prevalence of diabetes across three successful countries to domestic policies. The overall Ageing Society Index ranged between 35.0 for Gabon in Africa to 74.6 for Switzerland in Europe. Top-performing countries were high-income countries from the European and Oceania regions, while the worst-performing countries were countries from the African region. Domain scores ranged from 19 (India) to 91.6 (Singapore) for well-being, 12.8 (Mozambique) to 88.5 (Finland) for equity, 32.8 (Gabon) to 88.8 (Uzbekistan) for cohesion, and 27.8 (Madagascar) to 88.8 (Switzerland) for security. Our multidimensional index helps identify specific societal gaps for policymakers to address. Furthermore, the cross-country comparison can be instructive for policymakers to adapt the experiences of successful countries to domestic policies.

THE IMPACT OF EARLY CONDITIONS ON THE PREVALENCE OF DIABETES ACROSS THREE COHORTS OF OLDER ADULTS IN MEXICO

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In low-and-middle-income countries like Mexico the impact of disadvantaged early childhood conditions (ECC) on later-life health in not well known and may be changing across birth cohorts. Our objective is to examine the impact of ECC on the propensity to have diabetes in three different cohorts of older adults aged 60-69 (born in 1930-1939, 1940-1949, 1950-1959). We examine to what extent differences in ECC, sociodemographic characteristics, and lifetime obesity explain the differences in the prevalence of diabetes across the cohorts. We use five waves of data from the Mexican Health and Aging Study (n=10,313). We estimate a series of logistic regression models and use counterfactual analyses to identify the roles of ECC and lifetime obesity on cohort-specific diabetes prevalence and on differences in diabetes prevalence across cohorts. Our results suggest that improvements in ECC would decrease prevalence of diabetes by 12.5% in the 1930-1939 cohort and 10% in the 1950-1959 cohort. However, the rise in lifetime obesity appear to offset the benefits derived from better ECC resulting in higher rates of diabetes.

EVERYTHING HAS CHANGED FOR THE WORSE: EXPERIENCES OF ELDERS DISPLACED BY ARMED CONFLICT IN ETHIOPIA

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In November 2020 an outbreak of ethnically and politically motivated armed conflict started in Tigray, Ethiopia and expanded to the Amhara and Afar regions, bringing a devastating impact upon civilians and disadvantaged groups. Persons living in those areas, including elders, were forced to flee and seek refuge at internal displacement centers. The purpose of this study was to investigate the challenges faced by older individuals fleeing the war zone and settling in internal displacement centers during Ethiopia’s armed conflict. A qualitative descriptive case study was used in this cross-sectional investigation. Purposive sampling was used to identify 13 displaced older adults. Data from the in-depth interviews with elders were supplemented with key informant interviews and observations. Narrative data was analyzed using thematic analysis. Findings revealed that the older adults faced a variety of challenges in the war zone while escaping their homes and in the displacement center, all of which negatively impacted their physical and psychosocial well-being. Elders fled on foot and walked for three days without food to reach the internal displacement center. In addition to food shortage, other themes included loss of significant others, family disintegration, and lack of care and support. The findings call attention to the need for practical access to social and economic integration of elders in the aftermath of war as well as ongoing psychosocial intervention. In Ethiopia and in other war-affected areas, displaced older people need tailored support.

ETHIOPIAN CENTENARIANS: HEALTH CONDITIONS AND SENSORY COGNITIVE FUNCTIONALITY

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Globally, the centenarian population is expected to increase in the coming three decades reaching 3 million by 2050. In Ethiopia, like other Sub-Saharan African countries, information about the health condition, sensory and cognitive functionality of centenarians is scanty. This study examined the health conditions and sensory/cognitive functionality of Ethiopian centenarians. A qualitative case study design was employed. Nine centenarians (1 woman, 8 men) between age 100 and 108 were identified using snowball sampling. Data were generated through in-depth interviews and analyzed using descriptive analysis. All 9 were Orthodox Christians and lived in rural areas either with their wives (3) or other relatives. Four centenarians could read and write, two attended grade eight and nine, and three were non-literate. Before retirement the centenarians engaged in different occupations as farmers (4), shoemaker, government employee, school teacher, priest, “bounty hunter” and mechanic. Most perceived that their sensory and cognitive functionality was