Tuberculosis case finding in South Africa
Claassens, M.M.

Citation for published version (APA):

General rights
It is not permitted to download or to forward/distribute the text or part of it without the consent of the author(s) and/or copyright holder(s), other than for strictly personal, individual use, unless the work is under an open content license (like Creative Commons).

Disclaimer/Complaints regulations
If you believe that digital publication of certain material infringes any of your rights or (privacy) interests, please let the Library know, stating your reasons. In case of a legitimate complaint, the Library will make the material inaccessible and/or remove it from the website. Please Ask the Library: http://uba.uva.nl/en/contact, or a letter to: Library of the University of Amsterdam, Secretariat, Singel 425, 1012 WP Amsterdam, The Netherlands. You will be contacted as soon as possible.
ACKNOWLEDGMENTS
Acknowledgments

I would like to thank the following colleagues for their contribution, support and enthusiasm:

- My promotors, Nulda Beyers from the Desmond Tutu TB Centre (DTTC) at Stellenbosch University and Martien Borgdorff from the University of Amsterdam.
- Other senior colleagues at the DTTC, namely Robert Gie, Anneke Hesseling, Donald and Penny Enarson.
- The biostatisticians, Carl Lombard, Cari van Schalkwyk and Sian Floyd, for assisting with the analyses.
- The research teams who worked in the field: Elizabeth du Toit, Gcobokazi Mdlulwa, Sipho Matyesini, Louis van Zyl, Malusi Blou, Blia Yang, Candice-Lee Arendse. Thank you for your hard work and dedication.
- Other staff at the DTTC: Sterna Brand, Chrissie Louw, Joyal Arendse, Lisl Martin, Joretha Arendse and others working behind the scenes.
- Rory Dunbar who assisted with the data management.

I would also like to acknowledge the support of my husband, family and friends without whom I would not have been able to complete the thesis. Thank you Alex van der Horst, Hélène de Kok, Boetie Claassens, Eleonore and Johannes van der Horst. In addition, I would like to thank James and Thea Joubert and Ian and Mariana van Zyl for their support during my school years in Stellenbosch and my subsequent academic career.

Thank you to the City of Cape Town Health Department, the Provincial Departments of Health (Eastern Cape, Western Cape, Limpopo, Kwazulu-Natal, Mpumalanga and North West) and the National TB Programme for giving me permission to do the studies and for collaborating with the DTTC.

Thank you to the funders (USAID, Bill and Melinda Gates Foundation) for giving me the opportunity to implement the studies, to Fogarty International ICORHTA for supporting my training at Johns Hopkins Bloomberg Summer School and to the Wellcome Trust (SACORE) which enabled me to complete my MSc at the London School of Hygiene and Tropical Medicine. Thank you to the Erasmus Mundus Foundation for supporting my PhD studies at the University of Amsterdam and to Stellenbosch University’s support (staff bursary, clinical research fellowship, HB Thom bursary, HD Brede award) which contributed to my success in completing the thesis.

The articles originally published in the International Journal of Tuberculosis and Lung Disease are reprinted with the permission of the International Union Against Tuberculosis and Lung Disease. Copyright © The Union.
Acknowledgments

The articles originally published in PLoS One has copyright © 2013 Claassens et al. These are open-access articles distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.