

**ILLINOIS
CERTIFIED DOMESTIC VIOLENCE
PROFESSIONAL CERTIFICATION
EXAMINATION APPLICATION**

PLEASE TYPE OR PRINT IN INK

1. Exam Date Applying For:

___ September 27, 2008
___ February 21, 2009
___ September 5, 2009

2. Exam Location

___ Chicago Area
___ Springfield Area

3. Fee: \$150.00

Certified Check or Money Order ONLY
Payable to Continental Testing Services, Inc.

4. Social Security Number: _____ - _____ - _____

5. Name: _____
Last First Middle

6. Home Address: _____
Street Number and Name or P.O. Box

City State Zipcode

Contact Information: _____
Home Phone with Area Code Cell Phone with Area Code e-mail address

7. Business Information: _____
Employer

Street Number and name or P.O. Box (Please indicate Room Number, if applicable)

City State Zipcode

Work Phone with Area Code (include ext) Fax Number with Area Code

8. I prefer mail to go to: _____ **Home Address** _____ **Work Address**

9. Maiden or former surname(s) (If any) _____

10. Daytime telephone number where you may be reached: _____
Include Area Code

11. Date of Birth: ____ / ____ / ____
Month Day Year

12. Modification: Requesting special accommodations for ADA Candidates or language considerations. (See guide for instructions)

Check if applicable: _____ **ADA** _____ **Language**

(CONTINUE APPLICATION ON BACK)

Mail completed form with fee(s) to:

**Illinois Certified Domestic Violence
Professional Certification Examination
Continental Testing Services, Inc.
P.O. Box 100
La Grange, IL 60525-0100**

ILLINOIS CERTIFIED DOMESTIC VIOLENCE PROFESSIONALS, INC.
SUPERVISOR ASSESSMENT, Part 1

I am submitting an application to become a Certified Domestic Violence Professional. I have identified your agency as the location where I completed 150 hours of supervised domestic violence work. In submitting this form to you, I hereby waive any right I may have to view or inspect this form after it is completed, now or in the future. Note: No application will be accepted unless this form is processed as described below.

Applicant Name

Applicant Signature

Date

Instructions to supervisor: The above listed individual has named you as a current or former supervisor and has requested documentation of the number of hours of work supervised by you. Refer to the Eligible Services List for types of functions that may be included. Document only those hours for which the applicant **performed eligible services**. The applicant has waived the right to view or inspect this form.

Complete the form documenting the total number of service hours the candidate has completed. Place the form within an envelope bearing the name of your agency. **Seal the envelope, tape the flap shut, and sign your name diagonally across the flap and onto the body of the envelope.** Return the form to the applicant.

_____ I certify that the above listed individual has completed at least _____ hours of eligible services and I certify that this individual is qualified to become a Certified Domestic Violence Professional. This certification is based on:

_____ personal supervision by me and/or

_____ evaluations from former supervisors working for this program.

_____ I am unable to certify that this person has completed at least 150 hours of direct service and do not believe that this individual is qualified to become a CDVP.

The work performance in question occurred over the course of the following dates:

_____ to _____

Printed Name of Supervisor

Title

Signature of Supervisor

Date

CDVP #

Expiration Date

Name of Agency

Street Address

City, State, Zip Code

Phone Number

Director's Name Printed

Director's Signature

**Illinois Certified Partner Domestic Violence Professionals, Inc
Supervisor Assessment Part 2**

The services listed below clarify the kinds of activities that qualify for the 150 hours of service requirement. Please list the hours in the following work areas:

