also the ones adopted later, including the few actually raised by real schizophrenic parents and relinquished or removed from the home.

9. Scientists have been known in major studies to switch first degree relatives with second degree relatives to achieve results. This, of course, destroys the validity of the genetic research, but it pumps up the statistics.
STATISTICAL PROBLEMS

10. Scientists do not achieve statistics anywhere close to the Mendel model.
11. The research actually proves that schizophrenia is not genetic.
12. So, they bolster their statistics by “age correcting,” meaning anyone who is expected to become schizophrenic before the age of 45 gets counted as half schizophrenic.
13. “Age correcting” studies are not blind. If they age corrected for all twins whose sibling became symptomatic, then the results would dramatically shoot over 100%, invalidating the statistics. So, scientists have to limit the amount of age-correcting they do, so that the results don’t invite scrutiny.
14. Two major researchers were exposed for having greatly fabricated/padded their statistics, and all the other research employ the same errors.
15. Yet, however bogus or flawed, the results of older studies are still often averaged into more stringent and modern studies in order to increase the statistics.
16. Researchers have no problem misleading the public. When their studies are found to be flawed or not replicable, their retractions go unheralded, and the scientists actually write, speak and continue as if the studies were sound.
17. Genetic researchers, as a rule, do not take meaningful family histories. They don’t review parenting styles, child abuse, abandonment issues, neglect, substances, age of adoption, reasons for adoptions, etc.

ADOPTION STUDIES

18. Adoptions are often represented to have taken place at birth, when they take place anywhere between birth and four years old or in some cases up to 10 or even up to 15 years old.
19. Children placed at an older age are averaged in with newborns so that the average age of the index groups, often of about 4-6 months at adoption or placement, matches closely to the average age of the control group, which has no older children.

IDENTICAL TWINS SEPARATED AT BIRTH

20. This is a myth. There have only been about ten known pair of identical twins adopted out, both of whom turned out to be schizophrenic. In all known cases they were adopted out after infancy, usually around three to four years of age, in each case, after the core damage had been done and they were old enough to share and suffer abandonment trauma.
21. Further, these twins were also adopted into similar circumstances, such as separate orphanages or by grown siblings of the mother, if not her own mother. Thus, many of these twins have cause to see each other again, sometimes extensively.
22. The average age in one study for separation was 10, the youngest age 5, and the oldest 15. These were called Separated Twin Studies. The twins were considered separated after five years of separation, even if they were separated at 15 and evaluated at 20. Yet, studies were written, so the reader could assume they were separated at birth.
DNA

23. Or, scientists study large families, and if they find a gene in common for another family trait, say visibly larger upper bodies, the same gene is theorized to be the cause of the family psychopathology as well, even when the gene appears to be for some physical condition. Later the correlation cannot be replicated elsewhere. However, the family members who are symptomatic can be shown to have a gene in common.

24. Officials, editors, journals, APA Presidents, and scientists hold press conferences and announce that the gene has been located.

25. Behavioral scientists have turned the scientific rule inside out which says that a discovery is only valid when it can be replicated. The new procedure is that when the study can’t be replicated, they declare (that the lack of ability to replicate as) evidence that there is more than one gene. The number of genes which create schizophrenia is growing, and it is not clear whether they supposedly combine or trade off, since there are no consistent results in this regard.

26. No gene has been isolated and then replicated to account for any mental illness.

INTERPRETATION OF THE DATA

27. Mendel’s model of genetics is nowhere to be found. This is explained as incomplete penetrance. Incomplete penetrance is a hypothesis which is not proven. It is a circular argument used to explain research failures to achieve significance. It implies that scientists failed to completely penetrate the genetic code, which presumably existed, but was simply not completely penetrated. By its use, it is assumed as valid. Even biogeneticists say this concept is over-used. It’s an explanation, or rather rationalization, which has no proof.

28. If parents, the pharmaceutical industry, the American Medical Association, the American Psychiatric Association, and genetic researchers didn't have so much invested in psychopathology being a medical problem, then their research techniques and “results” would be either deemed clearly bogus, fraudulent, or comical.

