# The perception of trans men about the relationship between voice and gender expression in their social interactions.

A percepção de homens trans sobre a relação entre voz e expressão de gênero em suas interações sociais.

La percepción de hombres trans sobre la relación entre voz y expresión de género en sus interacciones sociales.

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**ABSTRACT: Introduction:** Communication – verbal and non-verbal – is an important aspect of human behavior and expression of gender. Since voice is a significant factor in gender perception, non-conformity between these elements can generate feelings of inadequacy and a potential psychosocial impact even on voice and communication itself, in the gender expression of trans men. The objective of this study was to analyze the perception of trans men about gender expression and social interactions, influenced by voice and communication. Method: Qualitative research of theoretical-philosophical basis in dialectical hermeneutics, guided by the notion of gender performativity. Semi-structured interviews were conducted by a speech therapist, with seven trans men from different regions of Brazil, aged between 18 and 42 years. Results and Discussion: The analysis of the interviews allowed the emergence of analytical categories related to voice and communication in social interactions, involving voice professional support in collective health. The categories were interpreted in an integrated manner to the social and health context studied. Conclusion: Understanding the perspective of transgender men on voice and communication enables the development of culturally competent care approaches, without normative gender norms, with respect to individualities and the various ways of expressing gender, especially, for collective health, seeking equity and integrality in health, and offering subsidies so that the speech therapist

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can contribute to the self-esteem and health of trans men.

**Key words:** Transgender Persons, Transmasculine, Female-to-Male Transgender, FtM, Gender Identity, Voice, Voice Quality, Public Health, Speech Therapy.

**RESUMO:** Introdução: A comunicação – verbal e não verbal – é um aspecto importante do comportamento humano e da expressão de gênero. Sendo a voz um fator marcante na percepção de gênero, a não conformidade entre estes elementos pode gerar sentimentos de inadequação e um potencial impacto psicossocial mesmo sobre a voz e a própria comunicação, na expressão de gênero de homens trans. O objetivo do presente trabalho foi de analisar a percepção dos homens trans sobre expressão de gênero e interações sociais, influenciadas pela voz e pela comunicação. Método: Pesquisa qualitativa de base teórico-filosófica na hermenêutica dialética, orientada pela noção de performatividade de gênero. Foram realizadas entrevistas semiestruturadas por uma fonoaudióloga, com sete homens trans de várias regiões do Brasil, com idades entre 18 e 42 anos. Resultados e Discussão: A análise das entrevistas possibilitou o surgimento de categorias analíticas relacionadas à voz e à comunicação nas interações sociais, envolvendo o suporte de profissional da voz na saúde coletiva. As categorias foram interpretadas de maneira integrada ao contexto social e de saúde estudado. Conclusão: A compreensão da perspectiva dos homens trans sobre voz e comunicação possibilita o desenvolvimento de abordagens de cuidado culturalmente competentes, sem padrões normativos de gênero, com respeito às individualidades e às variadas maneiras de expressão de gênero, em especial, para a saúde coletiva, buscando equidade e integralidade em saúde, e oferecendo subsídios para que a fonoaudiologia possa contribuir para a autoestima e a saúde dos homens trans.

**Palavras-chave:** Pessoas Transgêneras, Homem Transexual, Homem Trans, Identidade de Gênero, Voz, Qualidade da Voz, Saúde Coletiva, Fonoaudiologia.

**RESUMEN:** Introducción: La comunicación, verbal y no verbal, como un aspecto importante del comportamiento humano y la expresión de género. Siendo la voz un factor marcante en la percepción de género, la no conformidad de la voz con la expresión del mismo, puede generar sentimientos de inadecuación, teniendo un potencial impacto psicosocial sobre voz y comunicación en la expresión de género de hombres trans. Con el objetivo de analizar la percepción de los hombres sobre la expresión de género e interacciones sociales, influenciadas por la voz y la comunicación. Método: Investigación cualitativa de base teórico filosófica en la hermenéutica dialéctica, orientada por la noción de performatividad de género. En la que se realizaron entrevistas semiestructuradas por una fonoaudióloga con siete hombres trans de varias regiones de Brasil con edades entre 18 y 42 años. Resultados y Discusión: El análisis de las entrevistas posibilitó el surgimiento de categorías analíticas relacionadas a la voz y comunicación en las interacciones sociales, involucrando las relaciones entre voz, salud e interacciones sociales y el soporte de profesional de la voz en la salud colectiva. Las categorías fueron interpretadas de manera integrada al contexto social y de salud estudiado. Conclusión: Comprender la perspectiva de los hombres sobre voz y comunicación,

