

Jae Carelli

Module 3: Final Draft

Impact of trauma on trans femme AMAB (assigned male at birth) voices on HRT

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Proposal: Impact of trauma on trans femme AMAB (assigned male at birth) voices on HRT**Context:**

Voices are one of the key markers of identity. The vocal apparatus is utilized as one of the fundamental manners of human expression and is completely unique to each individual (Kreiman & Sidtis, 2011). Transgender and non-binary individuals often undergo speech therapy in order to attain an instrument that fits their identity (Kennedy and Thibeault, 2020). Many transgender and non-binary people have been subject to prejudice, discrimination, and violence impacting their physical well-being and their psychological well-being (VAWnet, 2019). By utilizing existing research on how identity and voice are intertwined, how transgender people will undergo treatment to have their voice aligned with their gender identity, how the vocal apparatus reacts to stress, and how transgender people often experience distressing discrimination and harassment, there is a need to explore and gain more knowledge.

Justification and intended impact:

There is still very little research on transgender individuals and their experiences, and even less research on how transgender and non-binary folk relate to and utilize their voices (Graham, 2019). This research will fill a gap in knowledge about an oppressed group of people and obtain useful information that has the potential to understand the experiences of trans and non-binary voices on a physiological level concerning trauma as well as the impact of HRT and psychologically concerning how perception, identity, and mental health play a role in the use and the health of the voice.

Intention:

Using a qualitative methodology I am going to gather data from initial surveys to select participants and ensure they fit the demographic of the research. Then I am going to send questionnaires to the 5 selected participants to gain more insight by quantifying their experience, scaling it numerically. Then I will gather most of the data through semi-structured interviews, asking participants to elaborate on their perception of their voice, psychologically stressful experiences and the impact of that on their voice, and their experience on HRT. Then I will evaluate the data and conduct thematic analysis by coding the data and drawing conclusions on any connections that arise from the participants. The deadline for the final draft is due on January 31, so my timeline will be to create the research instruments and distribute the surveys the first week of November and interview participants the following two weeks. Then analyze the data the last week of November and begin writing my draft in December, with enough time to edit and submit my final draft in time for the deadline.

Ethics and Insider Research:

Recalling past psychologically stressful/traumatic experiences and asking questions about private information such as health treatment can be of risk to the participants (Amir, Badour, and Freese, 2009). I will mitigate these risks by disclosing any topics, study activities, or questions that may be triggering in the informed consent, listing mental health resources that can assist the participants, assuring confidentiality policies, and disclosing what identifiers may be at risk of disclosure. As an insider, I will recognize my bias, especially drawing upon my personal and professional community as potential participants, and also take into account my own experience as a nonbinary vocalist who works with transgender voice students.

Proposed Learning Outcomes

The learning outcomes for this research are how transgender people have been 1. physiologically, 2. psychologically, and 3. socially silenced. With this greater understanding of how their identity, life experiences, and mental/physical health impact the vocal apparatus on a physiological and psychological level, trans folk can then take steps to utilize their voices to express, communicate, and advocate for themselves to create a more equitable and accepting world.

Impact of trauma on trans femme AMAB (assigned male at birth) voices on HRT

INTRODUCTION:

Voices are one of the key markers of identity and are utilized as one of the fundamental manners of human expression (Kreiman & Sidtis, 2011). Transgender and non-binary individuals often undergo hormone replacement therapy or speech therapy in order to attain an instrument that fits their identity (Kennedy and Thibeault, 2020). Many transgender and non-binary people have been subject to prejudice, discrimination, and violence impacting their physical well-being and their psychological well-being (VAWnet, 2019). I drew upon existing research on how identity and voice are intertwined, how transgender people undergo treatment to have their voice aligned with their gender identity, how transgender people often experience distressing discrimination and harassment, and how this impacts their voices. There is a need to explore and gain more knowledge in this field to amplify oppressed and marginalized people.

There is still very little research on transgender individuals and their experiences, and even less research on how transgender and non-binary folk relate to and utilize their voices (Graham, 2019). This study has filled a gap in research about an oppressed group of people, and I obtained information and firsthand accounts through this study, which aids in understanding the experiences of trans femme voices on a physiological level concerning trauma and the voice, as well as psychological impacts on perception, identity, and mental health that play a role in the use of the voice.

