Acquisition Deficits and Performance Deficits

By Dr. Peter Beddow, BCBA-D



My doctorate is in educational psychology, learning, and measurement, and I spent around six years studying assessment testing and the examination of student aptitudes and skills using standardized assessment tools. In that process, I developed assessments, tests, and rating scales for a variety of purposes, mostly involving students with special needs.

One of the chief problems in assessing a child's skills, especially a child with special needs, is discerning the difference between an acquisition deficit and a performance deficit.

What is a performance deficit?

A performance deficit is when the student has demonstrated the skill independently in the past. There is evidence that the student possesses the skill, but when they are called to demonstrate it, they do not. In other words, they are either unable or unwilling to perform an acquired skill upon direction, in a particular scenario, or when they are presented with an opportunity to demonstrate that skill.

There are many different reasons for performance deficits, including that the student simply does not want to perform the skill.

Children are not animals. They are not dogs. They have minds of their own, and they are free to choose whether to do something that an adult asks them to do or not.

There is also the question of receptive language and whether the student understands what they are being asked to do and which skill they are being asked to perform. That requires language discrimination. The student has to understand that when an adult asks them to do a particular thing, the adult is asking for that specific thing.

A student might have a whole plethora of skills that they could demonstrate. Discriminating which one the adult wants them to do might be difficult.

There may also be setting events that reduce the likelihood that the student will demonstrate the skill. These might include fatigue, sickness, frustration, dysregulation, unfamiliarity with the particular adult who is asking them to perform a skill, or anxiety.

Anxiety might be present because the student does not understand the behavioral contingencies that are going on. They might not know what the result of doing the skill is going to be. There are some students I have worked with who refuse to demonstrate a skill that they know how to do because they are afraid that if they demonstrate it, the adult will ask them to demonstrate a skill beyond their capacity. They will then be unable to do that skill and will experience failure for having been unable to learn or demonstrate something new.

Students like that sometimes remain stagnant in their skills because their anxiety prevents them from advancing to new things.

Our job as educators should be to instill in our students the joy that comes from learning new things. We should demonstrate that there is not only reward, praise, and excitement from demonstrating skills correctly. There is also praise, reward, enjoyment, and excitement from trying to demonstrate skills, even when you are not always successful.

To reward and place value on effort and on attempting to do things that are new or difficult is a huge predictor of whether a student will bridge the gap between acquisition deficits and performance deficits.

What is an acquisition deficit?

An acquisition deficit is when the student has not learned the skill. They may not have received instruction. They may not have had the opportunity to learn it. Or they may have had the opportunity to learn it, but the instruction they received did not result in the acquisition of that skill in a durable enough way for them to perform it independently.

They may have had exposure to the skill. They may have the ability to do it with help. But when they are asked to do it independently, they do not have the ability to demonstrate it. That is an acquisition deficit.

When it comes to assessment in ABA therapy, we contend with this issue frequently. We are often forced to discern between performance and acquisition because it is a common occurrence that a student with autism can demonstrate a skill independently one day and come in the next day and not demonstrate that skill.

Sometimes the teacher needs to “prime the pump.” They need to orient the student to the learning task or activity in a way that brings together the variables that help the student recall the different pieces of knowledge and skills needed to demonstrate a particular skill.

Sometimes things like muscle memory have not developed yet. The student needs more practice. The first few trials may need to be done with the student, and then the student can do it again. Over time, the hope is that the student can do it independently, even on a new day with a new person or in a new environment. That is called generalization. Over time, the student can continue to do it even if they have not done it for a while. That is called maintenance.[1][2]

Generalization and maintenance are not extra details after teaching is finished. They are part of determining whether a skill is available beyond the original teaching moment. Research and practice literature treat them as distinct outcomes that need to be planned for and assessed.[1][2]

Why the distinction matters

The difference between performance deficits and acquisition deficits is a key component of teaching in general.

If we treat performance deficits as acquisition deficits, we may be doing the student a disservice by believing that the student simply has not learned a skill when the student has learned it and is simply not demonstrating it. There may be things we can do to help the student feel more comfortable demonstrating it or to orient the student to the task in a better way so that they are able to demonstrate it.

That may involve reducing anxiety, priming the pump, and understanding that student motivation is sometimes based on relationship, contentment, regulation, and trust. The student needs to know that getting it wrong is not going to be punished and that getting it right is not going to lead to some arduous, impossible requirement that the student will then be left alone to figure out for themselves.

On the other hand, if the deficit is an acquisition deficit and we treat it as a performance deficit, we could expect a student to demonstrate a skill when they have not had sufficient instruction, modeling, practice, prompting, or coaching to be able to demonstrate it.

If we treat it as a performance deficit and try to coerce the child, or speak to the child as though the child is intentionally refusing as opposed to being unable, that can create a situation that is abusive and traumatic. We are essentially saying that the student is lying. That can be a terrible emotional situation for the child because they are not trying to refuse to do what they are asked.

They might be willing to do it, but they genuinely do not have the capacity to recall that skill.

Acquisition and performance deficits can overlap. Setting events may make it so that a skill performed in the past, with evidence of acquisition, is not demonstrated in the current situation. The student may simply have forgotten. Maybe they have not had enough opportunities, so the skill is not in the front of their mind and is not readily available to their working memory.

We are responsible for helping to bring back that skill. That is why we do things like maintenance and generalization. Environmental factors and the time between the last opportunity to try are variables that affect performance.

So we have to be very careful and very discerning when we teach students and determine the difference between acquisition deficits and performance deficits.

References

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About the author

Teacher at heart, behavior analyst, and writer, Dr. Peter Beddow has spent more than two decades helping children, families, and school teams navigate autism, behavior, trauma, and learning differences with clarity, structure, and hope. He studied English Literature and Creative Writing at Middlebury College and earned a PhD in Special Education from Vanderbilt University's Peabody College, where his work focused on fairness, learning, and access in assessment. Peter has worked as a teacher, special educator, clinical director, consultant, and board certified behavior analyst in homes, schools, and clinics. He founded Accessible Hope, a Nashville-area practice supporting diverse families, and writes and teaches practical, humane approaches to behavior and learning.

Scope and safety

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