

# REPORT ON NEW ZEALAND EXPEDITIONARY FORCE SOLDIERS FROM THE COOK ISLANDS WHO DIED SHORTLY AFTER DISCHARGE WHO MAY BE ELIGIBLE FOR INCLUSION ON THE NEW ZEALAND FIRST WORLD WAR ROLLS OF HONOUR

## Executive Summary

1. This report was prompted by an enquiry from the Cook Islands High Commissioner in Wellington. It examines the military service and deaths of 10 Cook Islanders who served in the New Zealand Expeditionary Force (NZE), and who died after discharge prior to 1 September 1921. The report aims to establish if their deaths were attributable to their war service. This report concludes sufficient evidence to establish that the deaths of six former soldiers from tuberculosis (TB) was attributable to their war service. The report, therefore, recommends that the names of Privates Nga Naeiti No. 60769, Taria Tearii (aka Tearii Taria) No. 84513, Rangi Tiaure No. 84532, Mareto Tima No. 84541, Banaba Tipe No. 60653, and Terongo Tuakeo No. 19327 should be added to the New Zealand National War Memorial and Commonwealth War Graves Commission First World War Rolls of Honour.

## Background

2. Rolls of honour are compiled to record the names of those who lost their lives in a conflict. Usually they are restricted to military personnel, but some rolls include civilians who meet particular criteria, such as members of the merchant navy. In 1924 the New Zealand government published: *The Great War, 1914-18, New Zealand Expeditionary Force Roll of Honour* (Wellington: Government Printer, 1924). The *NZE Roll of Honour* is divided into three sections:

Section I -- killed in action, or died from wounds inflicted, accident occurring, or disease contracted while on active service;

Section II -- died after discharge (up to 31 December 1923) from the New Zealand Expeditionary Force from wounds inflicted or disease contracted while on active service; and

Section III -- died from accident occurring, or disease contracted, while training with or attached to the New Zealand Expeditionary Forces in New Zealand.

3. The Commonwealth War Graves Commission (CWGC) First World War roll of honour covers a shorter period, 4 August 1914 to 31 August 1921. The graves of Commonwealth military personnel who died as a result of their service between these dates are cared for by the CWGC as war graves. New Zealand is a signatory to the CWGC Royal Charter and it is unclear why the roll of honour produced by the New Zealand government in 1924 included deaths between 1 September 1921 and 31 December 1923. In 1960 Cabinet decided that a roll of honour should be included in plans for the Hall of Memories to be constructed at the National War Memorial. The roll of honour maintained at the National War Memorial, however, uses the same dates as the CWGC roll. All of the men dealt with in this report died within the dates covered by the CWGC and National War Memorial rolls of honour.

4. The National War Memorial Roll of Honour originally included the names of all members of the New Zealand Armed Forces and New Zealand Merchant Marine who died as a result of their service in conflicts from the South African War of 1899–1902 to the Malayan Emergency. It has since been extended to include members of the

Armed Forces who lost their lives in more recent conflicts. The roll is divided into sections for each Service and for merchant navy personnel and is arranged by conflict.

5. On 22 September 2017 the Cook Islands High Commissioner to New Zealand wrote to the Chief of Defence Force (CDF) asking if the New Zealand Defence Force could investigate the circumstances under which a number of Cook Islanders who had served in the NZEF died within a few years of being discharged. The High Commissioner wanted it established if any of these individuals were eligible for inclusion in the New Zealand National War Memorial and Commonwealth War Graves Commission Rolls of Honour. On 9 October, Commodore Smith replied on behalf of CDF agreeing to do this. The New Zealand Defence Force Historian was tasked with carrying out this work.<sup>1</sup>

6. The preparation of the report has been greatly aided by the detailed research undertaken by Cate Walker, Howard Weddell and others who freely provided me with the fruits of their substantial research into these cases. The medical advice provided by LTCOL Charmaine Tate was also of great assistance. Preparing this comprehensive report has required a considerable amount of archival research.

### **The Scope of the Investigation and General Considerations**

7. Cate Walker and the other researchers who have looked into the deaths of ex-NZEF Cook Islands personnel identified 14 men who died after the end of the First World War up to 31 December 1923. Of this group 10 died before 1 September 1921, which is the cut-off date for inclusion in the First World War section of the New Zealand and CWGC rolls of honour. As the men who died after 31 August 1921 cannot be included on these rolls of honour this report is restricted to the 10 individuals who died before that date: Privates Akatea Aiaia No. 16/1183; Nga Naeiti No. 60769; Mate Paora No. 19260; Taria Tearii (aka Tearii Taria) No. 84513; Rangi Tiaure No. 84532; Mareto Tima No. 84541; Banaba Tipe No. 60653; Aruake Tuaine No. 60762; Terongo Tuakeo No. 19327; and Tom Tupu No. 16/1197.

8. The preparation of this report has been complicated by gaps in the surviving records including on the personnel files of these men and also by the poor legibility of some of the surviving records. In particular, as with other Cook Islanders who died during this period, there are no death certificates giving the cause of death of these men.<sup>2</sup> The lack of available records was a major consideration when in the 1920s the Cook Islands Department and the Department of Internal Affairs considered what kind of headstone should be provided in the Cook Islands for the graves of former members of the NZEF. In New Zealand two types of headstones were used. One war grave headstone was for the graves of personnel whose death was attributable to their war service and who died between 4 August 1914 and 31 August 1921 (referred to as true war graves); and the other non-war grave headstone for veterans whose death was not attributable to their war service.<sup>3</sup>

---

<sup>1</sup> High Commissioner for Cook Islands to Chief Defence Force, 22 September 2017, Smith to High Commissioner, 9 October 2017, NZDF 5400/HCP/2.

<sup>2</sup> Newton to Resident Commissioner Rarotonga, 18 July 1929 and related papers, IA1, 32/2/377, R 1233 3811, ANZ.

<sup>3</sup> Ibid. Under-Secretary Internal Affairs to Secretary Cook Islands Department, 14 December 1925; Department of Internal Affairs, *War Graves and Servicemen's Cemeteries* (Wellington: Department of Internal Affairs, 1987), pp.4–9.

9. Initially, it seems, it was intended that both types of headstone should be used in the Cook Islands.<sup>4</sup> In 1928, the Cook Islands Department concluded that: "we have approximately 46 graves of returned soldiers in the Cook Islands, but it is impossible to say from the records which deaths arose from War Service. The best information I am able to get would indicate that possibly one half come under this head". The Cook Islands Department was anxious to ensure that the graves of former members of the NZEF should be appropriately marked.<sup>5</sup> Also taken into consideration was the belief that Cook Islanders would not understand the difference between the two types of headstone and that the Cook Islands Department would have to pay for non-war grave headstones. Eventually, it was agreed that because it was impossible to determine whether or not deaths were attributable to war service all the graves of former NZEF personnel in the Cook Islands should be of the non-war grave type. The Department of Internal Affairs and the Cook Islands Department agreed that each would each pay half the cost of the headstones. The Cook Islands Department assumed responsibility for the erection of the gravestones and the care of the graves.<sup>6</sup> The discussions about what kind of gravestone should be used prompted the New Zealand Resident Commissioner in the Cook Islands to conduct further investigations which lead him to conclude that of the 47 returned soldiers who had died, "at least 28 died as result of War Service or from T.B. as result of War Service".<sup>7</sup>

10. The surviving records indicate that in most cases the eligibility for inclusion on the appropriate rolls of honour of the former soldiers who died on or before 31 August 1921 was not properly investigated. Similarly, there is on the personnel files of these men little evidence that the military authorities considered giving the families of these deceased soldiers the memorial plaque and scroll given to the next of kin of soldiers and former soldiers whose death was attributable to their war service. This state of affairs may well be related to the limited information the military authorities had about the circumstances under which these men died and the decision to erect only non-war grave type headstones in the Cook Islands. This report sets out to address these failings and to determine in as many cases as possible whether or not the deaths of these ex-NZEF soldiers in the Cook Islands were attributable to their war service. Although the gaps in the written record relating to the service and subsequent deaths of these Cook Islands soldiers remains a serious problem, this report concludes that through a careful assessment of the available documents and by comparing the cases of the Cook Islanders against those other former members of the NZEF who died in New Zealand in similar circumstances, robust conclusions can in most cases be reached.

11. Of the 10 men discussed in this report, seven died of tuberculosis. In 1929 the Resident Commissioner, the most senior New Zealand administrator in the Cook Islands, noted when forwarding a list of deceased former soldiers that: "In nearly all cases it was found that where tuberculosis was the cause of death it was the result of war service".<sup>8</sup>

---

<sup>4</sup> Newton to Secretary Cook Islands Department, 2 November 1928, IA1, 32/2/377, R 1233 3811, ANZ

<sup>5</sup> Ayson to Secretary Cook Islands Department, 13 October 1928, IA1, 32/2/377, R 1233 3811, ANZ.

