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Report on weekly deaths in South Africa: Weeks 13 and 14

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REPORT ON WEEKLY DEATHS IN SOUTH AFRICA

28 MARCH – 3 APRIL 2021

&

4 -10 APRIL 2021

(WEEKS 13 & 14)

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South African Medical Research Council
14 April 2021



UCT Centre
for Actuarial
Research

Glossary:

Age-standardised excess death rate: Indirectly age-standardised excess death rates have been calculated for each province to adjust the crude death rates per capita for the differences in distribution of the population by age. The adjustment factor for each province is calculated as the crude death rate for South Africa divided by what the crude rate for South Africa would have been had the age distribution of the population been that of the province. Standardisation for age is necessary when comparing populations that differ in their age structure because age has a powerful influence on the risk of dying. The rate is based on the cumulative number of excess deaths since 3 May 2020 to date divided by the population estimate for 2021 and has not been annualised.

Actual number of deaths: The actual number of deaths in South Africa have been estimated from the numbers recorded on the National Population Register using weighting factors set to produce results consistent with those of the annual Rapid Mortality Surveillance Report to account for deaths of persons who are not on the National Population Register as well as those that have not been registered with the Department of Home Affairs. **The adjustments to account for incompleteness of recording of deaths on the NPR have been re-estimated for the 2021 reports taking into account the 2017 cause-of-death data released by Stats SA in 2020.** A methodological note briefly outlining the changes can be downloaded with this report from the SAMRC website: <https://www.samrc.ac.za/reports/report-weekly-deaths-south-africa>.

Epi-week: The Weekly Death Reports in 2020 used weeks from 1 January and ran from Wednesday to Tuesday. In setting up the monitoring for 2021, we recast the data to report by an 'Epi-week' consistent with CDC and many NICD reports which run from Sunday to Saturday, ensuring continuity of weeks from one year to the next. Each week is aligned with the 'Epi-year' that has 4 or more days in that week. Week 53 of 2020 is from 27 December 2020 to 2 January 2021 and Week 1 of 2021 is 3 January – 9 January 2021.

Excess deaths: There is no universal definition of, or understanding of what is meant by, "excess mortality". It is a term used in epidemiology and public health that refers to the number of deaths that are occurring above what we would normally expect. The WHO uses the term to describe "Mortality above what would be expected based on the non-crisis mortality rate in the population of interest. Excess mortality is thus mortality that is attributable to the crisis conditions. It can be expressed as a rate (the difference between observed and non-crisis mortality rates), or as a total number of excess deaths."

Excess natural deaths associated with COVID-19: Generally, the number of excess deaths per week is calculated as the number of all-cause deaths in that week less the number that might be assumed to have occurred had there not been the epidemic (i.e. the counterfactual number), provided that the counterfactual is lower. However, this approach has generally only been applied to countries where deaths have been tracking the counterfactual before the onset of significant numbers of COVID-19 related deaths. The method provides a poor estimate of the numbers of COVID-19 and collateral deaths in the early stages of the epidemic when this is not the case. Thus, we estimated the numbers of COVID and collateral deaths, once a clear upward trend is evident, as the number of actual deaths less a baseline number determined as a proportion of the predicted number. By the end of the 1st wave of the pandemic, the predicted values have been used as the counterfactual.

Warning: The Department of Home Affairs has faced sporadic temporary office closures, particularly in areas that are more affected by COVID-19. This may affect our allocation of a death to a metro area. For example, a death that occurred in the City of Cape Town might have been registered at an office outside of the City because of a temporary closure. Closure may also cause a delay in the processing of the death registration which would result in an underestimate of the deaths in the most recent week. This accounts for the kinks in what should otherwise be a smooth increase in numbers of deaths in Cape Town and Buffalo City, for example.

Background

This report provides estimates of the weekly number of deaths of person 1+ years in South Africa for epidemiological **Weeks 13** and **14** of 2021, covering the period **28 Mar – 3 April 2021** and **4 – 10 April 2021** respectively.

Reporting on Week 13 was delayed due to the interruptions in death registration caused by the public holidays. It is considered that by the 12 April, delays in processing arising from the public holidays are likely to be small.

While preparing predicted numbers of weekly deaths for 2021, enhancements have been made to the estimation process. The estimates now take into account the release of vital registration data to include registrations up to the close of 2017. They also ensure that the national estimate of excess deaths is consistent with the sum of the estimates for the provinces. Reporting has changed to 'Epi-weeks' that run from Sunday to Saturday, which will align with other weekly reports and enable us to lessen the lag in reporting.

The main methodological change introduced in the 2021 reporting is that predicted values for 2020 and 2021 are based on death data for the period 2014-2019, instead of data for 2018 and 2019 as was done for 2020 estimates. After reviewing trends in the data, separate negative binomial models have been fitted to the unnatural deaths, the natural deaths for each of KwaZulu-Natal and Western Cape, and for natural deaths for the 7 other provinces in a combined model to provide estimates by age, sex and epi-week for each year. A prediction interval has been estimated on the basis of the variability in the observed weekly data for each reported domain. The data for both 2020 and 2021 have been recast and both years will be reported with a cumulative total of excess deaths taken from the week starting 3 May 2020, considered to be the point of rapid increase in excess deaths associated with the COVID-19 pandemic in South Africa. Except for KwaZulu-Natal (and eThekweni in particular), where the additional VR data identified substantial missing late registrations from the 2015 data, the impact of the changes is relatively small. Predicted values for the metropolitan areas are still based on data from 2018 and 2019 as the trends in the sub-provincial data need further investigation to develop a comprehensive district-level model.

A brief methodological note outlining the changes that have been made for monitoring deaths during 2021 can be downloaded with this report from the SAMRC website as well as a spreadsheet with estimated values:

<https://www.samrc.ac.za/reports/report-weekly-deaths-south-africa>.

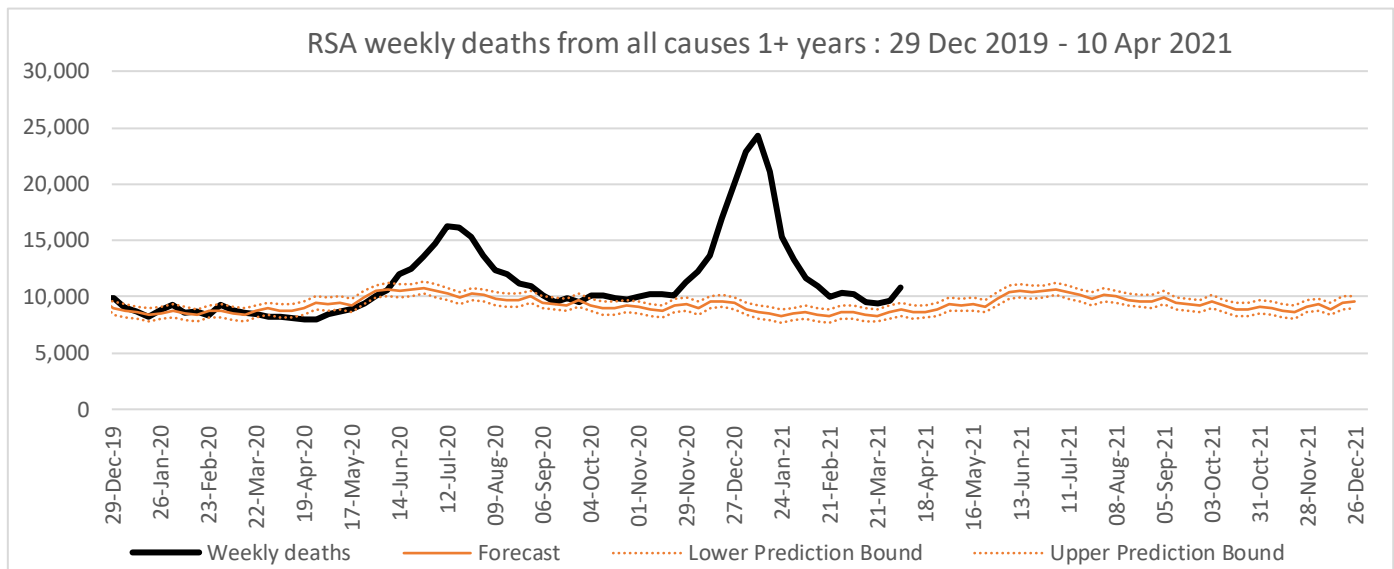
Trends

- The weekly numbers of deaths of persons 1+ years of age from all causes increased during Week 13 (**28 Mar – 3 Apr 2021**) with **9,703** deaths and then increased further in Week 14 (**4 – 10 Apr 2021**) with **10,837** deaths. This is due to an increase in deaths from natural causes.
- The number of excess deaths of persons 1+ years from natural causes increased to **1,970** in Week 14 (**4-10 Apr 2021**), following a low in Week 13 (**28 Mar – 3 Apr 2021**) of 977. [Additional data are required to know if this is a sustained uptick in the deaths as there is a degree of uncertainty about estimates for the last week.](#)
- By the end of Week 14 (**10 Apr 2021**), there have been more than **153,600** excess deaths from natural causes of persons 1+ years of age since 3 May 2020 and more that **70,600** excess deaths since **3 Jan 2021** (Week 1).

