



臺灣毒品處遇政策研究學會
Taiwan Association of Drug Treatment Policy

U.S. Department of Justice
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The Bureau of Justice Assistance is a component of the Office of Justice Programs, which also includes the Bureau of Justice Statistics, the National Institute of Justice, the Office of Juvenile Justice and Delinquency Prevention, and the Office for Victims of Crime.

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序 言

審定人 林達

本文件是由美國毒品法庭專業人士協會（National Association of Drug Court Professionals（NADCP），於 2023 年更名為 All Rise）於 1997 年首次出版，這份文件也是全美國各地毒品法庭運作的重要指引。由文件名稱 Defining Drug Courts: The Key Components 可知，其目的即在「定義」毒品法庭。因此，如想了解美國的毒品法庭，閱讀本文件是最直接的途徑。

由於美國各州刑事法庭程序未盡相同，數千個毒品法庭分別鑲嵌於各州郡的刑事司法體系之下，加上資源多寡和因地制宜，各地風貌變化萬千，認識不易。為了界定毒品法庭，並且分辨出它和普通刑事法庭的差異，此文件不從程序、機制面切入，而是從理念、目標面導入，選定了最關鍵的十項要素，以此說明毒品法庭的意義、原理和重要內涵。

本文件作為新型態法庭的引介，翻譯成中文版有其意義。因為傳統上，我們對於刑事法院的認知，都是以審判為核心，基於訴訟對抗式的架構進行「認事用法」。但是美國毒品法庭的目標和設計架構則全然不同，是一種新穎的作法，閱讀以後，可以帶給我們更廣闊的思維和想像，促使我們反思：司法的目的究竟何在，進而思考革新司法。

本文件作為毒品司法處遇程序的指引，對於台灣也深具參考價值。台灣自 2008 年起推行緩起訴附命戒癮治療，在檢察官主導下進行醫療轉介，實質上將罪犯改以「病犯」視之，由觀護、醫療、毒防中心三者聯合追輔、治療，這和美國毒品法庭的精神理念都是吻合一致的。本文件整合了司法和醫療的雙重理念，所引介的十項關鍵要素中絕大多數內容，都可以補足台灣當前緩起訴實務運作所需的具體指引，也可以作為未來改良司法處遇程序的重要參考。

關於翻譯用詞，就 Drug Court 宜翻譯為「毒品法庭」抑或「藥物法庭」，慮及當前台灣法制採「毒品危害防制條例」及「藥事法」二元分立定義，而美國 Drug Court 也是在刑事司法系統下針對毒品犯進行管制，選用「毒品法庭」理解上會比「藥物法庭」更清晰。另就 treatment 一詞，一般翻譯為治療，但治療在中文語意上偏向醫師的治療行為，有時較為狹隘，美國原意在於較廣泛的輔導措施，且大多數不限於醫師所為，故翻譯時可能因該處語意脈絡，而分別使用「處遇」或「治療」。本文件在翻譯上，秉持以下原則：第一，盡可能符合法律與成癮醫學的專業和用語，以免造成偏差；第二，盡可能忠實於原來的表達方式，以強調其重點；第三，如有需要，會以註解加以補充說明。

目前本文件於英文版外，僅有西班牙語版。臺灣毒品處遇政策研究學會特別向美方取得中文版之翻譯授權，集合此領域專家進行翻譯，並無償分享給中文世界的專業人士使用。本文件由林達、劉佳穎、紀凱峰與簡士淳等 4 位翻譯者合作翻譯，致力於確保對全文之正確理解與準確表達，期待給予台灣以及整個中文世界新的視野和激盪，能對未來毒品司法處遇帶來新的制度變革。

Defining Drug Courts: The Key Components

January 1997
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The National Association of Drug Court Professionals
Drug Court Standards Committee

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Notice
In November 2002, the Bureau of Justice Assistance (BJA) assumed responsibility for administering the Drug Court Grant Program and the Drug Court Training and Technical Assistance Program. For further information, please contact BJA.

定義毒品法庭： 關鍵要素

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The National Association of Drug Court Professionals
Drug Court Standards Committee

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Key Component #1

Drug courts integrate alcohol and other drug treatment services with justice system case processing.

Purpose

The mission of drug courts is to stop the abuse of alcohol and other drugs and related criminal activity. Drug courts promote recovery through a coordinated response to offenders dependent on alcohol and other drugs. Realization of these goals requires a team approach, including cooperation and collaboration of the judges, prosecutors, defense counsel, probation authorities, other corrections personnel, law enforcement, pretrial services agencies, TASC programs, evaluators, an array of local service providers, and the greater community. State-level organizations representing AOD issues, law enforcement and criminal justice, vocational rehabilitation, education, and housing also have important roles to play. The combined energies of these individuals and organizations can assist and encourage defendants to accept help that could change their lives.

The criminal justice system has the unique ability to influence a person shortly after a significant triggering event such as arrest, and thus persuade or compel that person to enter and remain in treatment. Research indicates that a person coerced to enter treatment by the criminal justice system is likely to do as well as one who volunteers.¹

Drug courts usually employ a multiphased treatment process, generally divided into a stabilization phase, an intensive treatment phase, and a transition phase. The stabilization phase may include a period of AOD detoxification, initial treatment assessment, education, and screening for other needs. The intensive treatment phase typically involves individual and group counseling and other core and adjunctive therapies as they are available (see Key Component #4). The transition phase may emphasize social reintegration, employment and education, housing services, and other aftercare activities.

Performance Benchmarks

1. Initial and ongoing planning is carried out by a broad-based group, including persons representing all aspects of the criminal justice system, the local treatment delivery system, funding agencies, and the local community’s other key policymakers.
2. Documents defining the drug court’s mission, goals, eligibility criteria, operating procedures, and performance measures are collaboratively developed, reviewed, and agreed upon.

¹ Hubbard, R., Marsden, M., Rachal, J., Harwood, H., Cavanaugh E., and Ginzburg, H. Drug Abuse Treatment: A National Study of Effectiveness. Chapel Hill: University of North Carolina Press, 1989.

Pringle G.H., Impact of the criminal justice system on substance abusers seeking professional help, Journal of Drug Issues, Summer, pp. 275–283, vol 12, no. 3, 1982.

第一項關鍵要素

毒品法庭將酒精與毒品的處遇服務， 整合進入司法系統的案件處理程序之中。

目的

毒品法庭旨在停止酒精與毒品的濫用，以及與之相關的犯罪行為。毒品法庭為了促進這類被告的復元，會透過一系列整合的回應處分為之。為實現這樣的目標，必須依靠團隊合作，包括法官、檢察官、辯護人、觀護機關、矯正人員、執法人員、審前服務機構、社區技術服務計畫 (Technical Assistance Services for Communities, TASC)、評估人員、地區型服務提供者，以及更完善的社區支持。在州的層級上，包括各州執法機關、刑事司法系統、就業輔導、教育及安置等相關部門，都扮演了重要角色。經由這些個人與部門的通力合作，可以協助和鼓勵被告願意接受幫助，進而改變命運。

刑事司法系統擁有一種獨特的能耐，可以透過逮捕這類重大觸發事件，對該人施加立即性影響，從而說服或強迫其進入處遇程序，並持續接受處遇治療。研究顯示，被刑事司法強迫進入處遇程序的個案，其表現可能跟自願進入程序的個案一樣好¹。

毒品法庭通常採用多階段的處遇程序，一般會分為穩定化階段 (stabilization phase)、加強處遇階段 (intensive treatment phase) 和過渡階段 (transition phase)。穩定化階段，通常包括一定期間的酒精與毒品解毒期、初始治療評估、教育，以及篩選有無其他需求。加強處遇階段，則通常包括個別輔導和團體諮商，以及主要或輔助療法，依各地的可行性而有差異 (參見第四項關鍵要素)。過渡階段，會把重心放在復歸社會、就業和受教育、安置服務，以及其他追蹤輔導活動。

執行準則

1. 處遇計畫是由跨領域所組成的團隊來規劃和執行，團隊成員包括刑事司法系統、在地處遇機構、捐助單位，以及社區內其他重要決策者等等。

¹ Hubbard, R., Marsden, M., Rachal, J., Harwood, H., Cavanaugh E., and Ginzburg, H. Drug Abuse Treatment: A National Study of Effectiveness. Chapel Hill: University of North Carolina Press, 1989.

Pringle G.H., Impact of the criminal justice system on substance abusers seeking professional help, Journal of Drug Issues, Summer, pp. 275—283, vol 12, no. 3, 1982.

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3. Abstinence and law-abiding behavior are the goals, with specific and measurable criteria marking progress. Criteria may include compliance with program requirements, reductions in criminal behavior and AOD use, participation in treatment, restitution to the victim or to the community, and declining incidence of AOD use.
 4. The court and treatment providers maintain ongoing communication, including frequent exchanges of timely and accurate information about the individual participant's overall program performance.²
 5. The judge plays an active role in the treatment process, including frequently reviewing treatment progress. The judge responds to each participant's positive efforts as well as to noncompliant behavior.
 6. Interdisciplinary education is provided for every person involved in drug court operations to develop a shared understanding of the values, goals, and operating procedures of both the treatment and justice system components.
 7. Mechanisms for sharing decisionmaking and resolving conflicts among drug court team members, such as multidisciplinary committees, are established to ensure professional integrity.

² All communication about an individual's participation in treatment must be in compliance with the provisions of 42 CFR, Part 2 (the federal regulations governing confidentiality of alcohol and drug abuse patient records), and with similar State and local regulations.

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2. 定義毒品法庭任務、目標、資格標準、操作流程、績效衡量標準的文本，都是透過共同合作而研發、審查和同意的。
 3. 法庭的目標在促使個案停止使用酒精與毒品，並能遵守法律，應採用具體且可量測的標準來評估其進展。這裡的標準可能包括：遵守處遇規範要求的情況，減少犯罪行為以及濫用酒精與毒品的情況，參與處遇計畫的程度，賠償被害人或社區的情況，以及降低使用酒精與毒品的頻率等。
 4. 法院與處遇提供者應持續保持聯絡溝通，經常交換有關於個案整體表現的即時動態和準確資訊²。
 5. 法官在處遇過程中應扮演一個積極的角色，定期審查個案在處遇中的進展。法官也會針對個案的每一次正向努力或違規行為，都分別給予回應。
 6. 跨領域的教育訓練，應當提供給每一位參與法庭運作的成員，俾建立其對司法和處遇雙方面有關於價值觀、目標和運作程序的共識。
 7. 法庭團隊成員之間，應建立能夠共享決策與爭端解決的機制，例如跨領域委員會等，俾確保專業倫理。

² All communication about an individual's participation in treatment must be in compliance with the provisions of 42 CFR, Part 2 (the federal regulations governing confidentiality of alcohol and drug abuse patient records), and with similar State and local regulations.