<sup>6</sup> Ibid., Under-Secretary Internal Affairs to Minister of Internal Affairs, 16 September 1929, Marginalia by the Minister of Internal Affairs, 18 September 1929 and Controller and Auditor-General, 22 September 1929.

<sup>7</sup> Ibid., Ayson to Secretary Cook Islands Department, 28 May 1929.

<sup>8</sup> Ayson, Resident Commissioner to Secretary Cook Islands Department, 20 November 1929, IT1, 122/2/2, R17963845, ANZ.

12. Tuberculosis (TB) results from an infection with one of a related group of bacteria in the Mycobacterium Tuberculosis complex. It has previously been known by the colloquial term 'consumption'. TB is spread from person to person through the air and most often affects the lungs where without effective treatment the disease can be fatal. TB can be primary, latent or reactivated. People with primary active TB can infect others through close contact. The risk of contracting TB is increased in overcrowded and poorly ventilated living or working conditions. Smokers also have an increased risk of infection. Latent TB means a person is infected but not unwell and they have a 5–15% lifetime risk of becoming ill with TB. The latent state explains delayed presentations of TB after departure from the conditions under which it was contracted. WHO statistics claim about one-quarter of the world's population has latent TB – and that is with the modern availability of vaccine and treatment options. Tuberculosis was endemic in many countries in the early 1900's including in the Middle East, Africa and the South Pacific.<sup>9</sup>

13. TB continued to claim the lives of many former soldiers throughout the interwar period.<sup>10</sup> Before, during and after the First World War, TB was a serious problem in the Cook Islands and a common cause of death.<sup>11</sup> It was also a major health issue in New Zealand, claiming between 693 and 832 lives each year from 1910 until 1919.<sup>12</sup> After the First World War, control of TB was markedly improved through the use of mass chest x-rays. During the Second World War men enlisting in the Second New Zealand Expeditionary Force were commonly given chest x-rays to detect signs of tuberculosis. As a result TB was much less of a problem to the New Zealand military authorities during the Second World War than it had been during the earlier war.<sup>13</sup> During the First World War the military authorities recognised that detecting TB was a serious challenge. In particular, it was extremely difficult for medical officers examining recruits to detect non-obvious symptoms of tuberculosis. Similarly, at that time the grounds for determining if the illness in former soldiers was related to their war service were not clear. As the medical director of a sanatorium in Christchurch, which treated returned soldiers with tuberculosis, noted in 1917:

It is well-known that the germs of the disease are capable of lying latent in the system for prolonged periods, and consequently it does not follow, when a person shows signs of consumption (TB), that the disease has been contracted within the last few weeks or months. The life the soldier leads on Active Service and even in the training camps is just the kind of life which in certain constitutions will bring about a condition of the body favourable to the development of consumption, and when, in addition to his strenuous life, he has suffered from any of the various debilitating diseases to which soldiers are subject, the risk of consumption developing if the person has been exposed to infection, is very considerable. If it is assumed that because a man does not come under treatment

<sup>9</sup> Comments by LTCOL Tate on draft report attached to email Tate to Crawford, 17 January 2019, NZDF 5400/HCP/2.

<sup>10</sup> See for example Secretary Cook Islands Department to Under-Secretary Department of Internal Affairs, 13 December 1932 and enclosures, IA1, 32/2/377.

<sup>11</sup> *Appendix to the Journal of the House of Representatives*, 1915, A-3, pp. 22–23; Raeburn Lange, 'A History of Health and Ill-Health in the Cook Islands', PhD Thesis, University of Otago, 1982, pp. 311–19; Howard Weddell, *Soldiers from the Pacific: the Story of Pacific Island Soldiers in the New Zealand Expeditionary Force in World War One* (Wellington: the Author, 2015), p. 25.

<sup>12</sup> *AJHR* 1920, H-31, p. 3.

<sup>13</sup> T Duncan M Stout, *War Surgery and Medicine* (Wellington: War History Branch, 1954), pp. 588–89.

for tuberculosis until several months after returning to New Zealand from the Front, that his Active Service is therefore not the cause of his disease a very grave injustice will be done to numbers of men, because it is quite certain that the disease which has been definitely brought about by Active Service will, in a certain number of cases, not show itself for months or even for two or three years or longer after the soldier's return to this country.<sup>14</sup>

14. Later in 1917, a committee reviewed how soldiers who had contracted tuberculosis should be treated and as a result of its considerations the New Zealand Pensions Department adopted the following principles:

1. That where the disease had developed during service overseas the man should always be held to be pensionable.
2. In any case where the man was passed for military service it should be presumed that the disease had been contracted or aggravated by such service unless the invaliding board or the medical advisors to the Ministry are satisfied that phthisis (progressive wasting) was present previous to enlistment and that the disease was not aggravated by service.<sup>15</sup>

15. Although the award of war pensions and inclusion of individuals on rolls of honour who died of illness after being discharged are separate issues, they both hinge on whether or not the individual's illness or disability was attributable to their war service. The principles laid down by the New Zealand war pension authorities, therefore, constitute useful guidelines for the consideration of the Cook Islands cases in which the former soldiers died of tuberculosis.

16. Comparing the cases of the Cook Islands soldiers with those of other former NZEF soldiers who died of tuberculosis on or before 31 August 1921, and who are already on the appropriate rolls of honour, also provides useful pointers as to how the cases under consideration should be approached. To do this the surviving records relating to as many such men as could be identified or had been identified by Cate Walker were examined. The cases of several of these men are discussed in some detail in Annex A to this report.

17. In addition, as part of the research for this report, an attempt was made to establish the criteria used in the 1920s to determine if men who died after discharge and before 1 September 1921 should be included on the roll of honour. Unfortunately, the documentation setting out the policy adopted does not appear to have survived. In an effort to get around this lack of documents the military personnel files of a random sample of 20 per cent of such men included on the New Zealand First World War roll of honour were examined. This research, which was principally conducted by a specially contracted researcher, has made it clear that the surviving records on many of these men are far from complete. It was, however, apparent that men who died from the effects of a medical condition which may have existed before they enlisted, but which was aggravated by their war service, were generally included on the roll of honour. Specifically, men discharged as unfit for further service because of

---

<sup>14</sup> Blackmore to Chesson, 6 March 1917, Lyth to Braithwaite, 9 March 1917, SSW1844 12, W76, R3984476, ANZ.

<sup>15</sup> Ibid., Extract from report to the Minister for the week ended 8 June 1917 and marginalia dated 16 August 1917 and related papers.

tuberculosis and who died as result of that condition, were commonly included.<sup>16</sup> Although there is a possibility that in at least some cases eligibility decisions were made on the basis of medical records that no longer exist, the research undertaken for this report has made it possible to form sound conclusions about the criteria used to determine if such men should be included on the First World War roll of honour. These conclusions have enabled reasonable inferences to be made in cases of several of the Cook Islands soldiers.

### The Cook Island Cases

#### *Private Akatea Aiaia, No. 16/1183 - Cause of death: unknown*

18. Akatea Aiaia was born about 1895 and was attested into the NZEF on 30 September 1915. He was a member of the 1st Rarotongan Contingent, which was recruited in the Cook Islands to serve as reinforcements for the Maori Contingent.<sup>17</sup> The medical examination conducted on entry into the NZEF found that his chest was well formed and his lungs were normal. After initial training in New Zealand between 30 September 1915 and February 1916 Private Aiaia sailed for service overseas on 4 February 1916.<sup>18</sup> He served with the Pioneer Battalion in France and Belgium between April 1916 and January 1918. During his service in Europe, Aiaia was admitted to hospital on a number of occasions with measles and VDG (Venereal Disease Gonorrhoea). In January 1918 he was transferred to the Rarotongan Company in Egypt. While serving in the Middle East, Aiaia contracted malaria and dysentery, and spent weeks in hospital. He was, it appears, too ill to return to New Zealand with the rest of the Rarotongan Company, and did not embark for New Zealand until March 1919. During the voyage back to New Zealand, Aiaia underwent his demobilisation medical board, which found that he had no disabilities and was fit. He was discharged from the NZEF on 9 July 1919 on the "termination of his period of engagement".<sup>19</sup>

19. Akatea Aiaia died on 6 June 1921 on the island of Aitutaki in the Cook Islands. He was 21 years of age according to the information on his gravestone. If this age is correct the date of birth on his personnel file is incorrect.<sup>20</sup> In March 1926 the Cook Islands Administration produced a draft First World War roll of honour. On this roll Akatea Aiaia is listed as one of the men who "Died in New Zealand or Cook Islands as result of War Service".<sup>21</sup> Later that year the President of the Cook Islands Returned Soldiers' Association stated that Akatea Aiaia's death, like that of a number of other former soldiers, was apparently due to his war service.<sup>22</sup> On 18 September 1928 Akatea Aiaia's NZEF personnel file was, however, annotated with the remark that he was not eligible for the memorial plaque and scroll which was issued to the next of kin

<sup>16</sup> See Annex A; Josh King, Roll of Honour Research Report, 13 March 2019, NZDF5400/HCP/2, HQNZDF.