Activities	# of Hours
Counseling: A one-to-one interaction between a domestic violence worker and an adult or child for the purpose of benefiting the client. Examples of counseling include support, guidance, education, problem solving, and discussion options. Counseling should be provided with the service plan in mind.	
Advocacy: Any intervention by a domestic violence worker with a third party on behalf of an adult or child. A release of information must be completed and signed by the client or her/his representative and placed in the client's file. Intervention with a third party should have the purpose of benefiting the client with the service plan in mind.	
IDVA ACT Advocacy: Illinois Domestic Violence Act Advocacy includes any assistance in pursuing criminal charges and/or orders of protection through problem solving, accompaniment, emotional support and encouragement. Court or IDVA advocacy also includes ongoing systems advocacy to improve policies and procedures which enhance the safety and court relief for victims.	
Telephone Crisis Information & Referral: Assisting victims of domestic violence to identify and gather information about community resources for her/himself and their children. Only direct client contact can be counted in this category.	
Group Services: Any service provided by a domestic violence worker to more than one child and/or adult client at a time, with the purpose of giving support or education, providing necessary information, offering guidance, or facilitating social interaction, etc. for the purpose of benefiting the client and with the service plan in mind.	
Prevention: Activities by a domestic violence worker that promote awareness of the dynamics of domestic violence and provide information to reduce the likelihood of domestic violence.	
Training: Provision of domestic violence information by a domestic violence worker to other professionals who are in contact with victims or abusers in order to assist them in developing more appropriate responses to domestic violence.	
Outreach & Community Education: Direct contact by a domestic violence worker with people in a community setting for the purpose of providing education about identification and effects of domestic violence and services available to victims of domestic violence.	
Systems Advocacy: Actions by a domestic violence worker to change established systems to ensure a more effective and appropriate response to domestic violence victims and abusers.	
TOTAL HOURS	

SPECIAL EXAMINATION ARRANGEMENTS LANGUAGE PROFIECIENCY

For
(Illinois Domestic Violence Certification and
Certified Partner Abuse Intervention Professional Exams)

The Illinois Certified Domestic Violence Professionals, Inc. values diversity in the domestic violence field. Some test candidates for whom English is not their first language may experience difficulty taking a test in English and may benefit from special examination arrangements. Such candidates may, upon approved request:

- Have an additional 30 minutes to take the exam;
- Bring with them to the exam a dictionary that translates English into another language. This dictionary must translate word-for-word (no definitions). An electronic dictionary is **NOT** permitted.

To request special examination arrangements related to language proficiency, the applicant must complete the form below and have it signed by their supervisor. This form must be submitted with the candidate's exam application, or **faxed to Continental Testing Services, Inc. at least 8 days before the actual exam date.** Fax number is: 708-354-9922.

REQUEST FOR SPECIAL EXAMINATION ARRANGEMENTS LANGUAGE PROFICIENCY

I am requesting special examination arrangements related to proficiency with the English language. I am a person for whom English is not my first language and have sufficient difficulty with written English that I would benefit from having additional time to take the exam and/or the use of a dictionary that translates English into my first language. This request must also be signed by my supervisor.

Signature

Printed Name

Supervisor's Signature

Supervisor's Printed Name

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FREQUENTLY ASKED QUESTIONS

Q. What is the criteria for Certification as an Illinois Certified Domestic Violence Professional?

A. The ICDVP, Inc. board has contracted with Continental Testing Services, Inc. (CTS) to conduct its Certified Domestic Violence Professional Program. Tests are given twice annually in the Chicago Metropolitan Area and in Springfield. The tests are usually offered every February and September, with deadlines for application submission 4-6 weeks prior to the actual test. For an information packet and an application, go to www.continentaltesting.net or contact CTS at 708-354-9911.

Certification will be applicable for two years, at which time the applicant must renew the certification. In order to renew the certification, the Certified Domestic Violence Professional (CDVP) must complete 30 Continuing Education Units (CEU's) within the two year period.

