

Witness Name: Judith Wood
Statement No.: WITN0812001
Exhibits: **WITN0812002-008**
Dated: 8th April 2019

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF JUDITH WOOD

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 30 October 2018.

I, Judith Wood, will say as follows: -

Section 1. Introduction

1. My name is Judith Wood. My date of birth is GRO-C 1949 and my address is known to the Inquiry. I intend to speak about my late partner, Anthony Walter Banks-Taylor, and in particular, the nature of his illness, the medical treatment he received and the impact his illness has had on our lives.

Section 2. How Affected

2. Anthony was born a severe haemophiliac. I recall him telling me that as a child, he had spent weeks at a time in bed as a consequence of his bleeds. I am not aware of any other member of his family suffering from haemophilia. His father was a Professor of Literature and his mother a French teacher.

3. Anthony received so many blood transfusions and Factor VIII treatments over the years that it is not possible to establish precisely when he received contaminated blood products.

Section 3. Background

4. I met Anthony in the mid-1980's in York. At the time he was working full time as a computer analyst for Nestle. Although he required frequent Factor VIII treatment for his bleeds, the York District Hospital was a five minute drive from his work so he would, if necessary go to the hospital, receive his treatment and return to work. It never seemed to interfered too much with his employment.
5. Because of the severity of Anthony's haemophilia, he had lived at home with his parents until the age of 35 years. With the advent of Factor VIII treatment together with having been given a disability vehicle, Anthony was able to leave home, job and live independently for the first time in his life. After a few years of working, he was able to buy himself a bungalow.
6. It seems ironic that just as Anthony had started to acquire the things he had waited so long for, he was infected with HIV by the very same treatment that had allowed him his independence. It had turned out to be a double-edged sword.
7. Soon after I met Anthony, he had a blood test to establish whether or not he had contracted HIV from contaminated blood products he had received. I got the impression that his consultant Haematologist, Dr Wylie, at York District Hospital, seemed to be aware that Factor VIII was not a safe product. We were aware that the blood was coming from the United States and that prisoners and prostitutes were being paid to donate their blood.
8. I recall Anthony telling me that at some point before we met, he was made aware of a facility that was being built near Oxford to enable the UK to produce its own blood supplies. He subsequently heard that this project had been

stopped because of a lack of funding. For this reason the country was forced to continue bringing in blood from abroad.

9. I accompanied Anthony to the hospital to hear the results of the blood test. I cannot recall whether I was in the consulting room with him when he was told he was HIV positive but know that I found out at that appointment too. It was a huge shock to both of us. At that time, our relationship had not yet developed into a sexual relationship.
10. I remember that a social worker was assigned to us but don't recall having much contact with her. It felt as if everyone was as much in the dark as we were as to what being HIV positive meant. Apart from Dr Wylie who was aware of the consequences and illnesses that Anthony could experience in time, everyone else seemed to know very little. Dr Wylie was devastated when he heard of Anthony's positive diagnosis.
11. Anthony did not tell his family of his HIV status for a number of years. They were shocked and upset when they found out.
12. Regardless of Anthony's diagnosis, our relationship developed and I moved in with him. Our way of dealing with his illness was to not get too worked up about it. We made sure we were always careful and sensible. As an example, we did not share bath towels but had no concerns about sharing drinking cups. At one point, my son Christopher, who was aware of Anthony's status, came to live with us. I believe that, as a trained nurse myself, I was aware of the risks of becoming infected myself. I had blood tests during the years we were together to confirm my HIV negative status. I never contracted HIV from Anthony.
13. Our acceptance of Anthony's HIV status did not make it any easier when dealing with the general stigma associated with HIV at that time. We lived in fear of people finding out and as such, lived a very isolated life together. As far as we were aware, we were the only couple in York in our circumstances. There was one other couple who lived 16 miles outside York who suffered

from similar circumstances to us but we never met, we only ever chatted to over the phone.

14. Only two or three people ever knew that I was in a relationship with Anthony. I lived 'a big lie' for fear of being people finding out that he was HIV positive. I was reluctant to find permanent employment as I was frightened that I would lose my job if an employer found out about Anthony's illness. I was also fearful of leaving him in case something happened to him. Instead, I attended adult learning courses but even then, I never revealed to any of the other students that I was in a relationship with anyone.
15. Anthony never revealed to his work colleagues that he was HIV positive. They did find out after his death though. He enjoyed and was very involved in the social side of his work. He was part of both the chess and Mastermind teams at Nestle. Apart from the games, the only other social work function he attended was the annual Christmas Party. Anthony was well liked and respected amongst his colleagues.

