Pedagogy and Coaching  Jeff Morrison, Associate Editor

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Introduction

As we know, the words that people use to describe the voices of others are many and varied, and like the description of wine, often use sensation and emotion vocabulary. Both wine and voices elicit strong personal opinions about what is liked or not liked. You are drinking a glowing white Californian Chardonnay with a friend and find it to be “light, fragrant and refreshing with a real taste of sunshine”. But your companion wrinkles her nose. “It’s a bit too dry” she says “and I don’t like those sandy rough undertones”.

Voice is a true two-way mind-body phenomenon, shaped by a speaker’s personality and emotions, together with the health, physique and usage of her body. But it also has a direct effect on the emotional and physical feelings of a listener. If a presenter’s voice is tense jawed and tight throated it is likely to affect the muscle tension of those who hear it, and we may notice members of an audience stretching their jaws in unconscious compensation. Conversely the open, warmly chest-resonant voice of a broadcaster may give listeners a physical sense of sensuality or relaxation.

As voice teachers we may have a sensory or emotional reaction to a voice, but our immediate job is that of translation, as we interpret that first impression into an understanding of what is emotionally and physically happening in a voice so that we can work appropriately.

Voice Client Example: When I met a 47 year-old pastor who was unhappy with his voice, I noticed that my immediate emotional reaction was that his voice gave an impression of being “dull and patronizing”. With conscious analysis it became clear that there were two main contributors:

- His pattern of excess jaw tension, and very limited movement of the jaw, lips and tongue, alongside a lack of variation in pitch and loudness was limiting the energy of his voice.
- His sentences tended to tail off with a falling pitch line, and he often produced a creaky quality as he ran out of breath on lengthy sentences. The sound conveyed a feeling that he was “speaking down” to his listeners as the energy dropped with each thought.

All three groups of voice practitioners (voice teachers/coaches, singing teachers and speech pathologists specializing in voice therapy) use a mix of words to describe voices, and they are often idiosyncratic to the individual professional. This rich pot-pourri of descriptive terms is inevitable for there is unlikely ever to be a universal terminology of voice. But a well-structured perceptual voice analysis can help communication with other professionals and evaluation of voice training; it can also illuminate the many contributors to a particular voice quality and point the way to appropriate action.

Of the three voice practitioner groups who work to change, develop or heal voices it is generally only the speech pathologists who regularly use some form of systematized way of charting and analyzing a person’s voice. As voice and speech teachers, we will always work with imagination, artistry, emotional connection and many other aspects of the professional voice that cannot be measured and structured into a system. This article however takes the view that a carefully structured listening scheme can be a valuable extra useful tool in practical voice work.
Formal Perceptual Voice analysis

In this specific kind of focused listening, we train to use particular terms within a carefully defined scheme to describe what we hear in a voice, and mark those observations onto some sort of protocol (a form or chart that lists the terms) rating each quality using a numerical system. So, for example, a perceptual scheme might use a term called “tight jaw quality”. It defines and assigns numerical ratings, so no tight jaw might be 0, mild is level 1, moderate level 2 and extreme would be classed as level 3. This kind of rating is called an equal-appearing scale; in a visual-analogue scale, listeners rate the quality by placing a mark somewhere along a ten-centimeter line, which can then be measured to produce a percentage score.

It is important that the terms used in a perceptual voice analysis are specifically defined, and there must be a numerical system of rating each aspect of voice, and reliable agreement between trained judges. Such analysis can be an effective tool to chart voice change over time. To continue the jaw example, at audition a young acting student might have a tight jaw level 2, but by the end of a year’s training, it might have dropped to a level 0. That numerical rating could form part of a series of figures shown to an academic or funding body to demonstrate the effectiveness of our work. We may hear the change as the actor physically connects to text, character and emotion, but figures provide hard evidence to those who require such proof. As part of a three-year research project at RADA (The Royal Academy of Dramatic Art) and LAMDA (London Academy of Music and Dramatic Art) in the UK, I have been coordinating a fine team of voice teachers to develop a tailor made perceptual voice assessment to evaluate students’ voices during training.

Speech scientists and voice clinicians increasingly use computers and sensitive equipment for acoustic evaluation to explore voices; these are rarely available to voice teachers. However the trained listening ear is still our most vital tool, for “there is as yet no instrument, no technique, no computer, that can begin to match the human auditory system for detecting acoustic variations, or for determining whether they reflect a variety of normal speech or something amiss in the speech system” (Baken and Orlikoff 2000). In formal perceptual voice analysis, we use an organized and tested listening tool to define and refine those auditory system strategies.

There are many different perceptual voice schemes in use around the world, but nearly all are deficit schemes for the clinically disordered voice. The GRBAS scheme (Hirano 1981) is widely used by speech pathologists since it is relatively simple and easy to learn, and has reasonable reliability with well trained judges (Webb et al 2004). The listener makes five judgments of vocal disorder severity for the overall level of voice disorder, along with the roughness, breathiness, aesthetic (weakness of power) and strain qualities of a voice, grading each on a 0 1 2 3 scale. The numbers correspond to a simple foursome of descriptive terms—normal, mildly affected, moderately affected, severely affected.

