

Witness Name: Alexandra Louise  
Finch

Statement No: **WITN7679001**

Exhibits: **Nil**

Dated: *2nd May 2023.*

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## INFECTED BLOOD INQUIRY

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### WRITTEN STATEMENT OF ALEXANDRA LOUISE FINCH

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I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 2 March 2023.

I, Alexandra Louise Finch, will say as follows: -

#### Section 1. Introduction

1. My name is Alexandra Louise Finch. My date of birth is GRO-C 1962, and my address is known to the Inquiry. I live with my husband, Alan, our son Chase, who is 18, along with our two dogs. I have two children, Ben, and Louise from a previous relationship and three grandchildren who I see regularly. I am a self-employed freelance bookkeeper and a Finance Manager of a Mental Health Charity.
2. I intend to speak about my husband, Alan Finch (born GRO-C 1967), who was infected with Hepatitis C (HCV), as a result of receiving a blood transfusion following a road traffic accident in 1984.

3. In particular, I intend to discuss the nature of his illness, how the illness affected him, the treatment received, and the impact it had on him and our lives together.
4. I confirm that I have chosen not to be legally represented and that I am happy for the Inquiry team to assist me with my statement. I wish to be anonymous for professional reasons.
5. The Inquiry Investigator has also explained the Inquiry's statement of approach and 'Right to Reply' procedure. I understand that if I am critical of a medical professional or organisation, they will have the right to reply to that criticism.
6. Alan and Chase have also submitted statements to the Inquiry, but we have all provided our evidence independently, so I am unaware of their witness numbers.

## **Section 2. How Infected**

7. Alan and I met on GRO-C 1994 – the day before my daughter's first birthday. We had both split up with our partners and forged a relationship together. I knew that Alan had been involved in a serious road traffic accident as a teenager – he had a wore a splint because of a drop foot and the scars on his body were very noticeable.
8. Alan always wanted to travel, but I was unable to because I had two small children at the time. Although it broke my heart, I helped him apply for an Australian temporary work visa and we went our separate ways. From my understanding, Alan tested positive for HCV during a health screen taken as part of his resident visa application.

9. In 1997 Alan moved back to the UK. He had all sorts of adventures during his time in Australia and even got married, but we rekindled our relationship upon his return and married in July 2000.
10. When we started dating again, I was living in rented accommodation with my children. There was one occasion when he came over and accidentally cut himself – I went to help him, but he pulled himself away and told me not to touch him. It was that evening he told me about his HCV infection and explained that he had contracted the virus from the blood transfusion he received in 1984. Alan was keen to emphasise that he was infected through no fault of his own because there were so many negative connotations with the virus. I distinctly remember him saying that he was “dirty”, and this has always stayed with me. I found it sad that he recoiled from me because he felt unclean and was so paranoid about passing on the infection. This incident would have occurred in 1999.
11. Nowadays, it is easy to conduct research online, but when I became aware of Alan’s infection with HCV, I had two young children and did not have the time to go to the library and read medical journals.
12. I was never offered to be tested for HCV and it is something that I have not pushed for. When Alan returned from Australia, we took precautions to prevent the virus from being transmitted and used barrier methods of contraception. Alan was very careful about sharing personal items such as toothbrushes and if he cut himself, he would not let anyone tend to him. From what I understand, Alan was informed how to manage the risk of infection whilst he was in Australia and there was a lot of information given to him which he was able pass on to me. As far as the information provided by the NHS – there was none that I can remember. These days there is so much more information online that we can self-source.
13. Especially in the early stages of our relationship, Alan was very cautious. I remember him forgetting his toothbrush on one occasion when he stayed at my house, and he went back home rather than sharing mine. I was naïve in

some ways, but it must have been horrible for him to feel that way about himself.

### **Section 3. Other Infections**

14. To my knowledge, Alan did not contract any other infections apart from HCV as a result of receiving a blood transfusion.

### **Section 4. Consent**

15. Alan was unconscious, and in a coma, following his motorbike accident, so I assume his parents would have consented for him to receive a blood transfusion. They would have trusted the medical profession to act in Alan's interests and to give him the best possible outcome, there were no suspicions.
16. Alan's parents were never warned of any risks associated with receiving a blood transfusion.
17. I have no reason to believe that Alan was ever tested for the purposes of research without his knowledge or consent.