REQUIREMENTS FOR ELIGIBILITY

The following are requirements to become a Certified Domestic Violence Professional:

1. Complete 40 hour training at an ICDVP, Inc. approved training site.
 - The ICDVP, Inc. Board publishes a list of approved sources for the 40 hour training on their website www.ilcdvp.org.
 - Candidates must submit documentation that they have completed the 40 hour training at one of the ICDVP, Inc. approved training sites.
2. Complete 150 hours of direct service or supervision of direct service at an ICDVP, Inc. approved supervision site—**within 2 years of application to be a Certified Domestic Violence Professional.**
 - The ICDVP, Inc. Board publishes a list of identified supervision sites. (See www.ilcdvp.org).
 - Candidates for Certification will be required to submit documentation of their service hours.
3. Pass the knowledge based certification test. The test will be offered twice annually, both in Springfield and in the Chicago Metropolitan area.

Q. How do I know CTS received my application?

A. Postcards are sent to candidates when the application is received. Candidates may send applications by registered mail, return receipt requested. Application status is available at www.continentaltesting.net.

Q. What exam date am I registered for?

A. A postcard will be sent to you after your application is received. Every effort will be made to schedule you for the exam date you requested, however you may be scheduled for a date later than the date you requested on your application:

- a. If the application was received late (applications should be received approximately 4 weeks prior to the examination date);
- b. If the examination site has reached full capacity;
- c. If your documentation is incomplete;
- d. If your fee has not been received.

Status of your application is available at www.continentaltesting.net. Firm confirmation of your examination date will be sent in the form of an admission letter, which will be mailed out approximately two (2) weeks prior to your exam date.

Q. What do I do if I change my name or address?

A. All changes of name and address must be made in writing to CTS. Use the form on the last page of the candidate guide. Name changes must be accompanied by legal documents, (i.e.; marriage certificate, divorce decree, etc.).

Q. How do I get to the test site?

A. Maps of the immediate vicinity of the test site are sent with admission materials. It is the candidate's responsibility to make travel arrangements and obtain routing information. Further information can be obtained from the Chamber of Commerce, travel service, or on the Internet (<http://www.mapquest.com>).

Q. When will I receive the results of the exam?

A. Results will be available at www.continentaltesting.net within 7-10 days following the exam. Official results will be mailed to applicants within 2-3 weeks after the examination. Grade letters for failing candidates will include information on reapplying. **EXAMINATION RESULTS WILL NOT BE RELEASED OVER THE TELEPHONE BY CTS OR ICDVP, INC.**

Q. I have read the entire candidate guide and still have a question. How do I resolve it?

A. If you have a question regarding completion of the application form, please call 800-359-1313, ext. 124, between the hours of 8:00 a.m. to 4:30 p.m. (Central Standard Time). If you reach voicemail, please state clearly that you have a question on the ICDVP exam application, your name, social security number, a current phone number where you can be reached, and your question. Please do not call again on the same day your message was left. Your question will be answered as promptly as possible. You may also contact CTS by e-mail, please direct your e-mails to nbyers@continentaltesting.net.

INTRODUCTION

Continental Testing Services, Inc. is a privately owned company administering examinations for state licensing agencies. CTS has administered examinations to hundreds of thousands of individuals in more than 50 professions throughout the United States.

The ICDVP, Inc. has contracted with CTS to conduct its Certified Domestic Violence Professional Certification examination. The purpose of this examination is to determine whether a candidate has the essential knowledge and ability to perform tasks in a competent manner without risk to public health and safety.

The Illinois Certified Domestic Violence Professionals, Inc. exists in order to foster uniformity in domestic violence services throughout the State of Illinois and create recognized professions of Certified Domestic Violence Professionals (CDVP) and Certified Partner Abuser Intervention Professionals (CPAIP) by setting standards for certifying domestic violence professionals and regulating the process of certification.

The Illinois Certified Domestic Violence Professionals, Inc. Board of Directors wishes to acknowledge the generous financial contributions and support given by the Illinois Department of Human Services and the Illinois Coalition Against Domestic Violence to support the establishment of certification for domestic violence workers.

This booklet contains a candidate's guide and application for the ICDVP Certification examination. Read it completely before filling out the application. Keep this booklet for reference until you receive your examination results.

