

CHAPTER IV

CONCLUSION

The data presented in the previous chapter show that there are some similarities and differences in producing sounds between people with cleft lip and those with cleft palate. The similarities include the sounds of phoneme voiceless bilabial /p/, phoneme voiced bilabial /b/ and phoneme bilabial nasal /m/.

Informants A1 and A3 of cleft lip are able to produce the three phonemes above, but informant A2 of cleft lip substitute nasalized bilabial /m̃/ for voiceless bilabial stop /p/, voiced bilabial /b/ and bilabial nasal /m/ when they occur in initial and medial positions. It happens since the cleft in her lip quite affects her speech quality so that the air comes through the nostril and produce nasal sounds.

Informants of cleft palate are also unable to produce the three phonemes since the soft palate fails to close the way to nasal cavity. They substitute nasalized bilabial /m̃/ for the phonemes when they occur in initial and medial positions. However, when the phonemes occur in final position, Informants A2 of cleft lip and B1, B2 and B3 of cleft palate substitute phoneme bilabial nasal /m/ for them.

The differences in sounds produced people with cleft lip and those with cleft palate are greater than the similarities. They include dorsovelar /k/ (voiceless velar stop), dorsovelar /g/ (voiced velar stop),

apiko dental /t/ (voiceless alveolar stop), apiko dental /d/ (voiced alveolar nasal), lamino alveolar /s/ (voiceless alveolar fricative), lamino alveolar /z/ (voiced alveolar fricative), apiko alveolar /r/ (voiced alveolar trill), apiko alveolar /l/ (voiced alveolar lateral), apiko alveolar /n/ (voiced alveolar nasal), labio dental /f/ (voiceless labiodental fricative), labio dental /w/ (voiced labial-velar approximant), medio palatal /ç/ (voiceless palatal affricate), medio palatal /j/ (voiced palatal affricate) and diphthong /au/.

Informants A1, A2 and A3 of cleft lip are able to produce phonemes /k, g, t, d, s, n, w, ç, j / when those phonemes occur in all positions but informants A1 and A3 of cleft lip are unable to pronounce phoneme apiko alveolar trill /r/. The phoneme is substituted by phoneme apiko alveolar /l/. Informant A2 of cleft lip is unable to pronounce phonemes /z, r, l, f/. She substitutes voiced medio palatal approximant or phoneme medio palatal /j/ for phoneme lamino alveolar /z/ when it occurs in initial and medial positions. The word 'zaman' is pronounced [jañman] and the word 'azas' is pronounced [ajas]. Phoneme apiko alveolar /l/ is eliminated when it occurs in all positions. For example in producing the word 'lama', A2 eliminates phoneme apiko alveolar and the pronunciation becomes [añma]. The word 'nilai' is pronounced [ni:ai] and the word 'amal' is pronounced [añma]. Informant A2 is also unable to pronounce phoneme voiceless labio dental [f]. She substitutes phoneme labio dental /w/ for the phoneme when it occurs in all positions, such as the word 'fakir' is

pronounced [wakil], 'kafan' is pronounced [kawan] and the word 'towaf' is pronounced [towaw].

Informants of cleft palate are unable to produce many sounds since the soft palate, whether in raised or lower positions, is unable to stop the airstream from the vocal cord to pass through nasal cavity. They may substitute them for others or eliminate them. They substitute murmured laringal /h/ for phoneme dorsovelar /k/, phoneme apiko dental /t/, phoneme lamino alveolar /s/, phoneme lamino alveolar /z/, phoneme apiko alveolar /r/, phoneme apiko alveolar /l/, phoneme labio dental /f/, phoneme labio dental /w/, phoneme medio palatal /c/ and phoneme medio palatal /j/ when they occur in initial and medial positions. Phoneme murmured laringal /h/ also substitutes phoneme voiced dorsovelar /g/ when it occurs in medial position. Murmur happens when the vocal cords are only slightly apart; they can still vibrate, but at the same time a great deal of air passes through the glottis. The presence of murmured laringal /h/ is the compensation of informants of cleft palate from being unable to produce certain sounds.

Informants of cleft palate substitute phoneme dorsovelar /ŋ/ for phoneme dorsovelar /g/ when it occurs in initial position. They also substitute phoneme dorsovelar /ŋ/ for phoneme apiko alveolar /n/ when it

occurs in final position. The airstream, which should be obstructed, makes its way to the nasal cavity and produce nasal sound that is phoneme dorsovelar /ŋ/.

Glottal plosive /ʔ/ substitutes phoneme dorsovelar /g/ and phoneme apiko dental /t/ when they occur in final position. In this case, the informants of cleft palate try to stop the air at the level where the sound is produced that is the vocal folds.

Phoneme nasalized apiko alveolar /ɲ̃/ substitutes phoneme apiko dental /d/ and phoneme apiko alveolar /n/ when they occur in initial and medial position. Phoneme /d/ and /n/ are homorganic. So when the airstream is unblocked and goes through the nasal cavity, both phonemes are substituted by nasalized apiko alveolar /ɲ̃/. The word 'dari' is pronounced [ɲ̃aɦɪ], 'nilai' is pronounced [ɲ̃iɦai], 'ada' is pronounced [aɦa] and 'anak' is pronounced [aɦaʔ].

Vowel back high lower /U/ substitutes phoneme voiceless labio dental /f/ when it occurs in final position. The word 'towaɦ' is pronounced [ɦoɦaU].

Informants of cleft palate are not only substituting phonemes for phonemes, they also eliminate some phonemes. Phoneme alveolar trill /r/ and phoneme alveolar lateral /l/ are eliminated when they occur in final position. It is very difficult for them to suck and then blow the air at very

short time. The examples are the words 'fakir' and 'amal' which are pronounced [fahɪ:] and [aĩma:]

As already mentioned before, the differences in sounds produced by people with cleft lip and those with cleft palate are much greater than the similarities. The data show that people with cleft lip are almost able to pronounce all phonemes correctly. Their speech is more understandable because they have no difficulty in pronouncing most of the phonemes. On the other hand, the sounds produced by people with cleft palate are quite difficult to be understood because they all sound almost the same and because the cleft in their palates, especially the soft palate and the uvula, allows the air to pass freely through the nose. However, they are able to pronounce all vowels correctly since most vowels are unobstructed.

BIBLIOGRAPY