### **Section 5. Impact**

18. When we first met, he was unaware of his HCV infection and so I used to put his quirky moods and continuous tiredness down to the fact that he could not emotionally heal from the motorcycle accident. His parents refused to talk about the accident because they found it too upsetting and so Alan never had the platform to open up about what he had gone through. In addition to his mental recovery from the accident, Alan had also come out of a bad breakup and so I would put his bad moods down to that.

19. The tiredness was very extreme for his age, and it was as though he could sleep for England. He never felt up to doing any activities with my children, but I never expected him to because they were not his own and I mainly did everything independently. In hindsight, I realise that the HCV was affecting him physically, but we were unaware of this at the time.
20. Not long after Alan and I married, I found out that I was pregnant. He was very worried about passing the HCV infection on to our unborn child and so we ended up having a termination. I hate myself every day for going ahead with that decision and the emotional impact has been profound, but with limited information or medical guidance we made a tough decision, and in hindsight I would suggest that the virus took another life due to lack of information.
21. Alan was contacted by his GP, Dr Twist (Flansham Park Surgery) about a trial treatment of Interferon and Ribavirin in or around 2001. He was notified by letter, the tone of which was almost like he had won the lottery. Southampton Hospital was forthcoming in including Alan in the trial because Dr Twist put his name forward.
22. Although little information was provided about the treatment, Alan was very much sold at the time because he wanted to get rid of his infection. We were not warned of the side effects of the medication other than a possible skin rash and feeling slightly woozy. Had he been fully informed, Alan would have thought twice about going ahead with the trial. I am unaware of the damage it has caused to Alan long-term – there wasn't aftercare or follow ups – so again it feels if Alan was neglected – both physically and medically.
23. Alan would not have vocalised any physical effects of the HCV and the treatment. I knew that he suffered from aches and pains in his liver, but he never expressed any concern about this. He did develop a bad skin rash whilst on the treatment and the doctors at Southampton Hospital instructed him to use an emollient.

24. I noticed that Alan became very woolly headed and indecisive whilst on the treatment and it was almost easier for me to make decisions, so he did not put his brain under pressure. To some extent, this still carries on and even though the virus is now undetectable there are still knock on implications. For example, if you break your leg playing football, you may end up with arthritis when you are older. I feel that the HCV virus and the psychological affects of the blood scandal doesn't allow for complete healing.
25. Alan did not take the medication for the intended length of time, and he stopped prematurely because of the adverse side effects of the Interferon. He became difficult to live with and it completely affected his mood. He was often angry and the things he used to say to me were horrible – I am not after pity, but merely recounting how vile and angry he became whilst on the treatment. Ben and Louise were affected by this time in our life – and again guilt as a mother comes into play.
26. My son, Ben, was a challenging child GRO-C. Alan could not cope with his behavioural issues and was rather horrible towards him. It reached a point where their relationship became very crackly. My daughter Louise understandably spent a lot of time in her bedroom and did not want to come out. It is a horrible time to revisit for this statement – so I don't want to elaborate more than this.
27. I had previously been in an abusive relationship, so Alan's level of anger used to frighten me. Whilst I never felt physically threatened by Alan, I was scared by his anger. I remember he said something vile to me after having sex and it felt that his anger and nastiness had permeated all levels of our relationship and I realised that I could no longer cope with his behaviour. I explained how this made me feel and while it was not an ultimatum, it made him think. It was almost like the mist inside his head cleared and he decided to stop the treatment.

28. Alan spoke to Dr Twist, who informed the doctors at Southampton Hospital that he would not be continuing with the trial.
29. The trial was successful, and Alan's viral count was undetectable once he stopped, however, the medication itself was awful and no support was offered during the course of treatment. It was almost as if we were expected to be grateful that treatment was available and there was no kindness at all.
30. I cannot remember Alan having any follow-up care after the treatment and despite him wanting regular check-ups, this has never been arranged. I had gestational diabetes and have been diagnosed with Type 2 diabetes, which means that I have frequent medical reviews. Even as a woman of a certain age, I have recurrent smear tests and mammograms, yet for Alan, there has been nothing other than what we have pushed for. Alan has almost been left to flounder. I wonder if this is still because of stigma.
31. Since his viral load became undetectable post treatment, there has been no concern about his HCV infection. We are unaware if it has returned and do not know what long term damage has been caused. Alan and I have so many unanswered questions.
32. The COVID-19 pandemic did not help with follow up care. A referral was made from Dr. Parsonage at Flansham Park Surgery to Dr. Roskilly at Worthing Hospital, but she has not yet seen Alan in person – she reviews his notes remotely and they have only had one phone consultation.
33. A couple of blood tests have been taken at Alan's request and more recently, he has had some MRI scans on his liver, but this has not been consistent since he finished the treatment. Something detected on the liver had grown in a follow up scan, so he is currently awaiting the results of a third scan. We have had to push so hard for this and even looked at private medical care, but there was no option to see a hepatologist. It seems absurd that we have had to push so hard for medical care.