Key Component #2

Using a nonadversarial approach, prosecution and defense counsel promote public safety while protecting participants’ due process rights.

Purpose

To facilitate an individual’s progress in treatment, the prosecutor and defense counsel must shed their traditional adversarial courtroom relationship and work together as a team. Once a defendant is accepted into the drug court program, the team’s focus is on the participant’s recovery and law-abiding behavior—not on the merits of the pending case.

The responsibility of the prosecuting attorney is to protect the public’s safety by ensuring that each candidate is appropriate for the program and complies with all drug court requirements. The responsibility of the defense counsel is to protect the participant’s due process rights while encouraging full participation. Both the prosecuting attorney and the defense counsel play important roles in the court’s coordinated strategy for responding to noncompliance.

Performance Benchmarks

1. Prosecutors and defense counsel participate in the design of screening, eligibility, and case-processing policies and procedures to guarantee that due process rights and public safety needs are served.
2. For consistency and stability in the early stages of drug court operations, the judge, prosecutor, and court-appointed defense counsel should be assigned to the drug court for a sufficient period of time to build a sense of teamwork and to reinforce a nonadversarial atmosphere.
3. The prosecuting attorney:
 - ☐ Reviews the case and determines if the defendant is eligible for the drug court program.
 - ☐ Files all necessary legal documents.
 - ☐ Participates in a coordinated strategy for responding to positive drug tests and other instances of noncompliance.
 - ☐ Agrees that a positive drug test or open court admission of drug possession or use will not result in the filing of additional drug charges based on that admission.
 - ☐ Makes decisions regarding the participant’s continued enrollment in the program based on performance in treatment rather than on legal aspects of the case, barring additional criminal behavior.
4. The defense counsel:
 - ☐ Reviews the arrest warrant, affidavits, charging document, and other relevant information, and reviews all program documents (e.g., waivers, written agreements).

第二項關鍵要素

法庭應採取非對抗式的作法，檢察官與辯護人都是在促進公眾的安全，也都在保障個案的正當程序基本權。

目的

為了促使個案能夠順利完成處遇計畫，檢察官與辯護人應當放下傳統的法庭對抗關係，作為一個團隊而共同努力。一旦被告受到接納進入毒品法庭處遇計畫，團隊的重點就是在個案的復元和使之遵守法律，而不再是被告刑案本身的實體事項。

檢察官的職責在於維護公眾的安全，因此他必須確保每一個個案都是真的適合進入處遇計畫，並且都會遵守毒品法庭的所有規範。辯護人的職責在於保障個案的正當程序基本權，同時鼓勵個案全程參與。當法庭依據整合性策略，針對個案的違規行為下達回應處分時，檢察官與辯護人雙方也都扮演了重要的角色。

執行準則

1. 檢察官與辯護人也會共同參與設計評估標準、篩選資格、指導方針和程序，俾確保個案正當程序基本權與公眾安全都能兼顧。
2. 為確保法庭運作前期的一致性與穩定性，法庭的法官、檢察官和公設辯護人都應安排好一定適足的任期，俾能建立團隊默契，營造非對抗式的氛圍。
3. 檢察官：
 - ☐ 審查案件並決定被告是否符合參與毒品法庭計畫的資格。
 - ☐ 備妥所需法律文件。
 - ☐ 參與法院回應個案毒品檢驗呈陽性或其他違規行為的整合性策略。
 - ☐ 同意個案在毒品檢驗呈陽性，或於公開法庭承認持有或施用毒品時，不會對其額外追訴。
 - ☐ 在評估個案是否適合繼續參與處遇計畫上，應根據其處遇期間的表現，而非依據其本案犯罪的法律要件，除非其又觸犯其他犯罪。
4. 辯護人：
 - ☐ 審視逮捕令狀、宣誓書、控訴文書及其他相關資訊，以及檢視所有處遇計畫文件（例如放棄權利聲明書、書面協議）。

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- ☐ Advises the defendant as to the nature and purpose of the drug court, the rules governing participation, the consequences of abiding or failing to abide by the rules, and how participating or not participating in the drug court will affect his or her interests.
 - ☐ Explains all of the rights that the defendant will temporarily or permanently relinquish.
 - ☐ Gives advice on alternative courses of action, including legal and treatment alternatives available outside the drug court program, and discusses with the defendant the long-term benefits of sobriety and a drug-free life.
 - ☐ Explains that because criminal prosecution for admitting to AOD use in open court will not be invoked, the defendant is encouraged to be truthful with the judge and with treatment staff, and informs the participant that he or she will be expected to speak directly to the judge, not through an attorney.
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- ☐ 向被告提供建議，包括毒品法庭的性質與目的、參與規則、遵守或違規的後果，以及參與或不參與毒品法庭對其利益之影響。
 - ☐ 向個案說明參與計畫將暫時或永久放棄之權利。
 - ☐ 提供關於替代方案的建議，包括除毒品法庭以外其他可選擇的法律及處遇方案，並與被告討論保持清醒和無毒生活的長期利益。
 - ☐ 向被告說明，在公開法庭承認使用酒精與毒品不會被額外追訴，因此鼓勵其誠實面對法官和處遇人員，並告知個案也期許之，將來毋須通過律師就可以直接與法官對話。
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Key Component #3

Eligible participants are identified early and promptly placed in the drug court program.

Purpose

Arrest can be a traumatic event in a person’s life. It creates an immediate crisis and can force substance abusing behavior into the open, making denial difficult. The period immediately after an arrest, or after apprehension for a probation violation, provides a critical window of opportunity for intervening and introducing the value of AOD treatment. Judicial action, taken promptly after arrest, capitalizes on the crisis nature of the arrest and booking process.

Rapid and effective action also increases public confidence in the criminal justice system. Moreover, incorporating AOD concerns into the case disposition process can be a key element in strategies to link criminal justice and AOD treatment systems overall.

Performance Benchmarks

1. Eligibility screening is based on established written criteria. Criminal justice officials or others (e.g., pretrial services, probation, TASC) are designated to screen cases and identify potential drug court participants.
2. Eligible participants for drug court are promptly advised about program requirements and the relative merits of participating.
3. Trained professionals screen drug court-eligible individuals for AOD problems and suitability for treatment.
4. Initial appearance before the drug court judge occurs immediately after arrest or apprehension to ensure program participation.
5. The court requires that eligible participants enroll in AOD treatment services immediately.

第三項關鍵要素

**符合資格條件的個案應儘早篩選出來，
並儘速轉介至毒品法庭。**

目的

被逮捕的當下是一個慘痛而深刻的情境，立即的衝擊直接讓被告濫用毒品的行徑被暴露出來，其一時之間會比較難否認。被逮捕以後的這段短暫期間，還有緩刑觀護期內又被查獲的這個時間點，為處遇治療的進行開啟了一扇關鍵的機會之窗。司法應當及時抓住這個衝擊性的時機點，迅速介入和註記處理。

迅速而有效的作為，也能提高民眾對刑事司法的信賴。而且，把被告濫用毒品與酒精的問題都一併納入案件裁處階段，是整合刑事司法和成癮治療策略的關鍵因素。

執行準則

1. 個案資格篩選應當根據既定的書面標準。刑事司法官員或其他人員（例如審前服務機構、觀護人、社區技術服務計畫 (TASC)），會被指定負責個案之篩選，辨識出有可能轉介毒品法庭的個案。
2. 符合毒品法庭資格的個案，應即時告知其處遇的規範要求以及相關權益。
3. 經培訓的專業人員，會負責篩選符合毒品法庭資格的個人是否患有酒精與毒品問題，以及是否適合接受處遇。
4. 首次出庭程序應當在被逮捕後立即由毒品法庭法官辦理，以確保其可以參與處遇計畫。
5. 法庭應立即命符合資格的個案進入酒精與毒品的處遇服務計畫。

Key Component #4

Drug courts provide access to a continuum of alcohol, drug, and other related treatment and rehabilitation services.

Purpose

The origins and patterns of AOD problems are complex and unique to each individual. They are influenced by a variety of accumulated social and cultural experiences. If treatment for AOD is to be effective, it must also call on the resources of primary health and mental health care and make use of social and other support services.³

In a drug court, the treatment experience begins in the courtroom and continues through the participant’s drug court involvement. In other words, drug court is a comprehensive therapeutic experience, only part of which takes place in a designated treatment setting. The treatment and criminal justice professionals are members of the therapeutic team.

The therapeutic team (treatment providers, the judge, lawyers, case managers, supervisors, and other program staff) should maintain frequent, regular communication to provide timely reporting of a participant’s progress and to ensure that responses to compliance and noncompliance are swift and coordinated. Procedures for reporting progress should be clearly defined in the drug court’s operating documents.

While primarily concerned with criminal activity and AOD use, the drug court team also needs to consider co-occurring problems such as mental illness, primary medical problems, HIV and sexually-transmitted diseases, homelessness; basic educational deficits, unemployment and poor job preparation; spouse and family troubles—especially domestic violence—and the long-term effects of childhood physical and sexual abuse. If not addressed, these factors will impair an individual’s success in treatment and will compromise compliance with program requirements. Co-occurring factors should be considered in treatment planning. In addition, treatment services must be relevant to the ethnicity, gender, age, and other characteristics of the participants.

Longitudinal studies have consistently documented the effectiveness of AOD treatment in reducing criminal recidivism and AOD use.⁴ A study commissioned by the Office of National Drug Control Policy found AOD treatment is significantly more cost-effective than domestic law enforcement, interdiction, or “source-country control” in reducing drug use in the United States.⁵ Research indicates that the length of time an offender spends in

³ Treatment-Based Drug Court Planning Guide and Checklist, Combining Alcohol and Other Drug Abuse Treatment With Diversion for Juveniles in the Justice System, TIP #21, Treatment Drug Courts: Integrating Substance Abuse Treatment With Legal Case Processing, TIP #23. Rockville, MD: Center for Substance Abuse Treatment, 1996.

⁴ The Effectiveness of Treatment for Drug Abusers Under Criminal Justice Supervision. Lipton, D., Washington, DC: National Institute of Justice, Research Report, November 1995.

⁵ Rydell, P., Everingham, S. Controlling Cocaine: Supply Versus Demand Programs. Santa Monica, CA: RAND Corporation, Office of National Drug Control Policy, Policy Research Center, 1994.

