



## VOICE CARE

### NUT HEALTH AND SAFETY BRIEFING

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***This NUT document, produced in co-operation with the Voice Care Network UK, sets out advice to teachers on voice care, including basic advice on spotting problems and simple preventative measures and information on how and when to seek appropriate specialist help.***

#### **TEACHERS: AN AT-RISK GROUP**

Voice care is an issue of major concern to teachers and trainee teachers. The nature of the job, coupled with a frequent lack of voice training, means that teachers are at considerably greater risk than most other groups of employees of experiencing vocal problems at some point in their careers. Statistics from Voice Care UK have shown that teachers are eight times more likely to suffer from voice-related health conditions than other professions. Newly-qualified teachers are at even greater risk, with 50 per cent of NQTs suffering voice loss during their first year in teaching, according to a study carried out by Greenwich University.

A 2008 survey undertaken by the Royal National Institute for the Deaf found that

- teachers in around 60 per cent of schools complain of vocal problems;
- a third of head teachers report that it has caused teachers to have taken time off; and
- the cost to schools is calculated at around £15m a year.

#### **Causes of Voice Problems**

Voice is a key resource for teachers. Common contributory factors to the development of voice problems include ineffective projection and breathing techniques, exacerbated by speaking for long periods when tired or stressed, and vocal strain from supervising large groups, sometimes in teaching areas with poor acoustics and/or against loud background noise.

#### **Recognising the Signs**

Most teachers accept that they will from time to time experience hoarseness or discomfort from upper respiratory infections such as colds and flu. Prolonged and recurring hoarseness in the absence of a cold or throat infection and a persistent change in pitch or quality of voice should, however, be investigated. Where teachers and trainee teachers experience such problems, it is sensible for them to see their GP and ask about specialist help, where appropriate, from a speech and language therapist and/or ENT consultant.

#### **Preventative Voice Care Training**

Attention to voice care techniques can be of substantial benefit to serving teachers and trainee teachers alike. Teachers whose initial training included advice on care of their voice appear to have fewer voice problems during their careers than their peers. For this reason, the NUT is keen to see greater attention, advice and support on voice care issues, both as part of serving teachers' ongoing training and also as part of trainees' initial teacher education courses.

## **Voice Care Network UK**

Advice, guidance and training on this area is provided by the Voice Care Network UK, a registered charity set up by voice teachers and speech and language therapists which exists to support teachers and other professional groups.

Their specialist support for teachers includes in-depth written advice and guidance documents and workshops, tutored by speech and language therapists and voice teachers, which deal with voice awareness and how best to avoid voice problems. The Network's contact details can be found at the end of this guidance document.

## **IDENTIFYING WHEN MEDICAL ADVICE MAY BE NEEDED**

### **Consulting your Doctor**

Teachers should be alert to the signs of vocal difficulties. These may occur at any time and may be due to overuse of the voice, or to infection or illness. As a first step, teachers who experience any of the following symptoms should consult their GP.

- Regular and/or unexplained voice loss.
- A change in voice quality (e.g. hoarseness or croakiness) for more than 10 days.
- A weak and tired sounding voice.
- A voice and/or throat that feels consistently painful or as if there is a lump in the throat.
- Frequent throat clearing.
- Loss of vocal power or ability to project.

Doctors will usually consider any underlying infection, illness or allergic response and prescribe treatment accordingly.

### **Referrals to ENT Consultant**

If the problem persists, teachers should make a further appointment with their GP and discuss whether referral to an ENT consultant or laryngologist would be appropriate

### **Referrals to Speech and Language Therapist**

Following a consultation with an ENT specialist, a referral to a Speech and Language Therapist may be deemed appropriate.

### **Support from your Employer**

Advice and assistance should also be made available by employers through the occupational health service. Steps which employers might take to assist might include a voice therapy and also, for example, the provision of voice amplification equipment in appropriate circumstances.

## **CHECKLIST FOR USING THE VOICE**

Set out below is a brief summary of points to consider about the way teachers use their voices, possible problems which they may be causing for themselves and the way in which their working environment may contribute to these.

