Goals of Voice Therapy

- One of the most daunting obstacles is achieving an acceptable voice, particularly during the male to female transition
- For the MtF population, it has been demonstrated that voice alone has a negative impact upon a person’s perceived femininity, while physical appearance bestows a positive impact
- Therapy should focus upon a variety of speech, language, and pragmatic functioning as they relate to gender

Voice Characteristics

- Dividing line for male versus female voice perception is approximately 155-160 Hz
- Voices pitched higher than 160 Hz typically are perceived as female, and voices pitched less than 155 Hz usually are perceived as male


Support Site Mission Statements

http://www.youthpride.org

“YouthPride, a 501(c)3 non-profit organization, creates positive change in the lives of lesbian, gay, bisexual, transgender, and questioning youth through education, outreach, support services, community activities, and advocacy.”

www.thepointfoundation.org

“Point Foundation provides financial support, mentoring, leadership training and hope to meritorious students who are marginalized due to sexual orientation, gender identity or gender expression.”

www.glad.org

“Celebrating 30 years as New England’s leading legal rights organization dedicated to ending discrimination based on sexual orientation, HIV status and gender identity and expression.”

www.nctequality.org

“A guide to voice therapy for the transgender individual

Transgender Voice Therapy
### FtM
- Intake of testosterone during FtM hormone therapy increases the mass of the vocal folds, and thus, results in a lower pitched voice.
- The effects of testosterone on the voice may become apparent as soon as six to 12 weeks after the first injection, or as late as several months later.
- 14 out of 16 FtM transgender clients reported that they were satisfied with their vocal changes as a result of hormone therapy, while the other two participants did not report a change due to previously low-pitched and acceptable voices.

### MtF
- Intake of the female hormone estrogen does not produce any discernable effects upon the vocal folds.
- Many MtF transgender clients seek a combination of voice therapy and/or surgery.

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### Voice Therapy Options
- Acoustically, voice therapy can increase formant frequencies and pitch into the female range.
- SLP should ensure that the transgender client does not produce effortful speech and place a large amount of tension upon the larynx. This type of speech is characteristic of both adductor spasmodic dysphonia and vocal nodules, and has been observed to occur in MTF transgender clients.
- Transgender clients are generally satisfied with their voice following voice therapy, although while rating their voice on the Voice Handicap Index (VHI), a mild voice handicap remains.
- Gelfer (1999) designed a more rigid course of treatment for transgender voice clients focusing solely upon establishing an acceptable pitch level across all levels of speech.

### Surgical Options
- Surgery modulates automatic functions, such as sneezing, coughing, and throat-clearing.
- 3 goals
  - Increase tension
  - Alter consistency
  - Decrease the mass of the vocal folds.
- Types
  - Cricothyroid approximation, also known as type IV thyroplasty
  - Anterior commissure advancement
  - Scarification
  - Injection of triamcinolone into vocal folds
  - Endoscopic vocal fold shortening
    - Intended to both shorten the vocal folds and reduce their vibrating mass

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(King, Lindstedt, Jensen & Law, 1999; Kuiper, Asscheman & Gooren, 1992; Damsté, 1964, as cited by Van Borsel, De Cuypere, Rubens & Destaerke, 2000; Money & Walker, 1977 as cited by Brown, Perry, Cheesman & Pring, 2000)

(Gorham-Rowan & Morris, 2006; McNeil, Wilson, Clark & Deakin, 2008)