第四項關鍵要素

毒品法庭提供一系列酒精、毒品和其他相關治療處遇及復元服務。

目的

濫用酒精與毒品的原因和模式相當複雜多重，而且因人而異，也受到各種積累的社會經驗或文化經驗的影響。如果要讓酒精與毒品濫用的治療處遇能有效益，還必須集結基層醫療照護和精神衛生照護的資源，並且善用社福及其他支持服務³。

在毒品法庭中，治療處遇的體驗會從法庭開始，並藉由參與法庭的各項活動而持續進行。換言之，毒品法庭是一種廣泛而全面的治療處遇歷程，命令個案到指定的場所只是其中的一部分。整個治療處遇團隊的成員，包含了治療處遇和刑事司法的專業人員都在內。

治療處遇團隊的成員（包括治療處遇提供者、法官、律師、個案管理師、監督人及其他計畫執行人員）應保持頻繁、定期的聯繫，即時回報個案的進展，並確保對於其遵守或違規的行為都能迅速協調回應。處遇進展的回報程序，應當在毒品法庭運作文件中加以明文規定。

儘管毒品法庭主要在關注個案的犯罪以及其酒精與毒品的濫用情形，但還是需要注意到許多伴隨的問題，例如：精神疾患、醫療問題、HIV 和性傳染病、無家可歸；基礎教育不足、失業、就業準備不足；配偶和家庭問題—尤其是家庭暴力—以及對兒童身體及性虐待所造成的長期影響等問題。倘若不加以解決，這些因素將會減損個案的治療處遇成效，並影響其對計畫要求的遵守程度。因此，在擬定處遇計畫時，應當考慮到這些會伴隨的因素。此外，處遇服務還必須考慮到種族、性別、年齡，以及其他個人特質。

縱向研究一致指出，酒精與毒品處遇能可以有效降低刑事再犯及酒精與毒品的濫用⁴。美國國家毒品政策管制政策辦公室 (Office of National Drug Control Policy) 委託進行的一項

³ Treatment-Based Drug Court Planning Guide and Checklist, Combining Alcohol and Other Drug Abuse Treatment With Diversion for Juveniles in the Justice System, TIP #21, Treatment Drug Courts: Integrating Substance Abuse Treatment With Legal Case Processing, TIP #23. Rockville, MD: Center for Substance Abuse Treatment, 1996.

⁴ The Effectiveness of Treatment for Drug Abusers Under Criminal Justice Supervision. Lipton, D., Washington, DC: National Institute of Justice, Research Report, November 1995.

treatment is related to the level of AOD abuse and criminal justice involvement.⁶ A comprehensive study conducted by the State of California indicates that AOD treatment provides a \$7 return for every \$1 spent on treatment. The study found that outpatient treatment is the most cost-effective approach, although residential treatment, sober living houses, and methadone maintenance are also cost-effective.⁷ Comprehensive studies conducted in California⁸ and Oregon⁹ found that positive outcomes associated with AOD treatment are sustained for several years following completion of treatment.

For the many communities that do not have adequate treatment resources, drug courts can provide leadership to increase treatment options and enrich the availability of support services. Some drug courts have found creative ways to access services, such as implementing treatment readiness programs for participants who are on waiting lists for comprehensive treatment programs. In some jurisdictions, drug courts have established their own treatment programs where none existed. Other drug courts have made use of pretrial, probation, and public health treatment services.

Performance Benchmarks

- 1. Individuals are initially screened and thereafter periodically assessed by both court and treatment personnel to ensure that treatment services and individuals are suitably matched:
 - ❑ An assessment at treatment entry, while useful as a baseline, provides a time specific “snapshot” of a person’s needs and may be based on limited or unreliable information. Ongoing assessment is necessary to monitor progress, to change the treatment plan as necessary, and to identify relapse cues.
 - ❑ If various levels of treatment are available, participants are matched to programs according to their specific needs. Guidelines for placement at various levels should be developed.
 - ❑ Screening for infectious diseases and health referrals occurs at an early stage.
- 2. Treatment services are comprehensive:
 - ❑ Services should be available to meet the needs of each participant.
 - ❑ Treatment services may include, but are not limited to, group counseling; individual and family counseling; relapse prevention; 12-step self-help groups; preventive and primary medical care; general health education; medical detoxification; acupuncture for detoxification, for control of craving, and to make people more amenable to treatment; domestic violence programs; batterers’ treatment; and treatment for the long-term effects of childhood physical and sexual abuse.

⁶ Field, G. Oregon prison drug treatment programs. In C. Leukefeld and F. Tims (eds.), Drug Abuse Treatment in Prisons and Jails, Research monograph series #108. Rockville, MD: National Institute on Drug Abuse, 1992. Wexler, H., Falkin, G., and Lipton, D. Outcome evaluation of a prison therapeutic community for substance abuse treatment. Criminal Justice and Behavior, 17, pp 71-92, 1990.

⁷ Evaluating Recovery Services: The California Drug and Alcohol Treatment Assessment (CALDATA) General Report. Sacramento, CA: California Department of Alcohol and Drug Programs, April 1994.

⁸ Ibid.

⁹ Societal Outcomes and Cost Savings of Drug and Alcohol Treatment in the State of Oregon. Salem, OR: Office of Alcohol and Drug Abuse Programs, Oregon Department of Human Resources, February 1996.

研究也發現，在減少毒品濫用上，對酒精與毒品的治療處遇會比國內執法、攔截或「來源國控制 (source-country control)」更具成本效益⁵。

另有研究指出，一位個案參與處遇期間的長短，取決於其酒精與毒品的濫用程度，以及其刑事涉案的程度⁶。而加州進行的一項綜合研究發現，酒精與毒品處遇每花費 1 美元，可獲得 7 美元的效益。該研究進一步指出，儘管居家治療、中途之家及美沙冬替代療法具有一定的成本效益，門診治療還是其中最具成本效益的方法⁷。從加州⁸和奧勒岡州⁹進行的綜合研究可以看出，酒精與毒品處遇帶來的正面成果，能夠在處遇計畫結束以後繼續維持數年之久。

對於許多沒有足夠處遇資源的社區而言，毒品法庭可以發揮領導作用，來增加當地處遇的選擇，並強化支援服務的普及程度。有些毒品法庭已找到有創意的方法來協助個案能夠獲得服務，例如為那些還在等待正式處遇計畫的個案，先提供某些處遇準備計畫。在一些原本沒有處遇計畫的司法轄區，有的毒品法庭已建立出屬於該轄區的處遇計畫。其他毒品法庭則開始善用審前的、觀護的，或者公共衛生的處遇服務資源。

執行準則

個案資格篩選應當根據既定的書面標準。刑事司法官員或其他人員（例如審前服務機構、觀護人、社區技術服務計畫 (TASC)），會被指定負責個案之篩選，辨識出有可能轉介毒品法庭的個案。

- 1. 為確保處遇服務符合個案需求，宜先進行個案的初步篩選，再由法院和處遇人員定期評估：

⁵ Rydell, P., Everingham, S. Controlling Cocaine: Supply Versus Demand Programs. Santa Monica, CA: RAND Corporation, Office of National Drug Control Policy, Policy Research Center, 1994.

⁶ Field, G. Oregon prison drug treatment programs. In C. Leukefeld and F. Tims (eds.), Drug Abuse Treatment in Prisons and Jails. Research monograph series #108. Rockville, MD: National Institute on Drug Abuse, 1992. Wexler, H., Falkin, G., and Lipton, D. Outcome evaluation of a prison therapeutic community for substance abuse treatment. Criminal Justice and Behavior, 17, pp 71-92, 1990.

⁷ Evaluating Recovery Services: The California Drug and Alcohol Treatment Assessment (CALDATA) General Report. Sacramento, CA: California Department of Alcohol and Drug Programs, April 1994.

⁸ Ibid.

⁹ Societal Outcomes and Cost Savings of Drug and Alcohol Treatment in the State of Oregon. Salem, OR: Office of Alcohol and Drug Abuse Programs, Oregon Department of Human Resources, February 1996.