34. As a result of the long-term damage caused by the HCV and the treatment, Alan's soul is often shrouded. I can liken it to Dartmoor, or Cornwall – beautiful places but bad weather (or depression in Alan's case) can close in and it feels quite claustrophobic and exhausting to live with, but every so often it lifts for a while and the true beauty is there – which explains why we have been married for 23 years. Through all the cloudy and stormy days – the days when the sun comes out and Alan's soul is shining – it makes the bad weather worth the wait.
35. Alan is a beautiful, lovely person but he gets so tired that sometimes even being alive can exhaust him. I feel so sorry that he was not shown any kindness after his accident, no one helped him to mentally recover and then he had to deal with being told that he was infected with HCV through no fault of his own. It has been incredibly tough for him.
36. I try to be empathetic and supportive of Alan, but I can never fully appreciate how he is feeling and the pain he has experienced. And kindness is something I have referred to throughout this statement – and it is the key to this journey – because there are times when I can't reach Alan when he is really depressed – and kind gestures – like a coffee – cook a favourite meal lets him know that I am still here, and I will always care.
37. The psychological impact of the HCV infection and treatment has been very profound and continues to affect Alan daily. He was more volatile when he was younger, but he still experiences peaks and troughs. He suffers from anxiety, depression, and tiredness, and to a certain extent, elements of his personality have been eroded.
38. Alan has a lot of anxiety. Again, this makes me admire my children even more because they have remained loyal to him, despite how he has been in the past. He used to be very crackly but now takes himself upstairs to watch television if he is having a bad day. If my children and grandchildren are around when this happens, they now understand that he is not being rude,



but that it is a coping mechanism. He must take himself off and soothe his mind so that he can come back and be the person we all love.

39. I am unaware if Alan's HCV infection has impacted his dental care, if this was the case, he would have been mortified and would not have told me. I do, however, have a vague recollection of Alan having a [GRO-C]

[GRO-C]

[GRO-C]

I think in Alan's mind incidents like this reinforces the "dirty" stigma that he feels.

40. Since providing a statement to the Inquiry and seeing the hearings in the news, Alan has been more comfortable discussing his HCV infection as we have had some very wholesome conversations together. The contaminated blood scandal has been brought to light and has gained attention in the public, which has removed the 'dirtiness' from his secret and perhaps he does not feel so alone. In some ways, we have attached a stigma to the infection by not vocalising how it was contracted, and the government used this to its advantage in the cover up of the scandal.
41. Alan and I have evolved as a couple, with this 'gremlin' that lives with us, in our pockets – sometimes it can be growly, sometimes it can bite but it is always there. I now have more patience to deal with it, but I wish it was never there in the first place and feel cheated of Alan without the gremlin, and this I feel is down to the infected blood he was given.
42. I often take on the role of mediator between Alan and Chase. Alan has a certain mindset because of his upbringing, the accident and his infection with HCV and Chase [GRO-C] and there are certain things that need to be a certain way, or it exacerbates [GRO-C] – Alan can be oblivious to this at times (although he is aware of Chase's peculiarities) which is when my mediating skills are needed most. Alan has conditioned himself to keep a lid on his feelings because he never had the opportunity to vocalise his emotions, and this has hardened him as

a person. Chase is also someone who keeps things bottled up – and I often wonder if that is learned behaviour from Alan (which comes back to HCV and being infected). All my children feel comfortable talking openly with me, but with Alan, it is under duress.