29. More and more markers are “identified” to cause schizophrenia. The pattern seems to be when each discovery cannot be replicated, new discoveries are said to have been made which, again cannot be replicated, and then newer discoveries cannot be replicated, but show that there are more and more elements to the genetic cause of schizophrenia. Each discovery warrants a press conference. Each failure to replicate is re-framed as another great discovery into the complexity of schizophrenia.

30. The more causes it takes to produce a phenomenon, the rarer it will be. For example, if I have to inherit five different markers on my genes in order to become schizophrenic, I am far more unlikely inherit all these predispositions than to inherit either a dominant or a recessive gene. It is becoming implausible.

31. Yet it is claimed that different combinations of markers may produce the same or similar results, since schizophrenia takes so many shapes. Even though it was once said that bi-polar disorder is caused by an entirely different gene than schizophrenia, bi-polar disorder is now being counted in research as one of the valid outcomes proving schizophrenia can be inherited genetically.

32. The more biologists have difficulty isolating the gene, the more they modify their tune like a shell game. They introduce new concepts like the diathesis model. This model has no evidence behind it other than it is an explanation for failure to achieve evidence of genetic causation while scientists continue to prove evidence of environmental causes. So, the diathesis model proposes that some people have
stronger genetic constitutions and others have weaker constitutions. Thus, some are more susceptible to injury than others. This allegedly humanitarian model fails to consider parenting and trauma and rather explains pathology in terms of genetic weakness. Most people appear to believe it is actual science.

33. Another new theory is the epigenetic model, in which it is proposed that genes may be modified by the environment. Epigenes modify the genetic expression. However, there are no epigenes, per se. Once you wade through the double talk, you find out that whatever the genes, the environment is the determinant. Nevertheless, the geneticists try to interpret the data to mean that if genes are not the determinants, then at least the epigenes are, only they are called epigenetic factors. Epigenetic factors are not part of our makeup. They are introduced from the outside into the organism. Even mother love has been said to be epigenetic. Epigenetic factors are environment.

34. While there are mounds of evidence which have been replicated ad nauseum, for environmental causes of behavior, there have been no such evidence for genetic causes.

CHEMICAL IMBALANCE AND BRAIN ABNORMALITIES

35. Even though trauma has repeatedly been demonstrated to cause a chemical “imbalance,” such as surges of cortisol or adrenalin, and other chemical reactions to stress, loss, or trauma, these physiological changes are reported by biogeneticists to be evidence of genetic inheritance.

36. Because a drug works to correct these “imbalances” or to change the mood, actually, it is surmised that the original problem was created by genes.

37. Many times subjects are reported to have chemical imbalances or show up as having brain abnormalities in brain scans, MRI’s, and other such tests, but other researcher have demonstrated that these abnormalities result from neglect, trauma or previous medications taken extensively, influential factors not previously ruled out. What is proven to be a result is said to be a cause.

POLITICS

38. It is a known practice for many scientists to be under contract with pharmaceutical research grants, which require pro-genetic outcomes, and if they do not get that outcome, they do not get paid, or get their significant bonus, and they are required to keep the results secret.

39. Scientists and publicists are paid to write scientific reports acclaiming previous research studies to repair their reputation.

40. One researchers’ study explored whether people are more likely to seek treatment (with pharmaceuticals) if they believe their mental illness is genetic. The results were “positive.”
References


Brazelton, T. B. (1986, October). A speech to parents at the Auraria Higher Education Center, Denver, CO.


Perry, Bruce (1997). Early Childhood Development and Victims’ Rights [Video]. Presentation to the National Governor’s Association (February 4). C-SPAN.


Read, John; Perry, Bruce; Moskowitz, Andrew; and Connolly, Jan (Winter, 2001). The Contribution of Early Traumatic Events to Schizophrenia in Some Patients: A traumatagenic Neurodevelopmental Model.


Solomon, Marion. (March 8-9, 2003). *Treating the Effects of Attachment Trauma*. Excerpted for: New developments in attachment theory: Applications to Clinical Practice, UCLA.


Teicher, Martin (2002, March). *Scars That Won’t Heal: The Neurobiology of Child Abuse* Maltreatment at an early age can have enduring negative effects on a child’s brain development and function. *Scientific American*.