Transgender and non-binary voices have been silenced by violence and oppression throughout history. With this greater understanding of how their identity, life experiences, and mental/physical health impact the vocal apparatus on a physiological and psychological level, trans femmes' can then take steps to utilize their voices to express themselves authentically. Voices do not just communicate; they also advocate for the people to whom the voice belongs and for others that the voice is being raised on behalf of. With more insight on how trans people use their voices to authentically speak their truth and stories, we will create a more equitable and accepting world.

My personal learning outcomes for this research are to investigate the impact of discrimination on the voices of trans femmes on HRT, so I can consider how my trans femme clients approach and use their voice. With the data from their recollections of how identity, life experiences, and mental health impacted their vocal apparatus' on a physiological and psychological level, trans femmes can then take steps to utilize their voices to express, communicate, and advocate for themselves to create a more equitable and accepting world.

LITERATURE REVIEW

“Gender and history impact how we read the tone, velocity, and pitch of the voice, but they also shape parameters of where and when particular voices are invited to speak or expected to remain silent” (Ehrick, 2015). Transgender voices have been silenced due to stigma and phobia throughout history (Parker et al., 2022). This research study on trans voices is especially relevant considering the current political climate in the United States. There are almost 250,000 trans youth living in states that have either introduced or made legal measures, or laws were pending to ban access to gender-affirming care in the 2024 legislative session. This is slightly more than three-quarters of all trans youth ages 13-17 in the United States of America (Redfield et al., 2024). These bills negatively impact transgender youth by denying them medical care that is deemed best for them by healthcare professionals (Movement Advancement Project, 2024). The Movement Advancement Project (2023) also cites various tactics that target trans youth and adults from accessing care, criminalizing trans folk and their allies, and rolling back legal protections for trans people to exist in public and within American society. In 2023 almost two hundred bills were proposed, and twenty-six passed, but in 2024, over six hundred anti-trans bills were considered, and over fifty were passed in 2024. Eighty-seven bills were considered at the federal level last year (Trans Legislation Tracker, 2024). There is a major rise in transphobia and also the legal and societal protections of trans people in the United States.

Given the legislature that silences and erases trans people, it is of the utmost importance to amplify trans voices in a theoretical, social, and physical sense. Ryan Aguirre wrote *Finding the Trans Voice: A Review of the Literature on Accommodating Transgender Singers* in 2018, which indicates the need to welcome trans voices in spaces that tend to be cisgendered. Gathering resources on how to accommodate and include trans voices is significant, considering how a study by Case and Meier (2014) notes, “Many educators do not feel well-prepared to work with trans*+ students.” Some of the findings conclude the obstacles that prevent allies and others in the music education field from working with trans people include “fear of offending those with whom they work, lack of training, and a feeling of not being able to make a difference” (Ji, 2007; Ji, Du Bois, & Finnessy, 2009; Ji & Fujimoto, 2013).

A study by Christopher Cayari published in the *International Journal of Music Education* investigated The Transgender Singing Voice conference held in 2017. Data analysis identified significant topics of interest at the conference. Themes included the vocal production, pedagogy, physiology, and identity of trans*+ singers. The conclusions of that study indicated that trans*+ attendees and allies were empowered due to the demystification of trans*+ experiences. (Cayari, 2019). This is evidence which indicates the power of narratives.

In my review of relevant literature, I have discovered there is more narrative research on trans experiences in general. In the voice world, there are many fewer narrative studies, and in the ones that do exist, they tend to be in the music education and choral ensemble spheres than there are in the general voice pedagogy field. There is research on the experiences of trans*+ youth in school music choral programs. (Palkki, 2016). Nichols (2013) published one of the first research studies on trans*+ issues in the *National Association for Music Education* journal. The

narrative research told the story of Rie Daisies, a young trans*+ songwriter, and illustrated Rie's account of discrimination in the educational system throughout middle and high school. Other research on trans experiences in music education has explored intersectionality, which notes how race, gender, socioeconomic status, and sexuality impact each other in an individual's experience and also the social workings of society. (Kruse, 2016).

