

<b>MODEL</b>	<b>LOOIC</b>	<b>SE</b>
Unadjusted	5835.88	169.09
Partially Adjusted	5804.11	168.44
Fully Adjusted (includes infant race)	5754.81	167.11
Unadjusted - Partially Adjusted	31.78	13.29
Unadjusted - Fully Adjusted	81.07	19.3
Partially Adjusted - Fully Adjusted	49.29	14.02
<b>UNADJUSTED</b>		
Spatial	5835.88	169.09
Aspatial	5858.33	169.66
Spatial - Aspatial	-22.45	11.16
<b>PARTIALLY ADJUSTED</b>		
Spatial	5804.11	168.44
Aspatial	5817.37	168.69
Spatial - Aspatial	-13.26	9.4
<b>FULLY ADJUSTED</b>		
Spatial	5754.81	167.11
Aspatial	5751.41	166.95
Spatial - Aspatial	3.41	3.68

Comparison of models using the Leave-one-out cross-validation information criterion (LOOIC). A difference between models is "significant" when the difference in their LOOIC exceeds the standard error of the comparison. Significant differences are highlighted. Both adjustment for individual and maternal variables improved upon our unadjusted model, and the addition of infant race improved the model further. Spatial models were significantly better than aspatial models except once race was added; geography was no longer significant at that point. This is likely because the communities in our study are quite segregated by race. However, because there is no known race-associated predisposition to hearing loss, race is most likely a surrogate for other socioeconomic or medical risks that are more predominant among minorities. CMV infection and acquisition among pregnant women is likely an important component.