posibilita el desarrollo de enfoques de cuidado culturalmente competentes, sin patrones normativos de género, con comprensión y respeto a las individualidades y variadas maneras de expresión de género. En especial para la salud colectiva buscando equidad e integralidad en salud, ofreciendo subsidios para que la fonoaudiología pueda contribuir a la autoestima y salud de los hombres trans. **Palabras clave:** Personas Transgénero, Hombres Transexuales, Identidad de Género, Voz, Calidad de la Voz, Entrenamiento de la Voz, Salud Pública, Fonoaudiología.

# INTRODUCTION

The National Lesbian, Gay, Bisexual, Transvestite and Transsexual Comprehensive Health Policy (PNSI-LGBT)), which aims to promote the integral health of such a group, seeking to eliminate discrimination and reduce inequalities in health care, considers discrimination by gender identity, prejudice and social stigma as social determinants of health<sup>1</sup>.

An important initiative regarding the health of the LGBT population corresponds to meeting the demands of transsexual people<sup>2</sup>, which, in this work, will be treated according to the following approach: "*The expression of gender characteristics, including identities, that are not stereotypically associated with sex attributed to birth, is a common culturally diverse human phenomenon, which should not be judged as inherently pathological or negative"*.

In this perspective, as an international reference for the integral health of transgender people, the *World Professional Association for Transgender Health* (WPATH) has been dedicated to the construction of standards of comprehensive care, among which it brings communication – verbal and nonverbal – as an important aspect human behavior and gender expression. Thus, transsexual people and with gender variability, who desire or feel such need, may develop vocal characteristics and non-verbal communication patterns that provide comfort to their gender identity. For this purpose, it is essential that professionals in the field understand the issues related to gender identity, such as the objectives regarding the expression of the gender role and the concerns presented by these people, respecting and being sensitive to individual preferences of communication<sup>3,4</sup>.

Since voice is a significant factor in gender perception, non-conformity between these elements can generate feelings of inadequacy, with a potential psychosocial impact<sup>5-8</sup>. As a result of this, transsexual people may experience various forms of anguish about how they feel about their gender, about how their gender is read socially, and other non-gender-specific psychosocial factors<sup>9</sup>.

Initially, the focus of voice-related changes was to raise their fundamental frequency in the case of transsexual women, and to lower their fundamental frequency, in the case of trans men. However, vocal tract resonance, breathing and speech intonation also contribute to the perception of gender, since these characteristics present differences between women and men<sup>10,11</sup>.

Reflection on the interaction between voice and gender can be linked to a very present issue in

the social life of some trans people, called "passability", which, among different senses, can refer to the fact that the person is read socially according to the gender with which he/she is identified, and is associated not only with social comfort and security, but also with the expression of gender. This compatibility with gender stereotypes in force socially is considered as fundamental for most trans people, since being socially passable can influence from the personal satisfaction of being recognized as they really are to situations such as their safety in relation to transphobic actions<sup>12</sup>.

In Brazil, there are few studies related to the transsexual population, specifically on trans men, and it is fundamental that they develop for the mapping, analysis and understanding of the integral health of trans people in the Country<sup>12</sup>. Even the international literature on vocal function, exclusively covering trans men, is still limited, both in number and in scientific quality<sup>13</sup>. This scarcity may be linked to the scientific belief that trans men would have no vocal problems or need for voice-related attention because hormone treatment with testosterone would lead to a satisfactory transformation of their vocal production structures and, consequently, their voice. Or it may occur because it is a heterogeneous group, whose members may not share the same body type, gender identity or desire for health approaches for gender transition<sup>9,13,14</sup>.

Despite the limitation of the literature, there is already evidence of vocal restrictions with which trans men live, but still very focused on anatomical and physiological aspects, such as hormonal treatment<sup>13,15</sup>. Thus, more research is needed on the different factors that affect the vocal situations of trans men, in addition to these aspects, which take into account the diversity of this population, their psychosocial situation and practices that may be associated with the adequacy of vocal function. And that can bring to light aspects related to what one has as communication barriers and to the elements that can be identified as facilitators, in the sense of factors or practices that expand or potentiate the vocal function of trans men, in order to overcome such obstacles<sup>15</sup>.

