

ANONYMOUS

Witness Name: GRO-B

Statement No.: WITN0366

Exhibits: NIL

Dated: 03/10/18

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF GRO-B

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 27 September 2018.

I, GRO-B, will say as follows: -

Section 1. Introduction

1. My name is GRO-B but I am known as GRO-B. My date of birth is GRO-B 1965 and my address is known to the Inquiry. I am a civil servant working as a publisher for the GRO-B GRO-B
2. I currently live with my fiancée and my 2 children from a previous marriage and her daughter from a previous relationship.
3. I intend to speak about my late sister GRO-B: S and how her HIV infection (via her husband GRO-B: B) and subsequent death affected both myself and my family even until this day.

Section 2. How Affected

4. My sister [S] was married to [B] who was a haemophiliac that was infected with HIV via Factor 8 blood products which I believe occurred around 1986. However, I am not aware whether [B] was a mild, moderate or severe haemophiliac.
5. [B]'s two brothers are also haemophiliacs and have been involved in the campaigning process. They would know the whether [B]'s haemophilia was severe, moderate or mild. His brothers are aware that I am giving a statement to the Inquiry.
6. [S] became infected with HIV via her relationship with her husband, [B] and she initially protected us (her family) from all the bad news. My mum was the first to know of [S]'s infection, so in terms of dates we all were, and indeed still are, absolutely in the dark.
7. I know [B] was living in [GRO-B] Bristol and [GRO-B] in the late 1980's at various points and he had met [S] whilst they were both studying at [GRO-B]
8. Originally, [S] had a place on a prestigious art course at the end of sixth form but she decided to work locally until she knew what career she really wanted.
9. Thereafter she enrolled at [GRO-B] to study Speech Therapy and it was there she met [B] whilst he was studying Economics at the same institution.
10. Shortly after, they moved to Bristol as [B] had formed a band there. They later moved to North East England but I assume they moved to the North East once they knew [B] was infected with HIV.

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11. I cannot remember the date [B] and [S] got married as I have suppressed thinking about these things over the years. But I know that they were together since they met at [GRO-B] in the early 80's.
12. I confirm that as far as I am aware both [B] and [S] did not take any intravenous drugs and did not have any tattoos either.
13. As far as I am aware [S] did not have any blood transfusions prior to being infected with HIV. She only received blood transfusions during the course of her treatment after she became infected with HIV. I am not aware of the date [B] became infected with HIV.
14. [S] sent me a letter in early 1991 whilst I was in Nepal in which she apologised for burning the original letter she wanted to send me as she said she was not able to tell me what she had written.
15. She did not explicitly tell me in the letter that she was infected but I can only think that was due to the stigma around HIV at the time. Yet on that basis, I imagine she knew she was infected between February and May 1991.
16. [B] died in 1991 as a result of being infected with HIV. I do not know when or how [B] was told he was infected neither am I aware of the hospital that informed him of his HIV status.
17. I am also not aware if [B] was given any advice or counselling from the hospital when he was infected. I believe [S] must have had counselling after [B] died simply because she was so together through it all and never seemed out of control.
18. In the summer of 1992 she moved back home to our parents' house in [GRO-B] London. She had lived in the [GRO-B] prior to

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this but once she became severely ill she moved back to London to be with us.

19. I was in London at that time, so the whole family got together to see her and spend time with her. She spent all that time with us and tried to help sort our lives out as she was very concerned about us. That was the kind of person she was, always caring about others.
20. Around that time I had broken up with my girlfriend who [S] had been friends with, so she wanted to make sure I was alright. She was such a positive influence in my life. She was extremely bright and such a warm, people person.
21. [S] died on the night of [GRO-B] 1992. She was only 32 years old. She really was the formative person for all of us, to the extent that our family as a whole has felt that we have not developed and grown as we should have done because we all lost [S] and she was a key influence in each of our lives.
22. [S] was a very special person. She was an author in [GRO-B] [GRO-B] and she specialised in correcting speech habit disorders in children. She really humanised the whole approach as a speech therapist and focussed on putting the child first.
23. She understood that the children wanted an engaging play room and an environment that they could feel relaxed in and she wanted to create that for them and not treat them as a traditional clinician would.
24. Her books are still being used today. When she died there was a memorial and an annual lecture in memory of her that ran for a number of years after her death. The lecture is no longer running as far as I know.

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25. [S] and [B] didn't have any children and I think once she knew she wouldn't be able to have them she wanted to work with children which is why she became a speech therapist.
26. [S] also worked with stroke patients. That was who she was. She was always there for others and she was always involving others as well.
27. Because of her caring nature it did not come as a surprise to us that she was counselling and looking after us all even up until her death. [S]'s death has hugely affected our family even until this day.