On the other hand, there are quantitative studies done on the physiological aspect of hormone replacement therapy and voice transition. Many studies examine how to help individuals accomplish voice feminization or masculinization. Studies report that pitch of voice is the issue most trans people struggle with concerning vocal functioning (Dacakis et. al. 2012). An article titled, "Pitch Elevation in Male-to-female Transgender Persons" by Meister et. al. (2017), is one example of the quantitative trend in this topic of research. Another article by Deanna Kawitzky and Tara McAllister (2018) notes that the variations in the frequencies of formants in people assigned male or female at birth directly contribute to how others perceive the voices as masculine or feminine. This study explored if "visual-acoustic biofeedback" is effective in assisting transgender women achieve formant targets typical of cisgender women. The study also investigated if such a shift influences the perception of femininity in speech." While this quantitative lens is important, especially for assisting trans femme folk to achieve their goals of using a voice that aligns with their identity, if one does not understand why trans femmes desire to have their voice fit specific qualities, there is a gap in the research. Psychosocial issues were the most frequently reported voice-related impacts (Dacakis et. al. 2012), which indicates a need for understanding how hormone replacement therapy impacts voices in a psychological and social sense, not just a utilitarian sense.

There is discussion around including trans voices, utilizing inclusive language, and finding ways in which to serve the trans community as allies, however there is not much narrative research on the impact of HRT and voice training. Graham (2022) notes that research on outcomes for the transitioning voice is sparse. He notes that anecdotal narratives on the topic of undesired outcomes give both professional and serious avocational singers pause. This lack of readily available evidence-based research presents a challenge both to trans singers and the voice professionals working with them.

Many of the qualitative methods employed in the current research are semi-structured interviews, questionnaires, and surveys. When investigating quantitative aspects of trans voices, methods employed controlled experiments involving recordings, laryngoscopy, and collecting and measuring quantifiable data. In order to close the gap in research of trans femme folks' perception of their voice on HRT, I must utilize the narratives of trans femme individuals who are undergoing treatment. Since hormone replacement therapy has no significant physical impact on their voice (Sauerland, 2022), there is research on the impacts of voice feminization speech therapy, but not on the perceptions of these individuals who are not undergoing speech therapy but are pursuing HRT.

"Feminists have used the word 'voice' to refer to a wide range of aspirations: cultural agency, political enfranchisement, sexual autonomy, and expressive freedom, all of which have been historically denied to women (Dave 2022). Dave's point indicates the significant role of

metaphorical voice in society as a means of authority and how that has been stripped of women. Trans femmes who also have another intersection of being queer have been stripped of their voices in another way as well. This shows a need to investigate how trans femmes use their voice as humans and as members of society.

METHODOLOGY

I utilized a relativist ontological positioning, as when I gathered personal anecdotes, I needed to view the participants' lived experience as valid and true to their perception. My epistemological position relies on subjectivity, as the nature of this study is about interpreting how experiences shape the participant's behavior, perception, and worldview. I utilized an interpretive paradigm in order to position myself in a manner that can investigate how my participants make sense of their reality and understand themselves, as well as lend perspectives from the constructivist paradigm, as I evaluated how my participants interact with the world. According to Clandinin & Rosniek (2006), inquiring about the subject's narrative goes beyond the stories of the participants' experiences. It also investigates the social systems and functions in which the individual exists within. This is why I utilized both interpretive and constructivist paradigms, which have proven to be valuable for the purpose of this study.

Phenomenological qualitative methodology uses an approach that examines the phenomena of how my participants experience their lives as trans femme individuals. I used critical gender theory to position my research, as this theory examines the power systems that marginalize certain gender expressions in many societies and throughout human history. This research will fill a gap in knowledge about an oppressed group of people and obtain useful information that has the potential to understand the experiences of trans and non-binary voices on a physiological and psychological level. My literature review informed me of the gap in knowledge rather than giving me greater insight on the topics, so I utilized inductive reasoning to create my interview questions.

I gathered most of the data through semi-structured interviews. I asked participants to elaborate on their perception of their voice, psychologically stressful experiences and the impact of that on their voice, and their experience on HRT. I initially sent a survey to ensure the participants qualified for the demographics of the study and gathered other basic information. Then, I sent a follow-up questionnaire to scale their experiences, which lends itself to a quantitative methodology, ensuring I was able to provide a framework for the narratives to breathe within. Limiting the likert scale to 1-5, I was able to get a general scope of participants' perception. I utilized interpretive phenomenological and thematic analysis to sift through the data from the interviews to draw my conclusions. I could have also used a focus group and taken a more constructivist approach by drawing observations on group interactions. However, I was hesitant to organize a focus group, given the participants limited availability, and acknowledged that it would hinder their willingness to share traumatic recollections with a group of strangers, rather than just one person who guaranteed confidentiality.

