

## AABHL 2013 Survey Comments

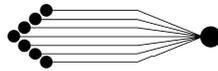
### What was your favourite part of the conference?

1. 5 minutes between lectures, keeping to time as advertised on program- excellent chair persons, after dinner speaker, dinner venue
2. Organisation, plenaries
3. Variety of themes, good time management
4. High quality papers, well organised (very smoothly run) and a very friendly vibe for a first-time attendee
5. Meeting colleagues old & new, quality of speakers & sessions, Anna and team were excellent
6. Excellent plenaries, informal sessions, people, Sydney city - fabulous
7. A good variety of speakers, issues and themes
8. Community mood, friendly & encouraging, diversity of themes, structure, food
9. Great session & speakers, generally an excellent conference
10. Variety, quality of talks, café's - good discussion, organisation - very smooth - Conference Design excellent again, combination of established & emerging plenary speakers
11. This was one of the best conferences I have been to. I particularly valued the collegial atmosphere and the genuine interest that attendees had in each others' work & ideas. Well done to the organisers
12. Most things
13. Relevance, kept to time, great abstracts
14. I enjoyed the dinner speaker
15. Quality of presentations, reduced number of concurrent sessions (meaning most had good attendance), abstract book, collegiality & support
16. Some great papers, interesting people, good questions, much to think about, met old pals, made new ones
17. Question time, program well configured
18. Friendly, welcoming atmosphere. Great variety of topics and presentations. Having the presence of a consumer voice
19. Networking opportunities
20. Well organised - good mix of plenary and concurrent sessions. The 5 minutes between sessions was great - the last speaker didn't lose out and we could switch rooms easily, Conference organisers were great! Sending PowerPoint's in advance meant no time wasted
21. Plenaries were meaningful
22. Discussion
23. The main speakers were excellent. It was fantastic to hear Jenn Morris's speech on her personal experiences. Having never attended this conference before and as a student at post graduate level, this whole conference was

- invaluable to me. Don't change a thing about the layout or structure - it's a fabulous conference to attend and be part of
- 24.** Very good organisation & session chairperson who kept exactly to time (as of course did the speakers)
  - 25.** Excellent pre-conference organisation - very helpful instructions for delegates and conference presenters. Very well organised social functions - food was high quality. Opportunity to mix/network with colleagues and researches in health law and health ethics.
  - 26.** Diversity of content. Different disciplines encourages some excellent discussion after papers - but then not enough time - not sure we can address this
  - 27.** Variety of sessions (always provided options that were of interest). Integrated of theory & practice
  - 28.** Ron Paterson, Julian Savulescu. Work presented by Ben White & Lindy Willmott. The presentation by Noeline Monaghan was very insightful and made me reflect on the push for Advance Directors. Chairs keeping things to time.
  - 29.** Well organised, good range of topics
  - 30.** Gaps between talks to allow movement. Streaming of talks so less needed and also some cross-fertilisation of talks. Simple catering. Format remains good - Thurs pm - Sun am
  - 31.** Poor Katrina Hutchinson - no microphone. Lunch, morning & afternoon tea. Saturday morning tea delicious.
  - 32.** Location
  - 33.** Ability to meet people from multiple disciplines
  - 34.** Hearing about cutting edge research - very stimulating. Meeting people, great discussions and new connections. Very well organised - thank you! Patient perspective added an excellent dimension
  - 35.** Strong program. Excellent range of presentations. Excellent standard of presentations
  - 36.** Quality of presentations and discussion

## What was your least favourite part of the conference?

1. Distance between rooms
2. Breaks were too short - networking opportunities are a vital part of attending a conference, all concurrent sessions should be in smaller rooms on the same floor level
3. In some sessions (concurrents) some of the men dominated discussions - even speaking in place of the person presenting (and they weren't supervisors). Some men domineering & arrogant
4. The manner in which the venue facilities were spread out including accommodation options and dinner made it impractical and inconvenient, the lecture theatre setting also made it feel less personal.
5. Venue - rooms were too spread out, bathrooms were distant & transit time inadequate, catering (special needs) was poor (gave everyone vegetarian & celiac), the same one though their needs are different, failed to provide some special needs at all on Saturday
6. Can we have a savory option at morning & afternoon breaks please? A suggestion - A closing plenary with attractive speakers will leave a better final impression of the conference e.g. Adelaide in 2009 had a panel session to which the public were invited discussion the community role in bio ethically contentious law and policy
7. The rooms chosen for the concurrent sessions should be closer to one another
8. Distance between lecture theatre and the break-out rooms
9. Poor organisation
10. Use of the main lecture theatre for concurrent sessions - disaster! Catering, need longer for breaks, need more booksellers/bookstands
11. Long distance between 101 and 4th floor sessions - sometimes missed intros etc.
12. Toilets - unspeakable, some speakers lacked public speaking abilities and deterred from presentation, some sessions were too rushed & presenters didn't prepare well instead trying to cover incomplete articles
13. No signage when we arrived at 3pm on the Thursday. A bit confusing for the early attendees
14. Many of the speakers appeared to gloss over the underlying assumptions contained in their analysis which I thought was fairly disappointing given this is a synthesis of philosophy regarding health & law. It therefore evoked constant gut reactions (very frustrating) of 'yes but.....'. That being said the conference subject matter is/was relevant and important. e.g. no understanding of or if there was, it was assumed that people would understand this (but conversation suggests they don't) that the model of disease is perhaps not applicable to many topics which were then squeezed into that model without scrutiny of the underlying assumption e.g. homosexuality, obesity & in particular the assumption that DSM is whatever version it is in - just needs tinkering with by bioethicists. The assumption that doctors/lawyers and bioethicists can pin down complex human behavior 'better' - misses the real ethical/scientific point - can it/ should it be done etc.? I think the conference could be 'meatier'. I enjoyed it very much, sorry for nit picking :(