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- ☐ Other services may include housing; educational and vocational training; legal, money management, and other social service needs; cognitive behavioral therapy to address criminal thinking patterns; anger management; transitional housing; social and athletic activities; and meditation or other techniques to promote relaxation and self-control.
 - ☐ Specialized services should be considered for participants with co-occurring AOD problems and mental health disorders. Drug courts should establish linkages with mental health providers to furnish services (e.g., medication monitoring, acute care) for participants with co-occurring disorders. Flexibility (e.g., in duration of treatment phases) is essential in designing drug court services for participants with mental health problems.
 - ☐ Treatment programs or program components are designed to address the particular treatment issues of women and other special populations.
 - ☐ Treatment is available in a number of settings, including detoxification, acute residential, day treatment, outpatient, and sober living residences.
 - ☐ Clinical case management services are available to provide ongoing assessment of participant progress and needs, to coordinate referrals to services in addition to primary treatment, to provide structure and support for individuals who typically have difficulty using services even when they are available, and to ensure communication between the court and the various service providers.
3. Treatment services are accessible:
- ☐ Accommodations are made for persons with physical disabilities, for those not fluent in English, for those needing child care, and/or for persons with limited literacy.
 - ☐ Treatment facilities are accessible by public transportation, when possible.
4. Funding for treatment is adequate, stable, and dedicated to the drug court:
- ☐ To ensure that services are immediately available throughout the participant's treatment, agreements are made between courts and treatment providers. These agreements are based on firm budgetary and service delivery commitments.
 - ☐ Diverse treatment funding strategies are developed based on both government and private sources at national, State, and local levels.
 - ☐ Health care delivered through managed care organizations is encouraged to provide resources for the AOD treatment of member participants.
 - ☐ Payment of fees, fines, and restitution is part of treatment.
 - ☐ Fee schedules are commensurate with an individual's ability to pay. However, no one should be turned away solely because of an inability to pay.
5. Treatment services have quality controls:
- ☐ Direct service providers are certified or licensed where required, or otherwise demonstrate proficiency according to accepted professional standards.
 - ☐ Education, training, and ongoing clinical supervision are provided to treatment staff.
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- ☐ 雖然當初轉介進入處遇時的評估可以作為參考基準，但那只能呈現出該名個案需求在特定時點的「快照 (snapshot)」，且可能是基於有限或不可靠的資訊做成的評估。處遇進行中的持續評估，對於觀察個案進展、進行處遇計畫之必要調整，以及辨別復發徵兆而言是必要的。
 - ☐ 如果能有不同等級的處遇計畫，個案便能依其需求來進行配置。法庭應制定不同等級處遇計畫的轉介指引。
 - ☐ 初始階段應先針對個案的傳染病和健康轉診需求，進行初步篩選。
2. 處遇服務是全方位的：
- ☐ 應提供相應於個案需求之服務。
 - ☐ 處遇服務可包括，但不限於：團體諮商、個人與家庭諮詢、預防復發、12 步驟自助團體 (12-step self-help groups)、預防與基層醫療照護、通識健康教育、醫療解毒、針灸解毒，抑制渴求 (cravings)，以及讓個案更能接受處遇；預防課程、施暴者處遇，以及對於兒童遭受身體及性虐待所造成長期影響之治療。
 - ☐ 其他服務可能包括：安置、受教育、職業訓練、法律、財務管理、其他社會服務需求、矯治罪犯的認知行為療法、情緒管理、中途之家、社交和體育活動、冥想或其他促進放鬆及自我控制的技巧。
 - ☐ 應考慮為患有酒精與毒品濫用問題伴隨精神疾病的個案，提供專門的服務。毒品法庭應與精神衛生部門建立合作關係，為共病疾病的個案提供服務（例如藥物濫用監控檢測、急性照護等）。在為精神疾患的個案設計毒品法庭處遇計畫時，靈活性是重要的（例如在處遇階段進行期程）。
 - ☐ 設計處遇計畫及其內容要素時，應注意女性或其他特殊群體個別之處遇問題。
 - ☐ 處遇可以在多種情境中進行，包括：戒治所、急性居家治療、日間治療、門診，以及中途之家等等。
 - ☐ 臨床個案管理服務之提供，可用以持續評估個案的處遇進展及需求，協調轉介至基本處遇外的其他服務，並針對因故難以接受既有服務之個案，另外提供完整的安排及支持，以及確保法院與各個提供服務之機構保持聯繫。
3. 便捷的處遇服務：
- ☐ 提供住宿給身心障礙、語言不流利、有托嬰服務需求，或識字能力有限的個案。
 - ☐ 處遇機構盡可能在大眾運輸工具可到達之處。
4. 處遇經費應充足、穩定，且專款專用於毒品法庭：
- ☐ 為確保個案在處遇過程中即時獲得服務，法院和處遇提供者之間會達成協議。這些協議是立基於穩定的預算，以及提供服務的承諾。
 - ☐ 根據全國、州或地方層級的政府及私人資源，制定多元化的處遇資金策略。
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6. Treatment agencies are accountable:
- ☐ Treatment agencies give the court accurate and timely information about a participant's progress. Information exchange complies with the provisions of 42 CFR, Part 2 (the Federal regulations governing confidentiality of AOD abuse patient records) and with applicable State statutes.
 - ☐ Responses to progress and noncompliance are incorporated into the treatment protocols.
7. Treatment designs and delivery systems are sensitive and relevant to issues of race, culture, religion, gender, age, ethnicity, and sexual orientation.

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- ☐ 鼓勵管理式照護機構為酒精與毒品處遇之個案提供健康照護資源。
 - ☐ 支付處遇費用、罰款和賠償，也都是處遇的一部分。
 - ☐ 個案費用之負擔，應與其支付能力相稱。且任何人都不應當僅僅因為其無力支付而遭拒絕處遇服務。
5. 處遇服務須控管品質：
- ☐ 處遇服務的直接提供者，應具備必要的認證或執照，或根據一般公認的專業標準來證明其專業程度。
 - ☐ 應為處遇人員提供教育培訓，並持續進行臨床監督。
6. 處遇機構應承擔之責任：
- ☐ 處遇機構應向法庭提供關於個案處遇進展準確、即時的資訊。資訊交流須遵循 42 CFR, Part 2 的規範（酒精與藥物濫用患者紀錄保密的聯邦法規）及各州的相關規定。
 - ☐ 針對處遇進展及違規行為所進行的回應，應納入處遇方案中。
7. 處遇之設計和提供服務之系統，應當對於種族、文化、宗教、性別、年齡、族群及性傾向等是敏感而且高度攸關的。

Key Component #5

Abstinence is monitored by frequent alcohol and other drug testing.

Purpose

Frequent court-ordered AOD testing is essential. An accurate testing program is the most objective and efficient way to establish a framework for accountability and to gauge each participant’s progress. Modern technology offers highly reliable testing to determine if an individual has recently used specific drugs. Further, it is commonly recognized that alcohol use frequently contributes to relapse among individuals whose primary drug of choice is not alcohol.

AOD testing results are objective measures of treatment effectiveness, as well as a source of important information for periodic review of treatment progress. AOD testing helps shape the ongoing interaction between the court and each participant. Timely and accurate test results promote frankness and honesty among all parties.

AOD testing is central to the drug court’s monitoring of participant compliance. It is both objective and cost-effective. It gives the participant immediate information about his or her own progress, making the participant active and involved in the treatment process rather than a passive recipient of services.

Performance Benchmarks

1. AOD testing policies and procedures are based on established and tested guidelines, such as those established by the American Probation and Parole Association. Contracted laboratories analyzing urine or other samples should also be held to established standards.
2. Testing may be administered randomly or at scheduled intervals, but occurs no less than twice a week during the first several months of an individual’s enrollment. Frequency thereafter will vary depending on participant progress.
3. The scope of testing is sufficiently broad to detect the participant’s primary drug of choice as well as other potential drugs of abuse, including alcohol.
4. The drug-testing procedure must be certain. Elements contributing to the reliability and validity of a urinalysis testing process include, but are not limited to:
 - ☐ Direct observation of urine sample collection.
 - ☐ Verification temperature and measurement of creatinine levels to determine the extent of water loading.
 - ☐ Specific, detailed, written procedures regarding all aspects of urine sample collection, sample analysis, and result reporting.
 - ☐ A documented chain of custody for each sample collected.

第五項關鍵要素

停止使用必須透過經常性的酒精與毒品檢驗來加以監控。

目的

法院經常性地進行毒品與酒精檢驗是必要的。建立一個準確的檢驗計畫，是最客觀且最有效的確立問責制度以及衡量個案處遇進展的方法。現代科技提供了高度可靠的檢驗技術，可用以判斷個案近期是否使用過特定毒品。此外，一般已知，飲酒行為對於那些即使非以酒精為主要濫用物質的個案來說，也是經常觸發其復發再度濫用物質的原因。

酒精與毒品的檢驗結果，是處遇成效的客觀衡量指標，也是定期審查處遇進展的重要資訊。酒精與毒品的檢驗，有助於建構法庭和個案之間持續的互動關係。即時且準確的檢驗結果，可以促進各方之間的坦誠及誠實。

酒精與毒品的檢驗，是毒品法庭監測個案是否遵守規範的核心。檢驗結果具有客觀性，又符合成本效益。檢驗結果能提供個案處遇進展的即時資訊，促使個案積極主動參與處遇計畫，而不只是被動接受服務。

執行準則

1. 酒精與毒品檢驗的政策和程序，應當以既定的，且經過驗證的指引為基礎，例如由美國緩刑與假釋協會 (American Probation and Parole Association) 發布的指引。實驗室要受委託檢驗尿液或其他檢體樣本，同樣必須依據既定的標準。
2. 酒精與毒品的檢驗，得採取隨機進行，或者定期進行，但在個案進入處遇計畫初期的幾個月內，檢驗應每周至少兩次。於此之後的檢驗頻率，則可以根據個案的處遇進展情況予以調整。
3. 檢驗的範圍宜夠寬廣，廣到足以檢出個案常用的主要毒品以及其他可能的潛在毒品，也包括酒精。
4. 毒品檢驗的程序必須明確。這些程序中有助於提升尿液分析檢驗之信度和效度的要素，包括但不限於：
 - ☐ 直接注視採尿過程。
 - ☐ 檢查尿液溫度並測量肌酸酐濃度 (creatinine levels) 來確認水的比重。

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- ☐ Quality control and quality assurance procedures for ensuring the integrity of the process.
 - ☐ Procedures for verifying accuracy when drug test results are contested.
5. Ideally, test results are available and communicated to the court and the participant within one day. The drug court functions best when it can respond immediately to noncompliance; the time between sample collection and availability of results should be short.
 6. The court is immediately notified when a participant has tested positive, has failed to submit to AOD testing, has submitted the sample of another, or has adulterated a sample.
 7. The coordinated strategy for responding to noncompliance includes prompt responses to positive tests, missed tests, and fraudulent tests.
 8. Participants should be abstinent for a substantial period of time prior to program graduation.
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- ☐ 以具體、詳細、書面程序規範檢體樣本採集、樣本分析和結果報告等各方面的流程。
 - ☐ 透過證物監管鏈管理蒐集到的樣本。
 - ☐ 透過品質管制 (quality control) 及品質保證 (quality assurance) 程序。
 - ☐ 來確保檢驗過程的完整性。
 - ☐ 建立毒品檢驗結果受到質疑時，驗證準確性的程序。
5. 在理想情況下，檢驗結果應在一天內提供並通知法院和個案。毒品法庭要能發揮最大功能，須能針對個案的違規行為立刻作出回應處分；並應盡可能縮短從採樣到檢出之間的時間差。
 6. 當個案檢驗結果呈陽性反應，或不能成功接受酒精與毒品檢驗，或提供他人檢體樣本，或在檢體樣本摻假時，法庭要能立即收到通報。
 7. 在針對個案違規下達回應處分的整合型策略中，也應針對檢出陽性、不出席接受檢驗、欺瞞的檢驗等情形，要能即時的下達回應處分。
 8. 個案在處遇計畫結業前的一定期間內，應保持完全停止使用的狀態。
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Key Component #6

A coordinated strategy governs drug court responses to participants' compliance.

Purpose

An established principle of AOD treatment is that addiction is a chronic, relapsing condition. A pattern of decreasing frequency of use before sustained abstinence from alcohol and other drugs is common. Becoming sober or drug free is a learning experience, and each relapse to AOD use may teach something about the recovery process.

Implemented in the early stages of treatment and emphasized throughout, therapeutic strategies aimed at preventing the return to AOD use help participants learn to manage their ambivalence toward recovery, identify situations that stimulate AOD cravings, and develop skills to cope with high-risk situations. Eventually, participants learn to manage cravings, avoid or deal more effectively with high-risk situations, and maintain sobriety for increasing lengths of time.

Abstinence and public safety are the ultimate goals of drug courts, many participants exhibit a pattern of positive urine tests within the first several months following admission. Because AOD problems take a long time to develop and because many factors contribute to drug use and dependency, it is rare that an individual ceases AOD use as soon as he or she enrolls in treatment. Even after a period of sustained abstinence, it is common for individuals to occasionally test positive.