Considering the above, it is justified the search for understanding the influence of vocal situations in the health-disease-care process of the mentioned population, aiming at the reflection and the attempt of an effective practice in the promotion of the integral health of transsexual people.

# METHODOLOGY

This is a qualitative research, developed from the perspective of *Queer* Theory based on contributions of Judith Butler on gender performativity<sup>16</sup>. It was sought, in the method of dialectical hermeneutics<sup>17</sup>, the theoretical-philosophical bases for the development of the research, as well as the analysis, interpretation and comprehension of the speeches of the actors involved, in the qualified listening obtained through semi-structured interviews, carried out by a speech therapist.

In order to cover the regional and cultural diversity of the Country, the interviews took place in six cities, from five states in each of the brazilian regions. The composition of the group of participants of the study consisted of the snowball technique<sup>18</sup>, which uses reference chains, useful for studying certain groups that are difficult to access<sup>19</sup>. When viewed critically, this popular sampling method can generate a precious type of social knowledge – emerging, political, and

interactional knowledge<sup>18</sup>.

Through such methodology, the participants were indicated and invited by people who already knew the research or the researcher. After indicating the probable participants, by the key informants, the researcher made phone contact or through social media (*Facebook* and *WhatsApp*). In the first contact, they were given information about the researcher, the type of theoretical and professional approach, the objectives of the research and the format of the interview.

Inclusion criteria were: persons over 18 who identified themselves as transsexuals, either as trans men or with a male gender expression. There were no exclusion criteria.

In order to comprehend how the perception of trans men about their voice and communication in their social interactions takes place, semi-structured, recorded and later transcribed open interviews were conducted. In addition, a field diary was developed, including experiences and observations incorporated into the study discussions.

The present work is part of a Master's degree research in Collective Health of the Post-Graduation Program in Collective Health of the University of Brasília (UnB), approved by the Research Ethics Committee of the Faculty of Health Sciences of the UnB, under the number 51975315.4.0000.0030. The Free and Informed Consent Form was signed by the researcher responsible and by the participants who agreed to collaborate with the study.

# **RESULTS AND DISCUSSION**

Participants were seven trans men, aged between 18 and 42, from different cities of Brazil (in the Federal District and in the states of Acre, Ceará, Paraná and São Paulo), representing the five brazilian regions.

Of the people who agreed to participate and scheduled face-to-face meetings for the interview, only two did not attend. During the meetings, the semi-structured interviews were deepened as the dialogue strengthened between the researcher and the interviewees, which promoted the commitment to the questions during the listening session.

It is worth emphasizing, here, the resistance reported by one of the key informants who indicated possible participants. Some people have resisted and/or refused to participate because of uncomfortable experiences in previous research or some kind of inadequate care they have received from health professionals at previous events. And this point provided a reflection on the need to adapt health approaches<sup>4,7</sup>, as well as on scientific research involving vulnerable populations. Because the brazilian society still presents little familiarity with the issue of gender diversity, trans people, when they are attended at a health service or participate in scientific research, they may suffer stigma due to their gender identity or expression. In addition, there is still the fact that when they participate in scientific research, they run the risk of being exposed to inappropriate,

embarrassing or even unethical situations.

The interviews addressed issues related to gender identity, social expression of the gender, health treatments performed in the transition process, perception and functioning of the voice itself, and influence of these aspects on social interactions.

The process of analyzing the interviews in interaction with the perceptions of the researchers in the field allowed for the emergence of analytical categories, which surfaced throughout the study. The analytical categories, their elements and reflections, will be presented in the sequence.

The need for reflection regarding these categories is due to the wealth generated from the understanding of the aspects discussed, by researchers and health professionals – especially in speech and hearing and collective health. Mainly because, in the university training in Speech Therapy, until then, there has been little or no contact with gender issues, and especially because it is perceived that the present object of study, human communication, is strongly influenced and is implicitly related to gender social issues.

## Comfort and security about the social expression of gender

The body has a lot of meaning when it comes to the gender expression of transsexual people. The use of binder, caps, wider clothing and body modifications (such as the use of the beard and the performance of mammoplasty surgery) go beyond individual needs<sup>20</sup>, representing modes of being and action developed by trans interviewed men, so that their social expression of gender is in agreement with the gender with which they identify themselves.

