

individuals with a risk score of 0 to 35 ranged from 1.4% to 32.0%. The area under the receiver operating curve was 0.713 for the learning sample and 0.744 for the testing sample. With the addition of tobacco, alcohol use and physical activities, the improvement in prediction in terms of NRI value was 0.1523 ($P < 0.005$).

Conclusions: This study demonstrates that a predictive model that is convenient can be used to predict the occurrence of diabetes among non-diabetic adults by means of a set of risk scores that is relatively easy to implement.

OT17-4

A 3-Years Evaluation of the Pay-for-Performance Program for Asthma under the National Health Insurance in Taiwan

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The Bureau of the National Health Insurance (NHI) in Taiwan implemented a "Pay for Performance Program (P4P) for Asthma" in 2001 to improve the care outcome. This study aims to analyze the long-term effects of this program with a hypothesis that the P4P program may reduce patient's emergency department (ED) visit or hospitalization due to asthma.

We employed a quasi-experimental study design. Using the NHI claim data during 2002 and 2006 we identified 714 asthma patients who were enrolled into the program in 2003 as the experimental group. By using the propensity score method, we then randomly selected 2,142 patients in the control group. We employed negative binominal regression model with difference-in-difference analysis to evaluate the effects of the P4P program.

The difference-in-difference analysis showed that the P4P program increased the physician visits for asthma significantly. After controlling for the baseline patient characteristics in the model, the net differences of the number of physician visit were 2.89, 1.89 and 1.57 respectively between the two groups in 2004-2006. Patients in the P4P group had fewer ED visits than the control group with net differences of 0.02, 0.06 and 0.05 respectively in the three years. The numbers of hospitalization were also lower in the P4P group with net differences of 0.02, 0.02 and 0.03 respectively. However, the differences did not reach a statistical significance level of $P < 0.05$.

In conclusion, the P4P program significantly increased patient's physician visit for asthma, and the difference in the numbers of physician visits between the two groups lessened gradually in the successive years. However, the P4P program did not significantly decrease the enrollees' emergency visits or hospital admissions. The current P4P program for asthma has to be modified to reach its ultimate goal.

OT17-5

The Sree Chitra Tirunal Institute for Medical Sciences and Technology, Trivandrum: The Trail Blazer and Trend Setter for Public Health Education in India

Thankappan K R

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The Sree Chitra Tirunal Institute for Medical Sciences and Technology (SCTIMST), located in the state of Kerala is a trail blazer and trend setter for public health education in India. SCTIMST, an institute of national importance established by an act of parliament in 1980 started the first Master of public health program (MPH) in India in the year 1997, when MPH was not a required qualification for any job positions either at the national or at the state level in India. So far 11 batches of students have graduated and all of them have gained excellent jobs, over 90% within India.

Over 10 organizations in India started MPH program after the successful experience of SCTIMST. Jawaharlal Nehru University, New Delhi, National Institute of Epidemiology, Chennai, Post Graduate Institute for Medical Education and Research, Chandigarh, Tata Institute of Social Sciences, Mumbai are some of them. Another major public health initiative in India is the establishment of the public health foundation of India (PHFI), a public private partnership launched by the Honorable Prime Minister of India, Dr. Manmohan Singh, on March 28, 2006. PHFI is working towards building public health capacity by establishing eight new institutes of public health offering teaching, training and research programs. SCTIMST could provide technical and faculty support to many of the new public health initiatives India.

Major challenges for public health education in India are recruitment and retention of quality faculty and creating career paths for public health graduates at state and national level similar to that exists in a few states such as Tamil Nadu and Gujarat. While all efforts should be made to develop quality faculty it will be worthwhile to experiment usefulness of information technology to share faculty from India and abroad by several public health institutions.

OT17-6

Blood Donation- Does University Students Care?

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WHO reported that blood donation has gone into a steady decline although the demand for transfusion continues to rise. There are various factors that cause the decline in the number of blood donation. This study aims to assess the attitude and practice of blood donation and to show their relationship with knowledge of blood donation. Four hundreds and six students of University of Malaya had been randomly selected to answer the