Week	Date	Weekly excess deaths from natural causes	Cumulative excess since 3 May 2020	Cumulative excess since 3 January 2021
8	21-Feb-21 – 27-Feb-21	1,761	145,432	62,438
9	28-Feb-21 – 06-Mar-21	1,588	147,020	64,026
10	07-Mar-21 – 13-Mar-21	1,631	148,651	65,657

11	14-Mar-21 – 20-Mar-21	991	149,642	66,648
12	21-Mar-21 – 27- Mar-21	1,079	150,721	67,727
13	28-Mar-21 – 3-Apr-21	977	151,698	68,704
14	4-Apr-21 – 10-Apr-21	1,970	153,668	70,674

- For people 1-59 years the natural deaths are within the bounds of uncertainty and the excess natural deaths since **3 May 2020** is **36,923** by the end of Week 14 (**10 Apr 2021**). For people 60 years and older, the number of natural deaths increased, well above the upper prediction bound. The excess natural deaths for people 60 years and older by the end of Week 14 (**10 Apr 2021**) is **115,745**.
- Increases in the numbers of natural deaths of persons 1+ years in Week 14 (**4 – 10 Apr 2021**) were seen in **Eastern Cape, Free State, Gauteng, Mpumalanga, North West and Northern Cape**.
- Numbers of deaths from natural causes in the **Western Cape** in Week 14 (**4 – 10 Apr 2021**) were within the prediction bounds and the numbers in **KwaZulu-Natal** and **Limpopo** are just above the upper prediction bound.
- Noticeable increases in excess deaths from natural causes were experienced in Week 14 (**4-10 Apr 2021**) in the **City of Johannesburg** and the **City of Tshwane**.
- Per capita excess death rates have been calculated for the provinces to scale the cumulative deaths for the population size of each province (**Table 1**). By the end of Week 14 (**10 Apr 2021**), the national excess death rate was **258 per 100,000** population.
- The provinces with the highest numbers of excess deaths at the end of Week 12 (**27 Mar 2021**), are, in order, **KwaZulu-Natal, Eastern Cape** and **Gauteng**. The ranking changes to **Eastern Cape, KwaZulu-Natal** and **Northern Cape** for the crude death rates per capita (i.e. taking size of the provincial populations into account) as well as the age-standardised rates (i.e. taking into account the age distribution of the provincial population).
- The weekly number of deaths from unnatural causes have continued to track within the prediction bounds.



Numbers have been scaled to the estimated actual number of death and for the last week has been adjusted for delayed registrations

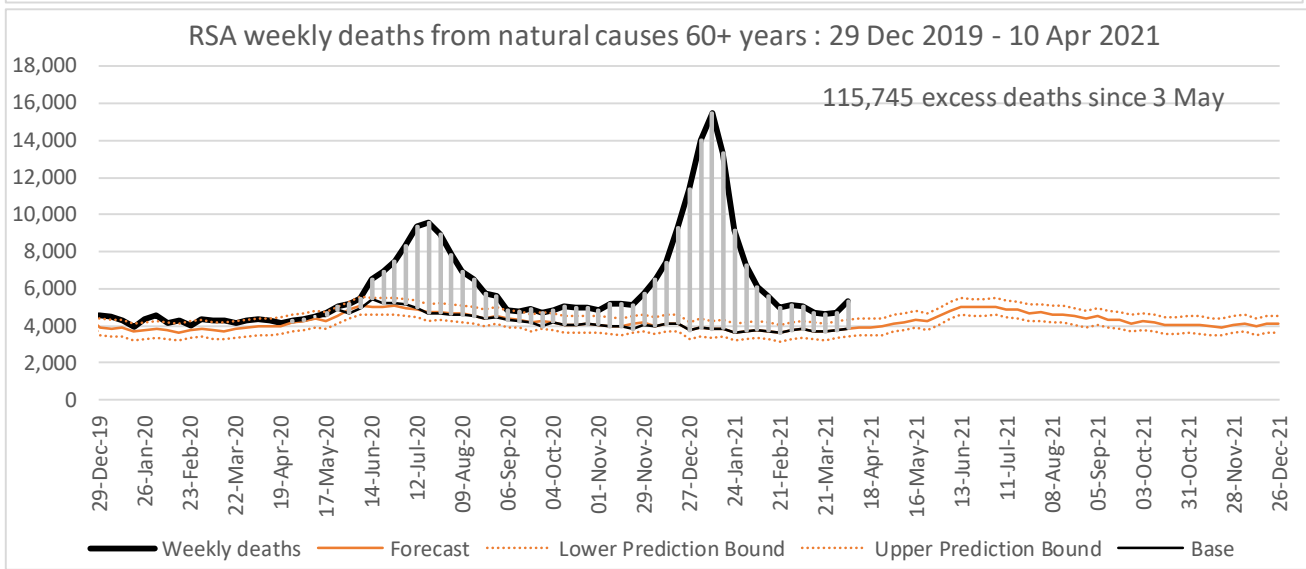
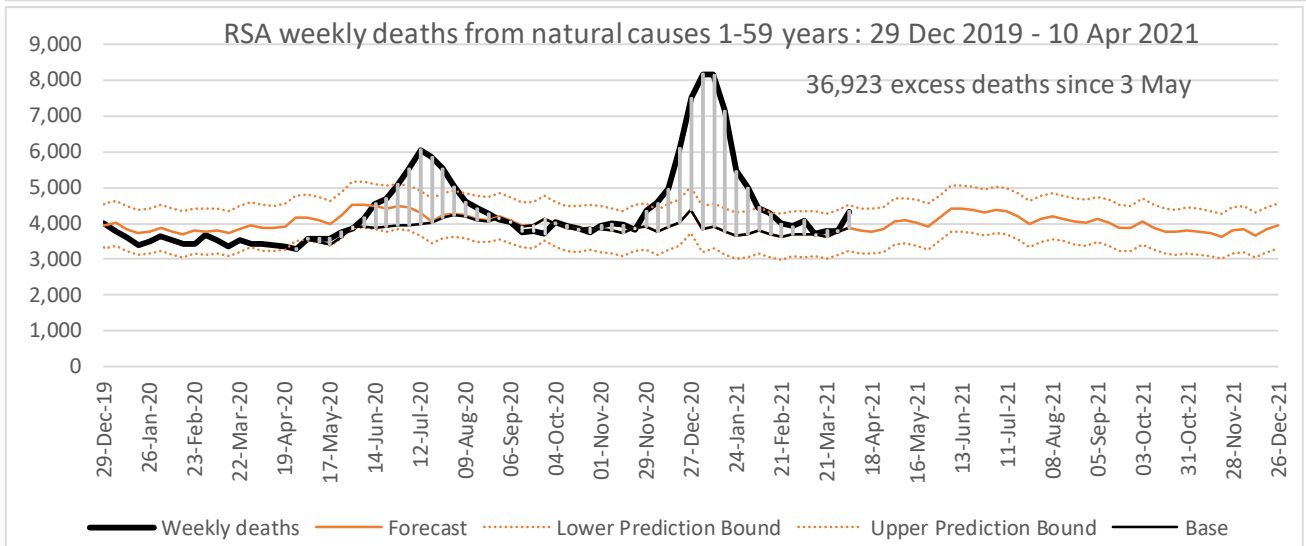
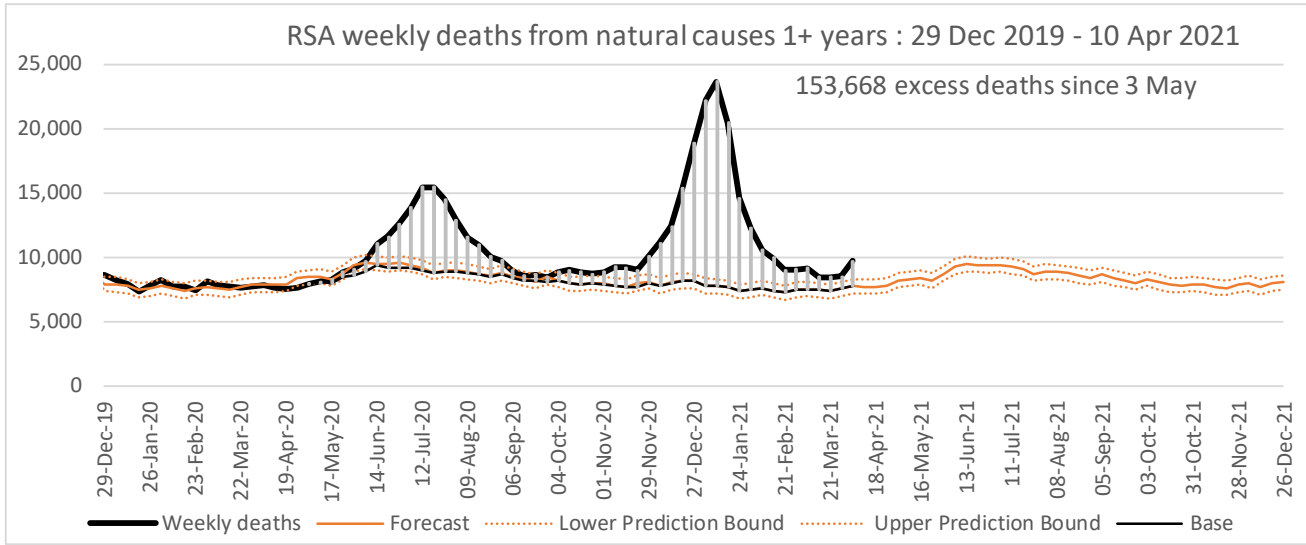
Table 1: Number of excess natural deaths of persons 1+ years by province and metro relative to revised predicted number based on the observed drop during lockdown, South Africa 2020