43. I have not known Alan without the infection, but I knew him before he became aware and there is a difference. Alan is 5 years younger than me and yet I bounce around as if I am 10 years younger. He often comments that I am his carer and I have to talk him out of that mindset because I am his wife.
44. Alan no longer drinks because of the impact on his liver.
45. As a couple we feel more comfortable in remote places, and we tend to holiday in the Cornish countryside. I would rather go for a walk with my sketchbook and a flask of coffee and absorb my surroundings, rather than go to a fancy restaurant. We don't do this to avoid people – it is just how we roll.
46. I certainly feel that my social life has been limited as a result of Alan's infection with HCV and I feel a sense of loss because of all the idiosyncrasies that make Alan up – sometimes I feel that I have lost my buddy, although there are times when he momentarily comes back. I find it difficult to invite friends' round because if Alan is in a bad place, he can make the whole house feel sad. Socialising to me is having friends' round – going to galleries – going to music gigs.
47. Alan GRO-C when I was pregnant with Chase. He could not do anything at all and had 18 months off work. I had no choice but to work and do all the household chores and I continue to do so now. I have lost my freedom to go to art galleries, to sew, to photograph nature and I can never make plans. Alan and I can look forward to doing something, but if something triggers him beforehand, his mood will change. On occasions, he will still go along with what he has committed to, but it becomes obvious that he is not enjoying himself.

48. We went to a Richard Ashcroft concert in Brighton and Alan stood in the crowd looking grumpy. I found his behaviour embarrassing and it prevented me from having a good time, then he left me and went and sat in the foyer – so an event we were going to go to as a couple didn't go to plan. I do understand that he can get poorly because of his liver, and he has no control over this, but there is an ongoing impact on our social life and compounds the loneliness I feel at times.
49. There are times when I play music loud to sing and dance and this has become my release. It is hard maintaining a good level of optimism when you are living with depressed people. My dance off only happens when I have the house to myself – and it is great to let all the happiness and bounce in me come out – mostly I suppress it and in fact providing my statement has made me question whether this is a healthy way of living for me.
50. I was offered a trial treatment for diabetes, but I refused to take part. I do not want to take unnecessary medication and some of that mistrust comes from what happened to Alan.
51. Whilst Alan was in Australia, I completed a HND in Business Information Technology and worked as a single parent to provide for Ben and Louise. After Alan and I were married and after Chase was born, I enrolled on an online bookkeeping course. I did this so that I could work at night and be with the children during the day. This is how I managed to study, and I grew my business from there. I have recently cut back on some of my clients so that I have more time with my family and for my hobbies. The payments from the EIBSS have enabled me to do this.
52. When I was younger, I wanted to go into costume design but because of my mum's ill health, I joined the civil service straight after school. We were horribly hard up and I remember going to bed hungry. This part of my life has not been dictated by Alan's infection with HCV.

53. Alan is self-employed as a gas engineer and every 5 years he has to renew his gas safe certificates. He now trains other engineers, but he used to work in a commercial environment. During the Interferon and Ribavirin course of treatment, he suffered from brain fog, and it was particularly hard for him to concentrate. He has always struggled with paperwork and being organised. His nickname at home is 'Captain Chaos'! In his new role he is interacting with people each day and this has been good for him.

## **Section 6. Treatment/Care/Support**

54. My husband and I have never been offered any counselling or psychological support via the NHS concerning his infection with HCV. If had been offered during the treatment trial, when everything became rather volatile, it would have helped.
55. Alan struggles to vocalise his feelings and emotions and this I feel is largely due to his upbringing. I find this rather upsetting because my children and I are very open and feel comfortable talking to each other. When I read through Alan's medical records following the accident, there was no kindness, and in response, he has built a barrier around himself.
56. I had no one to talk to about Alan's infection and because he was uncomfortable bringing it up in discussion, it was almost as if we had to live with a dirty secret. I did not think of it that way, but it was not my secret to tell. My mother was a single parent and was diagnosed with leukaemia when I was 16, she sadly passed away 2 years later and so I became the legal guardian of my 13-year-old brother and went out to work instead of pursuing higher education. I feel blessed for the 18 years I had with my mother; she was amazing in every way, but I had no family to talk with at the time I found out about Alan's positive HCV status. I am not close to Alan's parents – we are like chalk and cheese. So, it has been and still is a lonely place for me.
57. I would have accepted any offer of psychological support as I would have been able to talk everything through with someone, who would not get angry.

It would have helped me to rationalise everything and provided me with a platform to describe how I felt. I certainly believe counselling helps you unravel all your thoughts and emotions and rolls them back into a nice ball of yarn rather than it all being jumbled in your mind.

58. I am aware that Alan has used GRO-C  
GRO-C

59. Alan is part of one of the support groups connected to the Infected Blood Inquiry and has spoken to others about his liver concerns.