AMERICANS WITH DISABILITIES ACT/LANGUAGE ASSISTANCE

Continental Testing Services, Inc. and the ICDVP, Inc. comply with the Americans with Disabilities Act of 1990. They will make reasonable modifications to policies, practices, and procedures, when modifications are necessary, to avoid discrimination on the basis of disability, and will make reasonable accommodations necessary to provide a qualified individual with equal access to the ICDVP examination.

Examinations: Individuals wishing special examination arrangements must explain the desired arrangement on a separate sheet and submit it by the application deadline with the examination application. Included should be a written diagnosis and recommendation from an appropriate health care professional supporting the accommodation requested. Modifications can also be made to accommodate religious requirements.

Individuals for whom English is their second language may request an extended time of 30 minutes to complete the examination. To request additional time, candidates must complete the enclosed "Special Examination Arrangements Language Proficiency" form and submit with the exam application.

EXAMINATION INFORMATION

The ICDVP/CPAIP Certification examination is two (2) hours in length and has 75 questions.

APPLICATION FILING DEADLINE

An application for examination must be received by CTS at least 4 weeks before the examination date. This is to allow ample time to process the application and for the candidate to receive the supplemental study material.

FEES

The fee for the examination must accompany the application. ***ONLY CASHIER'S CHECKS or MONEY ORDERS*** payable to Continental Testing Services, Inc. will be accepted. **DO NOT SEND CASH.**

The fee for this examination can be found on the application form. Fees for examination are subject to change and cannot be guaranteed. **Fees are not transferable from one candidate to another.**

ADMISSION LETTERS

An admission letter will be sent to all applicants approximately two (2) weeks before an examination. The admission letter will include the time, date, and location of the exam, in addition to the instructions regarding what to bring to the exam. The admission letter and photo identification are required for admission to the examination.

STUDY GUIDE

An examination study guide is included with the application package. It is also available at www.continentaltesting.net. Supplemental study materials are available at www.ilcdvp.org, with the exception of the SAGE published article, which will be mailed to candidates after application approval. Note: If the application is received less than four (4) weeks prior to the examination, delivery of this article cannot be guaranteed.

EXAMINATION RESULTS

Results will be available at www.continentaltesting.net within 7-10 days following the exam. Official results will be mailed to applicants within 2-3 weeks after the examination. Grade letters for failing candidates will include information on reapplying. **EXAMINATION RESULTS WILL NOT BE RELEASED OVER THE TELEPHONE BY CTS OR ICDVP, INC.** If your address changes prior to receiving your examination results, please use the change of address form found in this booklet.

ABSENCES

Candidates who are absent from an examination forfeit their examination fee.

REFUNDS

If a candidate is determined to be not eligible to take the certification examination, a refund will be considered. Refunds will also be considered if an applicant withdraws their application 30 days prior to the test. In either case, an administrative charge will be deducted. If a refund is determined to be appropriate, the refund will only be made to the candidate, regardless of the original payee

PROCEDURES ON APPLICATION DENIAL

An applicant may appeal the notice of denial of eligibility for the credential, by submitting a request for reconsideration to the credentialing authority within 45 days of the mailing of the notice of denial. The request must be in writing and must include the applicant's name and address and a specific description of the mistake, which constitutes a reasonable ground for reversing the decision to deny the application for credential. The applicant must include all essential facts that support the appeal. The Illinois Certified Domestic Violence Professionals, Inc. Board will render a decision within 30 days of receipt of the written appeal.

APPLICATION ACKNOWLEDGEMENT

Upon receipt of your application, a post card will be mailed to you in acknowledgement. Please do not call our office to see if your application has been received.

If you are not approved to take the exam because you are missing the required documentation, or do not meet eligibility criteria, you will be notified.

Admission notices will be sent to approved candidates approximately two (2) weeks prior to the examination.