Region	Period	Excess deaths vs revised base	Excess deaths per 100,000 population	Age standardised excess death rate per 100,000
South Africa	3 May 20 – 10 Apr 21	153,668	258	258
Province				
Eastern Cape	31 May 20 – 10 Apr 21	33,469	509	410
Free State	21 Jun 20 – 10 Apr 21	7,284	250	250
Gauteng	7 Jun 20 – 10 Apr 21	25,200	162	178
KwaZulu-Natal	7 Jun 20 – 10 Apr 21	37,359	326	376
Limpopo	21 Jun 20 – 10 Apr 21	14,194	240	210
Mpumalanga	21 Jun 20 – 10 Apr 21	11,094	231	248
Northern Cape	28 Jun 20 – 10 Apr 21	3,304	282	264
North West	28 Jun 20 – 10 Apr 21	5,544	138	141
Western Cape	3 May 20 – 10 Apr 21	16,221	230	202
Metropolitan Municipality				
Buffalo City	31 May 20 – 10 Apr 21	3,433		
City of Cape Town	3 May 20 – 10 Apr 21	12,000		
Ekurhuleni	7 Jun 20 – 10 Apr 21	6,831		
eThekweni	14 Jun 20 – 10 Apr 21	9,138		
Johannesburg	7 Jun 20 – 10 Apr 21	8,856		
Mangaung	21 Jun 20 – 10 Apr 21	2,252		
Nelson Mandela Bay	31 May 20 – 10 Apr 21	5,039		
City of Tshwane	7 Jun 20 – 10 Apr 21	6,196		

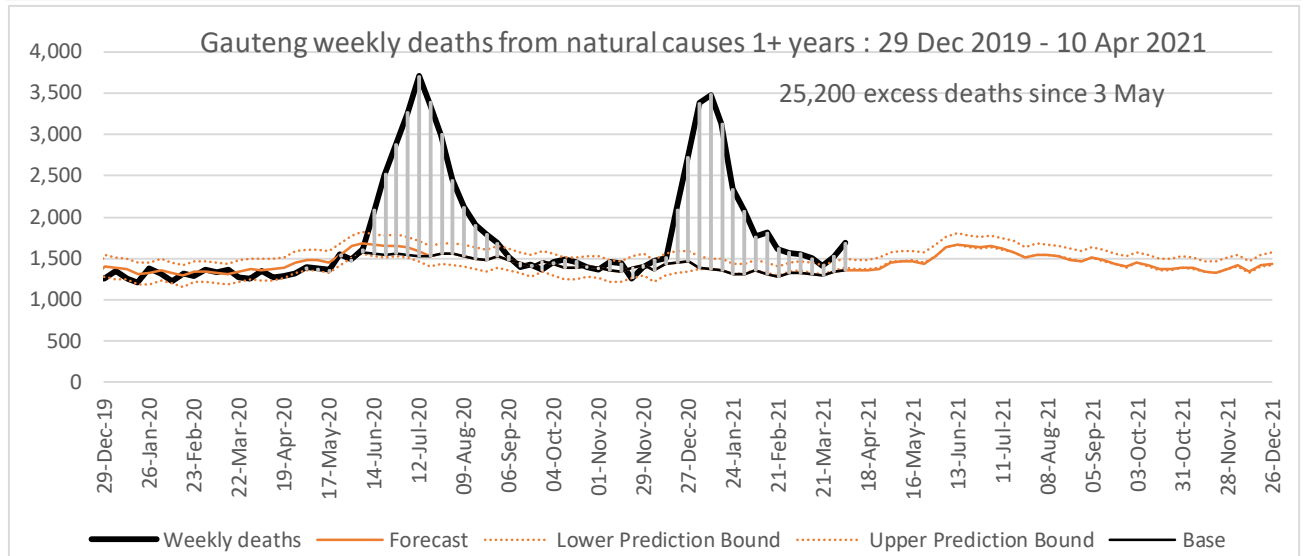
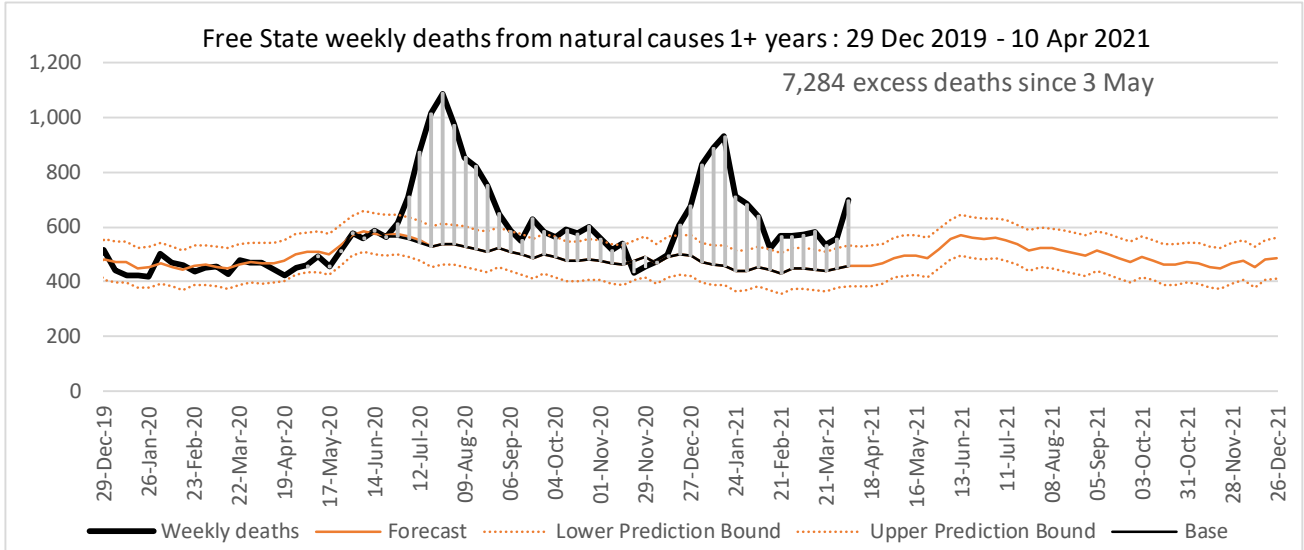
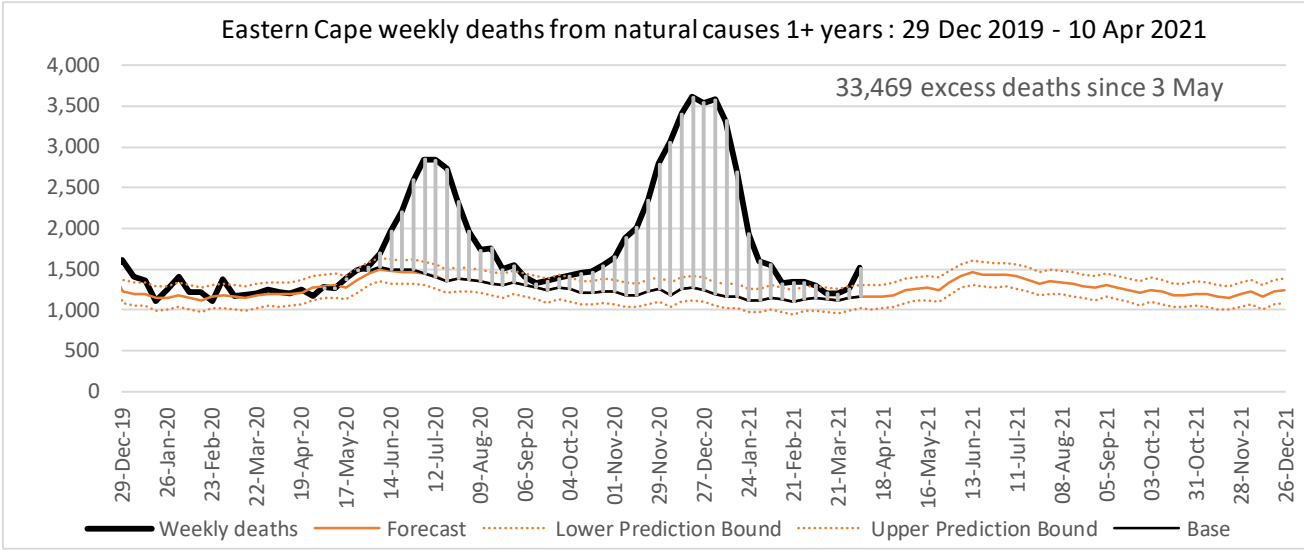
Note: Period has been determined based on when an upturn in the number of natural deaths became apparent. Parts do not sum to the whole because office closures due to Covid-19 may have led to registration of deaths at other offices which may not be in the same area, and random fluctuation at the point at which the baseline is determined.