Although drug courts recognize that individuals have a tendency to relapse, continuing AOD use is not condoned. Drug courts impose appropriate responses for continuing AOD use. Responses increase in severity for continued failure to abstain.

A participant's progress through the drug court experience is measured by his or her compliance with the treatment regimen. Certainly cessation of drug use is the ultimate goal of drug court treatment. However, there is value in recognizing incremental progress toward the goal, such as showing up at all required court appearances, regularly arriving at the treatment program on time, attending and fully participating in the treatment sessions, cooperating with treatment staff, and submitting to regular AOD testing.

Drug courts must reward cooperation as well as respond to noncompliance. Small rewards for incremental successes have an important effect on a participant's sense of purpose and accomplishment. Praise from the drug court judge for regular attendance or for a period of clean drug tests, encouragement from the treatment staff or the judge at particularly difficult times, and ceremonies in which tokens of accomplishment are awarded in open court for completing a particular phase of treatment are all small but very important rewards that bolster confidence and give inspiration to continue.

第六項關鍵要素

毒品法庭應採取整合型策略，針對個案的遵守與否作出回應處分。

目的

成癮屬於一種慢性且可能復發的疾病，此乃酒精與毒品處遇中業已建立之原則。在個案能穩定地完全停止使用酒精或毒品以前，其呈現出逐步降低使用頻率的樣態是普遍常見的。變得清醒和遠離毒品乃是一種學習的歷程，每次的復發也會讓個案從復元歷程中學習到更多。

治療策略旨在防免個案再次使用毒品或酒精，若能從處遇的初期階段就導入並持續強化，便能幫助個案學習管理他們對於未來復元的矛盾情結，以及培養其辨別和應付可能觸發毒品或酒精渴求 (cravings) 的高風險情境。

最終，個案能學會管理渴求 (cravings)，避免高風險的情境發生，或在高風險情境發生時更能有效應付，且能夠保持更長時期的清醒。

毒品法庭設置的終極目標，在於完全停用與公共安全。許多個案在參與毒品法庭計畫的初期的幾個月內，仍會表現出尿檢陽性的樣態。由於酒精與毒品成癮問題是長時期所致，而且造成其使用和依賴毒品的因素很多，因此鮮少有個案能在參加處遇計畫之初就能立即完全停止使用酒精與毒品。即使個案在穩定停止使用一段期間以後，偶爾又被檢出陽性也是普遍常見的。

毒品法庭雖承認個案會有復發的傾向，但仍不應被容許其持續濫用酒精與毒品。毒品法庭應針對個案持續濫用酒精或毒品的行為，下達適切的回應處分。回應的嚴厲程度，則隨著個案持續未能停用而逐步升高。

個案在毒品法庭的進步程度，是依據其對於處遇計畫的遵守情形來加以衡量。使個案澈底停止使用固然是毒品法庭處遇的最終目標。然而，承認個案已經朝目標有漸進的進步也是重要的，例如：按時出庭、處遇課程能規律準時報到、固定參與且全心投入處遇課程、充分配合處遇人員，以及定期接受酒精與毒品檢驗。

Drug courts establish a coordinated strategy, including a continuum of responses, to continuing drug use and other noncompliant behavior. A coordinated strategy can provide a common operating plan for treatment providers and other drug court personnel. The criminal justice system representatives and the treatment providers develop a series of complementary, measured responses that will encourage compliance. A written copy of these responses, given to participants during the orientation period, emphasizes the predictability, certainty, and swiftness of their application.

Performance Benchmarks

1. Treatment providers, the judge, and other program staff maintain frequent, regular communication to provide timely reporting of progress and noncompliance and to enable the court to respond immediately. Procedures for reporting noncompliance are clearly defined in the drug court’s operating documents.
2. Responses to compliance and noncompliance are explained verbally and provided in writing to drug court participants before their orientation. Periodic reminders are given throughout the treatment process.
3. The responses for compliance vary in intensity:
 - ☐ Encouragement and praise from the bench.
 - ☐ Ceremonies and tokens of progress, including advancement to the next treatment phase.
 - ☐ Reduced supervision.
 - ☐ Decreased frequency of court appearances.
 - ☐ Reduced fines or fees.
 - ☐ Dismissal of criminal charges or reduction in the term of probation.
 - ☐ Reduced or suspended incarceration.
 - ☐ Graduation.
4. Responses to or sanctions for noncompliance might include:
 - ☐ Warnings and admonishment from the bench in open court.
 - ☐ Demotion to earlier program phases.
 - ☐ Increased frequency of testing and court appearances.
 - ☐ Confinement in the courtroom or jury box.
 - ☐ Increased monitoring and/or treatment intensity.
 - ☐ Fines.
 - ☐ Required community service or work programs.
 - ☐ Escalating periods of jail confinement (however, drug court participants remanded to jail should receive AOD treatment services while confined).
 - ☐ Termination from the program and reinstatement of regular court processing.

毒品法庭對於個案的配合行為應當給予獎勵，就如同對於其違規會作出回應一樣。一旦個案有漸進性的成功，就給予一些小的獎勵作為回應，可以有效提升其使命感和成就感。毒品法庭法官對於個案能按時出庭，或能持續通過毒品檢驗宜給予表揚，處遇人員或法官在個案遇到瓶頸時可給予鼓勵，以及當個案完成了特定的處遇階段時，法官在法庭上公開加以表揚，這些都是細微卻非常重要的酬賞，能夠增強個案的信心，並且激發其堅持不懈的動力。

毒品法庭應制定一套整合型策略，包括一系列針對個案持續濫用毒品或其他違規行為的回應處分。該整合型策略應當能提供一般性的運作方案給處遇提供者及其他毒品法庭人員。刑事司法系統代表人士及處遇提供者應共同制定一系列能夠互補、縝密且能促進個案遵守處遇計畫的回應處分。明文記載回應處分的書面資料，應當在處遇程序介紹階段就提供給個案，並向個案強調下達回應處分的可預期性、確定性及立即性¹⁰。

執行準則

1. 處遇提供者、法官和其他處遇計畫人員均應保持頻繁且定期的聯繫溝通，及時通報個案的進展和違規情形，讓法庭能夠即時作出回應。對於個案違規行為的通報程序，應明訂於毒品法庭的運作文件內。
2. 在處遇程序介紹階段開始以前，就應當向個案以口語和書面方式，清楚說明遵守處遇及違規行為的各種回應處分，在整個處遇過程中也要定期提醒個案。
3. 對個案遵守處遇的回應措施有不同的強度，包括：
 - ☐ 來自法官的鼓勵及表揚。
 - ☐ 表揚個案進步的儀式，包括表揚個案進入下一處遇階段的儀式。
 - ☐ 降低監控。
 - ☐ 減少法庭報到的頻率。
 - ☐ 減少罰款或費用。
 - ☐ 撤銷刑事追訴或縮短緩刑期間。
 - ☐ 縮短或暫停監禁。
 - ☐ 結業。

¹⁰ 編委註：
可預期性：一有何種違規就會作出何種回應。
確定性：一有違規就一定會作出回應。
立即性：一有違規就會立刻作出回應。

4. 對個案違規行為的回應處分或懲罰包括：

- ☐ 法官在公開法庭上警告和訓誡。
- ☐ 降階回到先前的處遇階段。
- ☐ 增加毒品檢驗及出庭的頻率。
- ☐ 罰坐席。
- ☐ 增強監控及（或）處遇的強度。
- ☐ 罰款。
- ☐ 要求社區服務或工作計畫。
- ☐ 延長監禁時間（但是，受監禁人在監禁期間仍應持續接受酒精與毒品處遇）。
- ☐ 終止處遇計畫，回歸一般刑事司法程序。

Key Component #7

Ongoing judicial interaction with each drug court participant is essential.

Purpose

The judge is the leader of the drug court team, linking participants to AOD treatment and to the criminal justice system. This active, supervising relationship, maintained throughout treatment, increases the likelihood that a participant will remain in treatment and improves the chances for sobriety and law-abiding behavior. Ongoing judicial supervision also communicates to participants—often for the first time—that someone in authority cares about them and is closely watching what they do.

Drug courts require judges to step beyond their traditionally independent and objective arbiter roles and develop new expertise. The structure of the drug court allows for early and frequent judicial intervention. A drug court judge must be prepared to encourage appropriate behavior and to discourage and penalize inappropriate behavior. A drug court judge is knowledgeable about treatment methods and their limitations.

Performance Benchmarks

1. Regular status hearings are used to monitor participant performance:
 - ☐ Frequent status hearings during the initial phases of each participant’s program establish and reinforce the drug court’s policies, and ensure effective supervision of each drug court participant. Frequent hearings also give the participant a sense of how he or she is doing in relation to others.
 - ☐ Time between status hearings may be increased or decreased, based on compliance with treatment protocols and progress observed.
 - ☐ Having a significant number of drug court participants appear at a single session gives the judge the opportunity to educate both the offender at the bench and those waiting as to the benefits of program compliance and consequences for noncompliance.
2. The court applies appropriate incentives and sanctions to match the participant’s treatment progress.
3. Payment of fees, fines and/or restitution is part of the participant’s treatment. The court supervises such payments and takes into account the participant’s financial ability to fulfill these obligations. The court ensures that no one is denied participation in drug courts solely because of on an inability to pay fees, fines, or restitution.

第七項關鍵要素

法庭和個案保持持續的司法互動，是至關重要的。

目的

法官作為毒品法庭團隊的領導者，將個案和酒精與毒品處遇以及刑事司法系統串連在一起。整個處遇過程均應保持積極的監督關係，以提高個案持續接受處遇計畫的可能性，並且強化個案保持清醒和遵守法律的機會。持續的司法監督同時向個案—尤其是首次參與的個案—傳達一個訊息：有關當局是有人在關心他的，而且會密切監督他的行為。

毒品法庭要求法官走出傳統意義上獨立客觀的仲裁者角色，並且應當發展新的專業知識。毒品法庭制度要求早期和頻繁的司法介入。毒品法庭法官應當準備好，對適當的行為給予鼓勵，對於違規行為作出懲罰，也要了解處遇治療的原理及其限制。

執行準則

1. 定期的「狀態聽審」(status hearing)¹¹係用以監督個案的表現：
 - ☐ 在處遇初期階段，頻繁的「狀態聽審」有助於樹立毒品法庭的政策並強化之，且確保能有效監督到每一位個案。頻繁的開庭也能讓個案了解到自己和其他個案的表現。
 - ☐ 「狀態聽審」的間距，可以隨個案遵守處遇條件的情況以及進展的程度，而予以調整增減。
 - ☐ 在同一次庭期傳喚多數個案同時到庭，能讓法官同時對當庭及其他候庭的個案，針對遵守或違反處遇計畫的後果，都一起進行宣導。
2. 毒品法庭對於個案參與處遇計畫的進展情況，應作出相對應的獎勵或懲罰。
3. 支付處遇費用、罰款和（或）賠償，都是對個案處遇的一部分。毒品法庭在審酌相關費用時，應考量個案的經濟狀況是否足以負擔。毒品法庭應確保沒有人會僅僅因為無力支付費用、罰款或賠償，就無法參與處遇計畫。

¹¹ 編委註：「狀態聽審」(status hearing) 程序，是一種使法官能定期監督、評估個案態聽之證據調查程序。法官在此程序得藉由聽取雙方意見、調查證據以評估個案遵守處遇條件之態況，進而作出相應之裁決處分。

Key Component #8

Monitoring and evaluation measure the achievement of program goals and gauge effectiveness.