<sup>17</sup> Weddell, pp.17–18, 32–33

<sup>18</sup> Attestation Form dated, 30 September 1915 medical examination form, dated 29 September 1915 History-Sheet, Demobilisation Medical Form, Dated 15 March 1919, Akatea Aiaia NZEF PF, R 2226 9545, ANZ.

<sup>19</sup> History-Sheet, Demobilisation Medical Form, Dated 15 March 1919, Akatea Aiaia NZEF PF

<sup>20</sup> Register of Deaths, Cook Islands National Archives, copy of page provided by Cate Walker, and photograph of gravestone, provided by Cate Walker.

<sup>21</sup> Draft roll of honour enclosure to Resident Commissioner Cook islands to Secretary Cook Islands Administration, 8 March 1926, IT1, 122/2/2, R17963845, ANZ.

<sup>22</sup> President Cook Islands Returned Soldiers' Association to Scott, 15 May 1926, IA 32/2/389, copy on 32/2/377.

of service men and women who died as a result of their war service during the First World War.<sup>23</sup> This annotation clearly indicates that the New Zealand Military Forces did not consider that Aiaia's death was attributable to his war service. It is quite possible that this decision was made on the basis of records that are no longer in existence. It is the New Zealand Defence Force's policy when dealing with roll of honour cases not to go against such a finding unless there is substantial new evidence available or clear evidence that a mistake has been made.<sup>24</sup> That this is the policy that should be pursued in this case is supported by the absence in any of the relevant surviving documents of a cause of death for Akatea Aiaia.<sup>25</sup> Therefore, without further information, especially about the cause of this man's death, his name should not be added to the First World War rolls of honour.

*Private Nga Naeiti, No. 60769 – Cause of death: tuberculosis*

20. Nga Naeiti was attested into the NZEF's 3rd Rarotongan Contingent on 12 March 1918. The medical examination undertaken at the time of his enlistment found that his chest was well formed and his lungs normal. At the time of his enlistment he was described as being about 19 years of age. After undergoing initial training in New Zealand, he embarked on 13 June 1918 in Wellington and disembarked at Suez on 4 August 1918. He was then posted to the New Zealand training unit and depot at Ismailia. Naeiti's personnel file is incomplete, and it is not clear where he was serving before he embarked at Suez for New Zealand on 14 December 1918.<sup>26</sup>

21. Naeiti returned to New Zealand on 28 January 1919 and on 2 February 1919 he underwent a medical board. Unfortunately, the record of this medical board is in places illegible. The proceedings of this board described Naeiti as suffering from "Enlarged Cervical Glands? T.B". It notes that the disability was due to causes existing prior to enlistment and notes the specific cause as being "infection – origin unknown". The board described his disabilities as "Nil at present" and noted under the heading 'progress' that the glands were "much less in size. General condition much improved". The board concluded that his disability was likely to continue indefinitely. It also found that he was not fit for active service but that he was fit for civil employment. In answer to question 11 on the medical form: "Was the disability contracted in the service?" The answer given as "yes light duties". Given the question this does not make sense especially when in answer to question 12: "Was it [the disability] caused by military duty?" The answer written in is "no". The findings of the board are somewhat complicated by the fact that there is no answer recorded to question 14: "If replies to 11, 12 and 13 are all of the negative give reasons for so finding". We do not know the answer to question 13 because it is missing from the surviving copy of the form, but the fact that no answer is recorded to this question makes sense if the answer of yes to question 11 is correct. There is no answer to question 13 which is: "If disability is not contracted in service nor by military duties, was it aggravated by them?" The board

<sup>23</sup> History-Sheet, Akatea Aiaia NZEF PF, information provided by Cate Walker.

<sup>24</sup> Enclosure 1 to NZDF Hist to CDF, 5400/HCP/2, 14 Aug 2013.

<sup>25</sup> Register of Deaths, Cook Islands National Archives copy of page provided by Cate Walker, information on gravestone, 'Cook Islands Returned Soldiers Deceased' Enclosure to Secretary Cook Islands Department to Under-Secretary Department of Internal Affairs, 19 December 1929, IA1, 32/2/377, R 1233 3811, ANZ.

<sup>26</sup> Attestation form dated 12 March 1918, medical examination report dated 15 March 1918, History-Sheet, Casualty Form-Active Service, Nga Naeiti NZEF PF, R 2137 9277, ANZ; Weddell, 41–42. His service was reckoned from 16 February 1918, which is, it appears, was the date on which he joined for the 3rd Rarotongan Contingent in the Cook Islands.

recommended that Naeiti be discharged from the NZEF. The board apparently considered recommending that he be granted a pension, but later changed its mind.<sup>27</sup> It is possible that by mistake the board put in the answer to question nine in the space for question 11, as the same medical board when examining another Cook Islands soldier on the same day put in exactly the same answer, "yes light duties", in answer to question nine: "Is the soldier fit for Civil Employment?".<sup>28</sup> Naeiti was finally discharged from the NZEF on 20 March 1919 as "no longer physically fit for War Service (Enlarged Cervical glands? TB)".<sup>29</sup>

22. Nga Naeiti died in the Cook Islands of "tubercular glands" on 28 January 1921.<sup>30</sup> His gravestone records his age as 20 years old, although the Department of Internal Affairs notification of death form gives his date of birth as "about 1899".<sup>31</sup> The President of the Cook Islands Returned Soldiers' Association stated in 1926 that Nga Naeiti's death, along with those of a number of other men, was due to war service.<sup>32</sup> It is clear that there was no sign of Naeiti suffering from tuberculosis when he enlisted and that this condition, which developed during his service, ended his war service and resulted in his death in 1921. If the circumstances of his illness and death are considered against the guidelines laid down by the New Zealand pension authorities for dealing with returned soldiers suffering from TB, it seems clear that his illness would have been attributable to his war service. The problems with the record of the February 1919 medical board and other deficiencies in this man's personnel file do not undercut these central findings. The name of Nga Naeiti should, therefore, be added to the appropriate First World War rolls of honour.

*Private Mate Paora, No. 19260 – Cause of death: tuberculosis*

23. Mate Paora was attested into the 2nd Rarotongan Contingent of the NZEF on 9 July 1916. The medical examination conducted when he entered the NZEF concluded that his chest was well formed and lungs normal. After training in New Zealand he embarked for overseas service on 16 November 1916 and disembarked at Suez on 27 December 1916. He initially served with the New Zealand training unit and depot at Ismailia before transferring to the Rarotongan Company on 7 April 1917. During his service in Egypt, Paora was hospitalised on several occasions with an inflamed stomach, gastritis, and jaundice. On 26 August 1918 he sprained his back. He embarked for New Zealand in December 1918.<sup>33</sup> During the voyage back to New Zealand he was assessed by a medical board on 19 January 1919. The board described his original disability as being due to jaundice and a strained spine. It concluded that the disability did not exist before enlistment and gave the specific cause

<sup>27</sup> 'Proceedings of a Medical Board' convened on 2 February 1919, History-Sheet, Nga Naeiti NZEF PF.

<sup>28</sup> 'Proceedings of a Medical Board' convened on 19 January 1919, Mata Paora NZEF PF, R2138 3701, ANZ.

<sup>29</sup> History-Sheet, Nga Naeiti NZEF PF.

<sup>30</sup> 'Cook Islands Returned Soldiers Deceased' Enclosure to Secretary Cook Islands Department to Under-Secretary Department of Internal Affairs, 19 December 1929, IA1, 32/2/377, R 1233 3811, ANZ.

<sup>31</sup> Photograph of gravestone provided by Cate Walker; Department of Internal Affairs 'Notification of Death', History-Sheet, Nga Naeiti NZEF PF, ANZ.

<sup>32</sup> President Cook Islands Returned Soldiers' Association, to Scott, 15 May 1926, IA 32/2/389 IA1, 32/2/377, R 1233 3811, ANZ. Draft roll of honour with annotations enclosure to Ayson Resident Commissioner Cook Islands to Secretary Cook Islands Administration, 8 March 1926, IT1, 122/2/1, R17963844, ANZ.

