of including same-sex couples when exploring linkages between marital dynamics and health, especially when considering how gender impacts these processes.

SESSION 5670 (SYMPOSIUM)

MEMORIES OF LOST LOVED ONES

Chair: Emily Mroz Co-Chair: Susan Bluck Co-Chair: Deborah Carr

The death of a loved one is a challenging but also normative occurrence in later life (e.g., Thomson et al, 2018). Experiencing the death of others typically increases with age, so personal reaction to loss becomes an ongoing process (Harrop et al., 2016). When adults lose someone, the deceased person is often 'gone but not forgotten.' That is, they are remembered over time (Klass & Steffen, 2017). The way one remembers their lost loved one's life and their death (e.g., Mroz et al., 2019) may influence post-loss emotional adjustment and personal views. This symposium brings together Psychology and Sociology researchers with data from Germany, the US, and China whose work elucidates the complex relation between loss and memory: we identify how remembering lost loved ones relates to both adaptive and difficult outcomes. In this symposium, Wolf et al. examine beneficial and harmful ways of using autobiographical memories after a personal loss. Mroz and Bluck identify how grief responses in older adult widows lead to functional use of memories from the very end of the spouse's life. Fu and Idler focus on the directive function of autobiographical memory, examining how memory for end-of-life experience with loved ones influences current choices for aggressive end-of-life care. Bolkan and Weaver examine how early life experiences with loss influence later personal views and advance care planning. Our Discussant, Debby Carr, integrates these talks to elucidate how remembering loss experiences relate to not only current grief, but also to people's preparations for the future.

MALADAPTIVE USE OF AUTOBIOGRAPHICAL MEMORY BY BEREAVED INDIVIDUALS ACROSS ADULTHOOD

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Remembering one's personal past can serve adaptive psychosocial functions (Bluck, Alea, & Demiray, 2010). Autobiographical remembering has been related to well-being in older age but little research has focused on grief. We address this issue in two studies grounded in the model of reminiscence and health in older adulthood (Cappeliez & O'Rourke, 2006). Participants (aged 18 - 91) completed the Reminiscence Functions Scale and the Inventory of Complicated Grief. Regression analyses show that negative self-related use of memories, but not positive use, is associated with experiencing more grief. Sharing memories with others (pro-social function) is indirectly linked to grief, as mediated by negative self-related uses. These patterns held for autobiographical recall in general (Study 1; N = 51) and when specifically remembering the deceased person (Study

2; N = 49). How adaptively individuals remember their personal past appears linked to the experience of grief, sometimes even years after the loss.

REMEMBERING THE DYING DAYS: OLDER ADULTS' FINAL MEMORIES FROM THE LOSS OF A SPOUSE

Emily Mroz, and Susan Bluck, *University of Florida*, *Gainesville*, *Florida*, *United States*

Memories from the very end of the life of a deceased spouse (i.e., their dying days) are frequently carried with the bereaved as major markers in their own life stories. The current study identifies functions of these memories. Older adults (age 70-96; N = 53) told two memories from their spouse's dying days, then self-rated them for serving directive, social-bonding and self-continuity functions (TALE; Bluck & Alea, 2011). Those who found their loss more incomprehensible (ISLES; Holland, 2015) reported using these memories for directive (i.e., guidance of behaviors) and selfcontinuity (i.e., maintenance of a sense of self) functions more frequently (ps < 0.05). This relation was, however, mediated by older adults' current grief (ICG; Prigerson et al., 1995). Incomprehensibility of the loss of a spouse appears to lead to intense grieving, prompting individuals to draw on memories from the loss to maintain a sense of self and direct their future.

AUTOBIOGRAPHICAL MEMORY AND END-OF-LIFE TREATMENT PREFERENCES IN CHINA

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In this mixed-methods study of religious/cultural beliefs and end-of-life treatment preferences in China, we surveyed 1,085 mainland Chinese people aged 18 or above online. We assessed the effects of past experience with dying people they have known and their own end-of-life treatment preferences in two hypothetical terminal illness vignettes. We found that respondents who knew or visited someone at the end of their lives were somewhat less likely to choose aggressive treatment for themselves in a lung cancer scenario (25% compared to 33%, p=.013). However, there was less difference in an Alzheimer's disease scenario, with a choice to use a gastric feeding tube or not (39% compared to 42%, p=.262). Openended responses indicate that people refer to these past experiences as a reference in making end-of-life decisions for themselves. This study provides empirical evidence that autobiographical memory has a directive function that individuals call on to inform future behaviors.

MEMORIES OF A GRANDPARENT'S DEATH: PREPARATION FOR FUTURE LOSSES

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Experiences of death in early life may result in identity-defining memories that last a lifetime. Autobiographical memories serve psychosocial functions, acting as guides for future behavior. Understanding early death experiences may thus inform lifelong personal views about death, dying, and bereavement. We queried 50 adults (ages 19 – 67 years) using