Recalling past psychologically stressful/traumatic experiences and asking questions about private information such as health treatment can be of risk to the participants (Amir, Badour, and Freese, 2009). I mitigated these risks by disclosing any topics, study activities, or questions that may be triggering in the informed consent, listing mental health resources that can assist the

participants, assuring confidentiality policies, and disclosing what identifiers may be at risk of disclosure. As an insider, I recognized my bias, especially as I drew upon my personal and professional community as potential participants. I also took into account my own experience as a non-binary vocalist who works with transgender voice students. Working with people I knew personally made it easy to find participants.

Participants were informed of how data was collected through surveys, questionnaires, and semi-structured interviews. This multimethod approach enabled me to ensure results for this study were reliable, as it enabled cross-referencing the results. Participants will know their data will be collected through Google Forms stored on Google Drive, and the interviews will be held on the video chat platform Zoom and audio recorded with the Voice Memos iOS app. They were provided a full understanding of the nature of the questions, the full scope of the topics, and how the data will be about their personal lived experiences. They were notified they may withdraw from participation at any time, and their data will be protected. They all signed consent forms and verbally confirmed their consent at the beginning of the interview.

Semi-structured interviews were conducted. I conducted interviews with participants on December 12, December 13, December 20, and January 3. I conducted these interviews in my apartment in Brooklyn. One participant was able to meet me in person at my home, and the others were done on Zoom. Participants were located in Brooklyn, NY; Boston, MA; Austin, TX; and Portland, OR. I asked the participants questions about what identity means to them, how they utilize their voices in their daily lives, and how they perceive their voices before and during HRT. I then asked the participants to recall stressful experiences they may have experienced related to being a trans person and how that impacted how they perceive and utilize their voice, in a physical sense but also a theoretical/social sense. I then sent out a follow-up questionnaire asking the participants to quantify their feelings and perceptions on a scale of 1-5.

The Participants:

Participant A currently is not working, residing in Brooklyn, NY, but previously worked in food service and human resources in Boston, MA. Participant B works as an EMT and researcher in Boston, MA. Participant C is a student at Portland, Oregon. Participant D is a New York-based musician currently traveling and touring with a show.

Participants are trans femme individuals assigned male at birth in their twenties, two of them using they/them pronouns and two of them using she/her pronouns. Two of them identify as white, and two of them identify as Asian. The data from the survey concluded that the participants' age range was from 21-29. Participants A and C had attempted voice and speech feminization therapy but stopped one relating to identity and one related to physical health reasons. Participants were taking estrogen (estradiol), dutasteride, and progesterone.

FINDINGS

After the interview, participants also were asked to complete a survey. They were asked, on a scale of 1-5 with one being ranked the least and five being the most. The following graphs below are a quantifiable description to give a framework for the qualitative data provided in the interview.

On a scale from 1-5 how has HRT impacted your mental health
4 responses

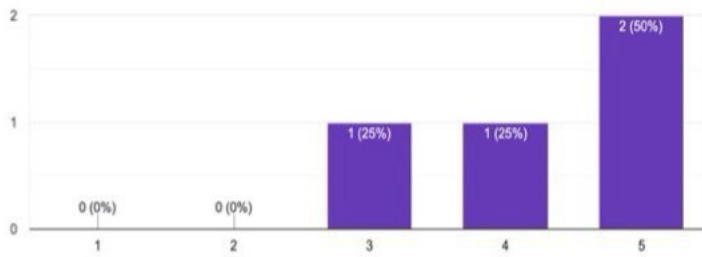


Figure 1

On a scale from 1-5 how have these stressful experiences impacted your mental health?
4 responses