Table 2: Number of excess deaths from all causes of persons 1+ years by province and metro relative to predicted number based on historical trend, South Africa 2020

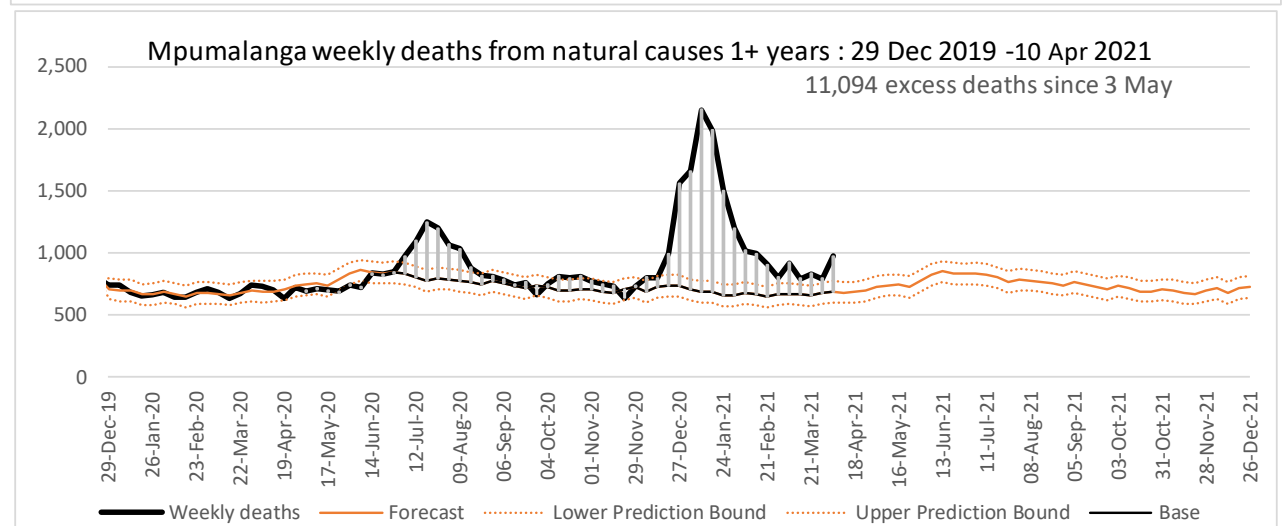
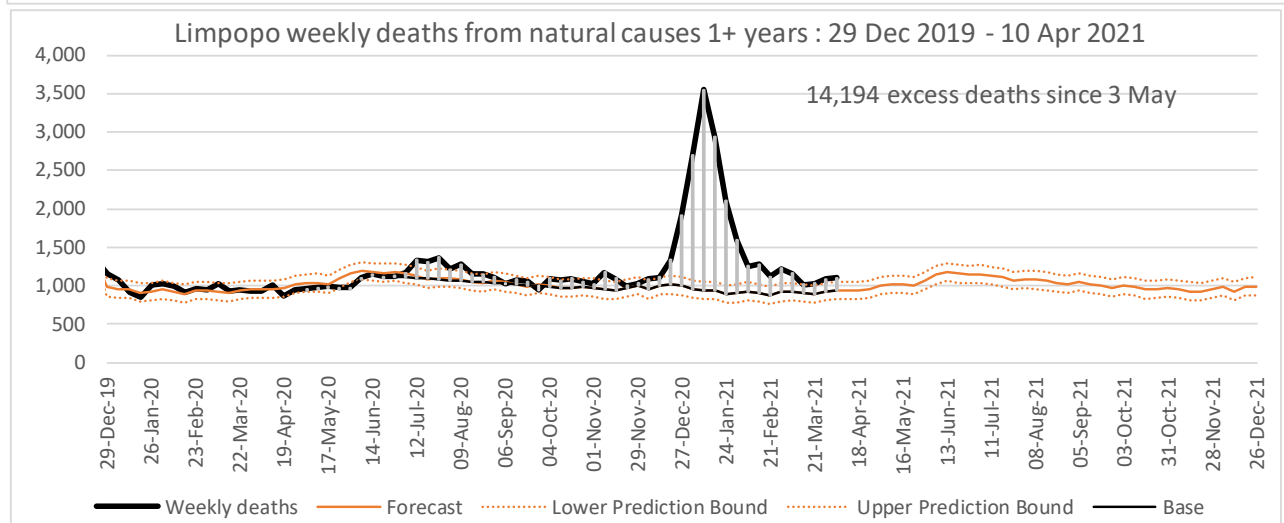
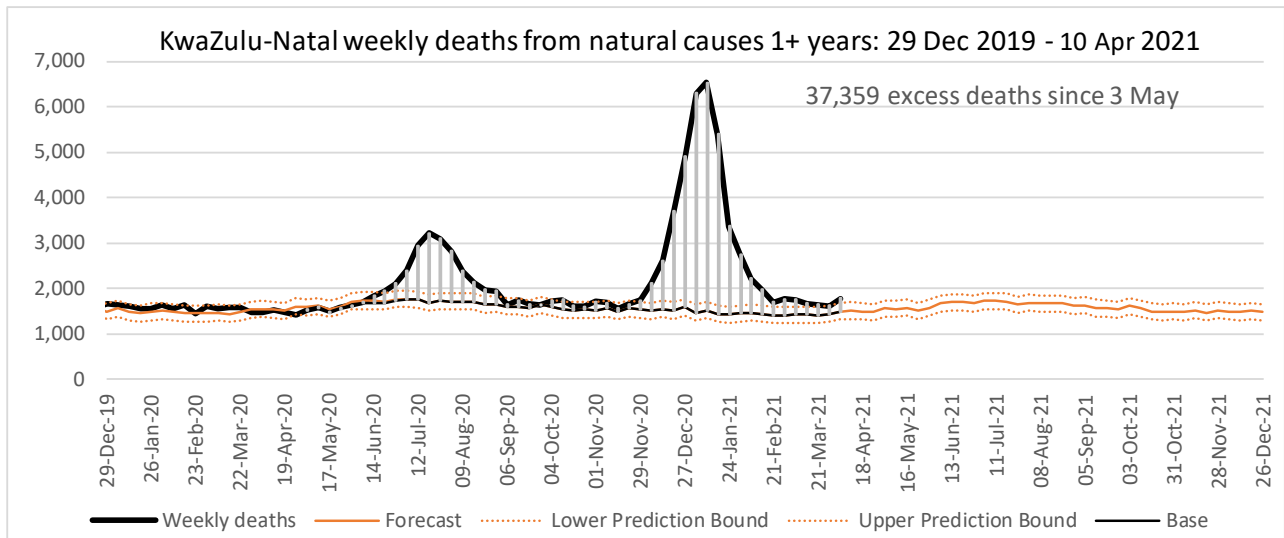
Region	Excess deaths vs forecast	Excess deaths per 100,000 population
South Africa	148,373	249
Province		
Eastern Cape	33,890	515
Free State	7,102	244
Gauteng	22,740	146
KwaZulu-Natal	37,140	324
Limpopo	13,922	236
Mpumalanga	10,701	222
Northern Cape	3,244	277
North West	5,281	131
Western Cape	14,353	203
Metropolitan Municipality		
Buffalo City	2,762	
City of Cape Town	9,678	
Ekurhuleni	6,645	
eThekweni	9,314	
Johannesburg	7,105	
Mangaung	2,452	
Nelson Mandela Bay	5,002	
City of Tshwane	5,787	