Purpose

Fundamental to the effective operation of drug courts are coordinated management, monitoring, and evaluation systems. The design and operation of an effective drug court program result from thorough initial planning, clearly defined program goals, and inherent flexibility to make modifications as necessary.

The goals of the program should be described concretely and in measurable terms to provide accountability to funding agencies and policymakers. And, since drug courts will increasingly be asked to demonstrate tangible outcomes and cost-effectiveness, it is critical that the drug court be designed with the ability to gather and manage information for monitoring daily activities, evaluating the quality of services provided, and producing longitudinal evaluations.

Management and monitoring systems provide timely and accurate information about program operations to the drug court’s managers, enabling them to keep the program on course, identify developing problems, and make appropriate procedural changes. Clearly defined drug court goals shape the management information system, determine monitoring questions, and suggest methods for finding information to answer them.

Program management provides the information needed for day-to-day operations and for planning, monitoring, and evaluation. Program monitoring provides oversight and periodic measurements of the program’s performance against its stated goals and objectives.

Evaluation is the institutional process of gathering and analyzing data to measure the accomplishment of the program’s long-term goals. A process evaluation appraises progress in meeting operational and administrative goals (e.g., whether treatment services are implemented as intended). An outcome evaluation assesses the extent to which the program is reaching its long-term goals (e.g., reducing criminal recidivism). An effective design for an outcome evaluation uses a comparison group that does not receive drug court services.

Although evaluation activities are often planned and implemented simultaneously, process evaluation information can be used more quickly in the early stages of drug court implementation. Outcome evaluation should be planned at the beginning of the program as it requires at least a year to compile results, especially if past participants are to be found and interviewed.

Evaluation strategies should reflect the significant coordination and the considerable time required to obtain measurable results. Evaluation studies are useful to everyone, including funding agencies and policymakers who may not be involved in the daily operations of the program. Information and conclusions developed from periodic monitoring reports, process evaluation activities, and longitudinal evaluation studies may be used to modify program

第八項關鍵要素

處遇計畫的成效，是透過監督及評估系統加以衡量。

目的

毒品法庭有效運作的基礎在於：協同管理、監督及評估系統。一個有效的毒品法庭計畫之設計及運作，仰賴縝密的初始規畫、明確的計畫目標，以及因應情事變更可調整的靈活性。

處遇計畫的目標，應以具體且可量化的指標來撰寫，俾作為資助機構及政策制定者執行問責的基礎。此外，由於毒品法庭會被要求達到符合成本效益的具體成效，毒品法庭應被設計具有收集和管理資訊的能力，包括記錄監控日常活動、評估提供處遇服務品質，以及產生縱向評估的各種資訊。

管理計畫 (Program management) 和監測計畫 (Program monitoring) 的系統，能夠即時而準確地向毒品法庭管理人員提供有關計畫運作的相關資訊，使他們能夠確保計畫正常運作，辨識出發展中的問題，並做出適當的程序修正。明確的毒品法庭目標，能夠塑造其管理資訊系統、決定其監測中的問題，並能建議找出資訊的方法來加以回答。

管理計畫系統，能提供日常運作以及規畫、監測和評估所需要的資訊。監測計畫系統，則能提供監測與定期評量，用以評估計畫運作是否符合預定目標。

評估 (Evaluation) 則是一個制度性的過程，用以收集數據並加以分析，藉此衡量長期目標的完成情況。歷程評估 (process evaluation)，是在評估有關運作及管理目標的進展 (例如，處遇是否按預期實施)。結果評估 (outcome evaluation)，則是在衡量該計畫長期目標的完成度 (例如，減少犯罪之再犯率)。一個有效設計的結果評估，應當以未接受毒品法庭處遇的對象作為對照組。

評估的作業，雖然通常是一邊規劃一邊執行，但在毒品法庭運作的初期階段，歷程評估的資訊可以更快的使用上。至於結果評估則應該在計畫開始時就進行規畫，因為至少需要一年的時間來收集結果，尤其若需要找到過往的個案並進行訪談的話。

procedures, change therapeutic interventions, and make decisions about continuing or expanding the program.

Information for management, monitoring, and evaluation purposes may already exist within the court system and/or in the community treatment or supervision agencies (e.g., criminal justice data bases, psychosocial histories, and formal AOD assessments). Multiple sources of information enhance the credibility and persuasiveness of conclusions drawn from evaluations.

Performance Benchmarks

1. Management, monitoring, and evaluation processes begin with initial planning. As part of the comprehensive planning process, drug court leaders and senior managers should establish specific and measurable goals that define the parameters of data collection and information management. An evaluator can be an important member of the planning team.
2. Data needed for program monitoring and management can be obtained from records maintained for day-to-day program operations, such as the numbers and general demographics of individuals screened for eligibility; the extent and nature of AOD problems among those assessed for possible participation in the program; and attendance records, progress reports, drug test results, and incidence of criminality among those accepted into the program.
3. Monitoring and management data are assembled in useful formats for regular review by program leaders and managers.
4. Ideally, much of the information needed for monitoring and evaluation is gathered through an automated system that can provide timely and useful reports. If an automated system is not available manual data collection and report preparation can be streamlined. Additional monitoring information may be acquired by observation and through program staff and participant interviews.
5. Automated manual information systems must adhere to written guidelines that protect against unauthorized disclosure of sensitive personal information about individuals.
6. Monitoring reports need to be reviewed at frequent intervals by program leaders and senior managers. They can be used to analyze program operations, gauge effectiveness, modify procedures when necessary, and refine goals.
7. Process evaluation activities should be undertaken throughout the course of the drug court program. This activity is particularly important in the early stages of program implementation.
8. If feasible, a qualified independent evaluator should be selected and given responsibility for developing and conducting an evaluation design and for preparing interim and final reports. If an independent evaluation is unavailable the drug court program designs and implements its own evaluation, based on guidance available through the field:

評估策略，應當要能呈現出為了獲得量化結果所需要的重要協作及夠長時程。評估研究對於所有人皆有用，包括資助機構，以及未參與計畫日常運作的政策制定者。藉由定期監測報告、程序評估作業和縱向評估研究中得出的資訊和結論，可用於修正計畫程序、改變治療的介入，並對延續或擴展計畫作出決定。

用於管理、監測和評估目的之資訊，可能已經存在於法院系統和（或）社區處遇或監督機構之中（例如，刑事司法資料庫、心理社會史和官方的酒精與毒品評估系統）。多元的資訊來源，能夠強化評估結果的可信度和說服力。

執行準則

1. 管理、監測以及評估的過程，從初始規畫就要開始。它們作為整體規畫過程的一部分，毒品法庭領導階層和高階管理人員應當制定具體且可量化的目標，用以定義數據收集和資訊管理的參數。而評估人員也可以是規畫團隊的重要一員。
2. 監督和管理計畫所需要的數據資訊，可以從維護計畫日常營運所需的紀錄中取得，例如，資格篩選的人數及一般人口組成的統計數據；對於可能參與計畫的人之酒精與毒品問題的程度和性質之評估；以及出席記錄、進度報告、毒品檢驗結果和犯罪率等等。
3. 監測和管理的數據資訊，要彙集成為有用的格式，提供給計畫領導階層和經理人來定期審閱。
4. 理想情況下，監測和評估所需的大部分資訊，都是透過能提供即時有用報告的自動化系統來收集的。如果無法使用自動化系統，人工收集數據及報告備置作業程序則可以精簡。額外的監測資訊可以藉由觀察，以及透過計畫工作人員和個案訪談獲得。
5. 自動化資訊系統必須遵循書面指引，以避免未經授權洩露個人的相關敏感資訊。
6. 監測報告須定期或不定期地交由處遇計畫領導階層和經理人審閱。該報告可用於分析計畫執行情形、評估成效、修正程序，俾因應需求以及調整計畫目標。
7. 個案歷程評估作業，應在整個法庭處遇方案過程中進行。該項評估在執行處遇計畫的初期階段尤為重要。
8. 如有可能，法庭應設置一名獨立且合格的評估人員。評估人員應負責設計評估機制、實施評估，以及準備期中及期末報告。如無獨立評估人員，可依據以下指引，設計及實施自己的評估機制：
 - 法官、檢察官、辯護律師、處遇治療人員和其他人員，共同與評估人員合作，一起設計評估機制。
 - 理想情況下，獨立評估人員會幫助資訊系統專家設計和導入資訊管理系統。