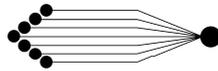


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- 15.** Almost nothing around the biggest health ethical problem of poverty and income inequality. We risk being an upper middle class organisation of limited relevance to those with the most need
- 16.** Dinner speaker - very long and so many people couldn't see the power point. The bus driver dropped us off in a different place to where we were picked up - confusing if you don't know the area
- 17.** A few presentations were disappointing
- 18.** We are a relatively small organisation hence a huge lecture hall not as conducive for discussion. Can we aim for a smaller auditorium?
- 19.** Try not to clash with other conferences like Australian Philosophy Association
- 20.** Very strong 'in-group' among chairs, presenters and some delegates, notable at question time. People were invited to ask questions according to whether known by the chair of the session, not order of queue, especially in plenaries. 'In' comments like 'don't need to say' & 'no need to introduce'. These are very exclusive. This exclusivity was intensified by the limericking at the conference dinner. No printed information about AABHL, e.g. benefits of membership, fees to join. Both of the above represent threats to the organisations health
- 21.** Aspects of the talk by Paul Saul. Philip Bates presentation was very poor and below standard. Room 101 was too big although AV was excellent.
- 22.** Needed more information about public transport - e.g. buses being pre-paid Mon - Fri 7am-7pm for CBD from Law School
- 23.** Sound in 101
- 24.** Some of the sessions were double ups or over the same issue
- 25.** Breakout rooms/ Annex was freezing cold. Air conditioning in the rooms so strong the screens at the front of the room (showing slides) blow back and forth! Insane
- 26.** Had difficulty in accessing internet in Law Building. Initial directions - relationship between accommodation & venue not clear prior to actually arriving

## Do you have any suggestions to improve future conferences?

1. Provision of notepad & pen (although delegates should provide their own) - would be a 'wise touch', if space for notes is provided in handbook there should be space below/beside each abstract, ensure adequate/appropriate audio-visual needs are met at dinner venue
2. More pragmatic, less rhetorical
3. Need more space for note taking
4. Maybe people all stay at the same place e.g. a College (better networking/collegiality)
5. Slightly longer lunchtime to talk with others informally, finish time earlier - say 4pm, bowl of fruit available, would like to see more women speaking in plenaries, has a woman given a Kirby Oration?
6. More PhD students, more social theory/ philosophy
7. Release a downloadable version of the timetable in advance so people can access a hard copy
8. Continue to develop scope of issues covered
9. Please include a 1 page summary program (with events included) in the front of the program booklet. Where there are 3 concurrent sessions and topic can these be structured as a panel session, with discussion as a group after. This is particularly valuable
10. There should be representation by the legal profession - a practicing lawyer in medical/health law
11. Consider another social event - even wine and cheese at the end of the day, do not use lecture theatres for breakouts/concurrent sessions
12. Fewer concurrent sessions, some workshops not so good - ok but not the usual brilliance. Great to see so many 'new' folk from elsewhere (interstate, NZ) - pleased you encouraged this but perhaps promotion to broader fields to encourage more people?
13. Expand with a public health ethics stream and extend period
14. Less of the very academic speakers/sessions - please use simpler language, also topics on Public Health ethics and Practical Ethics - Why are some health systems allowed to continue in such a dysfunctional way and nobody questions them?
15. Some focus on poverty and income inequality
16. Allow 5 minutes between presentations in concurrent sessions so that movement from the other sessions does not create disturbances
17. More fresh fruit for lunch, morning & afternoon tea
18. Somewhat intimate spaces for discussion & dialogue
19. Give consideration to process, including both inclusion & educational options. Set-piece & short questions time very ineffective as sole diet. Café session little more than extended question time after input. Don't use the Maritime Museum for a dinner again: Poor service, abysmal AV & sight lines for speaker
20. I paid for myself. I did not want to go to dinner and I did not. I noticed additional tickets cost \$121. I think the dinner should be optional and not compulsory. The time table: the conference was spread over 2 full days and 2 part days. I would prefer 3 full days
21. Hopefully it will come back to NZ soon!



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- 22.** Having all speakers' field questions jointly in a panel session at the end of the session allows for broad discussion and more inclusion of audience ideas.  
Agree with Public Health Ethics. Would enjoy something on addiction & drugs.  
More about resource allocation
- 23.** CD Rom of speaker's presentations. Some speakers provided their own sound system
- 24.** Townsville? Darwin? A warmer winter location. More seating at lunch & morning/afternoon tea
- 25.** Better signage at the entrance of the Uni, not just the building. More sensitivity to welcoming early-career and new members to AABHL; things like the limericks at the conference dinner can seem clubby and exclusive
- 26.** Public Health stream supported.
- 27.** For concurrent sessions, have three (related theme) speakers present without question time after each & have all three take floor questions as a panel. Made for great discussion & exchange of ideas at ACPEL conference in May