<sup>33</sup> Attestation form, dated 9 [?] July 1916, medical examination form dated 6 June 1916 History-Sheet, Casualty form Active Service, extract from daily orders New Zealand training unit and depot, 28 April 1917, Mata Paora NZEF PF, R 2138 3701, ANZ.



in the case of the jaundice as “infection response o[n] a[ctive] s[ervice]” and the cause of the second disability as an accident while performing military duty. The board thought his disability was likely to continue indefinitely. It concluded that he was not fit for active service, but was fit for civil employment on “light duties”. The board found that the disability was contracted in the service and that the back injury was caused by military duty. In its view his “capacity for earning a full livelihood in the general labour market” had been lessened by a quarter. In its view this level of disability was likely to continue for six months at which time the scale of pension, if granted, should be reviewed.<sup>34</sup>

24. On 11 February 1919 Paoara was examined in Wellington by a demobilisation medical board, which concluded that his general health and physical condition was good and that he was suffering from no disability as a result of his military service which “would reduce his earning capacity in civil life”. In particular they found that his respiratory system was normal.<sup>35</sup> The findings of this medical board contradict those of the board convened a month earlier. They are also at odds with the fact that Private Paora was discharged from the NZEF on 20 March 1919 as being “no longer physically fit for war service on account of illness contracted on active service”. The conditions responsible were specified as jaundice and a sprained back.<sup>36</sup>

25. Mate Paora died on 1 August 1919 in the Cook Islands and is buried on Aitutaki. His military personnel file, however, gives his date of birth as 1896, which suggests he was 22 or 23 years old at the time of his death.<sup>37</sup> His cause of death is given as tuberculosis in a list of deceased returned soldiers prepared by the administration in the Cook Islands in 1929.<sup>38</sup> He is not listed as one of the former soldiers recorded in 1926 as having died as a result of his military service.<sup>39</sup>

26. Mate Paora’s case is a difficult one. Paora’s death from TB less than five months after being discharged from the NZEF suggests a link between his war service and his death, especially as in 1929 the Resident Commissioner in the Cook Islands expressed the view that: “In nearly all cases it was found that where tuberculosis was the cause of death it was the result of war service”.<sup>40</sup> There are a few cases of men who do not appear to have been diagnosed with tuberculosis during their NZEF service who subsequently died of that disease being included in the New Zealand and CWGC First World War rolls of honour. It could be argued on this basis that Paora’s name should be added to the First World War rolls of honour. However, in these cases it is possible that the decision to include these men on the appropriate rolls of honour was made on

---

<sup>34</sup> ‘Proceedings of a Medical Board’ convened on 19 January 1919, Mata Paora NZEF PF, ANZ. O.A.S. may mean ‘origin as specified’.

<sup>35</sup> Proceedings of a Demobilisation Medical Board, convened on 11 February 1919, Mata Paora NZEF PF.

<sup>36</sup> Note on file cover, History-Sheet, Mata Paora NZEF PF.

<sup>37</sup> History-Sheet, Mata Paora NZEF PF; enclosure to Walker to Crawford, 3 October 2017, NZDF 5400/HCP/2.

<sup>38</sup> ‘Cook Islands Returned Soldiers Deceased’ Enclosure to Secretary Cook Islands Department to Under-Secretary Department of Internal Affairs, 19 December 1929, IA1, 32/2/377, R 1233 3811, ANZ.

<sup>39</sup> President Cook Islands Returned Soldiers’ Association, to Scott, 15 May 1926, IA 32/2/389 IA1, 32/2/37; draft roll of honour with annotations enclosure to Ayson, Resident Commissioner Cook Islands to Secretary Cook Islands Administration, 8 March 1926, IT1, 122/2/1, R17963844, ANZ.7, R 1233 3811, ANZ.

<sup>40</sup> Ayson, Resident Commissioner to Secretary Cook Islands Department, 20 November 1929, IT1, 122/2/2, R17963845, ANZ.

the basis of documents that no longer survive.<sup>41</sup> Crucially, Paora was never identified by the Cook Islands authorities as being one of the soldiers who had died as result of their war service. It is possible that Paora only developed TB after he left the NZEF.<sup>42</sup> The standard of proof required by the NZDF to recommend the addition of an individual to the New Zealand and CWGC First World War rolls of honour is high. Although it is quite possible that Mate Paora's death was attributable to his war service, the available evidence does not reach the standard required to recommend the addition of his name to the appropriate rolls of honour.

*Private Taria Tearii (aka Tearii Taria), No. 84513 – Cause of death: tuberculosis*

27. Taria Tearii (aka Tearii Taria) attested into the 4th Rarotongan Contingent NZEF in Auckland on 12 June 1918. The record of the medical examination that he would have undergone at this time has not survived. If there had been any symptoms of tuberculosis and other serious disease, however, it is very unlikely that he would have been attested into the NZEF. At the time of his enlistment he was described as being "about 18" years old.<sup>43</sup> His military service is restricted to New Zealand.<sup>44</sup> On 19 February 1919 Tearii's health was reviewed by a medical board. Although the record of this board's proceedings is difficult to read it is clear that it found that his original disability was "influenza pneumonia", which had been contracted during his military service. Tearii's state of health was clearly very bad as the board concluded that his "capacity for earning a full livelihood in the general labour market" was lessened by 100% and that his disability was permanent. It recommended that he be discharged from the NZEF.<sup>45</sup> Tearii was discharged from the NZEF on 20 February 1919.<sup>46</sup>

28. Taria Tearii died on 19 September 1919 at Aitutaki in the Cook Islands. His age is recorded at that time as being 18 years.<sup>47</sup> His cause of death is given as tuberculosis in the list of deceased returned soldiers prepared by the administration in the Cook Islands in 1929.<sup>48</sup> He is not listed as one of the former soldiers recorded by the RSA or the Cook Islands Administration as having died as a result of his military service, although it does note his death.<sup>49</sup>

29. There is no suggestion in the surviving medical papers on Taria Tearii's NZEF personnel file that he contracted TB, the illness that killed him, during his war service. This does not, however, as discussed above, necessarily mean that he cannot be included on the roll of honour. That he developed a serious lung disease during his military service and was significantly disabled by it is important. It is quite possible that

<sup>41</sup> History-Sheet, TB Treatment Form, Dated 10 February 1920 and Related Documents, Ernest Philip Hatch PF, R16792930, ANZ; History-Sheet and Related Papers, Stanley Allender PF, R22270830, ANZ.

<sup>42</sup> Advice received from LTCOL Tate, email Tate to Crawford, 19 January 2019, NZDF 5400/HCP/2.

<sup>43</sup> Attestation form, dated 12 June 1918, Taria Tearii NZEF PF, R 7824665 ANZ.

<sup>44</sup> 'Medical Interrogation on Demobilisation of Soldiers Who Have Not Left New Zealand', no date Taria Tearii NZEF PF, ANZ.

<sup>45</sup> 'Proceedings of the Medical Board', 19 February 1919, Taria Tearii NZEF PF, ANZ.

<sup>46</sup> History-Sheet Taria Tearii NZEF PF.

<sup>47</sup> Department of Internal Affairs Notification of Death, date illegible, Department of Internal Affairs Notification of Death, date illegible, Taria Tearii NZEF PF, ANZ; illegible to Mulia [?], 1 October 1929, IA1, 32/2/377, R 1233 3811, ANZ.

<sup>48</sup> 'Cook Islands Returned Soldiers Deceased' Enclosure to Secretary Cook Islands Department to Under-Secretary Department of Internal Affairs, 19 December 1929, IA1, 32/2/377, R 1233 3811, ANZ.

<sup>49</sup> Draft roll of honour with annotations enclosure to Ayson Resident Commissioner Cook Islands to Secretary Cook Islands Administration, 8 March 1926, IT1, 122/2/1, R17963844, ANZ.

Taria Tearii was suffering from tuberculosis during his service in the NZEF, but this was not diagnosed. In this significant respect his case is different from that of Mate Paora, for whom there is no surviving evidence that he suffered from any lung disease or illness during his war service. Furthermore, that Tearii was so ill in February 1919 and died seven months later does strongly suggest that there was a link between the ill-health he suffered during his service in the NZEF and his premature death. When the circumstances of his death are assessed against the guidelines used in TB cases by the New Zealand pension authorities it can reasonably be concluded that his death was attributable to his war service. On that basis his name should be added to the appropriate rolls of honour.