Section 3. Other Infections

16. The medication Anthony received to treat his HIV infection was aggressive and very debilitating. We had no carers allowance so I nursed Anthony through his various illnesses associated with AIDS. I even learnt to drive so that I could drive him when he was too ill. I remember that I took my driving test with Anthony.
17. In 1992 Anthony was admitted to York District Hospital where he remained for the 6 weeks prior to his death. During this period, he was given large doses of painkillers which meant he was 'out of it' most of the time. I believe that he was medicated too strongly and too soon before he died and that he could have had a few more days of being coherent before passing away. I lost

precious time with him as a result. Anthony's official cause of death was pneumonia. He was 52 years old.

Section 4. Consent

18. I do not believe that Anthony was tested or treated without his knowledge or consent.

Section 5. Impact

19. To this day, I feel the impact of Anthony having been infected with HIV through contaminated blood products. I am still fearful of people's reactions should they find out that he died of AIDS. There are still very few people who know of my relationship with him despite the fact that I have moved away from York.
20. After Anthony's death, word did get out that he had died of AIDS. I had remained living in his bungalow, our home, for approximately two years. I had a particularly awful neighbour who made life intolerable for me. One morning I woke up to find that she had uprooted all of my summer plants, including my sunflowers, and strewn them across the front lawn. I believe that this act of vengeance was borne out of her ignorance and prejudice.
21. Shortly before Anthony's death he had bought a new car which I continued to use. I always left it parked out on the driveway as the garage was full. I became so concerned that someone would damage it in some way by slashing the tyres or scratching it, that I decided to sell it back to the dealership where he had bought it from.
22. Anthony was always concerned as to what might happen to me after his death. People were ignorant and frightened of HIV/AIDS and didn't understand the illness in the way that they do today, although I believe the stigma still remains. I did feel that gay people had a particularly difficult time. I heard of some terrible things that happened to them as a consequence of their HIV status.

Section 6. Treatment/Care/Support

23. Dr Wylie, Anthony's Haematologist, looked after him for many years and attended his funeral after his death.
24. In the main I believe that Anthony was well cared for. There were times when I did feel that the nursing staff were a little indifferent towards him. He was placed in a side room at the hospital. There were occasions when I would arrive at the hospital and notice that he was uncomfortable. I have no real evidence that the nurses were reluctant to handle him, but it is something that I have often wondered about. During the Archer Inquiry, I met a member of the hospital staff who remembered Anthony as being very undemanding and easy to please.
25. Anthony did not wish to receive counselling during his illness. Knowing him as I did, particularly during his last year, I realised that he needed to come to terms with his imminent death in his own, private way and that I needed to give him plenty of space. I learnt that me hovering over him, wanting to do everything for him was not what he wanted. He felt he needed to retain as much of his independence for as long as he was physically capable of doing so.
26. I found this period very stressful and frightening and on the advice of a counsellor recommended by my GP, I attended hypnotherapy sessions. I attended these sessions for about a year before Anthony's death and for a year afterwards as I found them very helpful. These sessions cost £20 each time which I had to pay for as they were not covered by the NHS.

Section 7. Financial Assistance

27. Anthony had always been a member of the Haemophiliac Society. They advised us to make a claim to the Skipton Fund. I cannot recall the amounts exactly nor can I recall when we received them, but Anthony received approximately £25 000 from the Fund and I received about £3000 from them as his carer.
28. I found the process to apply for the payments long and difficult. It required a lot of work from my side to obtain the relevant information for the application. Trying to trace documents from years back took a long time and I felt that the Fund provided very little support. I discovered that many documents had gone missing. The general belief was that they had in fact been shredded.
29. I do not currently receive any benefits from any fund.

Section 8. Other Issues

30. On one occasion, Anthony and I went to visit a haemophilia centre in Oxford, to help carers. At that time, Anthony told me that a centre was being built to produce blood products, with a view to helping the UK become self-sufficient in production. However, the project ran out of money and it was eventually scrapped. I think this information is worth knowing.
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31. I submitted a witness statement to the Archer Inquiry as I believed that the Inquiry should have as much information made available to it as possible. I still have files full of documents which I had collected at the time and which I am happy to make available to this Inquiry if necessary.
32. Over the years since Anthony's death, I have corresponded with various Members of Parliament, the Department of Health and the Haemophiliac Society on the issue of contaminated blood products. For many years I was nervous of the consequences of talking openly about the subject, and in particular HIV/AIDS but have over time become more confident and outspoken. Since Anthony's passing, I have been invited to give talks at colleges about HIV/AIDS and have been interviewed by two local newspapers

about my life with Anthony. I have attached certain exhibits to this statement, including the two newspaper articles, in order that the Inquiry may get a real understanding of my account as an affected partner.

33. As a consequence of contaminated blood products, I lost a very important person in my life and I believe that society lost a most valuable member. The very treatment that was meant to help him in fact caused his unnecessarily premature death. Anthony was a resilient man who had lived with the fear of death all his life and was very philosophical about it. I learnt a lot from him and consider it to have been a privilege to have spent time the time I did with him.

Statement of Truth

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

Signed GRO-C

Dated 9th April 2019