Letter to the Editor Carta ao Editor

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Voice re-assignment in trans people

A redesignação vocal em pessoas trans

Dear Professors

Roberta Gonçalves da Silva and Ana Luiza Navas,

The guidelines for initial comprehensive healthcare to people with transgender and nonbinary gender identities have been published in June of this year by the University of California - San Francisco. The purpose of the document is to train professionals to facilitate the access to health care of this population. Among the justifications that led to design the "Guidelines for the Primary and Gender-Affirming Care of Transgender and Gender Nonbinary People¹" cited by the authors is a survey carried out in California with more than 600 transgendered people who reported prior disrespect or discrimination on the part of professionals as the main barriers for seeking medical care and where 50% of respondents reported having to teach their providers about their own healthcare.

Each topic of the document was written by a group of invited expert clinicians, based on scientific publications on the subject and consultations with transgender people, and submitted to a peer review and modified consensus process. The chapter of interest to speech therapy is titled: *Transgender voice and communication - vocal health and considerations*, written by Sarah Schneider (University of California San Francisco, Department of Otolaryngology Head and Neck Surgery University of California San Francisco, Voice and Swallowing Center) and Mark Courey (University of California San Francisco, Voice and Swallowing Center).

This chapter addresses the concern of speech-language therapist professionals with the health of transgender people in the perspective of a healthy vocal production and an efficient global communication. The plurality of voice is introduced within a multidisciplinary approach, where multiple professionals can contribute to building a new vocal image for this population. Among the aspects worked in the communication of transgender people are: timbre, intonation, vocal intensity, fatigue, resonance, voice quality, articulation, speech rate, language and nonverbal communication.

The authors initially present vocal complaints that can not be related to sexual reassignment. These are divided into non-organic, organic, iatrogenic, or idiopathic in nature. Subsequently, authors bring forth the items related to voice reassignment that need to be worked. These are arranged in voice feminization for trans females and masculinization for trans males, namely: *pitch*, resonance, intonation, intensity, behavioral voice therapy, hormonal effects on voice therapy and surgical considerations. They also recommend that before starting any kind of vocal treatment, trans people must seek an evaluation from a ear/nose/throat (ENT) physician, which includes imaging examination through videolaryngoscopy using a strobe light source to assess the anatomy and physiology of the structures related to vocal production and evaluation with a speech-language therapist.

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It is noteworthy that, according to the guidelines, flow phonation and resonant voice therapy are two common voice therapy techniques that are commonly used with both trans women and trans men. However, vocal function exercises seem to have satisfactory results with the population of trans women. With regard to trans men, the demand for voice services is lower when compared to trans women, which is explained by the positive effect of the hormonal treatment on the voice of trans men. Endocrine and behavioral therapies are effective in 90% of trans men. Thus, vocal folds surgery is rarely indicated. As a guideline, developing studies on interventions in the voice of trans men is recommended. The chapter ends with 46 references of scientific papers on the topics transsexuality, voice and communication, all available in English.

Healthcare to this population in Brazil is not recent and their demand for speech therapy has progressively increased throughout the years. It is therefore important that speech-language therapists engage in the theme not only on the technical aspects, but from the perspective of depathologization of trans identities, a political trend and national and international social movement. Reading the guidelines will contribute to the global understanding of the health needs of transgender people, including the aspect of reception, making professionals to become familiar with the social context of these people and the comprehensive health care for their needs.

REFERENCES

 Deutsch M. Guidelines for the primary and gender-affirming care of transgender and gender nonbinary people. 2. ed. San Francisco: University of California; 2016.

Author contributions

RD is responsible for the original idea and the editorial was written by all authors.