*Private Rangī Tiaure, No. 84532 – Cause of death: tuberculosis*

30. Rangī Tiaure was attested in the NZEF on 10 July 1918 as a member of the 4<sup>th</sup> Rarotongan Contingent. The medical examination conducted when he entered the NZEF concluded that his chest was well formed and his lungs normal.<sup>50</sup> Private Tiaure was examined by a medical board on 4 September or October [the whole form is barely legible]. The board concluded, as far as its report can be deciphered, that he was suffering from tuberculosis and was unfit for active service. In the board's view the condition was aggravated by his military duty and was related to the change in climate he experienced in coming to New Zealand.<sup>51</sup> On 16 November 1918 he was granted a certificate of leave in lieu of discharge.<sup>52</sup> The notification of death form on his file, however, gives his discharge date as 7 December 1918.<sup>53</sup>

31. Rangī Tiaure died in the Cook Islands on 13 January 1920 at the age of about 23 or 27.<sup>54</sup> His cause of death was "Tubercular glands".<sup>55</sup> He is not recorded as one of the former soldiers who had died as a result of their military service on the roll of honour compiled by the New Zealand authorities in the Cook Islands, although it does note his death.<sup>56</sup> Rangī Tiaure died as a result of the same condition that led to the termination of his military service. The medical board that examined him in New Zealand thought that his condition had been aggravated by his war service, which implies that they thought it was a pre-existing condition. There is, however, no reference to any such medical issue in the medical report completed when he was attested into the NZEF. In any case the finding that the condition which eventually killed him was aggravated by his war service is as noted earlier sufficient to merit his addition to the appropriate First World War rolls of honour.

*Private Mareto Tima, No. 84541 – Cause of death: tuberculosis*

32. Mareto Tima, who was aged 26, was attested into the NZEF's 4th Rarotongan Contingent at Rarotonga on 12 June 1918. The medical examination he underwent

<sup>50</sup> Attestation forms, dated 12 June 1918, medical examination report dated 11 June 1918, Rangī Tiaure NZEF PF, R 2202 4521, ANZ.

<sup>51</sup> 'Proceedings of the Medical Board', 19 February 1919, Rangī Tiaure NZEF PF, ANZ.

<sup>52</sup> Ibid.

<sup>53</sup> Department of Internal Affairs Notification of Death, advice received 4 June 1926 [?], Taria Tearii NZEF PF, ANZ.

<sup>54</sup> Information provided by Cate Walker Department of Internal Affairs Notification of Death, advice received 4 June 1926, Rangī Tiaure NZEF PF, ANZ

<sup>55</sup> 'Cook Islands Returned Soldiers Deceased' Enclosure to Secretary Cook Islands Department to Under-Secretary Department of Internal Affairs, 19 December 1929, IA1, 32/2/377, R 1233 3811, ANZ.

<sup>56</sup> Draft roll of honour with annotations enclosure to Ayson, Resident Commissioner Cook Islands to Secretary Cook Islands Administration, 8 March 1926, IT1, 122/2/1, R17963844, ANZ.

when he entered the NZEF found that his chest was well formed and his lungs were normal.<sup>57</sup> Private Tima did not serve outside New Zealand and was given a certificate of leave in lieu of discharge on 12 June 1919.<sup>58</sup>

33. Tima returned to the Cook Islands where he died on 10 August 1919 at the age of 30 years.<sup>59</sup> His cause of death according to the list compiled in 1929 was "Tuberculosis. Lungs thoroughly collapsed".<sup>60</sup> His Department of Internal Affairs notification of death form states that he was sent back to the Cook Islands with empyema sinus, a condition often associated with tuberculosis, pneumonia or other lung disease.<sup>61</sup> Tima was apparently granted a war pension because of his "chest trouble".<sup>62</sup> Tima died only two months after being discharged from the NZEF. It is unclear whether Tima developed TB during his military service or if it was a pre-existing condition, but there is no doubt that when he enlisted he was considered fit for service and that when he completed his war service he was an ill man and remained seriously sick with TB until his death from that condition. Moreover, at the time of his death he was in receipt of a war pension paid because of his lung disease. There is ample evidence that Mareto Tima's death was attributable to his war service and that his name should, therefore, be added to the appropriate rolls of honour.

*Private Banaba Tipe, No. 60653 – Cause of death: tuberculosis*

34. Banaba Tipe was attested into the 3rd Rarotongan Contingent, NZEF in Auckland on 12 March 1918. He was about 28 years of age. The medical examination conducted when Private Tipe entered the NZEF found that his chest was well formed and his lungs were normal. The version of the NZEF medical examination form used when Tipe enlisted included the following question: "Have you ever been notified for consumption [tuberculosis]"? Tipe said he had not.<sup>63</sup> After completing his initial training Tipe embarked for service overseas on 13 June 1918 and disembarked at Suez on 4 August 1918. He was posted to the New Zealand training depot before joining the Rarotongan Company on 18 September 1918. The following month he was admitted to hospital. Tipe remained ill until embarking for New Zealand on 14 December 1918. During the voyage back to New Zealand he was examined by a medical board that concluded that he was suffering from tuberculosis which he had contracted during his military service. The board found that he was not fit for any kind of military service. He returned to New Zealand on 28 January 1919.<sup>64</sup> Private Tipe was discharged from the

<sup>57</sup> Attestation form, dated 12 June 1918 and a medical examination report dated 3 August 1918 [?], Mareto Tima NZEF PF, R 22013683, ANZ.

<sup>58</sup> New Zealand Expeditionary Force Certificate of Leave in lieu of Discharge, dated 12 June 1919, Mareto Tima NZEF PF.

<sup>59</sup> Gravestone information provided by Cate Walker; Department of Internal Affairs Notification of Death, advice received to date for June 1926, Mareto Tima NZEF PF, ANZ; 'Cook Islands Returned Soldiers Deceased' Enclosure to Secretary Cook Islands Department to Under-Secretary Department of Internal Affairs, 19 December 1929, IA1, 32/2/377, R 1233 3811, ANZ

<sup>60</sup> 'Cook Islands Returned Soldiers Deceased' Enclosure to Secretary Cook Islands Department to Under-Secretary Department of Internal Affairs, 19 December 1929, IA1, 32/2/377, R 1233 3811, ANZ

<sup>61</sup> Department of Internal Affairs Notification of Death, advice received 4 June 1926, Mareto Tima NZEF PF, ANZ.

<sup>62</sup> Marginalia on list of deceased ex- servicemen, enclosure to Newton to Secretary Cook Islands Department, 2 November 1928, IA1, 32/2/377, ANZ.

<sup>63</sup> Attestation form, dated 12 March 1918 and medical examination report [no date], History-Sheet, Banaba Tipe NZEF PF, R 2201 6239, ANZ.

<sup>64</sup> Report of Medical Board, 19 January 1919, History-Sheet, Casualty Form-Active Service, Banaba Tipe NZEF PF, ANZ.

NZEF on 20 March 1919 as being "No Longer Physically Fit for War Service on Account of Illness Contracted on Active Service".<sup>65</sup>

35. After leaving the NZEF Banaba Tipe returned to the Cook Islands where he died on 2 August 1920. He was 30 years of age.<sup>66</sup> TB was given as his cause of death in the 1929 list.<sup>67</sup> Banaba Tipe was discharged from the NZEF as being no longer physically fit for war service because of an illness, TB, contracted during his service. There is clear evidence that his death on 2 August 1920 was caused by this disease. On that basis Banaba Tipe's name should be added to the New Zealand and CWGC First World War rolls of honour.

*Private Aruake Tuaine, No. 60762 – Cause of death: unknown*

36. Aruake Tuaine volunteered for service in the 3rd Rarotongan Contingent on 16 February 1918. He was attested into the NZEF at Auckland on 12 March 1918. Tuaine was about 28 years old when he enlisted. During the medical examination conducted at the time of his attestation he was found to have normal lungs and stated that he had never "been notified for consumption" [TB], nor been treated at a sanatorium or mental institution. His service was deferred for two months so he could undergo an operation for varicose veins. He was given the medical grading B2 – fit for active service beyond the sea (after recovery at home).<sup>68</sup> After completing his initial training Private Tuaine embarked for service overseas on 13 June 1918. He disembarked at Suez on 4 August 1918 and after a period with a training unit was posted to the Rarotongan Company in the field on 18 September 1918. He embarked for New Zealand on 14 December 1918 and disembarked in New Zealand on 29 January 1919. On 20 March 1919 Tuaine was discharged from the NZEF after being declared "no longer physically fit for War service on account of illness contracted on active service (dysentery)".<sup>69</sup>

37. Aruake Tuaine returned to the Cook Islands after leaving the NZEF and died there on 18 January 1920. In the 1929 list compiled by the Cook Islands administration his cause of death is noted as "Not known".<sup>70</sup> He is not listed as one of the former soldiers recorded on the roll of honour list as having died as a result of his military service.<sup>71</sup> The short period of time between Tuaine's discharge and death does suggest that his death may have been related to his war service. The lack of information about the cause of his death, however, means that there is currently insufficient evidence to recommend Tuaine's inclusion on the appropriate First World War rolls of honour.