INSTRUCTIONS FOR COMPLETING APPLICATION

Following are specific instructions for completing the ICDVP Certification application, which must be completed by all applicants. The numbers below correspond to the application form. Remove the forms from the guide to make them easier to fill out.

PLEASE TYPE OR PRINT ALL INFORMATION IN INK.

1. **EXAM DATE:** Place an X next to the date of exam for which you wish to apply.
2. **EXAM LOCATION:** Place an X next to the exam location you are requesting.
3. **FEE:** Enclose a CASHIER'S CHECK or MONEY ORDER payable in U.S. Currency to Continental Testing Services, Inc.
4. **SOCIAL SECURITY NUMBER:** Enter in the boxes provided.
5. **NAME:** Print your last name, first name, and middle initial.
6. **HOME ADDRESS & CONTACT INFORMATION:** Include any apartment or suite number, as well as **HOME PHONE, CELL PHONE, E-MAIL ADDRESS.**
7. **BUSINESS INFORMATION:** Include any apartment or suite number.
8. **PREFERRED CONTACT:** Please indicate preferred mailing and phone contact.
9. **MAIDEN OR FORMER SURNAME:** (If any). Print indicted information.
10. **DAYTIME PHONE:** Enter a number where you most likely can be reached during the day.
11. **DATE OF BIRTH:** Enter the month, day, and year of your birth.
12. **MODIFICATION:** If this box is checked, further information about requested special accommodations or language assistance is required. See "Americans with Disabilities Act/Language Assistance" on Page 3 of this Candidate Guide for more information.
13. **TRAINING:** Please check box indicating that proof of training is enclosed, sign, and indicate location and dates of training. Include a copy of your training certificate from an ICDVP Approved Training site. (Refer to website www.ilcdvp.org for a list of ICDVP Approved training sites.)
14. **EXPERIENCE:** Please check box indicating that the Supervisor Assessment form is enclosed, sign and indicate location and dates of service. The person who provided supervision, the supervising agency, or someone who can verify your work record must sign the Supervisor Assessment form. Also on Page 6 of this guide, please find an "Eligible Services" List, which clarifies the activities that qualify for the 150 hours of service requirement. (Refer to website www.ilcdvp.org for a list of ICDVP Approved supervision sites.)
15. **CODE OF ETHICS:** Sign and date to acknowledge that you have read the ICDVP, Inc. Code of Ethics for Illinois Certified Domestic Violence Professionals found on Page 8 of this Candidate Guide.
16. **STATEMENT OF ARREST OR CONVICTION:** Answer yes or no to each question. Attach statements if any questions are answered yes.
17. **CANDIDATE CERTIFICATION:** Read this section, sign and date the application. **NO APPLICATION WILL BE ACCEPTED WITHOUT A SIGNATURE.**

ICDVP ASSESSMENT FORMS

ICDVP FORM – SUPERVISOR ASSESSMENT PART 1: This form is required to validate 150 hours of supervised domestic violence work.

ICDVP FORM – SUPERVISOR ASSESSMENT PART 2: This form is required to clarify the kinds of activities that qualify for the 150 hours of service requirement.

ELIGIBLE SERVICES LIST

The services listed below clarify the kinds of activities that qualify for the 150 hours of service requirement. ICDVP candidates should have experience in at least one of the first five areas listed.

