

# REPORT ON WEEKLY DEATHS IN SOUTH AFRICA

29 AUG – 4 SEPT 2021

(WEEK 35)

Debbie Bradshaw, Ria Laubscher,  
Rob Dorrington, Pam Groenewald, Tom Moultrie

Burden of Disease Research Unit  
South African Medical Research Council  
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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-19 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 1<sup>st</sup> 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.

## Background

This report provides estimates of the weekly number of deaths of all persons in South Africa for epidemiological **Week 35** of 2021, covering the period **29 Aug – 4 Sep 2021**.

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. For the report for Week 32, the estimates of the predicted number of weekly deaths for 2020 and 2021 were revised to include the number of infant deaths (<1 year of age) as well as accounting for a different trend in mortality rates in the Northern Cape.

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

A review of provincial trends in mortality rates indicates that the rate of decline in Northern Cape was slower than in the other provinces, indicating the necessity to model the numbers for this province separately. Previously we fitted a negative binomial regression to the 2014-2019 weekly number of natural deaths for 7 provinces excluding Western Cape (which has an earlier winter peak in deaths) and KwaZulu-Natal (which experienced a more rapid decline in mortality rates during the period 2014-2019 than the other provinces). In August 2021, we revised the predicted numbers of natural deaths for all ages based on separate negative binomial regression models for natural deaths in Northern Cape, Western Cape, KwaZulu-Natal and a single regression for the remaining 6 provinces including a provincial coefficient to allow for different levels in the provincial rates. The deaths from unnatural causes for all ages have been modelled nationally using a negative binomial regression as done previously but now including infant deaths (<1 year of age).

## Trends

- The weekly number of deaths (all ages) from all causes was **14,482** in Week 35 (**29 Aug – 4 Sep 2021**) reflecting a slow downward trend in the weekly numbers of deaths.
- The number of excess deaths from natural causes (all ages) was **4,422** in Week 35 (**29 Aug – 4 Sep 2021**), reflecting a decrease since the peak of **10,265** experienced in Week 28 (**11 – 17 Jul 2021**).
- Since 3 May 2020, there has been a cumulative total of just over **250,000** excess deaths from natural causes of persons all ages of which nearly **169,000** occurred in 2021 (since 3 Jan 2021).