This body puts you in the world, this body will define what you can and what you cannot [...] the body has such materiality, so much that I find it very interesting when you talk about voice [...]. (T)

It can be considered that the singularities, the forms used for the expression of gender, are also communication resources in the adaptation of the body to social expectations, and these resources must be taken into account and contextualized when discussing the physiological and behavioral aspects of functioning the voice and communication of trans men in their social interactions<sup>9</sup>.

#### **Importance of voice**

The relevance of the voice in the perception of trans men interviewed appears in two different ways. At first, the voice may not generate any kind of expectation or discomfort regarding the expression of gender, as in the case where one of the interviewees reports that, although expressing a certain difficulty in social interactions in previous moments of his life, the voice does not generate (or used to generate) any kind of specific yearning.

*I have always lived in the middle: I was not much of a boy or much of a girl. I camouflaged there to be able to go unnoticed.* (L)

But, in relation to the respondent above, perhaps because he does not seek a gender expression according to the binary patterns used, the voice does not seem to be a relevant aspect in his communication.

Different relevance is given to the voice by other interviewees, for whom the theme appears as a significant factor in the expression of gender, influencing, in different ways, interpersonal relationships and even professional life. In the sense that, when the voice is comfortable with the expression of gender, social situations of talking to or for other people becomes a practice without difficulties or complexity. Since the conformity between what is expressed and what the interlocutor reads does not generate any kind of discomfort, there being no estrangement in the other about the gender of the speaker, this conformity between what is expressed and what is read socially has special importance, in the sense of not embarrassing, exposing or putting in a situation of vulnerability trans men, in the most diverse situations of social interaction.

So, the thing about the voice is also very important, because, the same way you walk bent and use a binder to hide your intruders, you also end up choosing to make a low pitch voice, so people will not notice [...] I make a low-pitched voice when I communicate with people. (K)

It is perceived, in the speech above, the use of voice in its more subjective dimension, not only in the organic and physiological aspect of a voice of serious frequency, but in addition to the material aspect of the body, expressing a set and reflecting the subjectivity of the speaker in interaction with a listener; and may be transformed and adapted according to the process of interaction and communication through which the person expresses himself, which can be seen as an element that contributes to the performativity of gender<sup>16</sup>, being worked in a way that provides a communication that represents the subjectivity of the speaker, adaptable to the contexts of communication, enabling an effective communication and, more than that, a secure communication.

Using this notion of performativity contributes to the way of perceiving that the production of the vocal genre occurs in the interaction between people, in which the exchanges between the speakers influence the ways of expression of the vocal genre, as shown by Azul<sup>9,13</sup> in his 'model of production of the vocal genre in interaction', which describes that, in the interaction, the factors that contribute to this production comprise: 1. Gender identity (gender subjective position); 2. Desire for gender attribution; 3. Social expression of gender (presentation of gender); and 4. Gender attribution given to the voice by the person himself and other people. Thus, working the voice of each trans man according to his personal and social context, considering his social interactions, allows the voice embodied in these relationships to be understood in its varied dimensions and does not become a barrier of communication, exploiting all the potentialities that can be developed.

Voice, when it does not represent the gender with which the speaker identifies himself, may generate discomfort in certain social interactions. This discomfort, when repeated, makes the person who feels it seeks to defend himself, thus, avoiding to communicate in situations that may expose it. This way, the nonconformity of the voice with the expression of gender may constitute a barrier to access or communication of a trans man, which may influence other levels of his social life, such as studies or work.

[...] and my voice, to me, is a shame, because I find it very high-pitched, and this, often, prevents me from speaking in public, because my voice, it does not represent me. So, I know this is a characteristic for people to look at me differently. For me, this bothers me a lot. (Z)

For me, my voice should be more low-pitched, because a voice denounces us [...] the voice, for me, is everything. If I do not have a good voice to speak, a voice that represents me, so, I am uncomfortable talking to people, I feel bad [...] because if I sound high-pitched, it will denounce me, that high-pitched voice will come out [...] I do not feel well, I feel uncomfortable, I bow my head, my voice doesn't come out anymore.... That's what happens to me, I totally block myself. (Q)

# Voice and Hormone Therapy

Treatment with the testosterone hormone, carried out by trans men who opt for this type of therapy, promotes several effects on the physiology and vocal function, according to the individual body variations and related to the specificities of the treatments, such as testosterone type, route of administration and time of hormone therapy<sup>15</sup>.