1. **Counseling** – A one to one interaction between a domestic violence worker and an adult or child for the purpose of benefiting the client. Examples of counseling include support, guidance, education, and problem solving and discussion options. Counseling should be provided with the service plan in mind.
2. **Advocacy** – Any intervention by a domestic violence worker with a third party on behalf of an adult or child. A release of information must be completed and signed by the client and her/his representative and placed in the client's file. Intervention with a third party should have the purpose of benefiting the client with the service plan in mind.
3. **IDVA ACT Advocacy** – Illinois Domestic Violence Act advocacy includes any assistance in pursuing criminal charges and/or orders of protection through problem solving, accompaniment, emotional support and encouragement. Court or IDVA advocacy also includes ongoing systems advocacy to improve policies and procedures, which enhance the safety and court relief for victims.
4. **Telephone Crisis Information and Referral** – Assisting victims of domestic violence to identify and gather information about community resources for her/himself and their children. Only direct client contact can be counted in this category.
5. **Group Services** – Any service provided by a domestic violence worker to more than one child and/or an adult client at a time, with the purpose of giving support or education, providing necessary information, offering guidance, or facilitating social interaction, etc. for the purpose of benefiting the client and with the service plan in mind.
6. **Prevention** – Activities by a domestic violence worker that promote awareness of the dynamics of domestic violence and provide information to reduce the likelihood of domestic violence.
7. **Training** – Provision of domestic violence information by a domestic violence worker to other professionals who are in contact with victims or abusers in order to assist them in developing more appropriate responses to domestic violence.
8. **Outreach and Community Education** – Direct contact by a domestic violence worker with people in a community setting for the purpose of providing education about identification and effects of domestic violence and services available to victims of domestic violence.
9. **Systems Advocacy** – Actions by a domestic violence worker to change established systems to ensure a more effective and appropriate response to domestic violence victims and abusers.

MISSION OF ILLINOIS CERTIFIED DOMESTIC VIOLENCE PROFESSIONALS, INC.

The Illinois Certified Domestic Violence Professionals, Inc. (ICDVP) was established to foster uniformity in domestic violence and partner abuse intervention services throughout the State of Illinois, and create recognized professions of Certified Domestic Violence Professionals (CDVP) and Certified Partner Abuse Intervention Professionals (CPAIP) by setting standards to certify domestic violence and partner abuse intervention professionals and regulating the process of certification.

PREAMBLE

To the Code of Ethics of the Illinois Certified Domestic Violence Professionals.

The movement to provide safety and support for domestic violence victims was generated by a vanguard of feminist activists in the early 1970's, who believed that no one deserved to be abused physically or emotionally, even within an intimate relationship. Their goals were to create social change by heightening public awareness of domestic violence issues, eradicating institutional sexism and providing services for domestic violence victims. Several diverse groups within the domestic violence movement came together to focus these efforts on a statewide basis and to advocate for passage of the Illinois Domestic Violence Act of 1982, making domestic violence a crime and providing relief for domestic violence victims.

The domestic violence movement has evolved in many ways, but at its core are values that endure and are expected to be held in high regard and practiced by Illinois Certified Domestic Violence Professionals (ICDVP's).

1. That violence is an unacceptable way to problem solve or to placate individual differences.
2. That each individual is responsible for his or her own behavior.
3. That the worth and dignity of every individual is to be respected.
4. That every effort should be made to remove the oppression of marginalized groups and to end all abuses of power.

The provision of domestic violence services centers on the philosophy that those served should be encouraged to become safe, self-reliant, and autonomous, and to integrate the above values into their personal lives.

The Illinois Certified Domestic Violence professionals exists in order to foster a uniform standard of professional service.

The following Code of Ethics is intended to govern ICDVP's in their various roles and relationships and at the various levels of responsibility in which they function. These principles also serve as a basis for adjudication by the Illinois Certified Domestic Violence professionals when allegations of misconduct are reported.

The Code sets forth general principles of conduct and the judicious appraisal of conduct in matters which have ethical implications. This Code is not implied to be all exclusive or exhaustive. ICDVP's are expected to adhere to the letter of this Code as well as be consistent with the spirit of responsibilities described therein.

An ICDVP is required to abide by any disciplinary rulings based on the Code, which will be determined by an unbiased jury of professional peers. An ICDVP shall also take adequate measures to discourage, prevent and correct the ethical conduct of colleagues.