Voice Client example: In my role as a speech pathologist and therapist I saw a successful television broadcaster. He had developed voice problems after a long period of bronchitis and the laryngologist found that he had swollen and inflamed vocal folds. My assessment found that he had a severely impaired voice with marked roughness, moderate breathiness, slight weakness and significant strain, so his GRBAS rating was G3 R3 B2 A1 S3.

The CAPE-V (Consensus Auditory-Perceptual Evaluation of Voice) is a development from the GRBAS scheme and is increasingly used in the United States. Here six “salient perceptual vocal attributes” are rated: overall severity, roughness, breathiness, strain, pitch and loudness. Although its categories are similar to GRBAS, it is a visual-analogue rating scale. Listeners place a mark along a 100 millimeter-long line for each parameter, to correspond to their impression of how strong that feature of voice sounds to them.

So—for example—we would see a line (length not to scale) for the strain feature like this:

<table>
<thead>
<tr>
<th>Strain</th>
<th>MI</th>
<th>MO</th>
<th>SE</th>
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MI means Mild, MO means the aspect is moderate and SE indicates severity. Using a simple ruler, we can measure at what point the mark has been made on that 100 millimeter line, and note a corresponding percentage; so a mark 58 millimeters along (from left to right) gives a score of 58% in that particular voice.

Since both schemes are focused on voice pathology and present a limited view of a spoken voice, they are rarely useful for voice or singing teachers. Even in voice therapy their ratings do not offer guidance for the direction of specific exercises. In most formal description of abnormal voice quality the main focus is on phonation quality—what happens at laryngeal level—and of course the arts based voice practitioner recognizes that voice is sculpted by far more than simply vocal fold vibration.

Phonetician John Laver’s important work on the phonetic description of normal voice (1980) emphasized the need for a wider account of voice.

Voice Client Example: Three speakers may have a similar phonatory quality but sound very different. One speaker may habitually speak with a rather rounded lip position and carry...
his tongue low and back in his mouth; another’s lips may be much more spread, with a raised and forward tongue setting and some degree of pharyngeal tension, whilst a third may have a close jaw, marked nasal tone and a very variable pitch range.

Laver called these long-term habitual articulatory patterns settings, which shape the total sound of our voices. Together with his colleagues (two of whom were speech pathologists), he developed a formal scheme to analyze and record these long-term average vocal tendencies (Laver et al 1981). This could be used with a recording of any spoken voice, whether normal or abnormal. Listeners were trained how to identify and assign a numerical rating (or the carefully defined “neutral” setting) to very fine variations in a number of spoken voice parameters, and these were then noted onto a written form. He called the scheme the Vocal Profile Analysis Scheme (VPAS). (An example can be found in Shewell 2009 on page 67.)

The protocol form is complex, but some examples of the parameters will give an idea of the richness and variety of the scope of the VPAS. Labial (lips) setting is rated according to the degree of roundness or lip spreading, the relationship of top teeth to lower lip quality and the range of lip movement. Mandibular (jaw) setting is rated on the degree that it is closed or open, the amount of jaw protrusion and the range of jaw movement. The habitual carriage of the tongue body varies between speakers according to where it mostly lies within the mouth space, and this is rated along the front-back and raised-lowered dimensions, and according to its range of movement as it shapes vowels and consonants. Listeners also judge the soft palate patterns according to the audible nasal or denasal resonant tone, and the levels of audible pharyngeal constriction and laryngeal tension or laxness. Vocal fold phonation qualities of harshness, whisper or creak are rated, along with a range of prosodic aspects such as loudness and pitch.

Such careful listening and identification helps both understanding and planning in voice work, but reliable interjudge agreement is important in any formal perceptual voice scheme. The number of parameters and fine number judgments in the VPAS does result in less reliable interjudge agreement than the GRBAS scheme. However training can improve perceptual judgment agreement, as was shown in my own research with 38 speech pathologists who improved in their ability to rate VPAS parameters (Shewell 1998). Although the scheme offers important insights that are relevant to training the spoken voice, and to dialect work (Shewell 1991), its detail and complexity mean that the system in its full form rarely appeals to voice teachers.

The Development of the Voice Skills Perceptual Profile
In my dual career as speech pathologist and voice teacher, I have taught formal perceptual voice analysis to many voice practitioners, and was on a British Voice Association committee that reported on its use in clinical work (Carding et al 2001). As part of my interest in the common ground of voice work, the committee members agreed there was a need for a voice assessment tool that would be useful to any voice practitioner, and I undertook to explore this idea.

My aim was to use the best points from the GRBAS and VPAS, but to develop a listening tool that would be comprehensive in its description of both normal and abnormal voice, would point a voice practitioner towards a direction for voice work and would generate a numerical score if needed. It would answer the question: what have we here and what shall we do?

The Voice Skills approach was the result. It is based on the core idea that spoken voice extension (in acting and public speaking) and healing (in voice disorder remediation) involves practical work that may include all or any of eight core voice skill dimensions. These are implicitly designed to lead to some sort of notion of the free voice, which I defined in terms of the eight contributing parameters.