<sup>65</sup> Note on file cover, New Zealand Expeditionary Force Certificate of Discharge (This form includes a note "Sent to S I", which I presume means Somes Island), History-Sheet, Banaba Tipe NZEF PF, ANZ.

<sup>66</sup> Department of Internal Affairs Notification of Death, date illegible, Banaba Tipe NZEF PF, ANZ.

<sup>67</sup> 'Cook Islands Returned Soldiers Deceased' Enclosure to Secretary Cook Islands Department to Under-Secretary Department of Internal Affairs, 19 December 1929 IA1, 32/2/377, R 1233 3811, ANZ.

<sup>68</sup> Attestation Form Dated 12 March 1918, Casualty Form-Active Service, Aruake Tuaine PF, R22013839, ANZ. Although his first name is recorded as Aruake on his NZEF personnel file, the correct spelling is Aruaki. See headstone image and other material provided by Cate Walker in the possession of the NZDF Historian.

<sup>69</sup> History-Sheet, Casualty Form-Active Service, Aruake Tuaine PF, ANZ.

<sup>70</sup> 'Cook Islands Returned Soldiers Deceased' Enclosure to Secretary Cook Islands Department to Under-Secretary Department of Internal Affairs, 19 December 1929, IA1, 32/2/377, R 1233 3811, ANZ.

<sup>71</sup> 'Roll of the of Cook Island Soldiers Who Served their King and Country in the Great War 1914–1918' enclosure to Ayson Resident Commissioner Cook Islands to Secretary Cook Islands Administration, 8 March 1926, IT1, 122/2/1, R17963844, ANZ.

*Private Terongo Tuakeo, No. 19327 – Cause of death: tuberculosis*

38. Terongo Tuakeo was attested into the 2nd Rarotongan Contingent, NZEF at Rarotonga on 1 July 1916. The medical examination conducted prior to his attestation found that his lungs were normal and he was generally fit. At the time of his enlistment he was about 20 years of age.<sup>72</sup> After completing his initial training in New Zealand, Private Tuakeo embarked for overseas service on 16 November 1916. He disembarked at Suez on 27 December 1916. Following a brief period with the New Zealand training and depot unit he was admitted to hospital on 9 January 1917. He remained in different hospitals until embarking for New Zealand on 7 March 1917. On 20 February 1917 a medical report was prepared on Tuakeo, who was found to be suffering from "Inflammation of Lymphatic Glands (T.B.)". The report noted that "the condition began about six months ago when a swollen gland was incised; [and] that his father and brother died of tubercular disease" and goes on to state that the date of origin of the disability was November 1916.<sup>73</sup> Tuakeo returned to New Zealand on 3 May 1917. On 5 May he was admitted to Auckland Hospital. He was examined on 4 July 1917, at which time he was described as having "about six sinuses in his neck all discharging. Masses of enlarged tubercular glands in neck". At this time it was noted that there was "some doubt about correctness of history as he cannot speak English". The medical board concluded that he required further treatment in New Zealand and that he should be medically boarded and discharged from the NZEF.<sup>74</sup> Tuakeo was discharged from the NZEF on 19 August 1917 as being "no longer physically fit for War service" on account of a "pre-enlistment disability aggravated by active service".<sup>75</sup> This finding appears at odds with the statement that the illness first manifested itself in November 1916.

39. Terongo Tuakeo died at Atiu in the Cook Islands on 6 July 1919. His cause of death is recorded in the 1929 list compiled by the Cook Islands Administration as "Tuberculosis. Returned sick from war".<sup>76</sup> He is not, however, listed as one of the former soldiers recorded as having died as a result of his military service on the roll of honour list on IT 122/2/1.<sup>77</sup> Terongo Tuakeo died of a condition which he either contracted during his war service or was aggravated by that service. Even if the condition which killed him was only aggravated by his war service, the research conducted for this report on men who died after discharge clearly shows that in general dying of a condition aggravated by war service warranted inclusion on the appropriate rolls of honour. On that basis the name of Terongo Tuakeo should be added to the appropriate First World War rolls of honour.

<sup>72</sup> Attestation Form dated 1 July 1916 and Medical Examination form dated 6 June 1916, Terongo Tuakeo PF, R220113845, ANZ.

<sup>73</sup> Medical Report on an Invalid, 20 February 1917, Casualty Form-Active Service, Terongo Tuakeo PF, ANZ.

<sup>74</sup> Medical report, 4 July 1917, Terongo Tuakeo PF, ANZ.

<sup>75</sup> New Zealand Expeditionary Force Certificate of Discharge, dated 19 August 1917, History-Sheet, Terongo Tuakeo PF, ANZ.

<sup>76</sup> Cook Islands Returned Soldiers Deceased' Enclosure to Secretary Cook Islands Department to Under-Secretary Department of Internal Affairs, 19 December 1929 IA1, 32/2/377, R 1233 3811, ANZ.

<sup>77</sup> Draft roll of honour with annotations enclosure to Ayson Resident Commissioner Cook Islands to Secretary Cook Islands Administration, 8 March 1926, IT1, 122/2/1, ANZ.

*Private Tom Tupu, No. 16/1197 – Cause of death: unknown*

40. Tom Tupu was attested into the 1st Rarotongan Contingent, NZEF at Rarotonga on 27 September 1915. He was about 22 years of age. The medical examination conducted two days after his attestation stated that his lungs were normal and his chest well formed.<sup>78</sup> After initial training in New Zealand, Tupu embarked for overseas service in February 1916. He disembarked at Suez on 15 March 1916 and re-embarked for France on 9 April 1916.<sup>79</sup> The climate in France posed particular difficulties for men from the Pacific Islands.<sup>80</sup> Tupu was taken ill soon after arriving in France and was in hospital from late May until early June 1916. At the beginning of September 1916 he was admitted to hospital suffering from pneumonia. Later in the month he was sent to England, where he was eventually transferred to the New Zealand Convalescent Hospital at Hornchurch. He was invalided back to New Zealand, embarking at Plymouth on 17 November 1916.<sup>81</sup>

41. Tupu arrived in New Zealand on 8 January 1917. He was discharged from the NZEF on 26 March 1917 as being “no longer physically fit for War service on account of illness contracted on active service”. On his personnel file it is noted that his medical papers have been merged with his pensions file. Unfortunately, like virtually all other such files, this has been destroyed. The existence of a pensions file, however, indicates that his state of health when he was discharged from the NZEF was poor.<sup>82</sup>

42. Tom Tupu died in Rarotonga on 27 December 1919.<sup>83</sup> His cause of death is recorded in the 1929 list compiled by the Cook Islands Administration as “not known”.<sup>84</sup> Tupu is also not identified as one of the 1st Rarotongan Contingent men who died in New Zealand or the Cook Islands as result of their war service in the list compiled by the Resident Commissioner in the Cook Islands.<sup>85</sup> This fact and the lack of information about Tupu’s cause of death means that on the basis of the currently available evidence his name should not be added to the First World War rolls of honour.

## Conclusion

43. There can be no doubt that the health of the men from the Cook Islands discussed in this report deteriorated over the period of their war service with the NZEF. It seems clear that during the 1920s the issue of whether the death of former members of the NZEF in the Cook Islands was attributable to their war service was in most cases not properly considered by the New Zealand authorities.

---

<sup>78</sup> NZEF attestation form, dated 27 September 1915, medical examination form, dated 29 September 1915, Tom Tupu NZEF PF, R22014081, ANZ. Note: this personnel file is named as Tupu [Tupe?] at Archives New Zealand.

<sup>79</sup> Casualty Form-Active Service, History-Sheet, Tom Tupu NZEF PF, ANZ.

<sup>80</sup> Weddell, 59–63.

<sup>81</sup> Casualty Form-Active Service, History-Sheet, Tom Tupu NZEF PF, ANZ.

<sup>82</sup> Notes on file cover, Tom Tupu NZEF PF, ANZ.

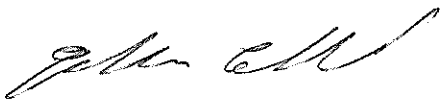
<sup>83</sup> History-Sheet, Tom Tupu NZEF PF, ANZ; information provided by Cate Walker in the possession of the NZDF Historian. There is some confusion about his age at the time of his death. His headstone incorrectly states that it was 17 years, but it is clear that he was in fact in his 20s.