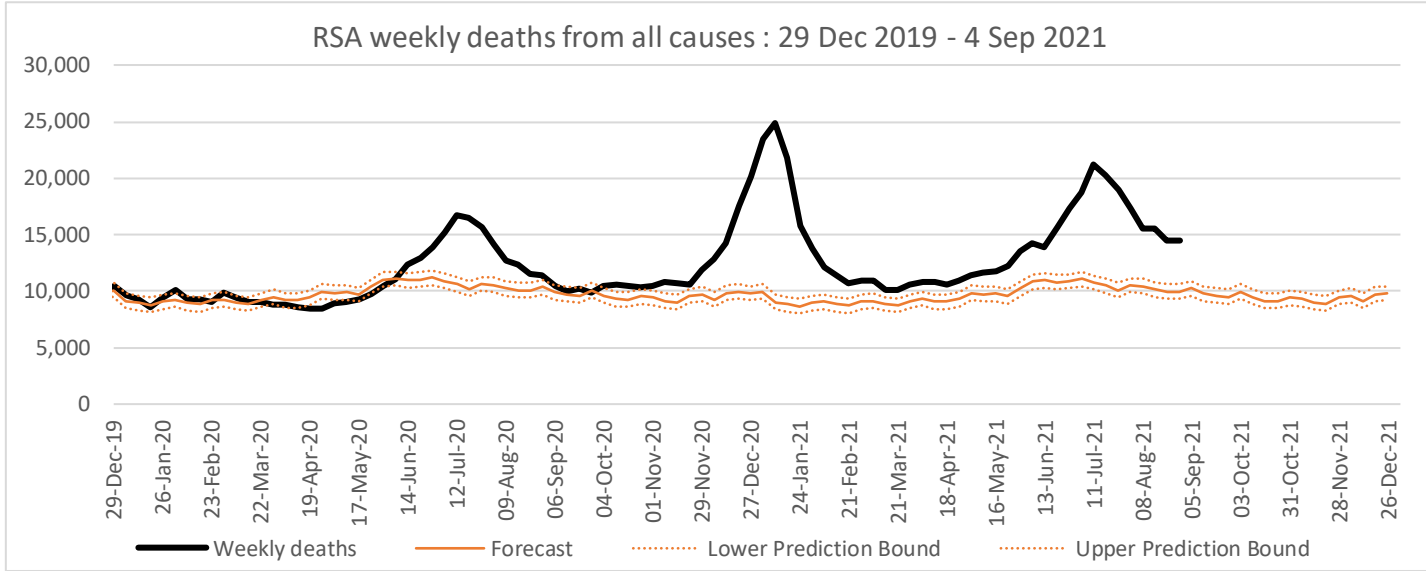
Week	Date	Weekly excess deaths from natural causes (all ages)	Cumulative excess since 3 May 2020 (all ages)	Cumulative excess since 3 January 2021 (all ages)
<b>28</b>	11-Jul-21 – 17-Jul-21	10,265	208,672	123,787
<b>29</b>	18-Jul-21 – 24-Jul-21	10,083	218,755	133,870
<b>30</b>	25-Jul-21 – 31-Jul-21	8,873	227,628	142,743
<b>31</b>	1-Aug-21 – 7-Aug-21	6,770	234,398	149,513
<b>32</b>	8-Aug-21 – 14-Aug-21	5,109	239,506	154,622
<b>33</b>	15-Aug-21 – 21-Aug-21	5,363	244,869	159,984
<b>34</b>	22-Aug-21 – 28-Aug-21	4,522	249,391	164,506
<b>35</b>	29-Aug-21 – 4-Sep-21	4,422	253,813	168,928

- For people under-60 years, the number of natural deaths tracked within the prediction bounds after waves 1 and 2. During Week 25 (**20 – 26 Jun 2021**), the number increased above the upper prediction bound and increased to a 3<sup>rd</sup> peak in Week 28 (**11 – 17 Jul 2021**). The numbers of excess deaths in this age group have continued to decrease over the last 3 weeks, at a slower pace, reaching the upper prediction bound. By the end of Week 35 (**29 Aug – 4 Sep 2021**), the cumulative number of excess natural deaths for people under-60 years since **3 May 2020** was just over **63,000**.
- For people 60 years and older, the number of natural deaths has exceeded the upper prediction bound throughout. The 3<sup>rd</sup> peak also occurred in Week 28 (**11 – 17 Jul 2021**) and the numbers have decreased but remain well above the upper prediction bound. By the end of Week 35 (**29 Aug – 4 Sep 2021**) the number was over **188,000**.
- Phase 2 of the vaccination programme, targeting persons 60 years and older in addition to health care workers, began on 17 May 2021. In the weeks leading up to the vaccination roll-out, there were about 1,200-1,500 weekly excess deaths from natural causes among persons 60+ years with p-scores ranging from 28%-33%. The number of weekly excess deaths from natural causes in this age group increased to **7,136** in Week 28 (**11 – 17 Jul 2021**) with a p-score of 152%. The numbers have been decreasing and during Week 35 (**29 Aug – 4 Sep 2021**), the excess deaths in this age group was **3,195** and the p-score was 75%. It remains difficult to quantify the impact of vaccines.