ICDVP, INC. CODE OF ETHICS

Illinois Certified Domestic Violence Professionals:

1. Have a primary commitment to provide the highest quality professional support for those who seek services.
2. Protect the safety of the domestic violence victim at all times.
3. Dedicate themselves to the best interest of clients and empower clients to help themselves.
4. Maintain confidentiality of the working relationship and information resulting from it consistent with all legal obligations.
5. Do not exploit relationships with clients for personal advantage.
6. Do not solicit clients of one's agency for private practice.
7. Do not have sexual or romantic relationships with their clients.
8. Avoid any action that will violate or diminish the legal and civil rights of clients.
9. Do not condone or engage in sexual or other harassment as defined by the law.
10. Do not discriminate against clients or professionals on the basis of age, gender, spiritual beliefs, race, ethnicity, sexual orientation, marital status, national origin or disability.
11. Develop knowledge, personal awareness, and sensitivity pertinent to the client populations served and incorporate culturally relevant techniques into their practice.
12. Are willing to release or refer a client to another program or individual when it is in the best interest of the client.
13. Do not perpetrate or condone domestic violence as defined in the Illinois Domestic Violence Act and its amendments.
14. Respect the rights and views of other professionals, agencies and organizations serving domestic violence victims.
15. Take personal responsibility for professional growth.
16. Do not knowingly misrepresent their credentials or those of their employer.
17. Abide by all State of Illinois requirements for professional licensing standards.

ICDVP DEFINITIONS

Domestic Violence: The following definition of Domestic Violence shall guide the process of any professional seeking Certification in Illinois.

Illinois Certified Domestic Violence Professionals (ICDVP) believes the root of violence against women in their interpersonal relationships is any imbalance of power and control. ICDVP attributes much of this imbalance to institutionalized sexism. ICDVP also understands the relationships between oppressive systems that support and condone the further victimizations of marginalized groups of people.

ICDVP understands the principles of community organization and the empowerment of women as integral components in practice. This belief is the difference between other social service providers and ICDVP. Together as a community of professionals, ICDVP believes that concepts of gender oppression must be integrated into service planning or other programs designed to assist the victims of domestic violence. ICDVP believes this is at the heart of supportive, effective and lasting change in women and ultimately of communities in which we live.

ICDVP DEFINITIONS (cont.)

Certified Domestic Violence Professional (IL) (CDVP): A person who has completed the requirements as specified in the Eligibility Criteria of the Illinois Certified Domestic Violence professionals.

Client: Any person who has been, or is currently, a victim of domestic violence as defined in this document or in the IDVA.

Confidentiality: A domestic violence counselor shall not knowingly disclose, except by order of a court, any confidential communication in violation of this Act* except; (1) when required to disclose in accordance with the provision of the Abused and Neglected Child Reporting Act or (2) in cases where failure to disclose is likely to result in a clear, imminent risk of serious physical injury or death of a victim or another person.

Court Advocacy: Providing information regarding a domestic violence victim's rights and sharing information regarding the judicial process. Intervening, when needed, on behalf of victims in criminal or civil process.

CPAIP-Certified Partner Abuse Intervention Professional: A person who has completed the requirements as specified in the Eligibility Criteria of the Illinois Certified Partner Abuse Intervention Professionals. CPAIP's believe the root of violence against women in their interpersonal relationships is the perpetrator's choice to use abusive power and control tactics against their intimate partners. The perpetrator's choices are based in attitudes and beliefs that perpetrate and promote sexism.

Domestic Violence Advocacy: Action for or on behalf of a victim of domestic violence.

Domestic Violence Counseling: The process of providing information, advice, education, and nonjudgmental support to domestic violence victims.

Illinois Certified Domestic Violence Professionals: The statewide governing body of the certification process for CDVP.

Illinois Domestic Violence Act (IDVA): The law in Illinois that prescribes the criminality of domestic violence and details the rights of victims and the responsibilities of law enforcement agencies. The IDVA also provides immunity for domestic violence counselors when they are attached to a domestic violence program.

* Illinois Domestic Violence Act 1986, Article II, Section 227 (c).