

ANONYMOUS

Witness Name **GRO-B**

Statement No: WITN4141001

Exhibits: 0

Dated: May 2020

INFECTED BLOOD INQUIRY

FIRST WRITTEN STATEMENT OF **GRO-B**

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

Section 1. Introduction

1. My name is **GRO-B** and I was born on **GRO-B**
I live with my **GRO-B**
2. I make this statement as the affected daughter of **GRO-B: M** who
was born on **GRO-B** and passed away, aged only **GRO-B** on **GRO-B**
GRO-B
3. My mother was infected with HIV by her previous partner, **GRO-B**
GRO-B
4. My elder brother, **GRO-B** has also given a witness statement to the
Inquiry **GRO-B**
5. This witness statement has been prepared without the benefit of access
to my mother's medical records.

Section 2. How Affected

6. My mother contracted HIV from her previous partner, [GRO-B] who was infected with HIV via contaminated blood products. He was the father of my elder brother.
7. My mother was aged [GRO-B] when she died and I was only aged [GRO-B]. [GRO-B] I do not know when she was infected, when she was told that she had been infected or the manner in which she was told. My elder brother has managed to obtain a very limited number of medical records which unfortunately leave so many questions unanswered.

Section 3. Other Infections

8. As far as I am aware my mother was only infected with HIV. I have never been told that she had been infected with any other viruses. I note that my elder brother's witness statement states that she also had Hepatitis C.

Section 4. Consent

9. I have no medical record evidence in relation to consent issues pertaining to the testing or treatment of my mother so I have no knowledge regarding matters of consent.

Section 5. Impact

10. My mother worked in [GRO-B]. From what I have been told, I understand that she was forced to stop working due to mental and physical illness which I believe was caused by the HIV taking control of her body. I do not know if she was ever given any advice or treatment in relation to HIV.
11. I try not to think or talk about what happened to my mother as it is still something I find very difficult to deal with.

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12. I have been told that my mother was always a happy and sociable person whose face would light up when she was with her children. However, from the day she was diagnosed with HIV her life was completely destroyed. She stopped going out and her social life ended. She was never the same again.
13. Losing my mother at the age of [GRO-B] was heart breaking for me. I was often [GRO-B] in [GRO-B] due to the fact that I didn't have a mother. I remember having to [GRO-B] without a mother and not understanding why. Mother's Days were particularly difficult because all the [GRO-B]
[GRO-B]
[GRO-B] but I couldn't be a part of things like this.
14. By my early teens I had developed anxiety issues. I would self harm and think of committing suicide as I believed that this was the only way I would have a mother again. My mother's death was on the [GRO-B]
[GRO-B] [GRO-B] [GRO-B] is particularly difficult and a constant reminder of what happened to my mother.
15. During [GRO-B] my anxiety deteriorated. I had to [GRO-B]
[GRO-B] Furthermore, I used to have to be removed from [GRO-B] as I would have outbursts of anger. I believe these were all a result of what had happened to my mother and her subsequent death which had a big impact on my [GRO-B]
16. Due to the stigma of my mother's infection, only some direct family members know what happened to her and I avoid talking about it at all costs. I live in fear that they will believe that I also contracted HIV.
17. By the time my brother was aged [GRO-B] he had lost both his parents to this infection. I can see the pain in his eyes as he still struggles to find answers as to why this happened.
18. My father will never get over my mother's death. He still smiles at the mention of her name but fights back tears whenever she is discussed.

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19. My grandfather still is, and will forever ever be, devastated by my mother's death. It makes it harder for him as I look and sound just like her.

20. To this day, the death of my mother has left me mentally drained. It still has a massive impact on my personal and social life as I tend to withdraw from situations.

Section 6. Treatment/care/support

21. I am not sure if my mother's access to treatment was affected by her infection.

22. I do not know if my mother was ever offered any counselling or psychological support in consequence of her HIV.

23. I came across a report GRO-B that recorded the fact that I received counselling GRO-B However, I have no recollection of this and I received no GRO-B

Section 7. Financial Assistance

24. I do not know if my mother received any financial assistance.

25. I have never received any financial assistance.

Anonymity

26. I want to apply for anonymity and I do not wish to give oral evidence to the Inquiry.

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Statement of Truth

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

Signed.

GRO-B

Dated.....

18 - 05 - 2020