Not all of the interviewees had already received or were undergoing hormone therapy, but, nevertheless, they already raised expectations about shifting to a more serious voice that would allow for more comfortable interaction with other people, in the sense that they did not generate constraints; that their interlocutors did not read them socially with the inappropriate gender or asked questions about their gender identity.

Because, as I still do not get hormone therapy, I do that. And, for not having a so feminine voice, it helps me a lot. I do not have dysphoria, but in the same way, I still use this technique to be able to keep a low-pitched voice. So people can easier to recognize me as I really am. (Z)

The most anticipated effect of voice-related hormone therapy is the decrease in fundamental frequency, which occurs when the voice becomes more low-pitched, characterizing a more masculine voice. It is well known that most trans men who undergo this type of treatment develop a vocal change<sup>21</sup>.

It's funny to talk about this voice issue... What I wanted most, about hormones, is the voice, because what bothers me the most is the voice, because it is high-pitched [...]. (J)

The interviewee above also describes a work situation in which the phone was used a lot and the people that called, knowing that they were going to talk to someone of the masculine gender, because of his name, on the telephone, did not recognize him when he introduced himself.

[...] I gave my phone number, and all the people called: "Oh ... but was not he a boy?". "It's a boy". And people never accepted [...] and then, it was a time that caused me a lot of dysphoria with my voice. (J)

The effects of a voice more in keeping with the social characteristics of gender provide more comfortable communication situations, increasing the well-being of the speakers.

The results of hormone therapy in voice quality currently known in the scientific literature<sup>15</sup> are satisfactory in the sense of modifying the fundamental frequency of the voice, making its tone more serious. Corroborating the literature, here is the speech below, whose subject quickly felt the effects of testosterone in his voice:

Testosterone has a very strong impact, unlike girls who use estrogen, which is a much weaker hormone than testosterone. So, takes time for them; for us, it's quick like that. The voice was really fast. (T)

However, from the perspective of other trans men, who have also been heard and have already performed or perform hormone therapy, not everyone considers that the modification for a more masculine voice was satisfactory. This shows that the changes are not so clear or effective, and/or that the person himself may not be satisfied with the level of his new vocal quality<sup>15</sup>.

It is important to emphasize that the quality of a 'more masculine' voice described in this work should be considered from the perspective of the person, according to their comfort in relation to their expression of gender, and not restricted to a technical perspective of an evaluation made from the professional parameter of the voice area.

The different perceptions of voice illustrate the men who feel that testosterone effectively transforms the voice, in dialogue with those who report that the voice does not present as much change, it is not so serious, with the hormone therapy. As in the case of the interviewee below, who, even after months of treatment, still did not perceive his voice as his, although people perceive a more serious voice.

So, before hormone therapy, I always had trouble speaking; I even had problems pronouncing, making certain pronunciations, because I did not like my voice, I could not bear my voice, I had difficulty pronouncing certain words. I stumbled because I wanted to speak fast so no one would hear; then, I stumbled, I was saying a lot of things wrong; so, I avoided talking too much [...] today, I hear my voice ... So, I really see how much my voice has changed, right? So, that makes me happy. (K) The different perceptions about the voice are related to the vocal self-perception and the perception of the listener. As for self-perception, generally, at the beginning of hormone therapy, men do not notice so much change in their voices; their closest interlocutors, such as friends or family members, often perceive first. The fact that people perceive a more masculine voice is seen as positive, causing men to even communicate and interact more.

And in my two relationships, my current one, she says my voice is great – but it's horrible, right? – that's okay. But my ex, she said that there were hours that I could speak with a low-pitch voice. Then I would say, 'Yeah, but for me to speak with a low-pitch voice, I have to control my breathing more, I have to articulate'. And to do it all the time, it's not possible. It's tiring. (Z)

[...] sometimes, I avoid singing at home, because hearing my own voice bothers me, I think it's still very feminine. That's why I like so much being hoarse, because when I'm hoarse, the voice is low-pitched. At work, I comment to the staff, 'Oh, I like when I get the flu because the voice is more low-pitched'. Then, they looked at me: 'No, your voice is just the same'. 'But for me, I'm listening, it's different'. So, this makes me more talkative. (Z)

Other moments in which men begin to perceive their changes in the voice occur in the interaction with interlocutors unrelated to their daily cycle, when, for example, they speak with a stranger and this one immediately identifies him according to the masculine gender.