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- ☐ Judges, prosecutors, the defense bar, treatment staff, and others design the evaluation collaboratively with the evaluator.
 - ☐ Ideally, an independent evaluator will help the information systems expert design and implement the management information system.
 - ☐ The drug court program ensures that the evaluator has access to relevant justice system and treatment information.
 - ☐ The evaluator maintains continuing contact with the drug court and provides information on a regular basis. Preliminary reports may be reviewed by drug court program personnel and used as the basis for revising goals, policies, and procedures as appropriate.
9. Useful data elements to assist in management and monitoring may include, but are not limited to:
- ☐ The number of defendants screened for program eligibility and the outcome of those initial screenings.
 - ☐ The number of persons admitted to the drug court program.
 - ☐ Characteristics of program participants, such as age, sex, race/ethnicity, family status, employment status, and educational level; current charges; criminal justice history; AOD treatment or mental health treatment history; medical needs (including detoxification); and nature and severity of AOD problems.
 - ☐ Number and characteristics of participants (e.g., duration of treatment involvement, reason for discharge from the program).
 - ☐ Number of active cases.
 - ☐ Patterns of drug use as measured by drug test results.
 - ☐ Aggregate attendance data and general treatment progress measurements.
 - ☐ Number and characteristics of persons who graduate or complete treatment successfully.
 - ☐ Number and characteristics of persons who do not graduate or complete the program.
 - ☐ Number of participants who fail to appear at drug court hearings and number of bench warrants issued for participants.
 - ☐ Rearrests during involvement in the drug court program and type of arrest(s).
 - ☐ Number, length, and reasons for incarcerations during and subsequent to involvement in the drug court program.
10. When making comparisons for evaluation purposes, drug courts should consider the following groups:
- ☐ Program graduates.
 - ☐ Program terminations.
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- ☐ 毒品法庭須確保評估人員有權限取得相關的司法系統資訊和處遇治療資訊。
 - ☐ 評估人員應與毒品法庭保持聯繫，並定期提供資訊。初步報告可提供毒品法庭人員參考，作為調整方案目標、政策和程序的參考基礎。
9. 有助於管理和監督個案的有用數據，可能包括但不限於：
- ☐ 符合計畫資格的被告人數，以及初步篩選結果。
 - ☐ 參加毒品法庭計畫的人數。
 - ☐ 個案的特徵，例如年齡、性別、種族 / 民族、家庭狀況、就業狀況和教育水平；正面臨的刑事指控；刑事司法紀錄；酒精與毒品處遇或心理健康治療紀錄；醫療需求（包括解毒）；酒精與毒品問題和嚴重程度。
 - ☐ 個案的人數和特徵（例如，參加計畫持續的期程、退出計畫的原因）。
 - ☐ 目前正在參加法庭計畫的人數。
 - ☐ 依據毒品檢驗結果，推估個案毒品使用的模式。
 - ☐ 彙整出席率數據及各項處遇進展與評估。
 - ☐ 結業或完成處遇的人數和特徵。
 - ☐ 未能結業或未完成處遇的人數和特徵。
 - ☐ 不到庭個案數，以及法官簽發逮捕令件數。
 - ☐ 個案參與計畫期間再次遭逮捕及逮捕類型。
 - ☐ 個案在參與計畫期間被短期監禁的次數、天數和原因。
10. 毒品法庭在進行評估比較時，應考慮以下群體：
- ☐ 完成毒品法庭計畫的結業生。
 - ☐ 被終止參與毒品法庭計畫的個案。
 - ☐ 經轉介但未出席處遇計畫的個案。
 - ☐ 未被轉介參加毒品法庭的個案。
11. 毒品法庭在個案結束計畫後至少六個月，應一併評估對照組（如上所列），以檢視該計畫對個案的長期影響成效。用於評估的數據可能包括：
- ☐ 犯罪行為 / 活動。
 - ☐ 自參與毒品法庭計畫起，因違法行為而被拘留的天數。
 - ☐ 毒品法庭計畫結束後的酒精與毒品使用情況。
 - ☐ 工作技能和就業狀況的變化。
 - ☐ 識字率和其他受教育程度的變化。
 - ☐ 身心健康狀況的變化。
 - ☐ 家庭關係狀況的變化。
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- ☐ Individuals who were referred to, but did not appear for, treatment.
 - ☐ Individuals who were not referred for drug court services.
11. At least six months after exiting a drug court program, comparison groups (listed above) should be examined to determine long-term effects of the program. Data elements for follow-up evaluation may include:
- ☐ Criminal behavior/activity.
 - ☐ Days spent in custody on all offenses from date of acceptance into the program.
 - ☐ AOD use since leaving the program.
 - ☐ Changes in job skills and employment status.
 - ☐ Changes in literacy and other educational attainments.
 - ☐ Changes in physical and mental health.
 - ☐ Changes in status of family relationships.
 - ☐ Attitudes and perceptions of participation in the program.
 - ☐ Use of health care and other social services.
12. Drug court evaluations should consider the use of cost-benefit analysis to examine the economic impact of program services. Important elements of cost-benefit analysis include:
- ☐ Reductions in court costs, including judicial, counsel, and investigative resources.
 - ☐ Reductions in costs related to law enforcement and corrections.
 - ☐ Reductions in health care utilization.
 - ☐ Increased economic productivity.
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- ☐ 個案對參與計畫的態度和看法。
 - ☐ 使用醫療保健和其他社會服務的情況。
12. 評估毒品法庭時，應考慮使用成本效益分析 (cost-benefit analysis)，以檢查處遇計畫服務的經濟效益。成本效益分析的重要要素包括：
- ☐ 減少的法庭費用，包括司法系統、辯護人和調查資源。
 - ☐ 減少執法和矯正的相關成本。
 - ☐ 降低醫療保健使用率。
 - ☐ 提升的經濟生產力。
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Key Component #9

Continuing interdisciplinary education promotes effective drug court planning, implementation, and operations.

Purpose

Periodic education and training ensures that the drug court’s goals and objectives, as well as policies and procedures, are understood not only by the drug court leaders and senior managers, but also by those indirectly involved in the program. Education and training programs also help maintain a high level of professionalism, provide a forum for solidifying relationships among criminal justice and AOD treatment personnel, and promote a spirit of commitment and collaboration.

All drug court staff should be involved in education and training, even before the first case is heard. Interdisciplinary education exposes criminal justice officials to treatment issues, and treatment staff to criminal justice issues. It also develops shared understandings of the values, goals, and operating procedures of both the treatment and the justice system components. Judges and court personnel typically need to learn about the nature of AOD problems and the theories and practices supporting specific treatment approaches. Treatment providers typically need to become familiar with criminal justice accountability issues and court operations. All need to understand and comply with drug testing standards and procedures.

For justice system or other officials not directly involved in the program’s operations, education provides an overview of the mission, goals, and operating procedures of the drug court.

A simple and effective method of educating new drug court staff is to visit an existing court to observe its operations and ask questions. On-site experience with an operating drug court provides an opportunity for new drug court staff to talk to their peers directly and to see how their particular role functions.

Performance Benchmarks

1. Key personnel have attained a specific level of basic education, as defined in staff training requirements and in the written operating procedures. The operating procedures should also define requirements for the continuing education of each drug court staff member.
2. Attendance at education and training sessions by all drug court personnel is essential. Regional and national drug court training provide critical information on innovative developments across the Nation. Sessions are most productive when drug court personnel attend as a group. Credits for continuing professional education should be offered, when feasible.

第九項關鍵要素

持續且跨領域的教育訓練， 有助於提高毒品法庭計畫於規劃、導入與執行之成效。

目的

定期的教育訓練可確保毒品法庭領導階層、資深經理人以及間接參與計畫的人員，都了解計畫的目標、目的、政策和程序。教育訓練計畫也有助於保持高水準的專業標準，並提供一個討論平台，鞏固刑事司法和酒精與毒品處遇人員之間的關係，並促進承諾與合作的精神。

所有毒品法庭工作人員，甚至在第一個案件被受理以前，都應接受教育訓練。跨領域的教育訓練除了讓刑事司法人員能接觸到處遇議題，同時也讓處遇人員能接觸到刑事司法議題。這可以促進雙方對於治療處遇領域和刑事司法系統彼此的價值觀、目標和運作程序能達成共識。

法官和法庭工作人員通常需要學習有關於酒精與毒品問題的本質，以及支持特定處遇方法的理論和實務。處遇服務提供者則通常需要熟悉刑事司法的問責事項和法庭運作。而所有工作人員也都需要了解並且遵守毒品檢驗的標準及程序。

對於未直接參與計畫運作的司法人員或其他官員，教育訓練可以提供有關毒品法庭的使命、目標和運作程序的概論。

對新上任毒品法庭工作人員進行教育訓練的簡單有效方式，就是讓他參觀現行的毒品法庭，藉此觀察法庭的運作實務並提出問題。透過現場參觀法庭的實務運作，提供新進人員直接和同行人士交流的機會，可以幫助他們進一步了解自己的角色及功能。

執行準則

1. 主要人員皆須達到基礎教育訓練所要求的一定程度，且該教育訓練是規定於員工訓練規範和明文的運作程序之中的。該運作程序也應規範要求所有人員都必須持續接受教育訓練。
2. 出席參加毒品法庭教育訓練課程和培訓研討會，對於所有法庭工作人員都是至關重要

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3. Continuing education institutionalizes the drug court and moves it beyond its initial identification with the key staff who may have founded the program and nurtured its development.
 4. An education syllabus and curriculum are developed, describing the drug court’s goals, policies, and procedures. Topics might include:
 - ☐ Goals and philosophy of drug courts.
 - ☐ The nature of AOD abuse, its treatment and terminology.
 - ☐ The dynamics of abstinence and techniques for preventing relapse.
 - ☐ Responses to relapse and to noncompliance with other program requirements.
 - ☐ Basic legal requirements of the drug court program and an overview of the local criminal justice system’s policies, procedures, and terminology.
 - ☐ Drug testing standards and procedures.
 - ☐ Sensitivity to racial, cultural, ethnic, gender, and sexual orientation as they affect the operation of the drug court.
 - ☐ Interrelationships of co-occurring conditions such as AOD abuse and mental illness (also known as “dual diagnosis”).
 - ☐ Federal, State, and local confidentiality requirements.
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- 的。地區型的和全國型的毒品法庭教育訓練活動，能提供跨越全國各地創新發展的重要資訊。培訓研討會如由毒品法庭工作人員組團參加，培訓效果最佳。如有可能，應提供繼續教育訓練的學分。
3. 持續的教育訓練有助於毒品法庭的制度化，使之超越其原初創建時之界定，並滋養增進其繼續發展。
 4. 教育訓練大綱和課程應當制定，並涵蓋毒品法庭的目標、政策和程序。主題可能包括：
 - ☐ 毒品法庭的目標和理念。
 - ☐ 酒精與毒品濫用的本質、處遇和術語 (terminology)。
 - ☐ 戒斷 (abstinence) 的動態變化和預防復發 (relapse) 的技巧。
 - ☐ 對個案復發和違反計畫規範要求的回應處分。
 - ☐ 關於毒品法庭的基本法律知識，以及當地刑事司法政策、程序和專有名詞的概論。
 - ☐ 毒品檢驗的標準和程序。
 - ☐ 種族、文化、民族、性別和性取向的敏感性，以及它們對毒品法庭運作的影響。
 - ☐ 酒精與毒品濫用伴隨精神疾患時的相互關係 (即「雙重診斷 (dual diagnosis)」)。
 - ☐ 聯邦、州和當地政府的保密要求。
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Key Component #10

Forging partnerships among drug courts, public agencies, and community-based organizations generates local support and enhances drug court program effectiveness.

Purpose

Because of its unique position in the criminal justice system, a drug court is especially well suited to develop coalitions among private community-based organizations, public criminal justice agencies, and AOD treatment delivery systems. Forming such coalitions expands the continuum of services available to drug court participants and informs the community about drug court concepts.

