It is a great honour to take over the National Chairmanship of the *South African Academy of Family Practice/Primary Care*. It is a mammoth task and Professor Marietjie de Villiers is a hard act to follow. Marietjie has lead the Academy from the front and leaving it today much stronger than it was when she took up the leadership six years ago. A healthier financial status for the organization, a peer reviewed, quality *SA Family Practice* and a successful hosting of WONCA in Durban are all a credit to her leadership. To her, I pay my tribute for enabling me to assume my leadership of a much healthier organization.

Challenges are many, but so are opportunities. The Academy’s core business has always been the provision of CPD for the discipline of general practice/family medicine. The advent of compulsory CPD accreditation for medical practitioners has ushered in a plethora of CPD providers all competing for sponsorship for CPD activities from the pharmaceutical industry. This has resulted in more and more difficulties to have the Academy’s activities sponsored. There is a need for the Academy to review its role as a CPD provider and also its reliance on the pharmaceutical industry to fulfill this mandate. We need to look at our members’ wants and needs and re-look our current CPD programmes, accepting that the needs may vary from one region of our country to the next.

The recent decision by the *South African Medical and Dental Board* to recognize Family Medicine as a specialty discipline presents the Academy with new opportunities in partnership with FaMEC, the *College of Family Practitioners* and RHI. I still feel the Academy’s role should remain CPD provision and skills development for GPs/ and family physicians. The Academy should lead the campaign to promote our discipline and to ensure acceptance of the health industry of the role of the family doctor as the conductor of the orchestra of healthcare provision. This should be our vision for healthcare in South Africa as well as playing our role in doing the same for the rest of the African continent in keeping with NEPAD’s vision.

Managed healthcare, loathed by many in both public and private camps, is upon us. The government’s new National Health Insurance and Managed Healthcare bills are addressing the regulation of managed healthcare and not its demise. One of its cornerstones is the requirement of both funders and providers to be accredited in order to be involved in managed care contracts. Accreditation of Medical Scheme Administrators is already underway and accreditation of providers cannot be far behind. The Academy needs to be involved in setting the standards for accreditation of general/family practice facilities. Huddling in a corner, jumping up and down screaming will not make managed healthcare go away.

Finally, disunity among general practitioner groups threatens our discipline more than anything, in my view. We need to see beyond our group’s self-interests and identify our common goals. All groups have a role to play in the fulfillment of those goals and instead of competing with each other, we need to acknowledge each other’s role and work together for the general good of the profession. The Academy should work together with managed care organizations, the *Society for General/Family Practitioners* and our obvious partners, FaMEC, RuDASA and the *College of Family Practitioners*.

I look forward to working together with the new National Council of the Academy and I am sure that together, we will successfully address the various challenges facing us in the coming three years.