The Durateston, in a month, I got this [talking about the beard growing] [...] I'm a passable person, you go into a place – but I realize it's not just my beard – I realize that my voice also, my voice gives me this thing that I can get in a certain place and not be identified. I have no problem being identified as trans, but I do not want to be identified otherwise. So, then, I realize that this are the two factors in my life, nowadays, that have left me extremely well, which is my beard and my voice. Because, therefore, it is precisely they that are strengthening my body as I want, as I really am, and being understood as such. (K)

It is important, then, to emphasize the relevance of other corporative and communicational elements, such as the use of the beard in the composition with the voice, contributing, thus, to the passability.

#### Relations between voice, health and social interactions

This paper proposes, based on the interrelation between body, subjectivity and collective health<sup>4,20</sup>, a reflection on how voice and communication in social interactions are related to gender discursiveness<sup>16</sup>; how this expression is transformed and transforming social interactions and how

this relationship is perceived by the trans men involved in the study.

The different perceptions that emerge in the study allow the understanding of the existence of different factors that contribute to the expression of the vocal gender of trans men, and that there is a diversity among individuals, in which there are, indeed, common desires and needs, but many particularities and individualities.

Some men, even going through hormone therapy, are not satisfied with their vocal output. Hence, the importance of reflection on the relationship between voice and social interactions. For example, a trans man may pass through social situations in his genre, in which he is mistakenly read, as a result of his voice or another aspect of his communication, since the expression of gender carries subjective characteristics that interconnect with materiality through corporality, and often may not fit into the normative social patterns of a heterosexual cisgender man.

This reflection on gender stereotypes of masculinity, often related to male chauvinistic communication behaviors, was brought about expressively in the speech of the interviewee below:

Another issue that also exists – this is subjectivity, but okay – that culture teaches, culture brings us two teachings: first, it says that, to be a man we must have a low-pitch voice. Culture has taught this to us for a long time. It came at a time that this culture also acquired, did another teaching, right? 'Thick voice is male voice, is a macho man's voice''. So, it's two teachings that we bring into the culture, that is, I want to have a low-ptich voice is going against what this culture says, but it is going in my favor, because it also feeds my masculinity. Now, I also have a certain fear of a certain place talking low-pitched and strong, and the person understand that I am a macho, rude. 'Look, he's talking like this to say he's the king' [...] and it's nothing like that, got it? (M)

This perception invites the problematization of the "obligation" that standardization generates, of following socially imposed patterns of gender stereotypes, in the sense that the gender expression inflicted by society imposes the stereotypes of feminine or masculine traits and, consequently, the expression of voice and modes of speaking 'need' to be framed in these social parameters.

In the process of transition, there are many people who find themselves dissatisfied because they do not reach certain imposed social standards – of masculinity, for example –, standards according to which all trans men must conform to a model of masculinity – male voice and manner – that legitimizes their gender identity in their social interactions.

This problematization contributes to the notion that the search for an ideal voice, if it exists, must take place in the sense of seeking a gender expression that reflects the subjectivity of those who identify with it<sup>22</sup>. And not in the pursuit of a socially imposed standard, which often creates expectations that are far from being achieved, and can generate discomfort and feelings of inadequacy to the speakers.

It is not intended, here, to argue that the search for a voice or gender expression that a person seeks is not legitimate, but to discuss and reflect on the search for an expression through a voice that is personally and socially comfortable and secure.

#### **Professional voice support**

The improvement of the vocal function of trans men with the help of a professional speech therapist is already described in the literature, although studies are still scarce<sup>17</sup>. Among the available studies that address the performance of the speech therapist with trans men, there are different types of approaches and focuses of attention. Some recommend treatment for muscle tension dysphonia, with special attention to the gradual increase of doses of hormonal treatment, stimulating adequate diaphragmatic breathing associated with soft exercise and certain vocal adjustments<sup>23,24</sup>. Others focus on information on vocal hygiene and recommendations for the prevention of vocal fatigue<sup>21</sup>.

