



July 8, 2024

The Honorable Tom Cole  
Chair, Committee on Appropriations  
United States House of Representatives  
H-307, The Capitol  
Washington, DC 20515

The Honorable Rosa DeLauro  
Ranking Member, Committee on Appropriations  
1036 Longworth House Office Building  
United States House of Representatives  
Washington, DC 20515

Dear Chairman Cole and Ranking Member DeLauro:

On behalf of the American Speech-Language-Hearing Association (ASHA), I write to share our opposition to Section 247 of the Labor, Health and Human Services, Education, and Related Agencies Appropriations Act, 2025, which would restrict access to gender-affirming voice therapy provided by speech-language pathologists (SLPs).

ASHA is the national professional, scientific, and credentialing association for 234,000 members, certificate holders, and affiliates who are audiologists; SLPs; speech, language, and hearing scientists; audiology and speech-language pathology assistants; and students. SLPs identify, assess, and treat speech, language, swallowing, and cognitive-communication disorders.

Providing gender-affirming voice therapy is within an SLP's scope of practice and may be done independently or as part of an interprofessional team focused on providing services related to vocal health and communication.<sup>1</sup> SLPs can help patients safely modify their voice and communication behaviors—including verbal and nonverbal communication, such as vocal pitch, intonation, voice quality, resonance, fluency, articulation, pragmatics, and vocalization (e.g., laughing)—through evidence-based interventions and patient-focused functional goals.

Gender-affirming voice therapy does not require surgery—though the services SLPs provide can support recovery from some surgical procedures—or medication but simply helps individuals learn strategies, techniques, and exercises to more closely align their communication with their gender or gender expression. Studies indicate that a voice that is incongruent with gender identity can negatively impact quality of life, in addition to attracting unwanted attention and risking personal safety.<sup>2,3</sup> Without proper guidance and treatment, modifying usual pitch, adopting new mouth shapes, or producing the voice in a different way than usual (e.g., increasing volume) can be arduous and potentially damaging, leading to problems like vocal fatigue, dysphonia (altered vocal quality), vocal cord nodules, polyps, or scarring.

ASHA is concerned with efforts to inhibit patient access to gender-affirming care and attempts to specifically restrict the ability of SLPs to provide services within their scope of practice. We believe that all individuals, including those who are transgender and gender-nonconforming and people with disabilities, have a right to bodily autonomy, self-determination, and equal access to health care.

Therefore, **ASHA opposes Section 247, which would broadly prevent the use of funds appropriated by the Act for “social transitioning.”** This provision could preclude access to gender-affirming voice therapy provided by SLPs, leading to adverse physical impacts and higher health care costs.

If you or your staff have any questions, please contact Eric Masten, ASHA's director of federal affairs, education, at [emasten@asha.org](mailto:emasten@asha.org).

Sincerely,

A handwritten signature in black ink that reads "Tena L. McNamara". The signature is written in a cursive style with a large initial "T" and "M".

Tena L. McNamara, AuD, CCC-A/SLP  
2024 ASHA President

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<sup>1</sup> American Speech-Language-Hearing Association. (2016). *Scope of practice in speech-language pathology* [Scope of Practice]. <https://www.asha.org/policy/sp2016-00343/>

<sup>2</sup> Nobili, A., Glazebrook, C., and Arcelus, J. (2018). *Quality of life of treatment-seeking transgender adults: a systematic review and meta-analysis*. *Reviews in Endocrine and Metabolic Disorders*, 19(3), 199-220.

<sup>3</sup> Oates, J. and Dacakis, G. (2015). *Transgender Voice and Communication: Research Evidence Underpinning Voice Intervention for Male-to-Female Transsexual Women*. *Perspectives on Voice and Voice Disorders*, 25, 48-58.