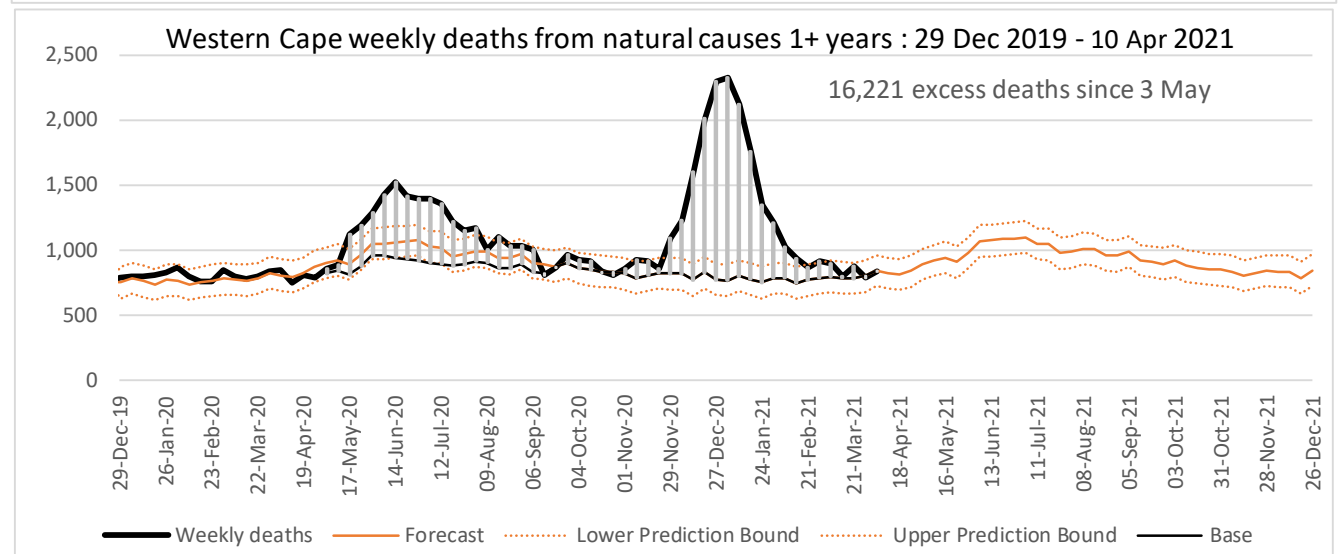
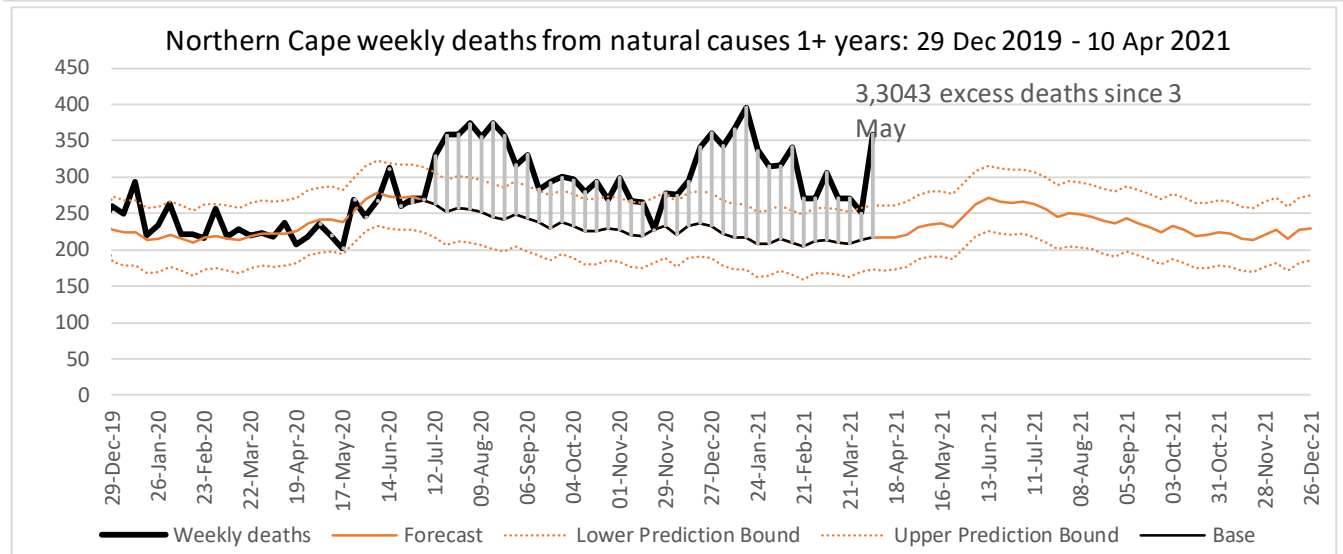
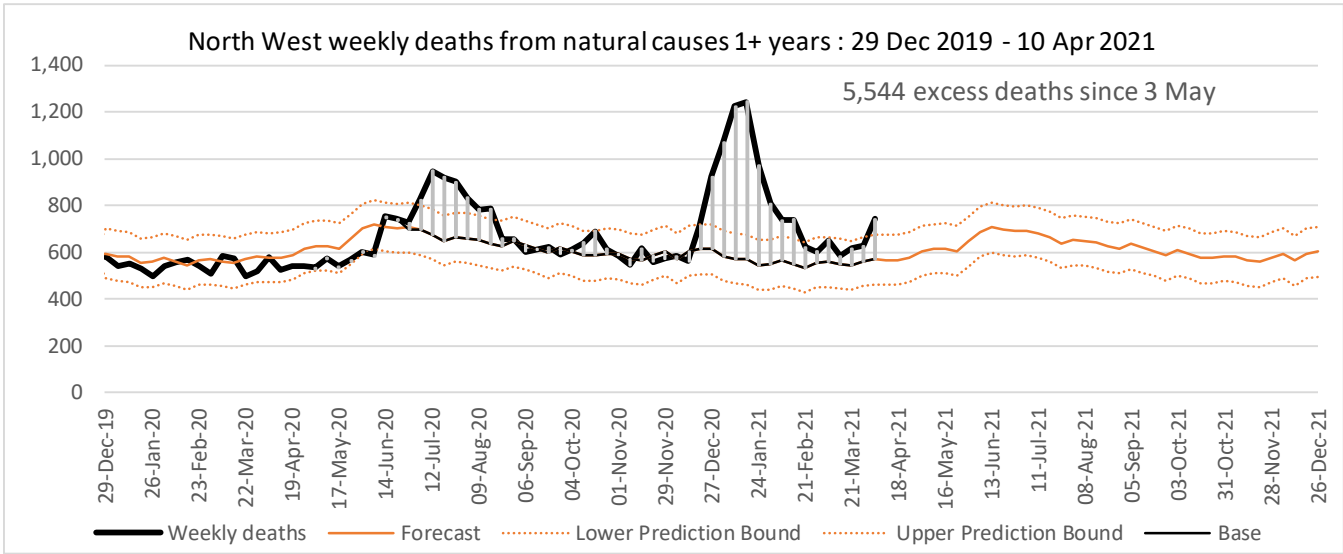
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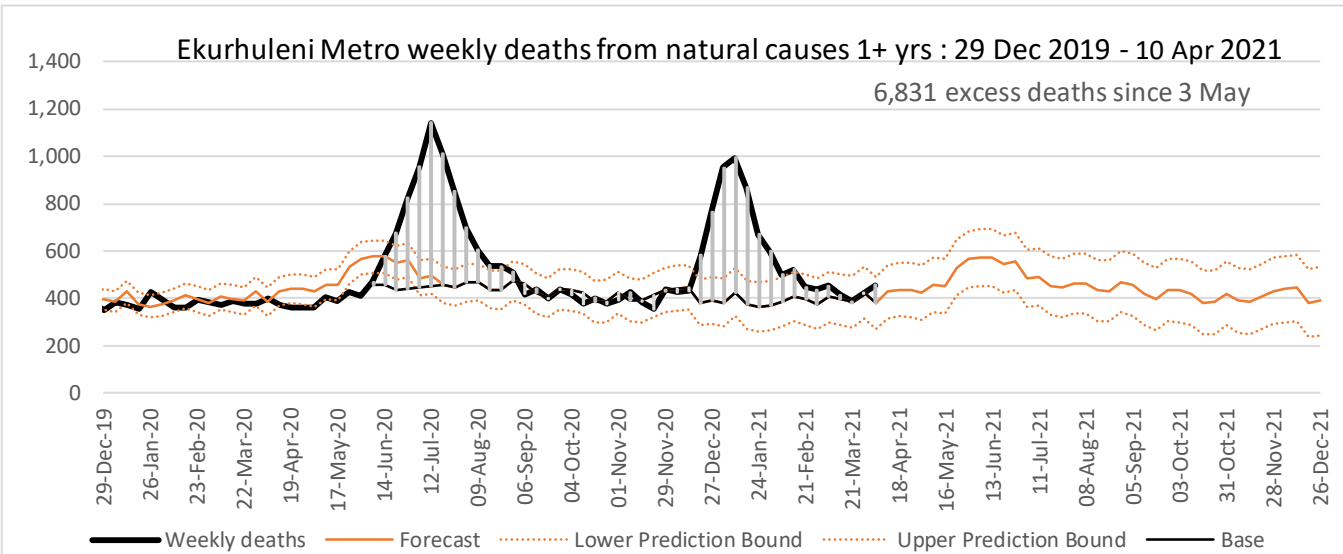
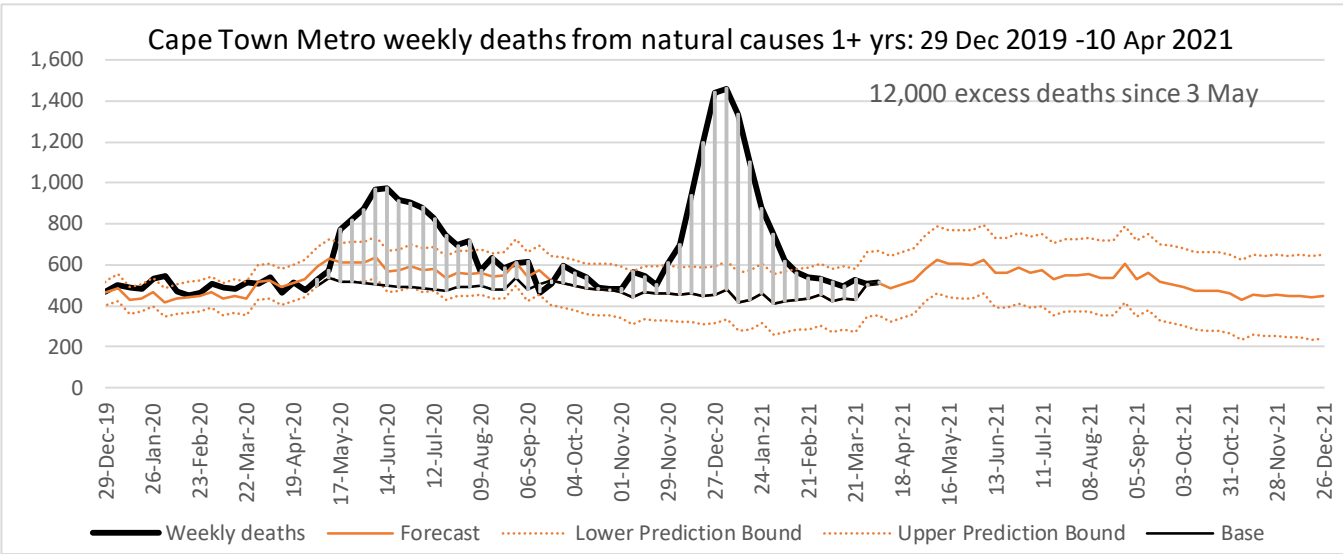
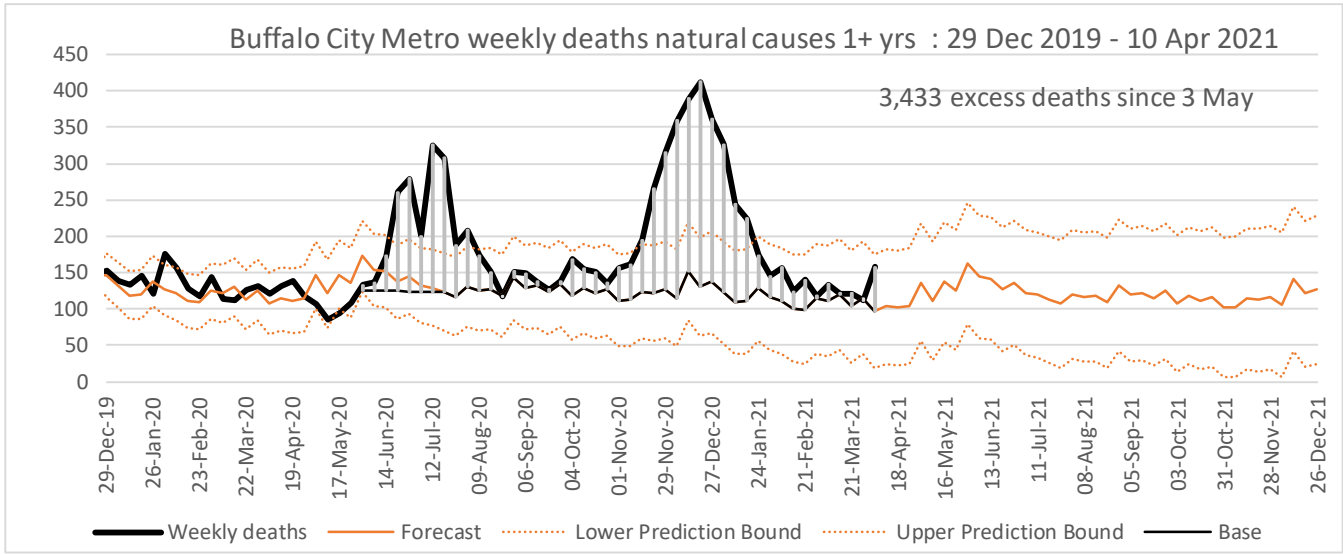
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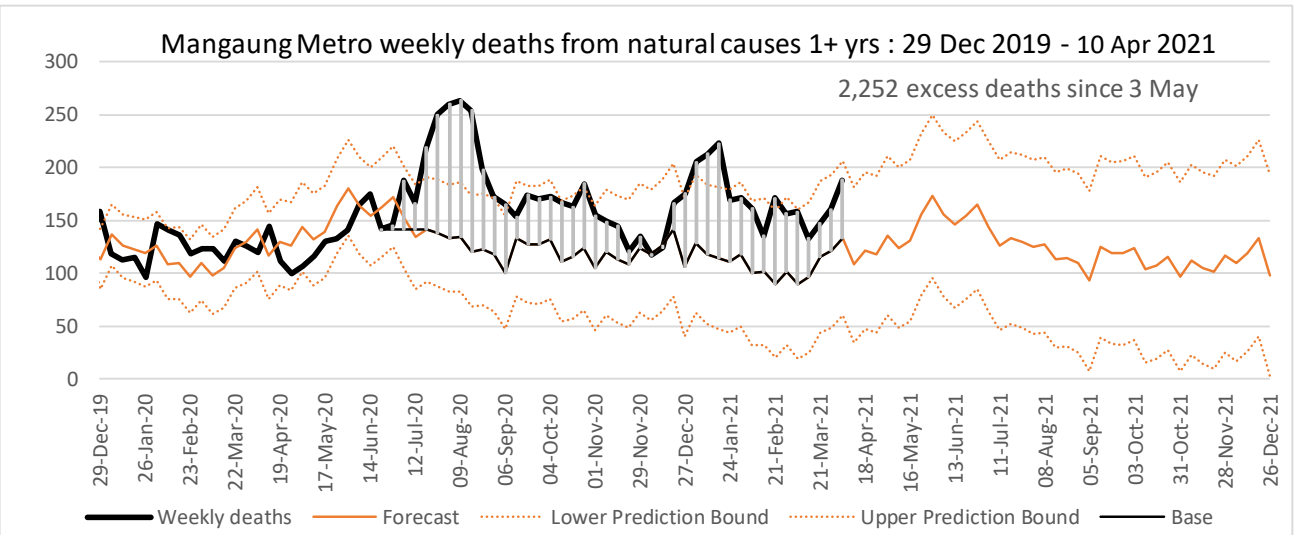
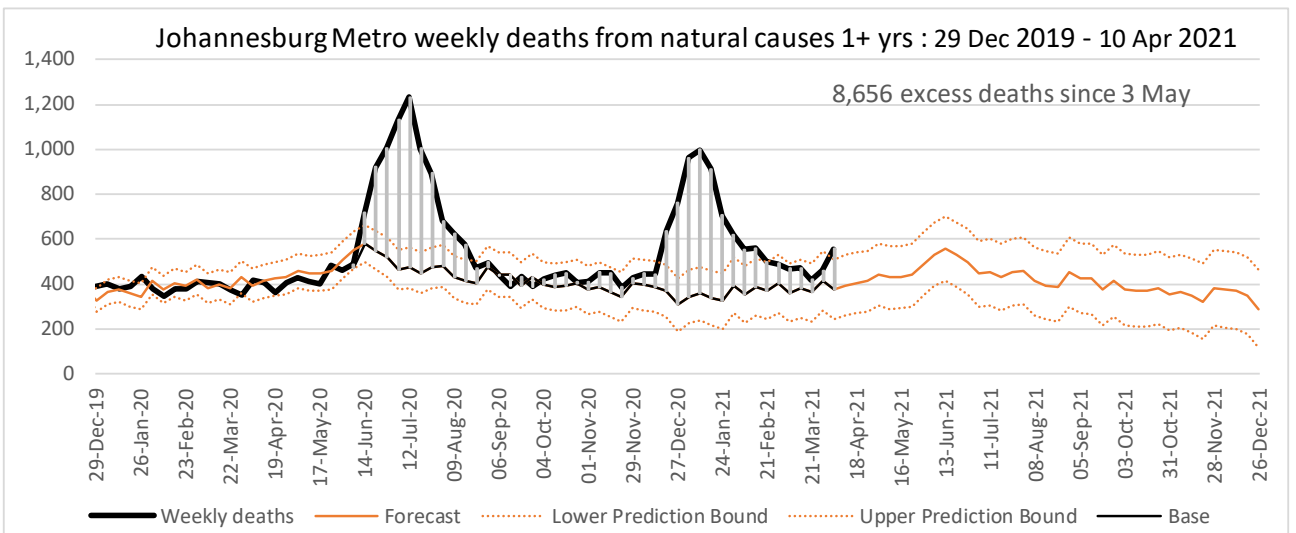
