

This study examined pleasant events, as measured by the Pleasant Events Schedule (PES), as a mechanism and moderator of depression outcomes in a completed randomized clinical trial comparing the efficacy of cognitive-behavioral therapy (CBT), light therapy (LT), and combination treatment for 84 adults with seasonal affective disorder (SAD). The aims were: (1) to compare CBT, LT, combined CBT+LT, and a concurrent wait-list control on change in pleasant events over 6-weeks of acute treatment; (2) to compare the three active treatments on the association between pleasant events change over treatment and mood outcomes the next winter; and (3) to examine whether baseline pleasant events scores are associated with next winter depression severity, in general or depending on treatment type. PES cross-products scores (i.e., enjoyment derived from activities completed in the past month) significantly improved over the course of acute treatment, regardless of treatment modality. Change in PES enjoyment and cross-products scores over treatment was associated with next winter depression severity, regardless of treatment type. In solo CBT, lower baseline PES cross products scores were associated with lower next winter depression scores whereas higher baseline PES cross products scores were associated with higher next winter depression scores. These results suggest that response-contingent positive reinforcement (RCPR) generally increases as winter depression improves and that greater change in RCPR is associated with less severe symptoms the next winter, regardless of treatment type. However, baseline RCPC is prescriptive of next winter outcomes uniquely in solo CBT. It is possible that SAD patients with lower pre-existing RCPR who receive CBT learn to enjoy the things they do in the winter and experience less severe depression the next winter as a consequence of practicing these new behaviors. In contrast, patients higher in

pre-existing RCPR already enjoy their activities before treatment and, therefore, have less to gain in CBT.