<sup>84</sup> ‘Cook Islands Returned Soldiers Deceased’ Enclosure to Secretary Cook Islands Department to Under-Secretary Department of Internal Affairs, 19 December 1929 IA1, 32/2/377, R 1233 3811, ANZ.

<sup>85</sup> Draft roll of honour with annotations enclosure to Ayson Resident Commissioner Cook Islands to Secretary Cook Islands Administration, 8 March 1926, IT1, 122/2/1, R17963844, ANZ.

44. To be included on the New Zealand National War Memorial and Commonwealth War Graves Commission First World War Rolls of Honour, the deaths of former service personnel must have occurred on or before 31 August 1921 and must have been attributable to their war service. The research conducted for this report has established that the deaths of former soldiers who succumbed to pre-existing medical conditions that had been aggravated by their war service were considered during the 1920s to be attributable to their war service. In such cases, if the death occurred within the time range specified their names were included on the appropriate First World War rolls of honour.

45. There is sufficient evidence that the deaths of six of the 10 Cook Islanders whose cases are examined above were attributable to their war service. I therefore recommend that the names of these six men: Nga Naeiti No. 60769; Taria Tearii (aka Tearii Taria), No. 84513; Rangi Tiaure No. 84532; Mareto Tima No. 84541; Banaba Tipe No. 60653; and Terongo Tuakeo No. 19327 should be added to the New Zealand National War Memorial and Commonwealth War Graves Commission First World War Rolls of Honour.



**John Crawford (Mr)**  
New Zealand Defence Force Historian  
12 July 2019

**Annex:**

- A. Other cases of NZEF personnel who died from tuberculosis after discharge before 1 September 1921 who were included in the New Zealand National Roll of Honour



**OTHER CASES OF NZEF PERSONNEL WHO DIED FROM TUBERCULOSIS  
AFTER DISCHARGE BEFORE 1 SEPTEMBER 1921 WHO WERE INCLUDED IN  
THE NEW ZEALAND NATIONAL ROLL OF HONOUR**

1. A study of a 20 per cent randomised sample of personnel who died after discharge and before 1 September 1921 included in the *New Zealand Expeditionary Force Roll of Honour* published in 1924 has shown that personnel discharged because of tuberculosis and who died from this disease before 1 September 1921 were included in the roll of honour. The study established that men who died as a result of a condition that had existed before they enlisted, but which had been aggravated by their war service, were generally included on the roll of honour. This is consistent with the CWGC's current policy.<sup>1</sup> This study also established that in some cases men who died as a result of a condition which had not led to their discharge from the NZDF were also included. Generally, in such cases there appears to be some link between their death and an illness or injury the individual had suffered during their war service, or that their state of health was generally very bad as a result of their war service. The loss of many relevant medical records through the purging of NZEF personal files and the destruction of pensions files; along with the absence of surviving policy documents means that it is not possible to be more precise.<sup>2</sup>

2. In addition to the conclusions drawn from the random sample study, a small group of cases similar to those of the Cook Islanders were identified using other research approaches. These cases, which are discussed in more detail below, demonstrate a pattern of decision-making that is consistent with that found in the random sample study. Although this is a *comparatively* small group, the evidence on the personal files of these men make it clear that dying from a pre-existing condition that was aggravated by their war service was sufficient to see men included on the First World War rolls of honour, and that in some cases men who died from a different condition to that which they had suffered during this service were also included. Not too much significance should, however, be placed on these latter cases as it is quite possible that records linking the former soldier's war service and his death have been lost.<sup>3</sup> The military service and circumstances of death of five of the men who died of illness found to be attributable to their war service are discussed in more detail below. These men are: Corporal Tame Epiha No. 20684; Gunner Hilary Martin Regan No. 2/2247; Rifleman Edwin Anthony Granfield No. 8/1246; Rifleman Charles William McNoe No. 42701; and Private John Brunt, No. 30027. In addition, the case of Private Henry Lionel Stevenson, No. 31364, was investigated. He died after the cut-off date for inclusion on the First World War rolls of honour, but his death was deemed attributable to his war service.

---

<sup>1</sup> Josh King, Roll of Honour Research Report, 13 March 2019, NZDF 5400/HCP/2, HQNZDF; Josh King, Twenty Percent Roll of Honour Spreadsheet and Additional Notes, June 2018, NZDF 5400/HCP/2; Email Ministry for Culture and Heritage to NZDF, 16 May 2019, NZDF 5400/HCP/2.

<sup>2</sup> Josh King, Roll of Honour Research Report, 13 March 2019, NZDF 5400/HCP/2, HQNZDF; Josh King, Twenty Percent Roll of Honour Spreadsheet and Additional Notes, June 2018, NZDF 5400/HCP/2.

<sup>3</sup> See the cases of James Andrew, No. 7/1939; James George Dunphy, No. 25/969; John William Harkin, No. 2/1233; Te Kuru Kaanga, No. 16/511; Robert Quinn, No. 24/1786 in [Josh King] 'Additional Notes for Roll of Honour Spreadsheet', NZDF 5400/HCP/2.

*Lance Corporal Tame Epiha, No. 20684*

3. Tame Epiha attested into the NZEF on 31 May 1916 and was assigned the service number 20684. At this time his lungs were described as normal and his chest as well formed. After initial training in New Zealand he embarked for overseas service in August 1916 as a reinforcement for the Pioneer Battalion. His health was not good and his overseas service was restricted to the United Kingdom. In March 1917 he was found to be suffering from tuberculosis and in May he was evacuated to New Zealand. After his return to New Zealand Lance Corporal Epiha was examined in September 1917 by a medical board which concluded that he was suffering from tuberculosis, that he was permanently unfit for military service, and that his disability had been contracted on active service. He was discharged from the NZEF on 8 October 1917 as being "no longer physically fit for War service on account of illness contracted on active service". He was at this time clearly unwell as his intended address was the Waikato Sanatorium in Cambridge. Tame Epiha died of tuberculosis on 1 April 1919. His name is included on the New Zealand National War Memorial and CWGC First World War Rolls of Honour and his next of kin received the New Zealand memorial plaque and scroll given by the New Zealand government to the next of kin of NZEF and former NZEF personnel who died as a result of their war service.<sup>4</sup>

*Gunner Hilary Martin Regan, No. 2/2247*

4. Hilary Martin Regan was attested into the NZEF in August 1915. He gave his age as 20 years, but was in fact only 15 years old. He was assigned to the artillery and given the service number 2/2247. The medical officer who examined him shortly before he enlisted reported that his lungs were normal and his chest well formed.<sup>5</sup> Regan completed his initial training and embarked for service overseas on 12 February 1916. He arrived at Suez on 31 March 1916 and the following month embarked for France. On 24 April 1916 Gunner Regan was posted to the base depot at Étapes. On 14 May he was evacuated to England sick. He spent most of the rest of the year in hospital suffering from phthisis (pulmonary tuberculosis or a similar progressive wasting disease). On 30 January 1917 his case was reviewed by a medical board which concluded that he was permanently unfit due to a disability, pulmonary tuberculosis, that had been caused by "climate while on active service". The board recommended that he be discharged as permanently unfit.<sup>6</sup>

5. Regan returned to New Zealand in May 1917. He was clearly seriously sick, as a few days later he was admitted to the Waikato Sanatorium as an "urgent case".<sup>7</sup> On 18 June 1917 Hilary Regan was discharged from the NZEF as being "no longer physically fit for war service on account of illness contracted on active service".<sup>8</sup> On 26 March 1919 Regan was re-attested into the NZEF so that he could receive further

<sup>4</sup> NZEF attestation form, dated 31 May 1916, History-Sheet, Casualty Form-Active Service, proceedings of a medical board, dated 17 September 1917, Tame Epiha NZEF PF, R21001178, ANZ

<sup>5</sup> NZEF attestation form dated 8 August 1915, medical examination form dated 25 June 1915, History-Sheet Hilary Martin Regan NZEF PF, R20804868, ANZ; *New Zealand Herald*, 7 August 1919, 8.

<sup>6</sup> Report of medical board, 30 January 1917, History-Sheet, Casualty Form-Active Service, Statement of Services, note on admission to hospital form, dated 14 December 1916, note on medical history form, dated 30 January 1917, Regan NZEF PF, ANZ.

<sup>7</sup> Dyer to Director Base Records, 17 May 1917 and related papers, Regan NZEF PF.