1. It is based in a BODY that is as free as possible from habitual unhealthy postures and excess tension.
2. It is powered by BREATH that flows from the lower chest area rather than the upper chest, and can support a variety of physical and vocal activities.
3. It has a passage through the CHANNEL with appropriate settings of face, lips, jaw, tongue, soft palate, pharynx and larynx and no excess muscle constriction.
4. It has PHONATION that will vary appropriately according to mood and energy but is not excessively rough, breathy or creaky, nor will the quality significantly change with demanding voice use.
5. It has an appropriate balance of head, oral and chest RESONANCE qualities with an appropriate forward “placing” in the mouth.
6. It has an appropriate centre PITCH with flexible range for any emotional, semantic or vocal need.
7. It has a flexibility of LOUDNESS for emphasis, variety and different situations, with an appropriate power support.
8. It is shaped into appropriate words by clear, energetic ARTICULATION of vowels and consonants, with appropriate pace, pause, fluency and rhythm.

These parameters can be considered as both perceptual and functional vocal aspects. They are, of course, intertwined strands and spirals that work together with personality, emotion and spirit; viewing them as separate aspects is simply a way of looking. However, when appropriate, the eight aspects...
do lead to the notion of distinct areas of voice on which we can
turn the light of our attention and the energy of our action. The
title “Voice Skills” was chosen as it is a familiar and common
sense term that implies the notion of a learnt and practiced
ability—something that is part of all voice development work.
It also avoids any mistaken emphasis on the idea of a Method.

The Voice Skills approach uses those eight skill parameters as a
template, and offers two options. In the Voice Skills Framework
version the listener notes personal observations (using her own
descriptive terminology) under a carefully defined, consistent
and comprehensive set of headings; this gives useful qualitative
information to guide the direction of appropriate voice work for
a client. In the full Voice Skills Perceptual Profile the practitioner
records both qualitative and quantitative judgments on the same
form, so that simple numerical judgments can generate quanti-
tative information for comparisons over time and research.

1. The Voice Skills Framework
The Framework offers a simple format of headings and sub-head-
ings that allows the practitioner to note down key observations,
explorations and client comments under the eight core aspects.
It includes a section at the end of the form for action planning.
On training courses, I describe the Framework as a kind of
auditory filing system to organize what is heard and seen in a
voice. This may simply guide quiet thoughts as we sit in a rehearsal
room, trying to work out the technical vocal dimensions that
are contributing to an actor’s struggles to be lucid, connected
and powerful. It helps us take a thorough view as we simply
think down the list. If we use it in written form, we can share
those notes with the client or with a colleague who takes on
the voice work with that person.

This is an example of how it was used with a young actor; my
notes are written in the present tense as I listened to an audio
recording after the session.

Name of Client: William  Age: 27
Date of Assessment: April 2007

Presenting voice issue in his own words: “I’ve got a tendency
to push my voice too much; I recognize it but can’t seem to sort
out. The director keeps telling me that I’m not clear enough,
not energized enough, but by the end of a long rehearsal I feel
an actual ache in my throat. Sometimes I feel the voice
becoming real tight. I know what to do but can’t seem to get
what’s needed”.

Current Demands: half way through four-week rehearsal
period, playing Trovimov in a major theatre production of The
Cherry Orchard.

Additional background: William has had a three-year well-
taught actor-training course. He has done lots of TV and film
work since graduation, but little stage work.

1. BODY Posture, Movement, Muscle Tension, Vocal Tract
Sensation, Health and Body
No obvious postural problems, but says he has some lower back
problems from an old basketball injury. Occasional chin-poking
when he raises his volume level. His shoulder muscles felt very
tight, and I could feel this also in the side of his neck and round
his larynx; he says he often feels tight around the larynx after
strong voicing. Does weight training twice a week.

2. BREATH Placing and Control
Able to sustain breath control in assessed task: sustained sss =
35 seconds  zzz = 30 seconds. Upper chest pattern of breath
visible when talks in ordinary conversation. William is aware
that he does not use lower breath/abdominal muscles to sup-
port his ordinary spoken communication.

3. CHANNEL Face, Lips, Jaw, Tongue, Soft Palate,
Pharyngeal and Laryngeal
Although all consonants and vowels are clear there is a sense of
lack of articulatory energy. Lips have extensive movement, and
general jaw setting does not seem tense or close but there is a
limited range of jaw movement. Also true in William's tongue
body, which sounds rather sluggish. Slightly excess laryngeal
tension is audible.

4. PHONATION Rough, Breathy, Creak Qualities,
Phonatory Stamina and other features
Mostly sounds fine—except when he raises his loudness level,
at which point I can hear a tendency to increased roughness
and hard onset on vow els.
Vocal stamina problem as he says that his voice feels tired after
rehearsal, and also even after a loud evening of socializing.

5. RESONANCE Features of Head, Oral and Chest
Resonant Quality and Focus of Oral Placing
A nice warm resonance with lots of chest quality, but slightly
lacking in any forward resonance and the ring of head resonant
quality that is needed for the voice to carry over noise or space.

6. PITCH Centre, Range and Intonation Patterns/Variety
All fine.

7. LOUDNESS Overall loudness level, Variety and
Control, and use in Emphasis
Definite throat/laryngeal constriction when raises vocal loud-
ness level and also tends to poke his chin out. Good loudness
variety and use of emphasis, a great impression of energy.
8. ARTICULATION Consonant and Vowel Clarity, Pace, Pause, Fluency, Rhythm

Fast, lively speaking pattern, consonants and vowels clear but sometimes slightly mumbled impression.

