



Empowering Children. Supporting Families. Building Brighter Futures.

Resource 021 | Speech and language disorders

Voice disorders in children

What it means

A voice disorder is a persistent change in voice quality, loudness, pitch, or effort that limits comfortable communication. A child's voice may be hoarse, breathy, strained, or unusually weak. A temporary change during a cold is different from a persistent or recurrent problem needing assessment. [1]

Causes and risk factors

Possible contributors include vocal fold irritation or nodules, excessive vocal effort, inflammation, structural differences, vocal fold movement problems, or neurological conditions. Reflux or other medical factors may be considered when relevant. A hoarse voice should not automatically be blamed on shouting. [1,2]

General family education. A concern deserves assessment, but this guide does not diagnose a child or prescribe treatment.



Signs and everyday impact

Signs include ongoing hoarseness, voice fatigue, discomfort when speaking, reduced loudness, or a voice that repeatedly cuts out. Noisy breathing, swallowing changes, or weak cry in an infant may indicate an airway or neurological issue and need medical attention. [1,2]

Assessment and diagnosis

Assessment involves a medical history and examination, often with an ear, nose, and throat clinician viewing the larynx. A speech-language pathologist evaluates voice use and functional impact. The cause should be understood before voice exercises are prescribed; speech therapy alone cannot correct every structural or airway condition. [1,2]

Treatment and therapy

Treatment may include individualized voice therapy, changes to vocal demands, hydration and environmental supports, and treatment of an identified medical cause. Some structural conditions require specialist procedures. Medicines, surgery, or reflux treatment are chosen for a diagnosed indication rather than used as universal voice treatments. [1,2,3]

Support at home

Reduce competing noise so the child need not shout, offer comfortable speaking opportunities, and encourage ordinary fluid intake appropriate to age. Avoid repeated throat clearing or forced whispering as a treatment. Follow the clinician's specific advice and keep practice gentle.

When to seek help

Difficulty breathing, stridor, sudden voice loss with airway symptoms, or trouble managing saliva requires urgent care. Persistent hoarseness or a weak infant cry deserves clinical assessment.

Questions for your care team

- Has the larynx been examined and what is causing the change?
- Is voice therapy appropriate for this diagnosis?
- Which daily vocal demands should be adjusted?



Podcast preparation

Use this outline to develop a later podcast script.

Suggested opening

Welcome to Mariel Early Intervention. Today we discuss voice disorders in children. A voice disorder is a persistent change in voice quality, loudness, pitch, or effort that limits comfortable communication. This is general education; each child needs individualized care.

Opening: Define the topic and its developmental context.

Understanding: Explain causes and signs without inviting self-diagnosis.

Assessment: Describe evaluation and distinguish screening from diagnosis.

Support: Discuss treatment, therapy, and practical family supports.

Closing: Explain urgent signs and one clear next step.

Misconception to address: A voice disorder is not always a behavior problem or a sign that a child has used their voice badly.

Before recording: update clinical references and local service details, arrange clinical review, and use fully consented or fictional examples.

Terms in plain language

- Larynx: the voice box.
- Vocal folds: tissues that vibrate to produce voice.
- Stridor: a harsh sound associated with narrowed breathing passages.

Sources and further reading

Sources accessed 3 October 2026. Numbered references support the clinical overview. Treatment availability and referral routes vary by country.

[1] Voice Disorders

<https://www.asha.org/practice-portal/clinical-topics/voice-disorders/>

[2] Early Identification of Speech, Language, Swallowing, and Hearing Disorders

<https://www.asha.org/public/Early-Identification-of-Speech-Language-and-Hearing-Disorders/>

[3] Cerebral Palsy

https://www.ninds.nih.gov/health-information/disorders/cerebral-palsy?Campaign_Content=100006380375789&linkId=100000294187174