There is, therefore, a need for the development of research related to the vocal function of trans men<sup>13</sup>, including in the brazilian context<sup>12</sup>, where, until the moment this work was written, there were no published researches. However, regardless of the thematic or technical approaches already developed in the research, one must reflect on the development of best ethical and clinical practices in the attention to the health of the trans people, which would already contribute to the reduction of the vulnerabilities to which these people are exposed in health care.

At this point, the professionals of speech therapy are also included, who, by working voice and communication, are directly intervening in the quality of life of these people<sup>7</sup>. It is not enough to know and use methods that measure health-related quality of life, it is necessary to respect and be sensitive to the diversity of genders and individuals, as well as to share, in the most diverse spaces – especially among other professionals – issues related to health and quality of life of transgender people.

Thus, there is a need for health professionals to increase and qualify the knowledge about the health of transgender people and to improve the sensitivity, respect, and attitudes essential to providing adequate care to this public<sup>7</sup>.

#### Transexualizing Process, Speech Therapy and Public Health

Regarding Ordinance n°. 2.803, dated November 19 of 2013, which addresses the Transexualizing Process in the Unified Health System  $(SUS)^{25}$  – admittedly a milestone in access to health and procedures related to the process of gender transition –, a reflection on what it defines as procedures related to voice, since it lists only one hospital procedure (although of high complexity): the thyroplasty surgery. However, such surgery has only the purpose of feminizing the voice and/or lengthening the vocal folds in the transexualizing process, not applying, therefore, to the other necessities of the trans men.

It is known that, in the SUS, most trans-health outpatient clinics have a professional speech therapist in the multidisciplinary team<sup>20</sup>, however, the fact that this professional is not compulsorily included in the above-mentioned ordinance makes him/her not gain political action in this area and is not quoted as an essential professional to attend to such a population.

Being mentioned in the ordinance even allows the speech therapist visibility in the attention to the health of the trans people, in the scope of the brazilian collective health, since it is desired that this type of care is not necessarily only linked to the reference centers of the transexualizing process, but its presence should be extended to all outpatient services of speech therapy in the SUS. In addition, promoting the dissemination of the theme and appropriate approaches in this area for speech-language professionals and students who are not yet familiar with the subject<sup>3,26</sup>. There is, therefore, the need and demand to truly include the speech and language pathologist in the aforementioned ordinance.

## **CONSIDERATIONS**

The perceptions about voice and social interactions shared by the actors in this study demonstrate possibilities for reflection on how voice and, consequently, communication can influence the wellbeing of a trans man in his personal and social life. This is an invitation to a change in the way of seeing and reacting to certain cultural patterns, which are already so natural in the eyes of brazilian society.

The discussion of a comprehensive health care approach to the health care of trans people in the SUS seeks to overcome social norms, in order to deconstruct prejudices and beliefs, that often in social interactions put trans people in a situation of vulnerability, including health.

With regard to collective health, this weighting is reflected in the attitudes and approaches that can be transformed and implemented to promote the integral health of transgender people. Especially, with regard to technical and cultural preparation, with an appropriate approach, ranging from the proper use of language, to gender issues, to approaches to health care. Always keeping in mind the standards that are preached and not to be reproduced or imposed, seeking to follow protocols of technical guidelines and good practices already available in the literature<sup>3,23</sup>. With respect to diversity and individuality, considering preferences and working possibilities, differently from seeking a social standard to be achieved, but aiming for a vocal and communicative expression that is comfortable, physically and socially. This is because, although the limits exist for any person, communication is a skill that can be developed and improved, along with other resources that allow to adapt the expression of gender to the way each person identifies himself/herself. It is worth, therefore, emphasizing that considering speech therapy with an appropriate and critical approach to social and subjective issues related to gender expression, besides the subjective aspects of communication and voice itself, represents a great potential for promoting the health of transgender people.

It must be said, also, that the literature on voice used for the construction and discussion of this study is mostly composed of international studies and, therefore, based on transgender speakers of other nationalities. Brazilian scientific evidence on the health of transgender men is still scarce and there is a need for the development of studies that bring to light the perspective of the people interested in the construction of therapeutic intervention focused on peculiarities that dialogue with the social and cultural aspects involved in expression in brazilian society.

All this in the sense of seeking the perception that the attention to the health of the trans person must reflect that the social interactions occur in the most diverse situations of communication and are influenced by the possibilities or barriers of expression that affect personal and social relationships.

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