Relevant Aspects For Voice Work

Loosen up work on whole body, particularly shoulders and neck. Self-massage.

Check he releases breath in weight training rather than “locks” in larynx.

Work to improve William’s head/neck alignment, to prevent head extension as increases his loudness.

Work to establish lower breath placing and support for ordinary conversation so that this is organically and naturally available in dramatic speaking on stage.

Work on jaw and tongue body movement, in sensory awareness and lively articulation exercises designed to increase clarity and open voice quality. Show him laryngeal deconstriction options. Bring oral resonant quality forward; work on lip tingling and vowel intoning, and maybe experiment with the ring quality so he can use this if necessary when very tired.

Work on the idea of vocal power and energy with good body and breath support.

Also play with speech sound consonant energy, again bringing the sound forward and out.

There is unlikely to be much that is unfamiliar to you in this description, for these comments are typical of voice teacher notes. What the Framework supplies however is a consistent way to check through and record individual features of the same important vocal characteristics for every client. That way, fewer things are missed, and that ensures that work is not confined to one or two most obvious areas.

The Full Voice Skills Perceptual Profile

The full Voice Skills Perceptual Profile (VSPP) is for the listener who wants to follow a systematic step-by-step approach through the eight core parameters with specific tasks and questions, most of which can generate numerical ratings. As you will see in the two forms below, there is space on the left side of the pages for descriptive comments, with a three-point rating scale on the right. The VSPP should be done on a recording from a good quality DVD recording of a session, as it takes time to review and accurately judge the different parameters. Even using an audio recording from a high quality device such as a professional two-channel solid-state digital recorder enables hard data to be kept for future reference or teaching purposes.

A feature is rated “mildly significant” if the assessor judges it to be clearly present but not necessarily or immediately needing practical work. The average pitch of a presenter’s speaking voice may be judged as mildly low for a woman of her age and size, but not significant enough to need practical work. An actor may have a slightly rough conversational phonation quality that we rate as 1; although she may have to reduce this to play a particular character, it can be quite acceptable in her own voice. If a feature is rated as 2, markedly significant, it is clear that work will certainly be needed on this aspect of voice. The individual VSPP aspect ratings can then be added together to create a pragmatic total number.

The two figures below (see appendix after article) demonstrate how the full VSPP can capture significant detail of a speaker’s vocal use, and the way it changes with appropriate voice work.

Andy: Politician

Andy was a 34-year-old British politician who wanted to improve the impact of his speeches. His voice had been described by a colleague as, “boring and droning on”, and his Voice Skills Framework illuminated some of the factors contributing to that impression. With a background in research science, he liked the idea of actually measuring change, so we decided to use the VSPP. Figure 1 shows how he came across at our first meeting, whilst figure 2 shows how he changed over a period of nine months.

Practical voice work followed the areas identified in the profile, and over the course of six two-hour sessions, Andy made excellent progress. We used both DVD and audio recording to give him opportunities to see and hear himself, and I also made him an individual CD for practice on long car journeys. As his own words demonstrate on the second VSPP, he was delighted with his progress.

Evaluation

In 2005 I carried out a small scale pilot study with 13 mixed voice practitioners to investigate whether training could improve their agreement in the VSPP numerical ratings, and to explore if they would find the VSPP scheme useful to their work (Shewell 2005). Voice teachers, speech pathologists and one singing teacher completed a two-day training in the VSPP. Film of two clients (A and B) was shown at the start of the course and two different clients (C and D) were shown at the end. In each pair, one was a client with a voice disorder and the other was working on presentational vocal style. The practitioners were asked to describe and rate each client on all VSPP parameters. Their total scores were compared with the scores previously agreed by the author and another VSPP trained voice practitioner.

Figure 3 shows some simple numerical scores that compare the subjects’ ratings of four clients with those of the author and
the other trained voice teacher. They suggest that ratings agreement between the voice practitioners can improve with training, and that there is at least potential for reasonable VSPP agreement amongst trained judges. Further investigation with larger numbers is now needed.

The subjects also completed a questionnaire about the usefulness of the VSPP to their work; 12/13 rated the VSPP as very useful as an assessment tool with clients and 11/13 rated it as very useful as a tool to plan training or therapy with clients.

Specific voice teacher comments included:
Voice Teacher 1: “It encourages you to commit to a judgment because the qualitative and quantitative sections encourage more reflection and analysis. It is user friendly; the headings/parameters are clear and observe a basic progression.”
Voice Teacher 2: “As everything is interconnected, all eight headings are relevant, and as a general assessment, these allow for a consideration of issues that might not have occurred it me or to the client. I am now using it with clients, and I like that they themselves can get insights through the process.”

Conclusion
The Voice Skills approach continues to be taught to mixed groups of voice practitioners who include voice teachers, singing teachers and speech pathologists, and is increasingly well received and used in the UK.

Voice teachers use many skills in their work with spoken voice development, involving text, imagination, movement, psychological understanding and intuition. Formal analysis can also be part of the repertoire of voice work, and indications are that with appropriate clients, the VSPP is a user friendly and effective additional tool. Just as learning to identify particular birds in a vast flock helps us to see more precisely, so learning to recognize and name the fine detail of varied auditory qualities helps us to hear more to tune in our ears to the possible contributors to a voice.

