Voice Handicap Index

Name:		Date:	
Day of birth:		Score:	F /40
			E /40
These are statements that many people have used to describe their voices			P /40
and the effects of their voices on their lives. Cl		Total:	/120

indicates how frequently you have the same experience.

		NEVER	ALMOST NEVER	SOME- TIMES	ALMOST ALWAYS	ALWAYS
F1	My voice makes it difficult for people to hear me					
P2	I run out of air when I talk					
F3	People have difficulty understanding me in a noisy room					
P4	The sound of my voice varies throughout the day					
F5	My family has difficulty hearing me when I call them					
	throughout the house					
F6	I use the phone less often than I would like					
E7	I'm tense when talking with others because of my voice					
F8	I tend to avoid groups of people because of my voice					
E9	People seem irritated with my voice					
P10	People ask: "what is wrong with your voice?"					
	I speak with friends, neighbours, or relatives less often					
	because of my voice					
F12	People ask me to repeat myself when speaking face-to-face					
P13	My voice sounds creaky and dry					
P14	I feel as though I have to strain to produce voice					
E15	I find other people don't understand my voice problem					
F16	My voice difficulties restrict my personal and social life					
P17	The clarity of my voice is unpredictable					
P18	I try to change my voice to sound different					
F19	I feel left out of conversations because of my voice					
P20	I use a great deal of effort to speak					
	My voice is worse in the evening					
F22	My voice problem causes me to lose income					
E23	My voice problem upsets me					
E24	I am less out-going because of my voice problem					
	My voice makes me feel handicapped					
P26	My voice "gives out" on me in the middle of speaking					
E27	I feel annoyed when people ask me to repeat					
	I feel embarrassed when people ask me to repeat					
E29	My voice makes me feel incompetent					
	I'm ashamed of my voice problem					

Please circle the word that matches how you feel your voice is today.						
		normal				
		mild				
		moderate				
		severe				