

# Coping strategies in teacher with voice complaint

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**Purpose:** To understand the coping strategies used by teachers with vocal complaints, to compare the differences between those who seek and do not seek speech therapy, and to investigate the relationship between coping and voice perceptual analysis, signs and symptoms of voice and participation restrictions and limitations in vocal activities. **Methods:** Ninety subjects participated in the study, divided into three groups with similar ages: Group 1 (G1) comprised 30 teachers with vocal complaints who sought speech therapy, Group 2 (G2) comprised 30 teachers with vocal complaints who never sought speech therapy, and Group 3 (G3) consisted of 30 teachers without vocal complaints. The following analysis were conducted: identification and characterization questionnaire, addressing personal and occupational description, recording speech material for voice perceptual analysis, Voice Signs and Symptoms Questionnaire, Voice Activity and Participation Profile – VAPP, and Voice Disability Coping Questionnaire – VDCQ – Brazilian Version. **Results:** In relation to the voice perceptual analysis, there was statistically significant difference between the groups with vocal complaint (G1+G2), which had showed voices with mild to moderate deviation, and the group without vocal complaint (G1), which showed voices within the normal variability of voice quality (mean for

G1=49.9, G2=43.7, and G3=32.3,  $p<0.001$ ). G1 had higher mean of voice signs and symptoms (G1=8.6, G2=6.6, and G3=2.0,  $p<0.001$ ), and higher scores in almost all dimensions of VAPP ( $p<0.001$ ), except for the aspects effect on job and effect on social communication. Individuals with vocal complaints (G1+G2) tended to use more problem-focused strategies and those who sought speech therapy (G1) had higher scores in VDCQ (G1=45.4, G2=38.5, and G3=9.5,  $p<0.001$ ). The aspects that were correlated with VDCQ in the three groups were: degree of vocal deviation, VAPP total score, VAPP partial scores of self-perceived severity of voice problem, effect on daily communication, effect on emotion, and participation restriction for G1; VAPP total score and partial score of effect on daily communication for G2; and all VAPP scores for G3. No correlation was found between voice signs and symptoms and coping. **Conclusion:** Teachers with vocal complaint use more problem-focused strategies to deal with their voice problems, and those who seek speech therapy use an even greater number of strategies. Voice symptoms influence the demand for speech therapy, but do not correlate with the coping itself. In general, the greater the perception of limitation and the restriction in participation in vocal activities, the greater the use of coping strategies.

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**Conflict of interests:** None

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