<table>
<thead>
<tr>
<th>VSPP Interjudge Rating Results</th>
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<tr>
<td>(Number of subjects: 13)</td>
</tr>
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</table>

**BEFORE Training in the VSPP**

**Practitioners’ Ratings on Client A (with voice disorder)**

Author/expert’s agreed total VSPP score = 15
Subjects’ total score (averaged from whole group) = 23
Difference between author score and average subject score = 8
Subjects’ range of total VSPP scores = 51 (6 – 57)

**Practitioners’ Ratings on Client B**

(With vocal problems in business presentation)

Author/expert’s agreed total VSPP score = 23
Subjects’ total score (averaged from whole group) = 30
Difference between author score and average subject score = 7
Subjects’ range of total VSPP scores = 33 (19 – 52)

**AFTER Training in the VSPP**

**Practitioners’ Ratings on Client C (with voice disorder)**

Author/expert’s agreed total VSPP score = 20
Subjects’ total score (averaged from whole group) = 17
Difference between author score and average subject score = 3
Subjects’ range of total VSPP scores = 12 (10 – 22)

**Practitioners’ Ratings on Client D**

(With vocal problems in business presentation)

Author/expert’s agreed total VSPP score = 12
Subjects’ total score (averaged from whole group) = 9
Difference between author score and average subject score = 3
Subjects’ range of total VSPP scores = 9 (4 – 13)

The Voice Skills Perceptual Profile: A Practical Tool for Voice Teachers
by Christina Shewell MA, Reg.MRCSLT, ADVS. (continued)

The subjects also completed a questionnaire about the usefulness of the VSPP to their work; 12/13 rated the VSPP as very useful as an assessment tool with clients and 11/13 rated it as very useful as a tool to plan training or therapy with clients.

Specific voice teacher comments included:
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**VOICE SKILLS PERCEPTUAL PROFILE: DESCRIPTIVE AND QUANTITATIVE**

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<table>
<thead>
<tr>
<th>Name of client: ANDY</th>
<th><strong>Voice Issue:</strong> Feels his voice is not lively or energetic enough in his work as a politician, in presentations or meetings. ‘Dull sound.’</th>
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<td>Date of assessment</td>
<td><strong>ENT findings:</strong> (if relevant)</td>
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<td><strong>ENT findings:</strong> (if relevant)</td>
</tr>
<tr>
<td>Assessor: CS</td>
<td><strong>Assessor:</strong> CS</td>
</tr>
</tbody>
</table>

Start recording the session from here.

**CLIENT’S OWN WORDS ABOUT VOICE** *(write down exactly what is said)*

**Question:** Can you describe the sound and feeling of your voice, and why you are here?

‘I know I don’t come across with enough ‘oomph’ in my presentations; a colleague once told me that he didn’t feel I sounded as if I’m really interested in what I’m saying – or why - even though I come across as fluent and intelligent. On recordings I can hear I sound boring – just droning on and on. Oh, and my voice sounds thin to me.’

**CONVERSATION, AND READING OR SPEAKING A TEXT.**

Ask the client to tell you about something pleasant e.g. an interesting project, holiday or experience; offer brief comments or questions if you feel this will make the speaking more natural. Unless reading is a problem, ask the speaker to read a short passage; if assessing a performer, this may be an already learned text.

Ask the speaker to rate his/her own voice, and then later add your own rating.

**WHOLE VOICE RATINGS**

<table>
<thead>
<tr>
<th>Whole Voice: Client’s Perception</th>
<th>Andy</th>
<th>0 1 2 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Whole Voice: Voice Practitioner’s Perception</td>
<td>CS</td>
<td>0 1 2 3</td>
</tr>
</tbody>
</table>

**VOICE SKILLS FEATURES OF VOICE**

**DEFINITION OF A FEATURE: when the specified aspect of voice is judged by the assessor as being a relevant and possibly negative contributing factor to the overall voice, which may indicate a direction for voice work.**