### **Section 7. Financial Assistance**

60. No medical professional ever informed Alan about the financial assistance available to those infected as a result of the contaminated blood scandal.
61. Alan first became aware of the EIBSS whilst listening to Jeremy Vine on the radio. He looked for more information about the scheme online and requested an application form.
62. I helped him get in touch with the hospital to retrieve copies of his medical notes to support his application and was given the contact details of someone at St Richard's Hospital. We had to complete a form of authority as part of the process and because many years had elapsed since the accident, the amount of documentation received was limited. We were told via email that some of the records had been destroyed because of retention policies (I do wonder if certain notes were destroyed to hide the scandal?) and so we used this as further evidence in the application form. We still found documents that alluded to Alan receiving a blood transfusion and so this was used to support the narrative.
63. Together we filled out as much of the application form as we could, and Alan asked his GP to complete the medical practitioner section.

64. Alan received a Stage 1 payment of £20,000 in 2019 and for him, it was a relief that he had been acknowledged as one of those poisoned by the contaminated blood scandal because the government was too cheap to purchase clean blood.
65. It is nice to know that the money is there, and Alan knows that I would be looked after if anything happened to him. Before Chase was born, Alan made some poor financial decisions (which were attributable to the HCV) and so the money helped to clear some of the debt he amassed. He took out loans as a way of putting a plaster over the issues.
66. As Alan is self-employed, he does not receive any sick or holiday pay. The financial assistance, therefore, provides him with more freedom and if he needs some time off due to his health, we still have a regular source of income.
67. When Alan first received the interim compensation payment, he thought it was great, but I likened it to being given flowers by an abusive partner with the promise to never be abusive again – and this never happens. There have been other government scandals since the infected blood scandal and cover ups – even up to the present day. We are thankful for the compensation of course but I don't think grateful is the correct sentiment. The hard-fought battle to get to a stage of compensation payments highlights the governments unwillingness to acknowledge a wrongdoing.

## **Section 8. Other Issues**

68. I strongly believe that those infected by the contaminated blood scandal are due a compensatory amount of money from the government. I especially feel bad for all the families that have lost loved ones.
69. It must also be acknowledged that for every person infected, a whole host of people, family, friends, and colleagues have been affected and as a result,

numerous generations are impacted. Alan's motorcycle accident happened in 1984 and the consequences were still being felt in 2022. Alan finds it hard to engage with his grandchildren –there are barriers in his relationship with Chase our son – and that will affect their lives going forward. Whilst I acknowledge that the impact on the grandchildren will be less than the impact that my children have felt – still there is an affect – like dominoes. I would like it to be recognised that whilst the current generation was not infected, they still must contend with the psychological effects and are therefore affected.

70. In my opinion the contaminated blood scandal is all down to a cheapskate who thought it would be a good idea to source blood from abroad without it being screened putting financial savings above people's lives. Their actions are comparable to an episode of The Apprentice – where they have sourced the product from the cheapest provider to boost profits, without taking ethics into account. Any concerns were brushed under the carpet because the costing spreadsheet worked so nicely.
71. I am very angry towards the government – Alan never asked to be infected with HCV and he has had to live with the consequences throughout his life, all because of a money saving exercise. It is disgraceful and devalues human life.
72. I was particularly angered by John Major's comment at the hearings, that some people have been "unlucky", especially as the use of contaminated blood was preventable with proper government action. In the moment that a blood transfusion was required there would have been trust in the medical profession – in Alan's case of course his parents would have agreed to a blood transfusion after his motorbike accident to save his life – but in that moment of consent they would not have known that his life and health would have been affected forever. So, in the moment lives were saved but due to government inadequacies the saving of their life condemned those that received the infected products to a lifelong sentence – and their families also received a lifelong sentence. This is an example of "Pay in Forward" in a negative context – for us as a family – Alan received infected blood and the

repercussions are still being felt, and I am sure the thread of these feelings are echoed in many other statements. Every person that received/needed blood should have received uninfected blood so that they had the opportunity to have a wholesome life after treatment – not condemned to pain suffering and stigma. It is morally and ethically wrong on so many levels.

73. I would like to thank the Infected Blood Inquiry for taking the time to listen to my experience as the wife of someone infected as a result of the contaminated blood scandal. It means a lot that my statement will be personally read by the chair, Sir Brian Langstaff as it means my voice will not remain on a pile of paper. I have watched Sir Brian speak throughout the enquiry and I feel that he has been excellent, thorough, and caring – exactly the right person that those infected really need in their corner. I would also like it to be noted that those affected are many – and we suffer in our own way too.

#### **Statement of Truth**

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

Signed GRO-C

Dated *2nd May 2023.*