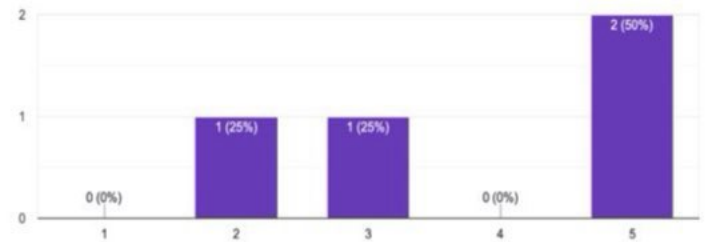


Figure 2

On a scale from 1-5 how comfortable are you using your voice
4 responses

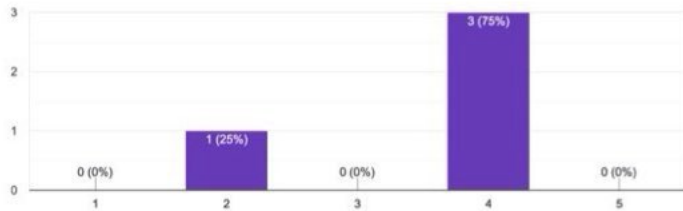


Figure 3

On a scale from 1-5 how do you feel stressful experiences have impacted how you use your voice
4 responses

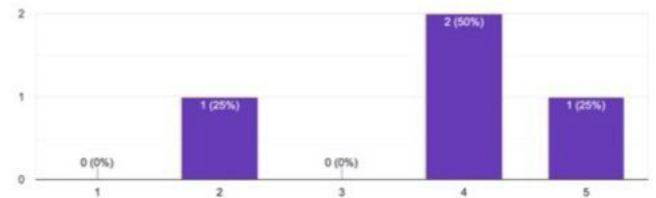


Figure 4

All participants noted that HRT has helped them feel more comfortable in their identity. The nonbinary participants both expressed that with HRT, they felt less of a need to “perform” femininity and could feel more secure as trans people. Through thematic analysis the following themes that the findings are organized in were developed inductively. Quotations have been edited.

Participants’ perception of their voice:

Participants were asked how they perceive their voice, and I received a variety of responses that were very personal. Some responses were related to gender or the utilitarian use of the voice; however, there is a lot of psychological and emotional weight related to the voice. Participant A noted her voice as “definitely being on the deeper side. The way in which I speak does have a more masculine tint to it because I was raised and socialized as a man. Women have a different cadence of speech than I do.” This connects with the quantitative studies cited in the literature review such as “Pitch Elevation in Male-to-female Transgender Persons” by Meister et. al. (2017) on how to physiologically feminize transitioning voices.

Participant B noted that on HRT her voice will break more often. She expressed that she knows her voice “isn’t the most feminine sounding,” but she doesn’t care to change anything. The apathy towards her voice is attributed to the mental burden she experiences from being trans. Participant C expressed anxieties around perceiving their voice due to how others may perceive their voice and the potential judgments that can follow the perception. This all connects with voice being one of the key markers of identity (Kreiman & Sidtis, 2011) and how one’s voice changes the perception towards others and therefore themselves.

Some responses were related to perception of how their voice sounds, unrelated to gender expectations. Participant A said, “Our voice is what we use to communicate, to make connections, whether or not it’s us physically using our voice. It’s how we can, for lack of better terms, justify our existence to the world around us. Participant B noted, “I don’t really know what I really sound like. I don’t know if I’ll ever be able to fix the disconnect between how it feels when I speak versus what it sounds like when I hear it back on recording.” Participant D expressed,

“Voice is a thing we used to communicate; musically, it’s...another instrument in the arsenal. My voice is one of my many instruments. It’s also the most fraught one. I would say because it changes over time. It’s also related to a lot of emotional weight from previous trauma and previous experiences that have made me think my voice doesn’t matter.”

Discriminatory experiences causing psychological stress and trauma

Participants were asked to recall discriminatory experiences that were psychologically stressful and/or traumatic. They expressed how being trans and specifically trans femme would bring verbal violence, threats of physical violence, exclusion, erasure, and disrespect. Participant A and participant C expressed specific accounts of misogyny that directly impacted their safety, mental health, and how they were able to interact in the spaces they were in. Participant B

recalled being discriminated against in various ways, for being queer, for being trans femme, for being a lesbian, and for being Asian American. This impacted her access to medical care in a variety of settings. She also recalls the physical and sexual violence that she faced as a trans person, as well as the general negative, hostile treatment in spaces she receives, as well as being treated differently by others. Participant A went into further detail about her experiences of objectification:

"I've had numerous negative experiences, either based on the fact that I am transgender because they were already attracted to me, and now they don't want to justify that attraction to themselves, but they do want to put the blame on me for being provocative for being a sexual creature. I have been called a slut, a whore, a bop. It's slang that stands for blown-out pussy... no matter what I wore when I was masculine presenting, no one ever said things like that to me, because men aren't held to the same standards."