**NUMERICAL RATINGS**

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
<th>Practical Work Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No Significant Features.</td>
<td>No practical work needed on this aspect.</td>
</tr>
<tr>
<td>1</td>
<td>Mildly Significant Features.</td>
<td>Some practical work possibly needed on this aspect.</td>
</tr>
<tr>
<td>2</td>
<td>Markedly Significant Features.</td>
<td>Significant practical work definitely needed on this aspect.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td><strong>1. BODY</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| 1.a | Posture/Movement: Observe and rate. Ask about musculo-skeletal issues.  
Tendency to stand very stiffly and hands behind back when presenting,  
with facial expression in ‘earnest’ mode. |   |   | 1 |
| 1.b | Shoulder, neck and extrinsic laryngeal muscle tension: Feel and rate.  
No particular excess tension in these muscles but A says he often feels very tight in this area  
after a long days work or before major presentation. |   |   | 0 |
| 1.c | Vocal tract sensation: Speaker to rate on severity & frequency of discomfort.  
Sensation of tightness and dryness if ever nervous. |   |   | 1 |
| 1.d | Overall physical/emotional tension: Speaker to rate on 1–10 scale (0=0-4; 1=5-7; 2=8-10).  
Describes himself as easy going and rarely very uptight, so long as no particular crisis! |   |   | 0 |
| Any other comments: (general health, past illness or accidents, exercise and fitness etc).  
Good general health, no accidents, plays squash and runs 3X a week. |   |   |   |   |
| **2. BREATH** |   |   |   |   |
| 2.a | Placing: Observe in conversation, and Task: Ask client to count 1–10 five times, quickly and quite loudly.  
Upper chest, but adequate for speaking |   |   | 0 |
| 2.b | Control: 0=15 or more seconds; 1=8-14 seconds; 2=1-7 seconds.  
Task: Sustained sssssss. 26 seconds  
Task: Sustained zzzzzzz. 32 seconds |   |   | 0 |
| 2.c | Ability in conversational speaking to sustain adequate breath support, to help prevent laryngeal strain.  
(Optional Task: Reading or repeating graded length sentences.)  
No problems. |   |   | 0 |
| **3. CHANNEL/VOCAL TRACT** |   |   |   |   |
| 3.a | Lips: Rate on range of movement and apparent tension, and describe the 'setting' tendency.  
Appearance of ‘stiff upper lip’ and limited range of lip movement,  
contributes to his rather ‘dead-pan’ facial expression. |   |   | 1 |
| 3.b | Jaw: Rate on degree of open or close setting, and on apparent or described excess tension.  
Close setting, minimised range of movement and an impression of clenched jaw. |   |   | 2 |
| 3.c | Tongue: Rate on the range of movement and apparent tension,  
and describe front/back and close/open settings.  
Scottish accent. Forward placing, adequate range of movement. |   |   | 0 |
| 3.d | Soft palate: Rate on adequacy of audible open/closure setting.  
Nil relevant. |   |   | 0 |
| 3.e | Pharyngeal Constriction: Rate on whether audible constriction.  
Slight pharyngeal constriction, but not abnormal or unpleasant quality. |   |   | 1 |
| 3.f | Laryngeal: Rate on larynx position and laryngeal muscle tension/laxness.  
Listen for frequent audible inhalation.  
No apparent constriction/strain in habitual voice but occasionally slight in the raising voice task. |   |   | 0 |
4. **PHONATION**

Observe in conversation, and Additional Task: Ask the speaker to intone a long vowel on eeeh, aaaah, or oooh.

<table>
<thead>
<tr>
<th>4.a</th>
<th>Rough Quality.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Slightly, but well within normal limits.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4.b</th>
<th>Breathy Quality.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>None.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4.c</th>
<th>Creak Quality.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Slightly, well within normal limits.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4.d</th>
<th>Phonatory Stamina: Ask the speaker to describe their vocal stamina through a day, evening, week or vocally demanding performance, and rate accordingly.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Says he feels his voice is tired after long day talking.</td>
</tr>
</tbody>
</table>

**Other Comments (e.g. hard or breathy onset, aphonic whisper, aryepiglottic involvement, tremor, diplophonia, etc)**

5. **RESONANCE**

<table>
<thead>
<tr>
<th>5</th>
<th>Balance of Head/Chest resonance quality.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Excess head resonant quality - could do with more ‘warmth’ of chest resonance; impression of a slightly ‘whining’ tone – probably what he hears as ‘thin’.</td>
</tr>
</tbody>
</table>

*Option to comment on auditory impression of the focus of ‘oral placing’.*

**Optional Task: Ask the speaker to hum on a long mid pitch mmmmm, and to tell you if they feel any tickle or tingle between the lips.**

Can feel tickle sensation – voice sounds forward placed.

6. **PITCH**

<table>
<thead>
<tr>
<th>6.a</th>
<th>Centre/ Mean pitch: Rate on whether too high or low for age and gender.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Centre Low mean – no problem.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6.b</th>
<th>Range: Highest to lowest pitch.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Task: Demonstrate and ask the speaker to produce a glide and siren on eeeh, and to speak up a scale on ‘hey’.</td>
</tr>
<tr>
<td></td>
<td>Limited range of high and low variations in presenting speech – slightly monotonous.</td>
</tr>
<tr>
<td></td>
<td>Glide is fine.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6.c</th>
<th>Variety of intonation patterns.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Tends to have odd rather repetitive falling line at end of sentences.</td>
</tr>
<tr>
<td></td>
<td>Says he lived in Northern Ireland in his early teens – possible link to that dialect’s falling line?</td>
</tr>
</tbody>
</table>
7. **LOUDNESS**

7.a **Overall loudness level.**
   Somewhat low average loudness level.

7.b **Variety in loudness (including use of emphasis).**
   Little variety in either conversational or presentation contexts.
   Not enough use of word or key point emphasis, given the importance and specificity of some of the information he has to give in presentations.

7.c **Power Source.**
   Task: 3 ‘heys’ at 3 loudness levels, and calling, to assess whether breath support and/or throat constriction. (Optional Task: Demonstrate and ask speaker to crescendo on a long vowel, staying on one pitch.)
   Slight ‘push’ when raises volume level – impression of not using enough breath to ‘play’ the voice in terms of energy variety.

8. **ARTICULATION**

8.a **Consonants.**
   Consonants crisp and clear.

8.b **Vowels.**
   Vowels tend to be ‘smothered’ by tight jaw.

8.c **Pace.**
   Very fast and little variation

8.d **Pause.**
   Very few in conversation or presenting.

8.e **Rhythm.**
   Occasionally slightly ‘jerky’ delivery – when nervous or thinking on feet.