More detailed advice on these areas, in particular on speaking techniques, is available from the Voice Care Network (see end of guidance for contact details).

### **Voice and Speech Patterns**

It is important for teachers to:

- warm up their voice at the start of the day;
- focus their thoughts and make good use of key words;
- consider the effect their voice needs to have on the listener and aim for flexibility to reflect the changing moods they wish to convey;
- make use of pauses and silences to emphasise their meaning; and
- be aware of the symptoms of vocal fatigue and consult their doctor accordingly.

### **Relaxation**

Teachers may find it helpful to:

- practise relaxation techniques to ease whole body tension;
- before lessons, stretch and relax their facial muscles to release tension from their face and jaw; and
- take time to relax and let their voice recover after prolonged speaking, use 'cooling down' exercises and have a warm drink.

### **Posture**

- Teachers should be aware of their posture when speaking and consider how their postural alignment and degree of muscular tension affect the tone and resonance of their voice.

### **Breathing**

- Shallow 'upper chest breathing' can affect the tone and resonance of the voice. Teachers may find it useful to practice slower 'centred breathing' using the diaphragm, which will help their vocal quality and also release tension and recharge energy.

## **Pitch**

- It is a useful exercise for teachers to seek to find their optimum or natural pitch. by making a sound of agreement in their most relaxed state ('hm, hm'). The second sound is most likely to be very close to their optimum pitch. Practicing speaking flexibly on and around this level can be helpful.
- Although this may be hard to achieve, teachers should try not to pitch outside their comfortable range or shout to get attention. Instead, they should try using agreed signals and develop 'getting attention' routines using sound, visual and vocal signals.

## **Your Working Environment (Acoustics, Layout and Air Quality)**

- Teachers need to be aware of acoustics, space and classroom layout and how these can impact upon their voice and should consider how best to group their class for the task they are undertaking with regard to the acoustics and layout of the room.
- Wood, stone, ceramics, pottery, brick, metal and glass all reflect sound, while some large spaces produce echoes. Teachers should aim to speak more slowly with clear pronunciation rather than increasing the volume in such surroundings.
- A heavily furnished room with low ceilings and containing many people will absorb sound, meaning that voices have to work much harder, so teachers will need to maintain good posture and articulate words using the front of the mouth.
- Dust and fumes or dry atmospheres can affect the voice as well. Poor standards of cleaning, particularly in areas such as art or D&T rooms where particular materials such as clay, solvent-based glues etc are used, can affect air quality. Rooms need to be well ventilated. Humidity can be increased by introducing a few houseplants or by placing bowls of water near radiators.

## **Self Help for Vocal Fatigue**

- It is important to drink water frequently. Drinking six or eight glasses a day will help to keep the larynx moist, especially in hot dry atmospheres. Keeping a glass of water to hand during lessons will help as will a reduction in caffeine intake.
- For a mild sore throat, sucking fruit pastilles can help. Strong throat sprays, lozenges etc, which dry the larynx, should be avoided. It is important to rest the voice as much as possible and avoid whispering, as it is stressful for the larynx. Breathing steam rising from hot – but not boiling! – water can also be of benefit.

## FURTHER ADVICE AND HELP

Useful sources include:

- **Health and Safety Executive (HSE):** The HSE's website, [www.hse.gov.uk](http://www.hse.gov.uk) is a useful source for general advice on all areas of occupational health and safety.
- **Voice Care Network UK:** contactable on 01926-864000 or at VCN UK, Office No. 2, 10 Station Road, Kenilworth CV8 1JJ and [www.voicecare.org.uk](http://www.voicecare.org.uk). VCN UK is a national group of voice teachers and speech and language therapists professionally qualified and experienced in classroom and clinic. They provide advice and workshops on voice care, managing acoustics and extending skills in efficient use of voice. VCN UK can be emailed at [info@voicecare.org.uk](mailto:info@voicecare.org.uk).
- **Royal College of Speech and Language Therapists:** contactable on 020 7378 1200 or at [www.rcslt.org](http://www.rcslt.org) for support and help with voice problems.