Participant C recognized a loss in privilege as they began presenting more femininely:

"The longer I was on (HRT), the more I realized how people were treating me differently... I could see my "male privilege" going away. Voice is a really big thing for that because a deeper voice gets, (it is) perceived as more masculine. People pay more attention to you and your speaking. People give you more respect. I've been shown a pattern where if I speak up, then sometimes people will talk down (to me). The experiences that I went through the first time that I was on HRT did show me that the more femininely I present myself, the less seriously people will take me."

Participant C also expressed specific instances of discrimination during their studies. A professor gendered the class by dividing groups within the gender binary, so the participant sent a polite email to the professor proposing gender-neutral terms be used when addressing the class. The professor wrote a retaliatory and insulting reply email stating, "I'll never understand the experience of what it feels like to be a woman." Another instance the subject recalled was their private instrument professor constantly misgendering them, making no genuine efforts to correct his efforts, and even admitting to joking about the participant's gender identity with his spouse (who was also the participant's work supervisor). These incidents jeopardized the participants' education and employment. Participant D elaborated on their experiences of discrimination and trauma:

"The constant trauma of being told you don't exist and you're a fucking crazy is the main one. Especially now, politically, everyone's like, We're going to erase transgenderism. Like it's not a fucking "-ism," it's a fucking group of people. That would probably be the main trauma, and then obviously, like, the little trauma of having to constantly explain yourself to other people and fight for you...there's that whole dance in your head, 'Do I correct them?' It is like the culmination of all these different microaggressions... (is) why a lot of people detransition. But other than hate-filled encounters on the street, not (physical) violence."

Impact of discrimination on use of physical voice

Participants were asked how this impacted their voice. Participants A B and C noted how these experiences resulted in them utilizing their voice less, on an internal level within themselves, on a physical level of them speaking due to safety and mental/emotional burden. Participant A expressed,

"When you physically withhold your voice, there is also an internalized shift inside of you, prior to me transitioning, even internally, I'm much more taciturn, I'm less likely to speak out about anything. I've definitely at times become very withdrawn, lost interest and making new connections, communicating with people. I feel like prior to transition, I was a very affable kind person and now I feel that I'm much more much more cynical to a degree because a lot of the assumptions when I'm creating new connections with people is that part of the reason that they approached me in the first place is because they are sexually attracted to me and that they're objectifying me just how my body's developed and my pretty face. It's definitely been rather severe."

Participant B disclosed, "It's physically and emotionally exhausting. Using my physical voice in (personal) situations. It doesn't really affect or change anything.. So why put too much effort or thought into it because it's just going to make my life more miserable." Participant C also noted how when they use their voice, they must go through the process of thinking how to present themselves using their voice as a matter of safety.

It makes me feel a little bit more like I have to be careful with my words and with the battles that I choose to fight...Depending on what voice I'm using, people respond differently, (which) can be associated with safety. One of the reasons that I stopped estrogen in the first place was because I felt like I was losing that sense of comfort and safety that masculinity had provided me, even though it wasn't an authentic feeling towards my experience. I was scared of the judgment of other people and the way that that was going to impact my life."

Identity is not just tied to expression, this insight from participant C indicates that how one presents and identifies can have a direct impact on one's safety. Participant D noted that while they continue to remain outspoken, they did note the mental and emotional burden of speaking out.

"I'm an outspoken person... I'm gonna talk no matter what. But it does make me more aware of how I am perceived, right? It's that cognitive load I was talking about that all trans people go through...When I'm out in the world and want to be seen in my identity by strangers, I have a different voice...That's a role that I play. When I'm out in the world for survival because I want to be seen as more not in the (gender) binary."

Impact of discrimination on the use of theoretical voice

Participants were asked how discrimination impacted their theoretical voice. At first, they all asked what that meant, and upon further explanation, they understood the question was meant to inquire about how they felt their experiences shaped how they asserted themselves without the use of their physical voice. Instances of this would include sharing thoughts and opinions, expressing feelings and sensations, and making their presence and state of being known to those around them. This could manifest in a variety of ways, from sharing their opinions on the internet, through creative means, in a political sense, and in a social sense. All participants felt like it impacted how they used their voice in a creative, political, and social sense. Participant A felt that her experiences of violence had impacted her theoretical voice significantly.