8.f **Fluency.**
   Fine.

**TOTAL VOICE SKILLS SCORE FOR 31 FEATURES:**

| Total | 22 |

**ANY OTHER RELEVANT OBSERVATIONS OF THIS SPEAKER’S VOICE USE**

(Use of words or images, apparent confidence, emotional connection to text, etc)

Voice gives little impression of warmth or energy. Nice humorous energy when chatting to me, need to bring that into the more formal presentations he is increasingly having to do. Says he was very shy at school, and that he sometimes feels he is ‘conning’ everyone that he has become quite successful comparatively young. Wide vocabulary and occasional vivid image in expression, gives impression of fluent intelligence, just rather dull delivery of message.

**RELEVANT VSPP ASPECTS FOR VOICE WORK**

Body work to ‘loosen Andy up’ in terms of the physical energy he both feels and conveys as he talks, focusing on standing posture, he wants to use this position more often. Work on posture for stronger presence impression. Use both mirror and video to explore new options. Use same with facial expressions, work on the image of ‘light behind the eyes’. Water intake may be relevant for general hydration levels, check? Lip and Jaw work, and ‘throat release’ work as part of work to open up the chest resonance to help use sound to give impression of warmth and authority. Pitch range and variety work, tune him in to the falling line, and explore options. Volume variety work, introduce idea of that as being able to ‘play the energy’ Practise pause. Practise emphasis. Work on fast/slow speed variety.

---

*Figure 1 (continued)*
VOICE SKILLS PERCEPTUAL PROFILE: DESCRIPTIVE AND QUANTITATIVE
© Christina Shewell

Name of client: ANDY
Voice Issue: Feels his voice is not lively or energetic enough in his work as a politician, in presentations or meetings. ‘Dull sound.’

Age/date of birth: 34

Date of assessment
SECONd VSPP: November 2006

ENT findings: Not applicable.
(if relevant)

Assessor: CS

CLIENT’S OWN WORDS ABOUT VOICE (write down exactly what is said)

Question: Can you describe the sound and feeling of your voice, and why you are here?
I have had an opportunity to practice my ‘impact’ in a variety of contexts and all have gone well. The sessions have been really helpful in changing the pace and energy in my public talks and meetings. I’ve actually felt more energetic, and feedback has been great. I’ve also enjoyed my new and deeper chest sound – very manly! Altogether I feel and sound much stronger and more varied.

CONVERSATION, AND READING OR SPEAKING A TEXT.

Ask the client to tell you about something pleasant e.g. an interesting project, holiday or experience; offer brief comments or questions if you feel this will make the speaking more natural. Unless reading is a problem, ask the speaker to read a short passage; if assessing a performer, this may be an already learned text.

Ask the speaker to rate his/her own voice, and then later add your own rating.

WHOLE VOICE RATINGS

0 = No problems  1 = Slight Problems  2 = Moderate Problems  3 = Severe Problems
(Circle relevant number)

WHOLE VOICE: CLIENT’S PERCEPTION
Andy 0 1 2 3

WHOLE VOICE: VOICE PRACTITIONER'S PERCEPTION
CS 0 1 2 3

VOICE SKILLS FEATURES OF VOICE

DEFINITION OF A FEATURE: when the specified aspect of voice is judged by the assessor as being a relevant and possibly negative contributing factor to the overall voice, which may indicate a direction for voice work.

NUMERICAL RATINGS

0  No Significant Features.  No practical work needed on this aspect.
1  Mildly Significant Features.  Some practical work possibly needed on this aspect.
2  Markedly Significant Features.  Significant practical work definitely needed on this aspect.
### 1. BODY

1.a  **Posture/Movement:** Observe and rate. Ask about musculo-skeletal issues. Much improved – a real sense of movement and energy now – more willing to smile and generally a ‘lighter’ feeling to his whole presentation.

1.b  **Shoulder, neck and extrinsic laryngeal muscle tension:** Feel and rate. As before – but A says does not feel tight after talking now, as is more confident and physically less tense.

1.c  **Vocal tract sensation:** Speaker to rate on severity and frequency of discomfort. Reports he still has occasional sensation of tightness/dryness if ever nervous, but generally tells me he is less often nervous now.

1.d  **Overall physical/emotional tension:** Speaker to rate on 1–10 scale (0 = 0–4; 1 = 5–7; 2 = 8–10). As before – generally feels fairly relaxed in ordinary life.

**Any other comments:** (general health, past illness or accidents, exercise and fitness etc). Continues to be fit and active.

### 2. BREATH

2.a  **Placing:** Observe in conversation, and Task: Ask client to count 1–10 five times, quickly and quite loudly. Upper chest, but adequate for speaking.

2.b  **Control:** 0 = 15 or more seconds; 1 = 8–14 seconds; 2 = 1–7 seconds.

   **Task:** Sustained sssssss. 23 seconds

   **Task:** Sustained zzzzzzz. 23 seconds (less than before-, but says he is slightly hung-over today!)

2.c  **Ability in conversational speaking to sustain adequate breath support, to help prevent laryngeal strain.** (Optional Task: Reading or repeating graded length sentences.) No problem.

### 3. CHANNEL/VOCAL TRACT

3.a  **Lips:** Rate on range of movement and apparent tension, and describe the ‘setting’ tendency. Increased range of movement and facial energy generally.