Week	Date	Weekly excess deaths from natural causes for persons 60+ years	p-score
<b>28</b>	11-Jul-21 – 17-Jul-21	7,142	151.8%
<b>29</b>	18-Jul-21 – 24-Jul-21	7,081	153.8%
<b>30</b>	25-Jul-21 – 31-Jul-21	6,108	139.2%

<b>31</b>	1-Aug-21 – 7-Aug-21	4,541	100.8%
<b>32</b>	8-Aug-21 – 14-Aug-21	3,434	75.9%
<b>33</b>	15-Aug-21 – 21-Aug-21	3,710	83.2%
<b>34</b>	22-Aug-21 – 28-Aug-21	3,248	74.6%
<b>35</b>	29-Aug-21 – 4-Sep-21	3,195	74.7%

- Numbers of natural deaths in **Gauteng, Mpumalanga, Limpopo** and **North West** have continued decreasing.
- However, the numbers in the **Eastern Cape, KwaZulu-Natal, Northern Cape** and **Free State** are continuing well above their upper prediction bounds with only slight indications of a decrease in Week 35 (**29 Aug – 4 Sep 2021**).
- The numbers of excess deaths in the **Western Cape** and **City of Cape Town** are decreasing, however, there appears to have been a slight uptick in the latest week.
- 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 35 (**29 Aug – 4 Sep 2021**), the national excess death rate since 3 May 2020 was **426 per 100,000** population.
- The provinces with the highest cumulative numbers of excess deaths at the end of Week 35 (**29 Aug – 4 Sep 2021**), are, in order, **Gauteng, KwaZulu-Natal** and **Eastern Cape**. The ranking changes to **Eastern Cape, Northern Cape** and **Free State** for the crude death rates per capita (i.e., taking size of the provincial populations into account) and to **KwaZulu-Natal, Northern Cape** and **Eastern Cape** using the age-standardised rates (i.e., taking into account the age distribution of the provincial population).
- The weekly number of deaths from unnatural causes has continued to track close to the predicted numbers since the end of January 2021, with increases corresponding with month-ends. During Weeks 26 and 27, the unnatural deaths dropped below their lower prediction bound, coinciding with the change of lockdown to adjusted level 4 with re-banning of alcohol sales and extension of curfew. However, coinciding with the unrest in **KwaZulu-Natal** and **Gauteng**, and continued taxi violence in the **Western Cape**, the number of unnatural deaths increased to the level of the upper prediction bound during Week 28 (**11 – 17 Jul 2021**) and dropped to below the lower prediction bound during Week 29 (**18 – 24 Jul 2021**) once the unrest had subsided. Coinciding with the easing of the alcohol ban to limited hours of sale during Week 30 (**25 – 31 Jul 2021**), the number of unnatural increased and has largely varied 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 by province and metro relative to revised predicted number based on the observed drop during lockdown, South Africa 2020/21**