Section 3. Other Infections

28. I am not sure if [B] contracted any other infections such as hepatitis, aside from his HIV infection.
29. I am quite sure that [S] did not have any other infections other than HIV. Her death certificate stated that she died from pneumonia as a result of HIV.

Section 4. Consent

30. As far as I am aware nothing was ever communicated to [B] about the possibility of cross infection.

Section 5. Impact

31. The impact that [S]'s illness and death had in our family is what I really want to get across here.

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32. We had always been a happy, close knit family, but once [S] died and there was always an empty chair at Christmas, we were never the same and the loss weighed on us all quite heavily.
33. That being said, [S] did not want us to be completely absorbed by this issue. She did not want her family to be defined as 'victims by association'. Ever since [S] died, our family drifted apart to a certain extent and we have not been as close as we once were.
34. She had such a positive impact on our family. We have always felt that her death has left a big hole that we still feel today.
35. I remember when my dad died in 2011, we were all in the car and I was thinking of [S] and [B] and the children they might have had, and how they were not there with us. That was the worst moment.
36. My dad and mum didn't get any answers and they never got to see the fruition of this Inquiry.
37. I remember being on a first date when [S] died and I think her death has affected my relationships since. I had therapy for anxiety after a bad relationship decision came to an end 5 years ago.
38. Although I have two wonderful sons from that relationship, I have always wondered what life would have been like if [S] was still here to inspire us. I am sure my sisters all feel the same too.
39. [S] wrote humorous articles for magazines using the name [S] [S] and she also wrote poems. Being a publisher, I promised her I would publish some of her work after she died.
40. [GRO-B] a retired police officer that now trains other police officers in the [GRO-B] saw one of [S]'s blogs that I published and he got in touch with me, which was nice. He had known

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[S] from when they were in school. (Tearfully) He said he just wanted me to know how lovely a person she was.

41. I think it's always the case that when someone you love is gone you put them on a pedestal, but [S] truly was a wonderful person. To have contact from someone who talked about how special she was, and that he still thought of her decades after knowing her, was confirmation for me.

42. I'm sure he's not alone in that. I think the key point that I want to get across today, is the impact of her death just goes so widely and it carries on for generations.

43. I see certain things in my sons that remind me of [S] She had a very quirky sense of humour and I see that in my sons and it will be in their children.

44. What if [S] had carried on and had children herself? Her husband, [B] was also very bright, intelligent and funny, as well as an artist, and sadly none of that ever came to fruition either.

[B] s Mental and Physical State Before Death:

45. I remember having conversations with [S] when she moved back home and she talked about the discussions she and [B] had before he died. They talked about a suicide pact whilst he was still alive so they could be with each other.

46. They were absolutely devoted to each other and their love was real so I could understand that. I believe she initially agreed to a suicide pact but when [B] eventually died from HIV she couldn't do it because she kept thinking of us.

47. They both talked about the afterlife and that whoever died first would contact the other but I don't think [S] got any contact from [B]

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after he died. I don't really believe in that stuff but I do dream about her and my belief is she is living on, through us.

48. I'm not sure if the suicide pact idea came from or but I know they talked about it.

49. I did not see before his death so I am unaware of his physical state. We didn't ask about it after he died as we did not want to take her to that place again.

s Mental State:

50. s mental state before her death was quite positive considering all she was going through. She was just so inspiring. As I said earlier, we all knew so little about everything as it was going on as and protected us all from it all.

51. But they always were so dedicated to each other and caring of everyone else, thinking about the family and how we would cope without them.

52. Before she died she certainly carried on well and processed things. She also had support from her place of work. She was very concerned that she shouldn't be defined by what happened to her at the end.

s physical state before her death:

53. was very thin and frail when she came home in the summer of 1992. She was mostly bed-ridden and she was just wasting away as she kept losing weight. I'd learned how to do foot massages when I was travelling and we use to sit and chat at night and I would rub her feet for her.

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54. I wasn't aware if she had any other physical ailments as that was kept between her and our mum. [S] didn't want to talk about what was happening to her as that was not how she wanted to be remembered. She wanted to talk about the future for the rest of us.

Personal Impact

55. I got married within a couple years after [S] died but the marriage ended 5 years ago when my ex-wife left. I carried on working until February of the following year as I tried to keep normality for my boys but I had a breakdown due to anxiety and had to take four months off from work.
56. Thankfully, I did not develop depression as I have always been motivated and optimistic and I think that comes from my sister, [S]. I remember my doctor telling me that having an optimistic attitude was what had prevented me from developing depression.
57. I do relate [S]'s death to my anxiety because it all goes back to the decision to marry that person. Our first date was on the night [S] died so I wasn't there for her final moments and that affected me.
58. Although she (my ex-wife) was very supportive when [S] died, I later found out that it was never a genuine relationship.
59. [S] has had one of the biggest impacts on my mental health. Having her in my life was the positive impact on my mental health and sadly, the negative impact came from losing her so tragically.
60. As I said earlier [S] wanted us all to move forward with our lives as she didn't want us to be defined by this whole thing. This is why my sisters do not wish to be directly involved with the Inquiry, but I am here because I need closure and I know [S] would want me to have that.