3.b  **Jaw:** Rate on degree of open or close setting, and on apparent or described excess tension. Better, in that less close and more range of movement, but could open up further!

3.c  **Tongue:** Rate on the range of movement and apparent tension, and describe front/back and close/open settings. As before, pleasant Scottish accent – Perthshire. Forward placing, adequate range of movement.

3.d  **Soft palate:** Rate on adequacy of audible open/closure setting. Nil relevant.

3.e  **Pharyngeal Constriction:** Rate on whether audible constriction. Only slight and occasional pharyngeal constriction – much less apparent as ‘throat’ sounds more open.

3.f  **Laryngeal:** Rate on larynx position and laryngeal muscle tension/laxness. Listen for frequent audible inhalation. Still slight tendency to tighten when raises volume to high level but within normal range and only slight laryngeal constriction in speaking – work not essential but could be protective.

---

Figure 2 (continued)
4. PHONATION

Observe in conversation, and Additional Task: Ask the speaker to intone a long vowel on eeh, aaah, or oooh.

| 4.a | Rough Quality.  
Slightly rough but not a problem, as well within normal limits and part of his phonation quality. | o |
| 4.b | Breathy Quality.  
No. | o |
| 4.c | Creak Quality.  
Slight–within normal limits but could give impression of tension towards the end of sentences/thoughts. | 1 |
| 4.d | Phonatory Stamina: Ask the speaker to describe their vocal stamina through a day, evening, week or vocally demanding performance, and rate accordingly.  
Says rarely now aware of vocal fatigue after long talking. | o |

Other Comments (e.g. hard or breathy onset, aphonic whisper, aryepiglottic involvement, tremor, diplophonia, etc)  
Nothing of any note.

5. RESONANCE

| 5 | Balance of Head/Chest resonance quality.  
Much better, resonance sounds more balanced with chest resonance opened up.  
I have suggested further work on his own as still tends to go into slight ‘whine’ at times. | 1 |

Option to comment on auditory impression of the focus of ‘oral placing’.  
Optional Task: Ask the speaker to hum on a long mid pitch mmmmm, and to tell you if they feel any tickle or tingle between the lips.  
Feels active ‘tickle’ - nothing particular to note here.

6. PITCH

| 6.a | Centre/ Mean pitch: Rate on whether too high or low for age and gender.  
Slightly low mean – no problem. | o |
| 6.b | Range: Highest to lowest pitch.  
Task: Demonstrate and ask the speaker to produce a glide and siren on eeeeh, and to speak up a scale on ‘hey’.  
Markedly wider range –reported that occasionally in practice after work, went too far and felt he sounded slightly manic! Now settled to a natural sounding and lively wider range. | o |
| 6.c | Variety of intonation patterns.  
Still quite frequent ‘falling lines’, but not a problem now as much more intonation variety.  
This definitely contributes to increased impression of energy. | o |
7. **LOUDNESS**

| 7.a  | Overall loudness level. Overall higher loudness level with better impression of power. |
| 7.b  | Variety in loudness (including use of emphasis). Much improved variety of loudness, which has greatly improved energy and interest in A's presentations. Now marks key facts if uses script, to make sure he gives them enough emphasis. |
| 7.c  | Power Source. Task: 3 ‘heys’ at 3 loudness levels, and calling, to assess whether breath support and/or throat constriction. (Optional Task: Demonstrate and ask speaker to crescendo on a long vowel, staying on one pitch.) Still slight impression of ‘push’ but improved – we have discussed A doing further work to further improve breath/sound energy co-ordination. |

8. **ARTICULATION**

| 8.a  | Consonants. Consonants crisp and clear. |
| 8.b  | Vowels. Vowels sound ‘fuller’ as jaw freer. |
| 8.c  | Pace. Better – slower and more variety – but still ‘rushes away with himself’ at times – will try to stay aware of this tendency. |
| 8.d  | Pause. Improved, but still needs to trust that he allow more use of pause to allow particularly dense financial facts and figures to be ‘digested’ by listeners. |
| 8.e  | Rhythm. Smoother – more confident. |
| 8.f  | Fluency. Fine. |

**TOTAL VOICE SKILLS SCORE FOR 31 FEATURES:**

| Total = 8 |

**ANY OTHER RELEVANT OBSERVATIONS OF THIS SPEAKER'S VOICE USE**

(Use of words or images, apparent confidence, emotional connection to text, etc)

The voice work we have done has by its nature a lot of ‘play’ in it and Andy has enjoyed this, and been willing to take risks. He feels that it has given him more confidence.

We have used a DVD recorder at times, so that he can see that what he feels to be an extreme jaw opening, or width of pitch range, actually sounds fine, and gives the impression of more energy and impact – exactly what he has wanted.

Andy has followed my suggestions that he talk in the car when driving alone, to practice and naturalise the new voice skills.

**RELEVANT VSPP ASPECTS FOR VOICE WORK**

Andy has done very well with the six sessions over this nine-month period. He says that he plans to continue to work further on issues of:

- Jaw release
- Chest resonance
- Use of pauses.

It may well be that he does not push himself to work on these areas, as he is very pleased with the changes he has achieved, but that is fine. We do not need more sessions.