<sup>8</sup> Note on file cover, History-Sheet, Regan NZEF PF.

treatment in a military hospital.<sup>9</sup> Regan was finally discharged from the NZEF on 5 July 1919. He died of tuberculosis at his parents' home in Auckland on 4 August 1919.<sup>10</sup> Hilary Martin Regan's name is included on the National War Memorial and CWGC Rolls of Honour. In 1923, his family received the memorial plaque and scroll.<sup>11</sup>

*Rifleman Edwin Anthony Granfield, No. 8/1246*

6. Edwin Anthony Granfield was attested into the NZEF on 25 October 1914, his 20th birthday. At the time of his enlistment his chest was described as well-formed and his lungs as normal.<sup>12</sup> After initial service with the Otago Infantry Battalion, Granfield was transferred to the Army Service Corps and assigned the service number 8/1246. Driver Granfield embarked for service overseas on 14 December 1914.<sup>13</sup> He served in Egypt and later in France. On 4 October 1916 he was found to be sick and was admitted to hospital in Rouen. On 20 October he was evacuated to England and was admitted to the New Zealand General Hospital at Brocklehurst. There on 9 December 1916 his case was reviewed by a medical board. His disability was described as "pleurisy with effusion", which affected his left lung. The board considered that the disability dated from August 1916 and was due to "undue exposure to wet and cold while under conditions of active service". It was concluded that Granfield was "debilitated" and that he should be sent back to New Zealand as unfit for War service for 12 months.<sup>14</sup> Granfield returned to New Zealand at the beginning of 1917. He was discharged from the NZEF on 4 April as being "no longer physically fit for War service on account of illness contracted on active service".<sup>15</sup>

7. Edwin Granfield died of pulmonary tuberculosis at Otaki on 21 November 1918.<sup>16</sup> Edwin Granfield's name is included on the New Zealand and CWGC First World War Rolls of Honour. In 1923, his family received the memorial plaque and scroll.<sup>17</sup>

*Rifleman Charles William McNoe, No. 42701*

8. Charles William McNoe, No. 42701 was 35 years old when he attested into the NZEF on 12 December 1916. At the time of his enlistment McNoe's lungs and heart were described as normal.<sup>18</sup> After initial training in New Zealand he embarked from New Zealand on 2 April 1917 and disembarked in England on 10 June 1917. The following month Rifleman McNoe was posted to France, where he joined the 3<sup>rd</sup> Battalion of the New Zealand Rifle Brigade on the Western Front. On 6 September 1917 he was slightly wounded in action near Ypres by mustard gas and after initial treatment in France was evacuated to hospital in England. His initial symptoms were

<sup>9</sup> Application for Re-Attestation for Service Whilst under Medical Treatment, Dated 26 March 1919, NZEF Form B.R. 169 dated 26 March 1919, Regan NZEF PF.

<sup>10</sup> History-Sheet, Regan PF; *New Zealand Herald* 7 August 1919, 8.

<sup>11</sup> Note on History-Sheet, dated 1 May 1923, Regan NZEF PF.

<sup>12</sup> NZEF attestation form dated 25 October 1914, History-Sheet, Edwin Anthony Granfield NZEF PF, R16787984, ANZ.

<sup>13</sup> History-Sheet, Edwin Anthony Granfield NZEF PF.

<sup>14</sup> Report of medical board, 9 December 1916, Casualty Form-Active Service, Granfield NZEF PF.

<sup>15</sup> History-Sheet and additional references, Edwin Anthony Granfield NZEF PF.

<sup>16</sup> History-Sheet, Edwin Anthony Granfield NZEF PF, *Evening Post*, 29 November 1918, 2.

<sup>17</sup> Attachment to History-Sheet, dated 3 August 1923, Granfield, NZEF PF.

<sup>18</sup> Attestation for General Service form/NZEF Attestation Form, dated 16 December 1916, Edwin Anthony Granfield, NZEF PF, ANZ. Although he was attested in December his service with the NZEF did not begin until 2 January 1917.

described as "marked conjunctivitis blistered thumb and finger and cough".<sup>19</sup> With treatment, McNoe's condition improved, but in early October 1917 he developed "right basal pneumonia" and his state of health deteriorated substantially. On 17 November 1917, his condition was reviewed by a medical board which concluded that he was suffering from "acute pneumonia unresolved", a disability that was "attributable to active military service and effects of shell gas". The board recommended that McNoe be returned to New Zealand "as unfit for War Service for six months".<sup>20</sup>

9. McNoe returned to New Zealand on 31 January 1918. On 21 June 1918 his case was reviewed by a medical board, which found that his original debility was due to acute pneumonia that had been contracted in the course of military duty and that he was now substantially disabled. On 12 July 1918 McNoe was discharged from the NZEF as "no longer physically fit for war service. On account of illness contracted on active service."<sup>21</sup> Charles William McNoe died of pulmonary tuberculosis at Gore Hospital on 3 March 1919.<sup>22</sup> Although he had died of TB rather than the pneumonia that had led to his discharge from the NZEF, McNoe's name is included on the New Zealand and CWGC First World War Rolls of Honour. In 1923, McNoe's family received the memorial plaque and scroll given by the New Zealand government to the next of kin of NZEF and former NZEF personnel who died as a result of their war service.<sup>23</sup>

*Private John Brunt, No. 30027*

10. John Brunt, No. 30027, was attested into the NZEF on 5 July 1916. While serving overseas Private Brunt became ill and was invalided back to New Zealand suffering from sciatica and chronic peritonitis.<sup>24</sup> John Brunt was discharged from the NZEF on 8 June 1917 as being "no longer fit for War service on account of pre-enlistment disability aggravated by war service".<sup>25</sup> John Brunt died on 4 April 1920. His cause of death is recorded as tuberculosis and peritonitis.<sup>26</sup> During his war service Brunt was never diagnosed as having TB. In February 1923 it was determined that his next of kin were eligible for the memorial plaque and scroll and his name is included on the New Zealand and CWGC First World War Rolls of Honour. John Brunt's case is a good example of the inclusion on these rolls of honour of individuals who died as result of a pre-existing condition aggravated by war service.<sup>27</sup>

*Private Henry Lionel Stevenson, No. 31364*

11. Henry Lionel Stevenson, No. 31364, was attested into the NZEF on 25 July 1916. At this time his lungs were described in a medical report as normal. He embarked for overseas service on 15 November 1916 and served in the United Kingdom and on the

<sup>19</sup> History-Sheet, Casualty Form-Active Service, Medical Report on an Invalid, dated 17 November 1917, Charles William McNoe, NZEF PF, R10926983, ANZ.

<sup>20</sup> Medical report on Invalid, dated 17 November 1917, McNoe NZEF PF, ANZ.

<sup>21</sup> *Ibid.*, note on file cover.

<sup>22</sup> *Ibid.*, History-Sheet, *Evening Post*, 7 March 1919, p.8.

<sup>23</sup> Attachment to History-Sheet, dated 27 August 1923, McNoe NZEF PF.

<sup>24</sup> NZEF attestation form dated 5 July 1916, History-Sheet, Casualty Form-Active Service, proceedings of a medical board dated 18 May 1917, John Brunt NZEF PF, R21889219, ANZ.

<sup>25</sup> History-Sheet, proceedings of a medical board dated 18 May 1917, John Brunt, NZEF PF, R21889219, ANZ.

<sup>26</sup> John Brunt extract from Auckland Register of deaths, 30 June 1920, copy in author's possession.

<sup>27</sup> History-Sheet, John Brunt NZEF PF; John Brunt extract from Auckland Register of deaths, 30 June 1920.

Western Front. During his service he developed tuberculosis and on 2 November 1917 a medical board recommended that he be invalided back to New Zealand.<sup>28</sup> On 22 February 1918, after Stevenson had returned to New Zealand, he was examined by a medical board that concluded that he was suffering from chronic pulmonary tuberculosis which had existed before his enlistment but had been "aggravated" by active service. On the basis of the board's recommendations, he was discharged from the NZEF on 28 March 1918 as no longer physically fit for war service.<sup>29</sup> Stevenson was in a bad state of health and died of tuberculosis on 10 July 1922. In 1923 it was decided that his next of kin were eligible for the memorial plaque and scroll.<sup>30</sup>

---

<sup>28</sup> NZEF Attestation Form, dated 25 July 1916, History-Sheet and related papers Henry Lionel Stevenson NZEF PF, R7821352, ANZ.

<sup>29</sup> Proceedings of a medical board, dated 22 February 1918, History-Sheet, Henry Lionel Stevenson NZEF PF.

<sup>30</sup> Pensions Department medical report, dated 8 August 1921 and related papers, History-Sheet, Henry Lionel Stevenson NZEF PF, R7821352, ANZ.