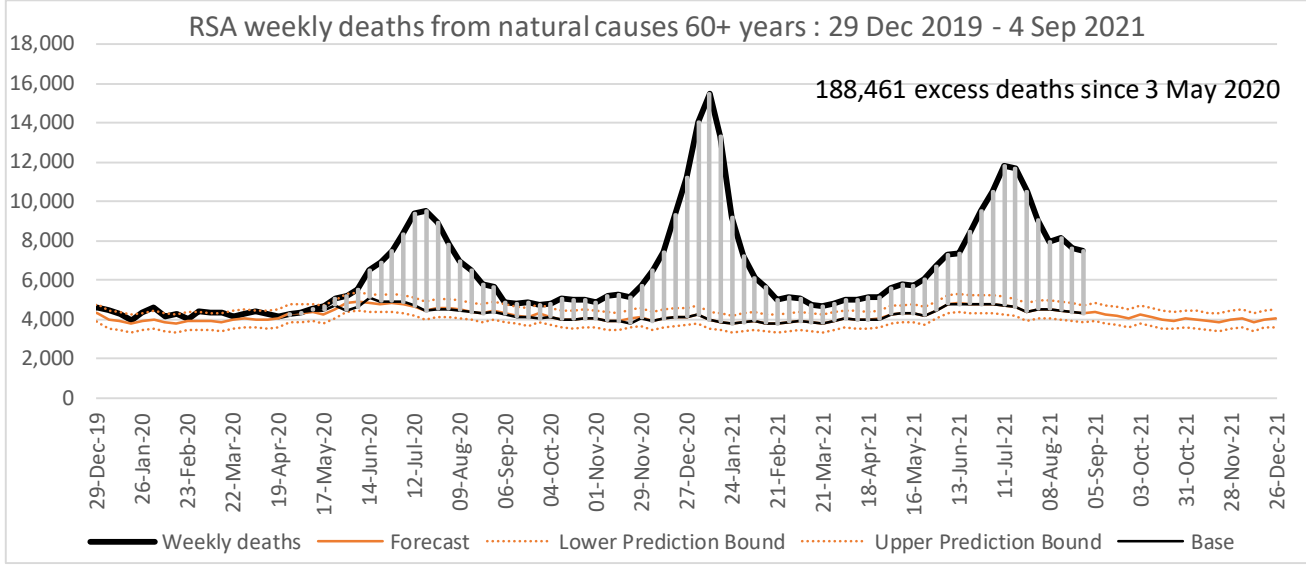
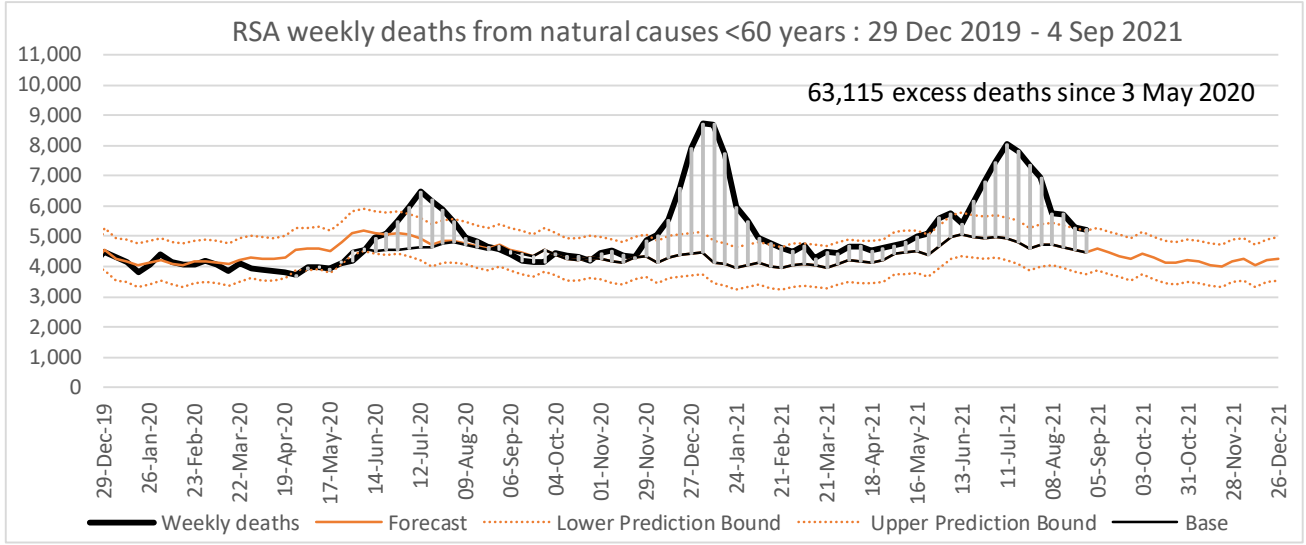
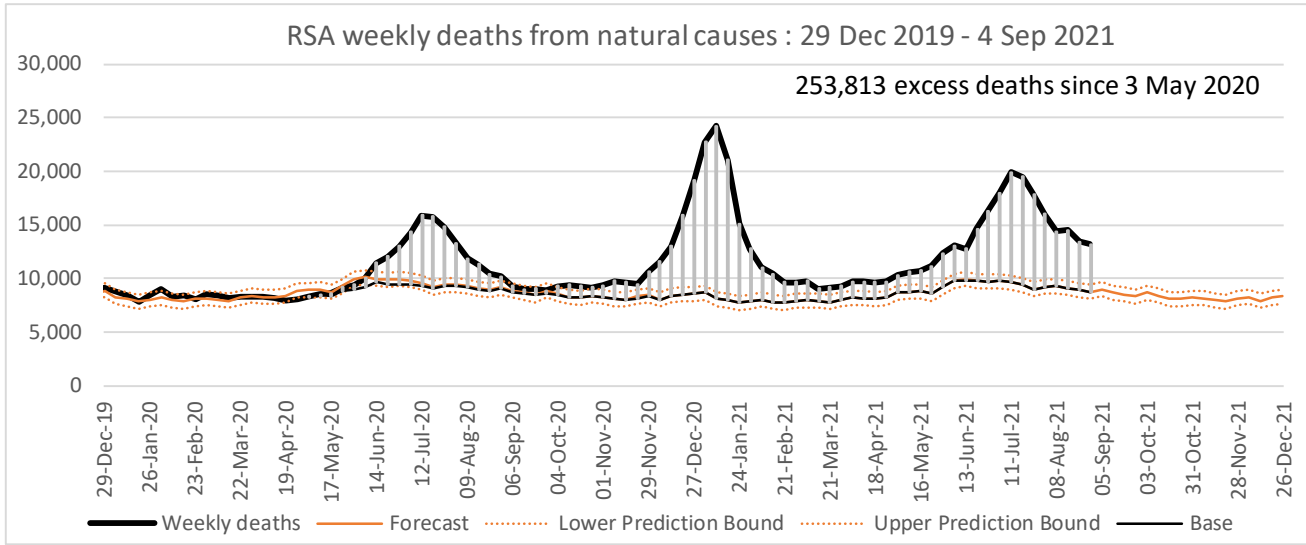
Region	Period	Excess deaths vs revised base	Excess deaths per 100,000 population	Age standardised excess death rate per 100,000
South Africa	3 May 20 – 4 Sep 21	253,813	426	426
<b>Province</b>				
Eastern Cape	31 May 20 – 4 Sep 21	40,502	615	496
Free State	21 Jun 20 – 4 Sep 21	14,138	486	486
Gauteng	7 Jun 20 – 4 Sep 21	54,512	349	384
KwaZulu-Natal	7 Jun 20 – 4 Sep 21	51,327	448	516
Limpopo	21 Jun 20 – 4 Sep 21	26,320	446	390
Mpumalanga	21 Jun 20 – 4 Sep 21	19,769	411	443
Northern Cape	28 Jun 20 – 4 Sep 21	6,434	550	514
North West	28 Jun 20 – 4 Sep 21	14,786	367	377
Western Cape	3 May 20 – 4 Sep 21	26,025	369	325
<b>Metropolitan Municipality</b>				
Buffalo City	31 May 20 – 4 Sep 21	4,214		
City of Cape Town	3 May 20 – 4 Sep 21	18,594		
Ekurhuleni	7 Jun 20 – 4 Sep 21	13,709		
eThekweni	14 Jun 20 – 4 Sep 21	11,446		
Johannesburg	7 Jun 20 – 4 Sep 21	17,771		
Mangaung	21 Jun 20 – 4 Sep 21	3,931		
Nelson Mandela Bay	31 May 20 – 4 Sep 21	6,484		
City of Tshwane	7 Jun 20 – 4 Sep 21	10,462		