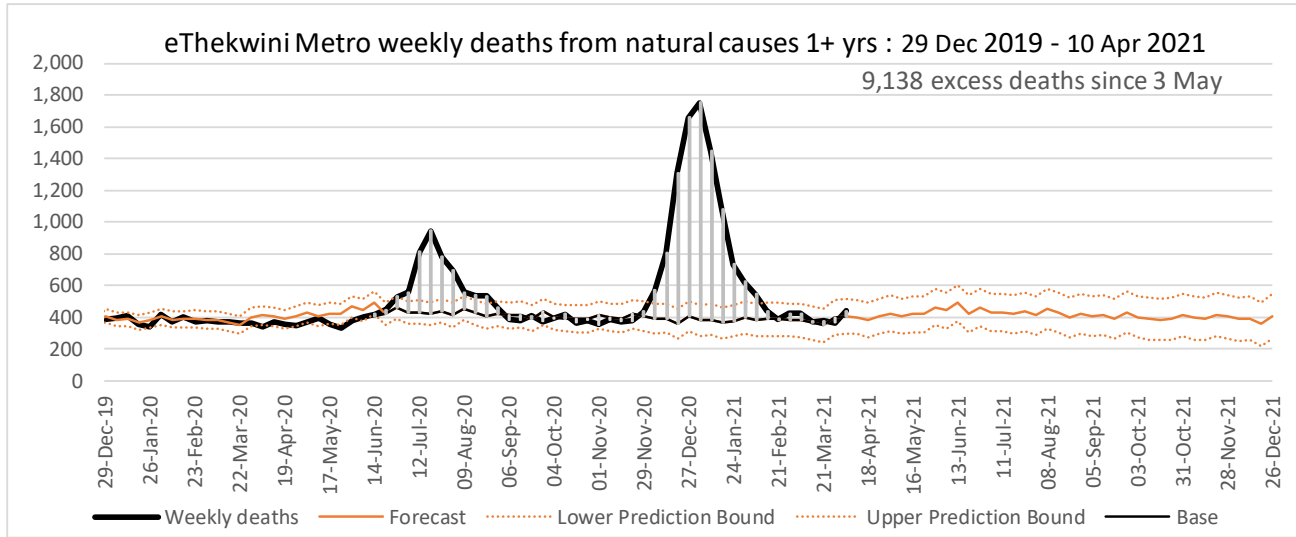
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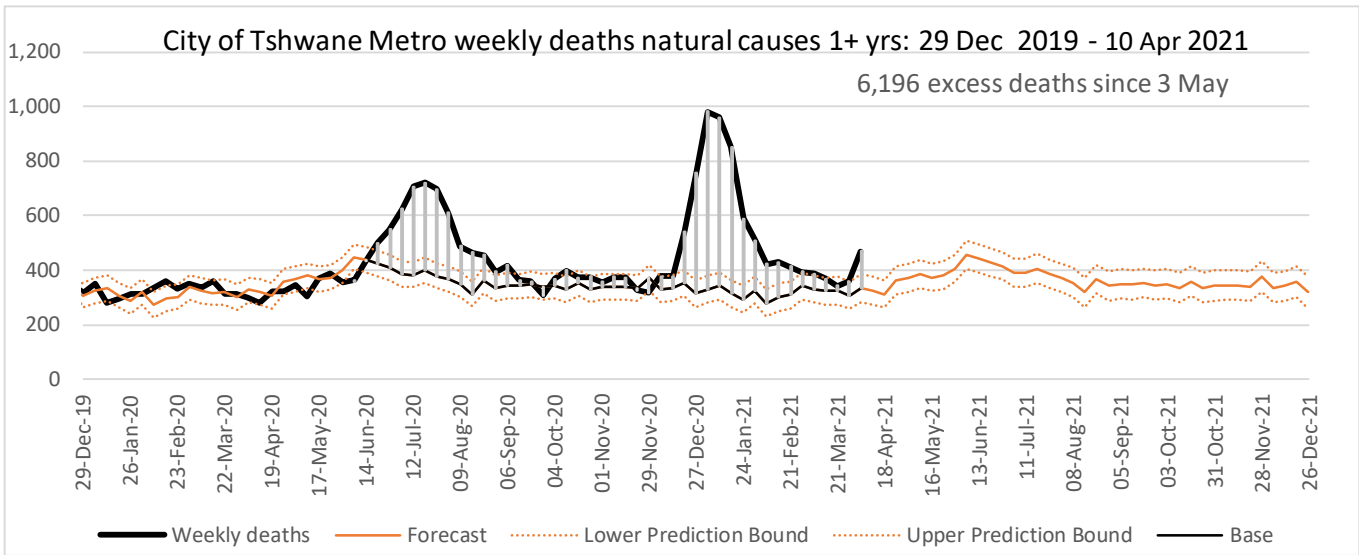
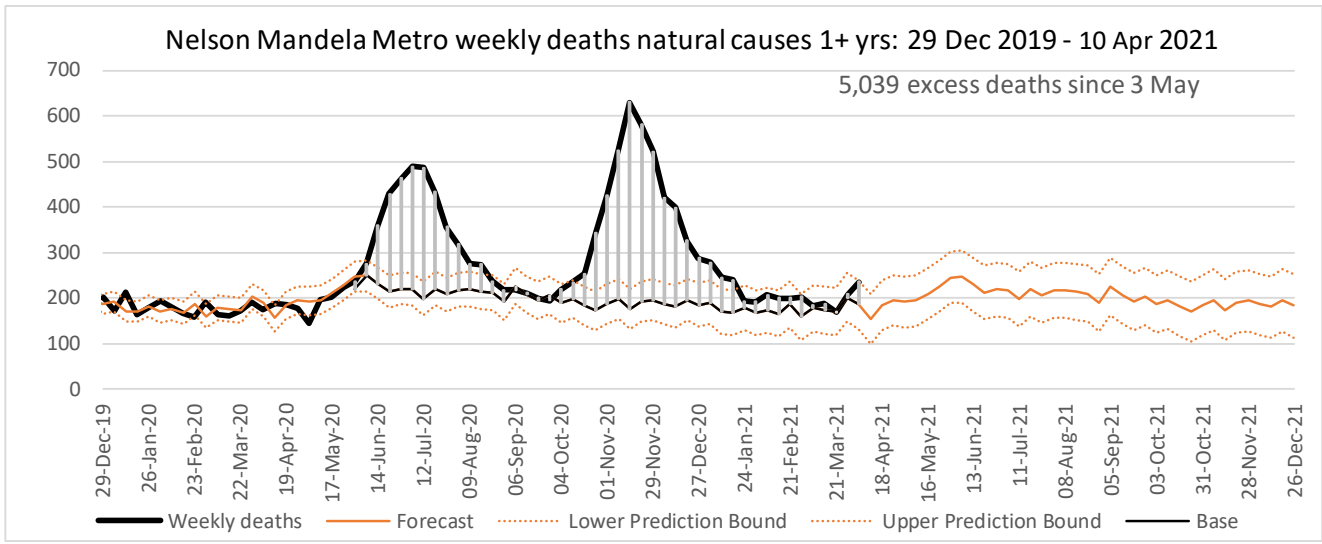
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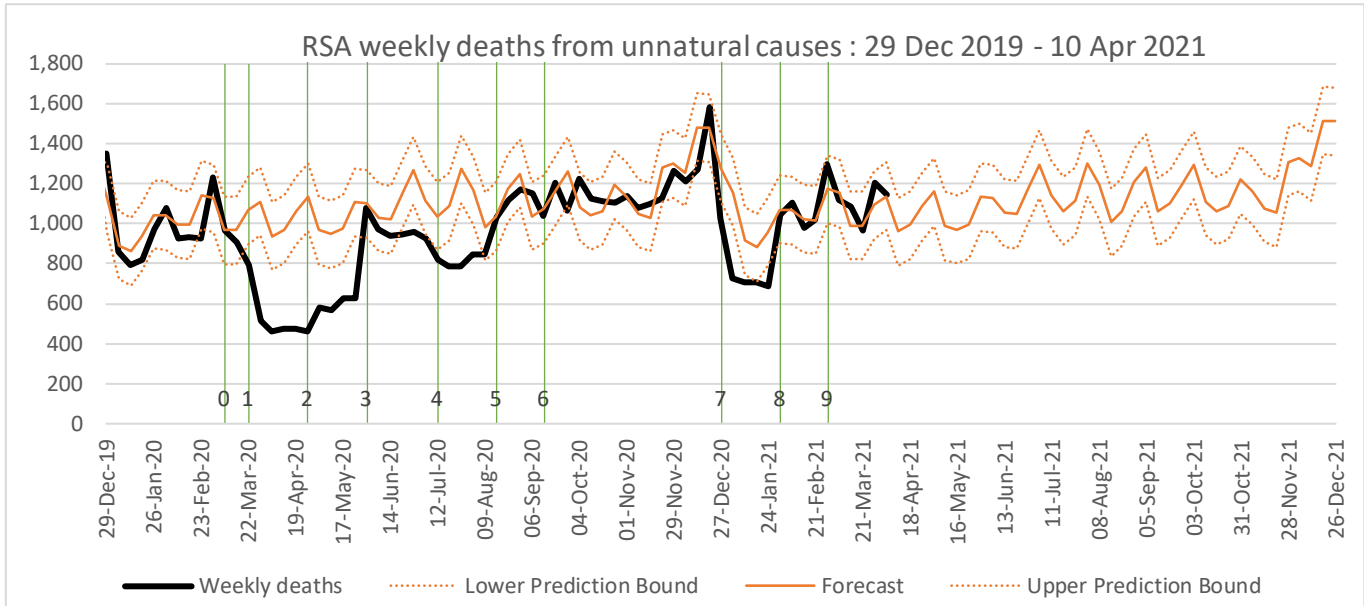
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Numbers have been scaled to the estimated actual number of death and for the last week has been adjusted for delayed registrations. As only a quarter to a third of unnatural deaths in the most recent week are processed at the time of the survey, the estimate for the most recent week is quite uncertain.

Vertical lines in order

- 0 Week Disaster Management Act implemented
- 1 Week lockdown level 5 introduced
- 2 Week lockdown changed to level 4, with curfew
- 3 Week lockdown changed to level 3 including unbanning of alcohol
- 4 Week alcohol re-banned and a curfew re-introduced
- 5 Week lockdown changed to level 2, including unbanning of alcohol
- 6 Week lockdown changed to level 1
- 7 Week lockdown changed to level 3 advanced (rebanning alcohol and a extension of curfew)
- 8 Week lockdown relaxed to allow sale of alcohol 4 days/week and reduce curfew
- 9 Week lockdown relaxed to allow sale of alcohol except during curfew and reduce curfew to midnight to 4am