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61. My family are concerned about the strain that bringing all this back up has put on me but I see it the other way as I wanted to come forward.

Section 6. Treatment/Care/Support

B s Treatment/Care/Support:

62. I am not sure what treatment **B** received from the hospital, friends or family after he became aware of his HIV status. **B** did not have any children.
63. I am not aware if his illness affected his job as **B** was a musician so he mainly worked from home. He was in a band called **GRO-B**. They were big in Bristol at the time and they used to have gigs in London.
64. The name came from when he sent tapes to his older brothers. When they played them to friends they told them the songs were "**GRO-B**".
65. Whenever they were down in London, or I was staying with them in Bristol, I was always on the guest list so it was quite cool for a teenager like me at the time.

S s Treatment/Care/Support:

66. In terms of **s** and her care and support, I am aware that she worked for as long as she could do so. She would often go to Lewisham Hospital in London to get blood transfusions in the little Haemophilia Centre there.
67. She would have a transfusion every few weeks or so and feel better straight after but then she would deteriorate after a while and then have another transfusion and feel better again.

68. She worked for the NHS so I believe she did have some counselling as part of her treatment. I believe the support [S] received was appropriate.

Section 7. Financial Assistance

69. My mum did not receive funds from the Skipton Fund directly but I remember there was a payment that was made to [B]s mum and she insisted on giving my mum some of it which my mum tried very hard to refuse.
70. My mum only made enquiries about payments but she was told she would not receive any. So as far as I am aware my mum did not receive any payments from the Skipton Fund directly.
71. I am not aware how much my mum received from [B]s mum. But, as mentioned previously, I know she did try to refuse the payment but [B]s mum insisted and so my Mum ended up accepting some in the end.
72. I am not aware if the payment made to [B]s mum was a conditional one. When [S] died my mum and dad did get some money but I cannot be sure of where it came from. I assume it might have been from [S]s will.
73. My mum died in 2015 so I'm guessing it might have been in late 2000 when my mum was given the money from [B]s mum. As I mentioned earlier, I remember my mum making enquires about payments from the Skipton fund but being told that she would not receive anything at all.

Section 8. Other Issues

74. I think the outcome of this Inquiry matters, as when people in the civil service are making decisions they should be aware that they are making decisions for the future generations to come.
75. As a civil servant myself, the nature of my job often involves making decisions that will affect the next generation. We take lessons learned after each initiative and apply improvements to everything else we do, to make sure the future is better and mistakes aren't repeated.
76. Civil servants won't have the lessons from this experience until this Inquiry is complete, decades after the event. We can only wonder what decisions have been made in this time without the benefit of it.
77. I often wonder if I was a civil servant when this whole thing was going on, how the system would have been compared to the way it is now. When I joined the civil service in 2000 the contract made mention of the civil service code.
78. To maintain integrity, I have to declare if anything I'm asked to do goes against my conscience or creates a conflict of interest. We have a competence framework within the civil service and we are expected to be effective in challenging plans or decisions that might be irresponsible or against the evidence for what is in the public interest.
79. I do not know what competence framework was in place before, or what the standards for former ministers were. It could be that things are better now and the government understand that set targets and the things we measure has an impact on outcomes.
80. People measure things like cost, through productivity because there are simple accounts and measures of those things.
81. However there aren't as many targets for quality or the likelihood of good outcomes of policies or people's work because those things are

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either harder to quantify and compare, or they might not have any measurable consequences for many years.

82. If public service falls into the trap of achieving measures and targets deemed to be important at the time, at the cost of the implications for generations, there can be dreadful consequences.
83. Is that what happened here? Or something else? I need answers about all this. Did anyone in public service at the time break standards or the civil service code? Were those standards as good as they might be, and are the current equivalents?
84. When someone is taken away from you like that by someone else's actions it really has a huge impact. I've lost a number of loved ones and moved on, but although [s] died in 1992 in some ways it always feels like it happened just now.
85. That's because people might still be there making decisions in similar ways based on similar motivations and imperatives. I want to know urgently if this kind of thing can be avoided in future because of what happened then.

Statement of Truth

I believe that the facts stated in this witness statement are true.

Signed [GRO-B]

Dated 1 / 4 / 19

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