IN THE WAITANGI TRIBUNAL **WAI 3060**
WAI 3130

IN THE MATTER OF the Treaty of Waitangi Act 1975

AND

IN THE MATTER OF The Justice System Kaupapa Inquiry

AND

IN THE MATTER OF a claim by Patrick Halliday

Brief of Evidence of Dee Kopa filed under Wai 3130 claim in presentation in Wai 3060 Tamaki – He Rau Korero Tara a Whare between 9 June & 13 June 2025

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MAY IT PLEASE THE TRIBUNAL

1. Introduction

My name is Dee Kopa. I am Māori. I am a mother, a grandmother, and a caregiver. I am also employed as an IDP support worker, where I support individuals re-entering the community after prison.

I give this evidence as someone who has lived through the gaps and failings in the Crown's systems — particularly in the areas of mental health and addiction, housing, child protection, and justice.

My experiences include supporting my daughter through addiction and mental health struggles, raising her children in the absence of appropriate state intervention, and working professionally with people facing these same barriers.

2. My Daughter's Experience with Mental Health and Addiction

My daughter Karla was in an abusive relationship, which echoes my own experiences of violence growing up. These patterns repeat through generations when nothing is done to interrupt them.

Karla has lived with both Bipolar, a severe mental health condition and addiction issues for many years. Karla has been under the DHB for so long and has been supported by them in the past whilst being sectioned into Tiahomai and Tumanako in-house units over the past 10 years. However, it is very hard to successfully section a person struggling with addictions and although our voices do not seem to count, we as a whanau know that Karla cannot make good decisions for herself due to her conditions.

Karla has been living rough for over five years now. There have been solutions offered at times, but because of her mental health and addiction issues, these are not long-term; she becomes transient and always ends up with no secure housing. I believe that placement in an institution that can provide the basic requirements for living as well as safety and treatment is the type of help people like Karla need.

Karla regularly comes to my home for food, warmth, or rest. I help her when I can, but I am also raising her four children, and I cannot safely have her in the home full-time.

Karla is in active addiction. On benefit days, others often take advantage of her, using her money to buy drugs. She is left with nothing.

At the time of writing, she is staying in a nearby house with others who are also using. That is the only space where she feels accepted and not judged even though she is being further harmed there and taken advantage of financially mentally and emotionally.

3. The Absence of Culturally Safe Mental Health and Housing Support
Karla has not been offered long-term treatment, secure housing, or appropriate mental health support.

There are no safe, whānau-based recovery options for people like her in our area. Facilities that previously existed — like Carrington Hospital — have been closed. The services that remain are under-resourced, short-term, and not designed to meet the needs of Māori in active crisis.

A Facility like Tukaha, which is a respite house run by the DHB in our area, would be good for someone like Karla, but it does not provide a secure area for its patients.

My daughter's situation is not unique. I see many others in my community like Rusty and Percy who have been homeless, unwell, and unsupported for years. I have especially noticed this increasing over the past five (5) years, and it has just become accepted that there is nowhere for them to go.

These people have become "normalised" in the streets, but their suffering should never be seen as normal.

4. Raising My Daughter's Children – Karlas Children.
I have cared for Karla's four children full-time for over four years. When they were originally uplifted, they were aged 12 months, two and three years old. They are now aged between 9 and 13.

At the start, and for approximately two years, we all lived together in my two-bedroom flat, and we managed, but it was far from ideal.

Initially, two of the children were placed with a loving, stable, church-going whānau. They were removed after a single allegation that one of the caregivers had smacked a child with a wooden spoon. This was not abuse. This was discipline.

The caregivers were devastated. The children were distressed. The allegation was never tested in court, but the consequences were life-altering, traumatising and heartbreaking for my mokopuna.

When the children were eventually placed with me and reunited with siblings, they did not know each other very well, and one of the boys had already been through 12 placements in seven years. This is damaging.

5. My Experience Becoming a Caregiver
I am in recovery from addiction myself. I completed a Salvation Army rehabilitation programme in Auckland in 2015. I have been clean and sober for ten (10) years. I have had to find my own pathway to recovery and seek

out support through my own determination, when it is not readily available.

Despite this, I had to fight to become an approved caregiver. The process was slow and difficult, and I was treated with judgment rather than support.

I was also investigated by Oranga Tamariki after smacking one of the mokopuna in my care. I do not deny that it happened. But I was raising four traumatised children alone, with no proper support or guidance.

I was not charged, but Oranga Tamariki told me the children may be removed. That threat hung over me for a long time. Oranga Tamariki having this power and control is stressful and traumatising as a grandmother working every day to care for her mokopuna.

A trusted caregiver named Rhonda came to stay with me, which helped stabilise the situation. OT had no clear alternative placement and no long-term plan. Their default response was removal — **not support**.

6. Systemic Failings of Oranga Tamariki
Oranga Tamariki intervenes quickly to remove children but provides little in the way of sustained or culturally grounded support.

I have experienced this as a mother, as a grandmother, and as a worker supporting others who have come through the same process.

Whānau like mine do the work of healing, but we are treated as if we are the problem. My experience with my mokopuna is that, in general, I was not supported but rather just a whanau passed from Crisis to Police and back again. I do not feel recognised for the work I have done.

There is no real acceptance that it is a whole whanau in need. My daughter is the mother of the mokopuna in my care and she still needs help as well because she is unable to help herself. Oranga Tamariki does not seem to consider the whanau's needs; in my opinion, helping the whanau is important as it will help the mokopuna.

7. My Work with Formerly Incarcerated Individuals
In my role as an IDP support worker, I assist people who are exiting prison to meet their bail conditions and reconnect with their whānau and community.

The first thing many of them say is that they just want to "get off court." They can't plan for their future until that immediate fear is dealt with.

Most of them face multiple issues — housing instability, mental health challenges, addiction, and disconnected whānau relationships. These

problems are all linked, but the Crown systems treat them as if they are separate.

It is exhausting watching people fall through gaps that the Crown has known about for years.

8. Conclusion

Karla has never had the support she needed. She is still out there. And I am still raising her children, trying to protect them from repeating the same cycle.

Everything I've described — the housing struggles, the addiction, the removals, the lack of support — it is all connected.

Speaking about te Taitokerau, Northland there needs to be more and accessible detox units. There also needs to be safe mental health and addiction housing in the north, where people can be supported within safe, drug and alcohol-free spaces.

I want the Tribunal to know that this isn't just one whānau's story. This is happening all over the country; it happens to Māori whānau every day and especially for Māori with mental health challenges. Groups like the Whakaoranga Whanau Recovery Hub where I work need to be recognised and supported. Organisations like this should not have to compete for funds and rely on most staff working as volunteers to service the community and support our people.

I do this work — at home and in the community — because I care. But I shouldn't have to fight this hard to hold my family together.

What we need are systems that walk alongside us — not systems that remove, judge, imprison and abandon us.

DATED at Kaikohe this 26th day of May 2025

Dee Kopa

This Brief of Evidence is filed by **DANIEL JOHN WATKINS**, Counsel for the Claimant, of **WATKINS LAW**, 2 Station Road, Kaikohe.