Does the quality of caregiver input predict IDS preferences at 8 months? Jessica Hay

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Infants' preferences for infant-directed speech (IDS) have been well-documented in the literature (see ManyBabies Consortium, 2020). Although there is general agreement that these early preferences, driven by IDS' enhanced prosodic properties, may facilitate language learning, factors that drive individual differences in IDS preferences are less understood. The current study examines whether the proportion of IDS infants hear in their environment predicts their IDS preferences. IDS preference data and language input data were collected from 33 typically-developing monolingual English-learning 8-month-olds (18 male, 15 female). Infants' IDS preferences were tested using a head-turn preference procedure and stimuli and methodology as outlined in ManyBabies1 (ManyBabies Consortium, 2020). Infants' natural language environment was captured using a LENA speech pedometer across two 8-hour sessions, on two consecutive days. Using methods adapted from Lany and Shoaib (2020), 40 five-minute segments with the highest adult word count (i.e., >110 words) were selected from each 8-hour recording session. From each 5-minute segment, the first 30-second clip that contained speech to the infant was coded for caregiver speech type (IDS vs adult-directed speech (ADS)). Proportion of IDS was then calculated for each infant. Consistent with extant literature, infants listened significantly longer to IDS (M=10.59s; SD=3.79) than ADS (M=9.62s; SD=3.37), t(32)=2.70, p=.01, d=.469), although there was considerable variability in the degree to which infants preferred IDS. Preliminary data also suggests substantial variability in the proportion of IDS heard by our participants (X= ~60%). Remaining LENA data, which has already been collected, is currently being coded. Current data promise to enhance our understanding of the evolving role parent speech type plays in the development of these ecologically relevant speech preferences. Implications of this dynamic interplay between the quality of caregiver input and infants' emerging language skills, especially for infants at risk for developmental delays, will be discussed.