

I first met Steve de Shazer in the winter of 1984. I went to the Brief Family Therapy Center in Milwaukee at the request of Wally Gingrich, a mutual friend and colleague. A group of us spent the afternoon watching videotapes of therapy sessions and talking about what we saw in them. Little did I know, at that time, that I would be involved (off and on) with Steve and many of the other therapists in the group for the next two decades. My involvement is that of a sociologist, not a therapist. I've spent most of my time over the years observing therapists interacting with each other and with their clients, taking notes on what I see, recording as many interactions as I can, and then writing about my observations.

My relationship with Steve was also probably a little bit different than for other people. My interest in therapy was practical, but in a different way than the practical concerns of therapists. I am interested in how therapists and other professionals use language to do their work. I rely upon a literature that is different than the literature in therapy. In some ways, this literature is more analytic and philosophical but, in other ways, it is even more focused on the details of social interaction than the literature read by most therapists. Steve's educational background, which involved philosophical studies and familiarity with sociological theory and particularly the small-group research done in the Sociology Department at Stanford University, made it possible for us to talk about the sociological and philosophical implications of therapy in a language that we both understood. So it shouldn't be surprising that much of our early relationship consisted of these sorts of conversations.

I won't bore you with the details of those conversations; rather, I mention them because they help to define the context of what I remember seeing at BFTC in the mid 1980's when I spent a year observing the activities of the clinic's staff, clients and students. Steve was a member of a unique therapy community, one that took seriously its obligation to regularly reflect on members' shared assumptions and practices. Some of the most important members of that community are contributing to this remembrance of Steve and his influence, but there were many other (new and experienced) therapists involved with the clinic. They were an intelligent and energetic group that was willing to question received wisdom.

A number of people have described Steve as an iconoclast, and he was. It is also important to notice, however, that his early work at the BFTC was done within an iconoclastic community. Steve was a leader within this group and he was also led by other members who were interested in observing and understanding how effective therapy works. As John Briggs recently noted in conversation, Steve de Shazer met the full definition of a charismatic leader. He possessed qualities that attracted others to follow him, while also recognizing that part of leadership is following in the foot steps of others. It should not be surprising that, in the ensuing years, several of members of this group have emerged as leaders in the therapy world in their own right. Whether it was designed or evolved spontaneously, the environment at BFTC nurtured creative ideas and practices.

My relationship with Steve changed over the years, especially in the 1990s and after. This was the time when Solution-focused Brief Therapy became internationally prominent. One consequence of this success was that Steve spent increasing amounts of time away from Milwaukee. While he continued to do therapy, it was less central to his professional life. Steve sometimes privately lamented this change, saying that he missed being a "simple" therapist in Milwaukee. On the other hand, my occasional travels with him showed that he had developed a new community of therapists committed to building on the solution-focused ideas initially developed at BFTC in Milwaukee.

This community is also filled with bright and energetic people, although they are widely dispersed around the world. I'm also impressed at how diverse the membership of this community is. They bring a variety of personal and cultural experiences to their understanding and use of solution-focused brief therapy. They include practitioners in Eastern Europe who use solution-focused ideas in doing therapy as well as in addressing social problems, business

consultants who use similar ideas in addressing the human side of organizational life, and teachers who are using solution-focused ideas to reorganize educational practices.

On the surface, Steve's role in this community was different. He was a teacher, consultant, role model and source of inspiration. Looked at another way, however, Steve's participation in this community was similar to his earlier participation at BFTC. He was a leader and he was led by others who introduced him to new and distinctive contexts for applying solution-focused principles to human problems, including how they might be used to improve public health and to address the housing needs of refugees. Steve was proud of the creative successes of his colleagues in the global solution-focused community.

Steve leaves behind a community committed to the application and expansion of solution-focused ideas and practices. Community members will carry on and probably change the foundations built by the early members of BFTC, just as Steve carried on and changed the ideas taught to him by his mentors. But, I fear that the passing of Steve will mean that this practitioner community is left without a member who can speak as easily and effectively as Steve did to academic communities interested in the philosophical, theoretical and linguistic implications of solution-focused practices. It is, no doubt, my academic bias speaking when I say that solution-focused therapy was enhanced by Steve's ability to link abstract concepts with concrete therapy practices.

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