The drug court is a partnership among organizations—public, private, and community-based—dedicated to a coordinated and cooperative approach to the AOD offender. The drug court fosters systemwide involvement through its commitment to share responsibility and participation of program partners. As a part of, and as a leader in, the formation and operation of community partnerships, drug courts can help restore public faith in the criminal justice system.

Performance Benchmarks

1. Representatives from the court, community organizations, law enforcement, corrections, prosecution, defense counsel, supervisory agencies, treatment and rehabilitation providers, educators, health and social service agencies, and the faith community meet regularly to provide guidance and direction to the drug court program.
2. The drug court plays a pivotal role in forming linkages between community groups and the criminal justice system. The linkages are a conduit of information to the public about the drug court, and conversely, from the community to the court about available community services and local problems.
3. Partnerships between drug courts and law enforcement and/or community policing programs can build effective links between the court and offenders in the community.
4. Participation of public and private agencies, as well as community-based organizations, is formalized through a steering committee. The steering committee aids in the acquisition and distribution of resources. An especially effective way for the steering committee to operate is through the formation of a nonprofit corporation structure that includes all the principle drug court partners, provides policy guidance, and acts as a conduit for fundraising and resource acquisition.
5. Drug court programs and services are sensitive to and demonstrate awareness of the populations they serve and the communities in which they operate. Drug courts provide opportunities for community involvement through forums, informational meetings, and other community outreach efforts.
6. The drug court hires a professional staff that reflects the population served, and the drug court provides ongoing cultural competence training.

第十項關鍵要素

建立毒品法庭、公共機構和社區組織之間的合作夥伴關係，有助於獲得在地支持，也能提升毒品法庭計畫的成效。

目的

基於毒品法庭在刑事司法體系中的特殊地位，其非常適合與私部門社區組織、公部門刑事司法機關，以及酒精與毒品處遇機構之間，發展建立聯盟關係。這種聯盟關係，不僅可以拓展連貫性的服務給毒品法庭的個案，也能讓社區更理解毒品法庭的概念。

毒品法庭是一個由公部門、私部門和社區組織所形成的合作夥伴關係，旨在以協調和合作的方式來處理酒精與毒品使用者犯罪的問題。毒品法庭要增進系統間的協作，應透過其承諾願與各合作夥伴共同分享責任與參與而為之。毒品法庭既是形塑和運作社區合作夥伴關係的其中一員，也是領導者，其可以重建民眾對刑事司法的信賴。

執行準則

1. 各機構之代表會定期開會交流，包含：法院、社區組織、執法機關、矯正機構、檢察機關、辯護人、監督機構、處遇與復元服務提供者、教育工作者、衛生和社會服務機構以及信仰團體等，以提供毒品法庭指導和建議。
2. 毒品法庭在社區團體與刑事司法系統之間的串接上，扮演著關鍵的角色。這個串接不僅讓公眾了解有關毒品法庭的資訊，同時也將社區可使用的服務資源和當地問題回饋給法庭。
3. 毒品法庭和執法機關以及（或）社區治安計畫之間的合作關係，有助於在法庭和罪犯之間建立有效的連結。
4. 公、私部門以及社區組織的參與，是透過指導委員會 (steering committee) 組建起來。指導委員會可以協助這些單位獲得資源及有效分配之。對於指導委員會來說，特別有效的一種運作方式是，組建一個非營利組織的框架，成員包括所有毒品法庭主要的合作夥伴，用以提供政策指導，並且作為募款和取得資源的管道。
5. 毒品法庭的計畫和服務，應當要對其所服務的群體及社區文化有所認識且具有敏感度。毒品法庭可以透過論壇、資訊會議或其他社區外展活動，多提供社區參與的機會。
6. 毒品法庭所聘用的專業人員中，應當包含可以反映該法庭所服務的族群之人士，並持續提供關於文化能力的教育訓練。

Appendix 1: Drug Court Standards Committee

Bill Meyer, Chairman Judge, Denver Drug Court Denver, CO	Carlos J. Martinez Assistant Public Defender Law Offices of Bennett H. Brummer Miami, FL
Ed Brekke Administrator Civil & Criminal Operations Los Angeles Superior Court Los Angeles, CA	Molly Merrigan Assistant Prosecutor Jackson County Drug Court Kansas City, MO
Jay Carver Director, District of Columbia Pretrial Services Agency Washington, DC	Ana Oliveira Director Samaritan Village Briarwood, NY
Caroline Cooper Director OJP Drug Court Clearinghouse and Technical Assistance Project American University Washington, DC	Roger Peters Associate Professor University of South Florida Florida Mental Health Institute Department of Mental Health Law and Policy Tampa, FL
Jane Kennedy Executive Director TASC of King County Seattle, WA	Frank Tapia Probation Officer Oakland, CA
Barry Mahoney President The Justice Management Institute Denver, CO	U.S. Department of Justice Office of Justice Programs Representatives
John Marr CEO Choices Unlimited Las Vegas, NV	Marilyn McCoy Roberts Director, Drug Courts Program Office Office of Justice Programs
	Susan Tashiro Program Manager Office of Justice Programs

National Association of Drug Court Professionals

Judge Jeffrey S. Tauber
President

Marc Pearce
Chief of Staff

Writer and Coordinator

Jody Forman
The Dogwood Institute
Charlottesville, VA

Appendix 2: Resource List

Federal Organizations and Agencies Providing Information and Guidance on Drug Courts:

The White House

Office of National Drug Control Policy (ONDCP)
Executive Office of the President
The White House
1600 Pennsylvania Ave., NW
Washington, DC 20502-0002
Tel: 202/395-6700

U.S. Department of Justice

Bureau of Justice Assistance
Office of Justice Programs
U.S. Department of Justice
810 Seventh Street, NW
Washington, DC 20531
Tel: 202/616-6500
Fax: 202/305-1367

National Criminal Justice Reference Service
Tel: 800/851-3420

Federal Agencies and Organizations Providing Information on AOD Treatment:

U.S. Department of Health and Human Services

Alcoholism and Substance Abuse Branch
Indian Health Service
5600 Fishers Lane, Room 5A-20
Rockville, MD 20857
Tel: 301/443-7623

Center for Substance Abuse Treatment
Substance Abuse and Mental Health Services Administration, Public Health Service
5515 Security Lane
Rockville, MD 20852
Tel: 301/443-5700

National Clearinghouse for Alcohol and Drug Information
11426 Rockville Pike, Suite 200
Rockville, MD 20852
Tel: 800/729-6686

National Institute on Alcohol and Alcoholism
Substance Abuse and Mental Health Services Administration, Public Health Service
Willco Bldg., Suite 400-MSC7003
6000 Executive Blvd.
Bethesda, MD 20892
Tel: 301/443-3851

National Institute on Drug Abuse
Substance Abuse and Mental Health Services Administration, Public Health Service
5600 Fishers Lane, Room 18-49
Rockville, MD 20857
Tel: 301/443-0107

Organizations Providing Information on Drug Courts:

Drug Court Clearinghouse & Technical Assistance Project
American University
Justice Programs Office
4400 Massachusetts Avenue, NW
Brandywine, Suite 660
Washington, DC 20016-8159
Tel: 202/885-2875
Fax: 202/885-2885

Justice Management Institute
1900 Grant St., Suite 815
Denver, CO 80203
Tel: 303/831-7564
Fax: 303/831-4564

National Association of Drug Court Professionals
901 North Pitt St., Suite 300
Alexandria, VA 22314
Tel: 800/542-2322 or 703/706-0576
Fax: 703/706-0565

National TASC
8630 Fenton St., Suite 121
Silver Spring, MD 20910
Tel: 301/608-0595
Fax: 301/608-0599

State Justice Institute
1650 King St., Suite 600
Alexandria, VA 22314
Tel: 703/684-6100
Fax: 703/684-7618

Private Organizations Providing Information on AOD Treatment:

American Society of Addiction Medicine, Inc.
Upper Arcade, Suite 101
4601 North Park Avenue
Chevy Chase, MD 20815
Tel: 301/656-3920

Guidepoints: Acupuncture in Recovery (Information on innovative treatment of addictive and mental disorders)
7402 NE 58th St.
Vancouver, WA 98662
Tel: 360/254-0186

National Acupuncture Detoxification Association
P.O. Box 1927
Vancouver, WA 98668-1927
Tel and Fax: 360/260-8620

National Association of Alcohol & Drug Abuse Counselors
1911 North Fort Meyer Drive, Suite 900
Arlington, VA 22209
Tel: 703/741-7686

National Association of State Alcohol and Drug Abuse Directors (NASADAD)
444 North Capitol St., Suite 642
Washington, DC 20001
Tel: 202/783-6868
Fax: 202/783-2704

National GAINS Center for People with Co-occurring Disorders in the Justice System
Policy Research, Inc.
262 Delaware Ave
Delmar, NY 12054
Tel: 800/331-GAIN
Fax: 518/439-7612

**Private Organizations Providing
Information on Community Anti-Drug
Alliances:**

Community Anti-Drug Coalitions of America
(CADCA)
James Copple, Executive Director
701 North Fairfax
Alexandria, VA 22314
Tel: 703/706-0563

Drug Strategies, Inc.
2445 M Street, NW, Suite 480
Washington, DC 20037
Tel: 202/663-6090

Join Together
441 Stuart Street, 6th Floor
Boston, MA 02116
Tel: 617/437-1500

Partnership for a Drug Free America
State Alliance Program
405 Lexington Ave., 16th Floor
New York, NY 10174
Tel: 212/922-1560

Bureau of Justice Assistance Information

For more indepth information about BJA, its programs, and its funding opportunities, contact:

Bureau of Justice Assistance
810 Seventh Street NW.
Washington, DC 20531
202-616-6500
Fax: 202-305-1367
Web site: www.ojp.usdoj.gov/BJA
E-mail: AskBJA@usdoj.gov

The BJA Clearinghouse, a component of the National Criminal Justice Reference Service, shares BJA program information with state and local agencies and community groups across the country. Information specialists provide reference and referral services, publication distribution, participation and support for conferences, and other networking and outreach activities. The clearinghouse can be contacted at:

Bureau of Justice Assistance Clearinghouse
P.O. Box 6000
Rockville, MD 20849-6000
1-800-851-3420
Fax: 301-519-5212
Web site: www.ncjrs.org
E-mail: askncjrs@ncjrs.org

Clearinghouse staff are available Monday through Friday, 10 a.m. to 6 p.m. eastern time. Ask to be placed on the BJA mailing list.

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