

**ADULT ESOL LESSON PLAN**  
**LCP C - High Beginning**  
**Phonemic Awareness Infusion**  
**Pronunciation of /t/ and /d/ Consonants**

**Instructor Presentation – Handout A**

**ESOL Competencies:** 24.04 Read and interpret information on medicine labels  
34.02 Pronunciation of /t/ and /d/ consonants

**Objective:** Content focus- List and explain the parts of a medicine label. Read and interpret important medical information, practicing the targeted consonant sounds and usage within reading passages.

Language focus- Demonstrate the specific articulation of /t/ and /d/ consonant sounds, practice their contrasting production, and discriminate between their unique sounds and positions both orally and aurally.

**Goal:** To understand how to produce these pronunciation features, hear the different sounds, recognize them, produce them correctly when thinking about it, and practice correct pronunciation to be understood by others.

**Materials:** Handout A- Instructor’s Pronunciation Lesson  
Handout B- Student Reading Passage

**Procedures:** **1. Explanation**

The American English sounds of /t/ and /d/ are both made using the same articulators and positions, but the difference in the sound production is in the flow of air and the voice. The sounds of /t/ is common to many languages and is easy to produce. Some speakers, however, tend to pronounce /ts/ instead of a clear and single /t/ sound before /u/ (e.g.- two becomes tsu) or /ch/ in place of /t/ before /i/ and /e/ as in tease (cheese) and tin (chin). Some NNS speakers may add the sound of /o/ to words ending in /t/ such as, sito or cato. You will notice that man NS will **reduce** the sound of /t/ and it becomes /d/ i.e., water becomes wader, better/bedder, party/pardy or twenty/ twendy. This happens because /d/ requires less effort and is an easier sound to produce.

**2. Articulation presentation and demonstration**

**/t/ sound**

**Placement-** First, firmly press the tip of your tongue against your upper gum ridge behind the upper front teeth to stop the flow of air. Then quickly drop the tongue tip to allow the air to be released.

**Manner-**The air stream is stopped, then released once the tongue tip is quickly dropped, causing a **strong puff of air** with an aspirate (breathiness) quality. Lips are slightly separated.

**Voice-** your vocal chords do NOT vibrate; it is a voiceless sound.

**Examples-** take, teaspoon, time, twice, little, ate, eat, date

(Note: hold your hand in front of your mouth to feel the strong puff of air.)

### **/d/ sound**

**Placement-** The sound of /d/ is produced the same way as /t/ except /d/ is voiced and the puff of air is not as strong as in /t/. The sound of /d/ becomes problematic when NNS place the tip of the tongue at the back of the upper front teeth rather than correctly touching the upper gum ridge. When /d/ is the last sound in a word, many NNS forget to make their vocal chords vibrate, causing the /d/ to be easily confused with the sound of /t/ to the listener (e.g.- bed becomes bet).

**Manner-** The air stream is stopped, then released once the tongue tip is quickly dropped, causing a **much weaker puff of air** to flow.

**Voice-** /d/ is a voiced (vibrated) sound.

**Examples-** dizzy, dosage, directions, drowsy, overdose, body, food

### **3. Reading Infusion (see Handout B)**

- A. Read aloud with the class two times. Pronounce the bolded letters loud and strong, with emphasis to reinforce the placement of articulators and correct production.
- B. With a partner, read the passage aloud with normal stress (emphasis) and intonation (expression). Think about the sounds demonstrated and modeled by your teacher in the lesson as you read. Listen for the correct pronunciation. Your partner will tell you if s/he hears the correct sounds and understands your pronunciation.