**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.**

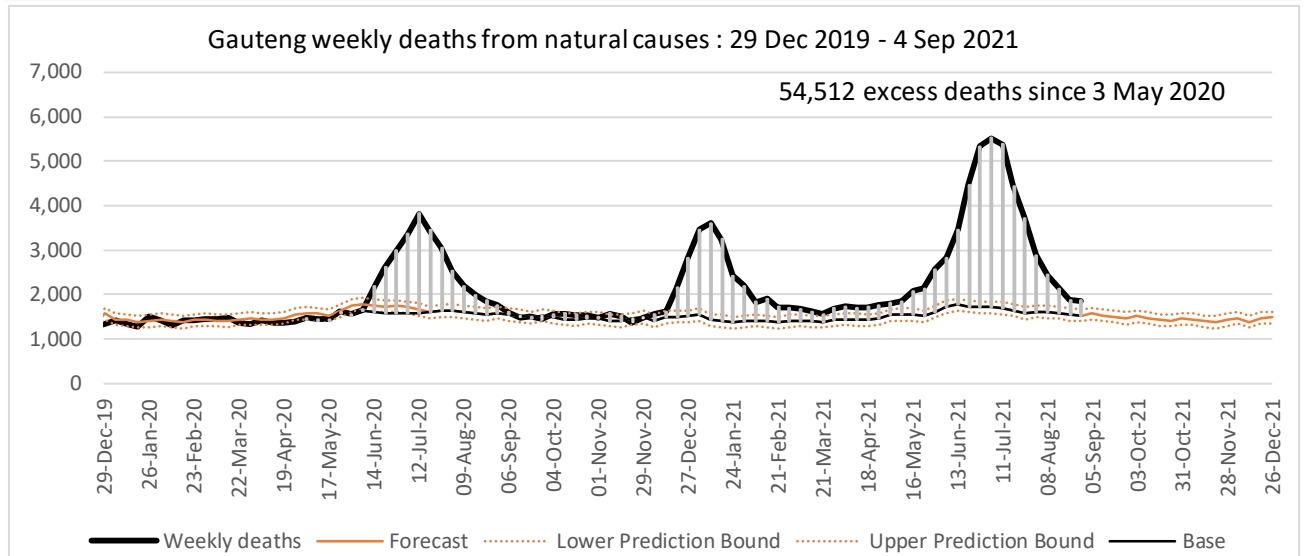
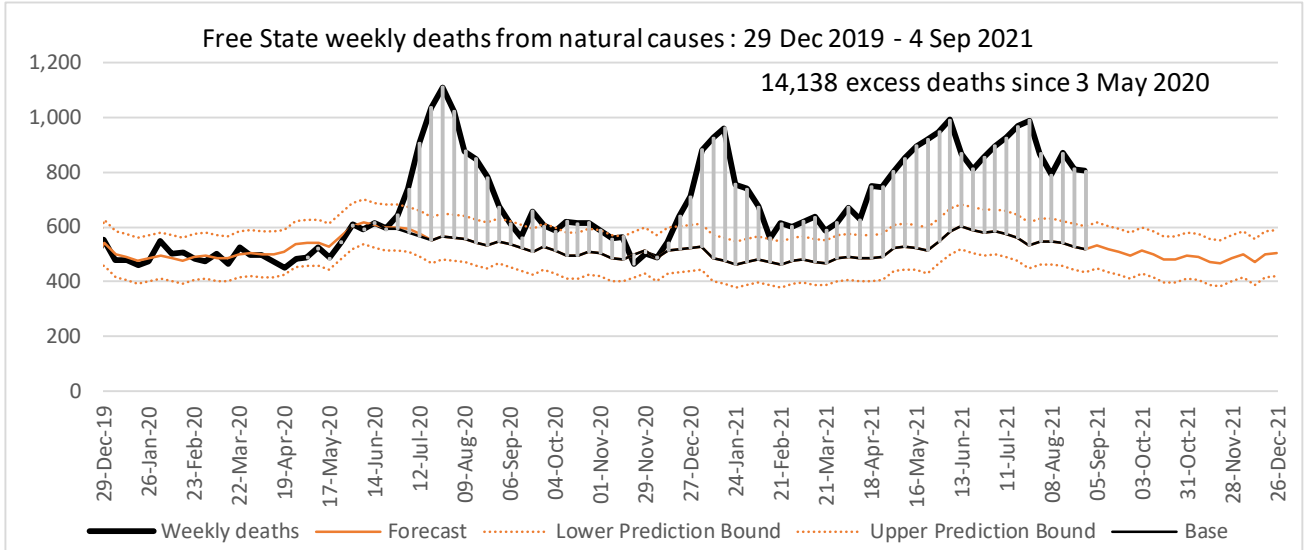
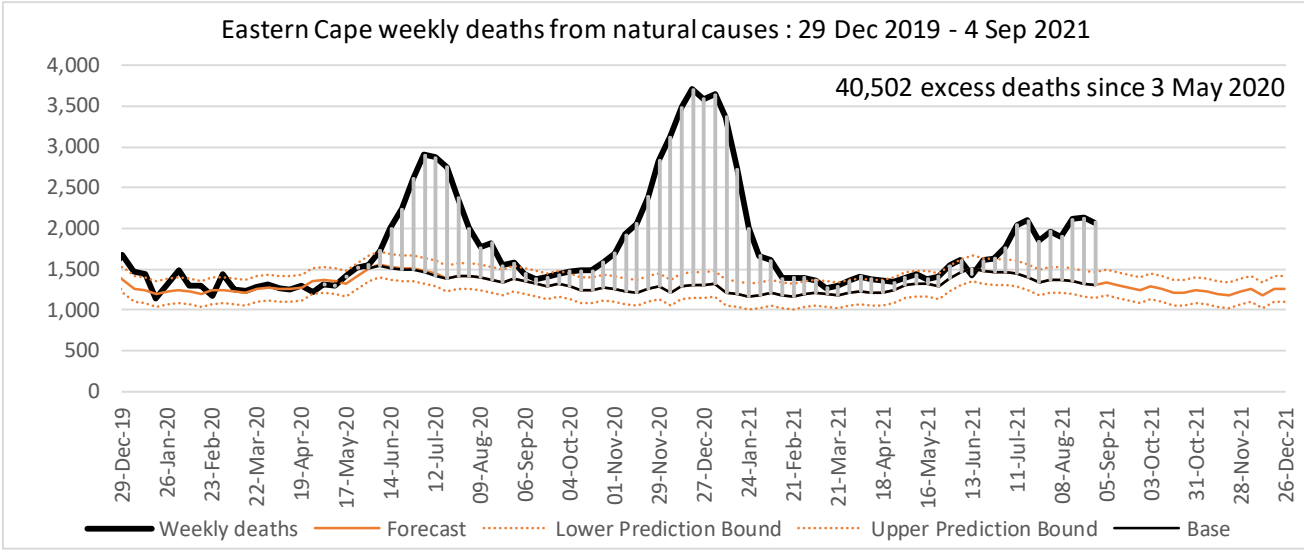
**Table 2: Number of excess deaths from all causes of persons by province and metro relative to predicted number based on historical trend, South Africa 2020/21**