"I'm not really on the Internet, but I can't imagine myself writing internet comments and giving my opinion on things because I am so used to not saying anything. I don't think I was always like that, but I think when you're so restrictive and hesitant about using your physical voice, it does create changes in how you use it, internally and in other situations as well."

When asked about how this impacted her creative voice, she responded, "I don't really use that anymore either, because that...feels like an extension of my physical voice. I'm much less likely to write music, to write poems, things that I have done in the past." Participant B noted that while advocacy is important, she would not choose to steer the majority of conversations she has with the objective of advocacy due to perception of others, as well as mental burden. Participant C noted how stereotypes and expectations around gender and musical genre have impacted their creative voice.

"When I'm creating music, if I'm feeling really queer, I might make more queer music, and if I've gone through an experience that makes me feel like I've been marginalized, I might make a darker song that is expressing those emotions... But I do feel like I have to sometimes conform to the boundaries of the art itself because I am afraid of looking stupid. I'll scroll through Instagram reels, and I'll see a trans girl who's making rap music in a voice that doesn't necessarily sound like a clock as an afab female voice but is still a very feminine voice. That person will have to delete lots of comments or just have their comments filled with bigots because online that supportive community does not present itself in the same way. If I look at that, that definitely is like an attack on artists' abilities to use their voice. I have sacrificed that range of my voice when I'm making specific types of music because I'm afraid of people perceiving it a certain way."

The societal expectations that correlate various labels and roles to specific genre characteristics are a means of silencing creative voices in a variety of mediums. The pressures to have art well received or even have an audience to perceive the art at all are significant, especially with the pressures and quantifiable success in social media. Participant D noted how using their voice in the face of oppression will take different forms of using their voice.

"More importantly, my advocacy for trans rights and telling my story rather than singing my story will be more important in the future. It's not staying silent in the face of our oppression...like speaking out, writing a song, going to a rally, speaking out at a rally, talking to a bunch of cis people about being trans at like a talk. Not letting people erase

my identity and asserting my pronouns is a huge thing that I do every day. Part of my work is to create an environment by speaking up using my voice and being a very vocal advocate for my people, in both big ways, like policy and creating an environment, and little ways too, like affirming people who come in who are in different parts of their trans journey and being very vocal about who they are to other people."

This shows how powerful the physical and theoretical voice is and the impact it can make when one has the capacity to effectively use their voice. Dave (2022) comments, "In this context, 'voice' has become a metaphor for textual authority... This metaphor has become so pervasive, so intrinsic to feminist discourse, that it makes us too easily forget (or repress) the concrete physical dimensions of the female voice upon which this metaphor was based." Seeing how the participants' voices have been silenced in a theoretical context connects back to how trans femme voices have been oppressed in a very physical and political manner. Voice is not just the physical entity; the theoretical voice is directly linked to the physical voice.

Other findings from where the interviews led:

It appeared from the data gathered that misogyny greatly impacted the participants. It tended to have a more extreme impact on those who were white presenting than those who were Asian American due to harmful racial stereotypes. Often the misogyny reported by the participants was physical violence but also mostly verbal violence from others. Participant A recalled:

"I've been told that my body's pornographic multiple times. At the root of it, that is just misogyny, but because I'm trans, you have that extra flavor, that extra twist...it becomes trans misogyny. It was hard for me to understand the scope of what systemic misogyny means in this society until after I started developing those secondary sex characteristics: hips, breasts, and so on. I realized the absolute severity of it; it's been a harrowing experience for me. It definitely has severe impacts on my mental health."

Participant C recalled an instance of being assaulted at work in a food service position. Industries such as the food service industry are known for misogyny (Williamson, 2022).

"I was like walking up to (the head chef) to ask him for something, and we were talking, and he squeezed my chest randomly. I was like, What the fuck? He was like, 'Oh, I thought you had something in your pocket because it was like a shirt with pockets.' And that is one reason that I've stopped estrogen for the first time, because I didn't want that to happen again, and I had associated those two things in my brain because, like femininity and discrimination, they are kind of connected. At the time I wasn't trying to just be me; I was trying to be more feminine."

Participant D gave some valuable insights about intersectionality and how stereotypes about race can impact perception of gender:

"I do think being Asian plays into that because I think there's already a feminization of Asian people and an infantilization of Asian people. Which is non-productive because I play into this cute Asian stereotype. They don't care if I have a high voice because it's cute and fun and plays into stereotypes of Asian people being cute and demure and subservient. I think that's why I get away with it more. People perceive me as this cute

Asian person, which is derived from the fetishization of Asian women.”

This insight aligns with what Cayari (2018) notes, that “race, religion, class, sexuality, and a plethora of other identities should be considered when serving and discussing the trans*+ community.” Intersectionality impacting the participants who identified as people of color (Asian American). The stereotype that Asian people are perceived as more “feminine” in America was one of the reasons why participant D felt like they avoided misogyny. Participant B did also express experiencing both misogyny and racial discrimination.

Physical Environments and Safety

Environments such as workplaces, specific cities and areas with more ‘liberal’ social values, and various social settings contributed to a feeling of more safety for the non-binary participants. Participant C noted, “Most people use they/them for me in Portland (Oregon), and I don't really have to do anything because I feel like I fit that demographic... I'm very lucky to have a supportive community.” Participant D observed, “I have not faced discrimination. I am privileged in my (field of) work. I work in theater primarily and in music, relatively like open-minded (at least on the surface) people. I'm very lucky that my career choices support my identity.” This connects with previous findings on how one's presentation relates to safety, especially participant C's anecdote on how their work environment changed their decision to be on HRT. An individual's surroundings will directly impact them on a psychological and physiological level.

CONCLUSION

My initial aim for this project was to investigate how trans femmes' voices have been physiologically, psychologically, and socially silenced. In conducting semi-structured interviews, I found that discrimination and oppression have direct impacts on silencing marginalized people's voices. Factors such as misogyny and additional influences such as the intersectionality of race, gender, sexuality, and queer identity have a direct impact on how trans femmes utilize their voice. While I expected this to be true, the extent of the violence silencing trans femmes' voices was something new I found. Another outcome I discovered was the consequences of trans femmes' using their physical voices, resulting in violence, extreme psychological stress, and silencing their inner mental/emotional voice, and additional hesitancy or lack of energy to utilize their voices in a theoretical social or creative way.

Limitations and Recommendations

While using the likert scale for the follow up questionnaire is a sufficient way to quantify the participants perception, the data cannot be generalized to the small scale of participants. The scale should only be used to frame the details given in the semi-structured interviews. While this study does add to the body of research about trans voices, there is still a limited amount of knowledge of the topic, which can hinder how this study was conducted. In this process of gathering data, I initially thought that my personal connections might give more insight into the detailed experiences of the people I knew. While I took care to not abuse that connection for the sake of the study, it actually had the opposite results. The participants I knew personally were less likely to share stories and anecdotes in detail for the interview because I had already heard many of those experiences on a personal level. Even when asked to elaborate, the participants I did know would not go into specific anecdotes that they had shared with me personally during my time knowing them. The participant I did not know personally shared the most detailed anecdotal accounts with me that lent valuable perspective. Due to the discoveries concerning the impact of intersectional identifiers, I would recommend that future research also investigate more BIPOC (Black, Indigenous, and people of color) as well as investigating how socio-economic privilege plays a role in how trans femmes use their voices. I would also recommend using both semi-structured interviews as well as focus groups to investigate how marginalized groups of people verbally interact with each other.

Final Remarks

I have a greater understanding of how to approach trans femme voices in the studio with care and more understanding of how misogyny silences femme voices. In investigating these accounts of young trans femmes' lives, we must consider the impact of the gender binary on voices in voice pedagogy. Classifying voices inhibits them from expanding to their fullest potential. We must also continue to recognize the societal expectations of a femme voice and the misogyny that subjects trans voices to violence. There is so much to explore on how systems of oppression literally silence the voice physically and theoretically. The voice is a tool to assert authority within spaces, and it is imperative we use our voices to sing a song of advocacy for all voices, especially those discriminated against and silenced.

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Jae Carelli, Voice Teacher
937 Rogers Ave 3B
Brooklyn NY, 11226
jae.carelli@gmail.com

20 August 2024

Dear UWTSD,

RE: How does previous psychological distress and trauma impact transgender femme AMAB (assigned male at birth) voices undergoing Hormone Replacement Therapy?

I confirm that I approve of the research proposed into “Impact of psychological stress on trans femme amab voices on HRT” to be carried out by Jillian Carelli during interviews with participants between September 2024- January 2025.

Kind Regards,

Jae Carelli