<b>Region</b>	<b>Excess deaths vs forecast</b>	<b>Excess deaths per 100,000 population</b>
South Africa	248,977	418
<b>Province</b>		
Eastern Cape	41,032	623
Free State	13,882	477
Gauteng	51,506	330
KwaZulu-Natal	52,072	455
Limpopo	26,207	444
Mpumalanga	19,414	403
Northern Cape	6,361	543
North West	14,314	355
Western Cape	24,189	343
<b>Metropolitan Municipality</b>		
Buffalo City	4,238	
City of Cape Town	16,710	
Ekurhuleni	12,538	
eThekweni	10,630	
Johannesburg	17,350	
Mangaung	4,283	
Nelson Mandela Bay	6,509	
City of Tshwane	10,446	

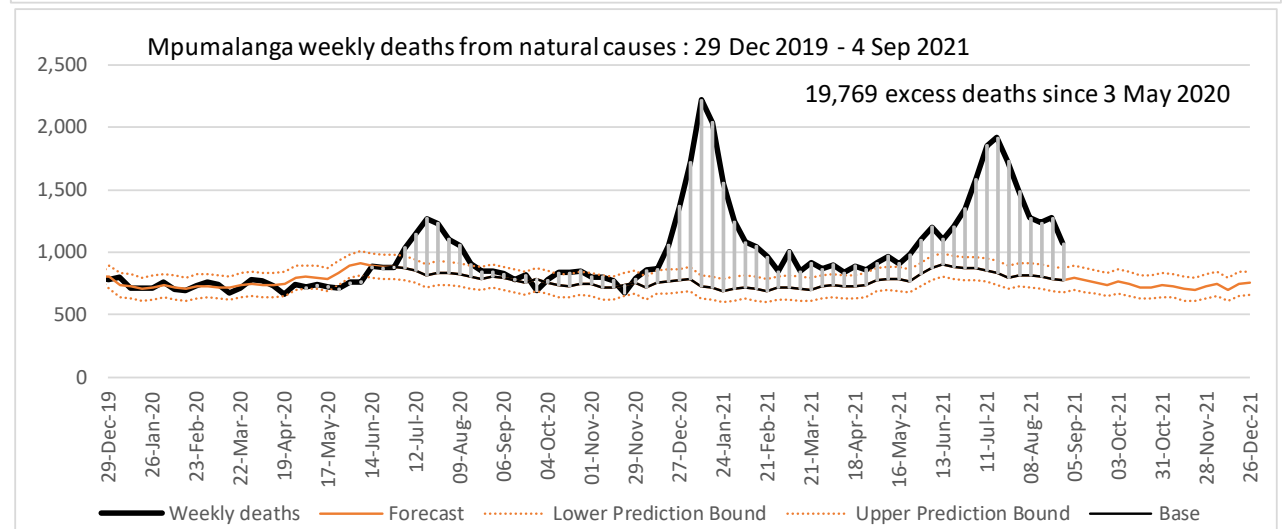
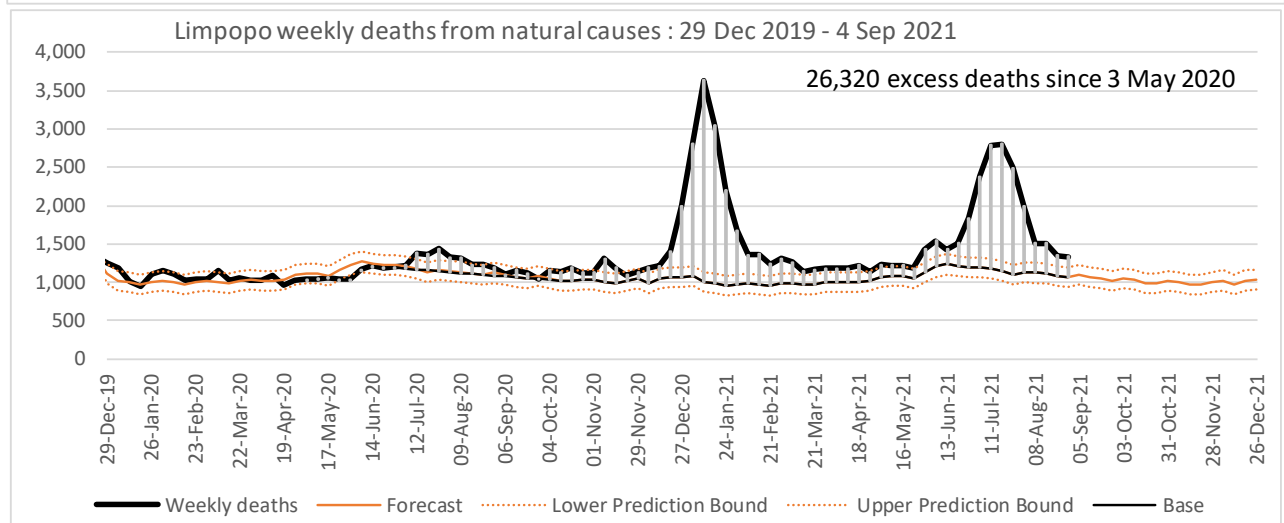
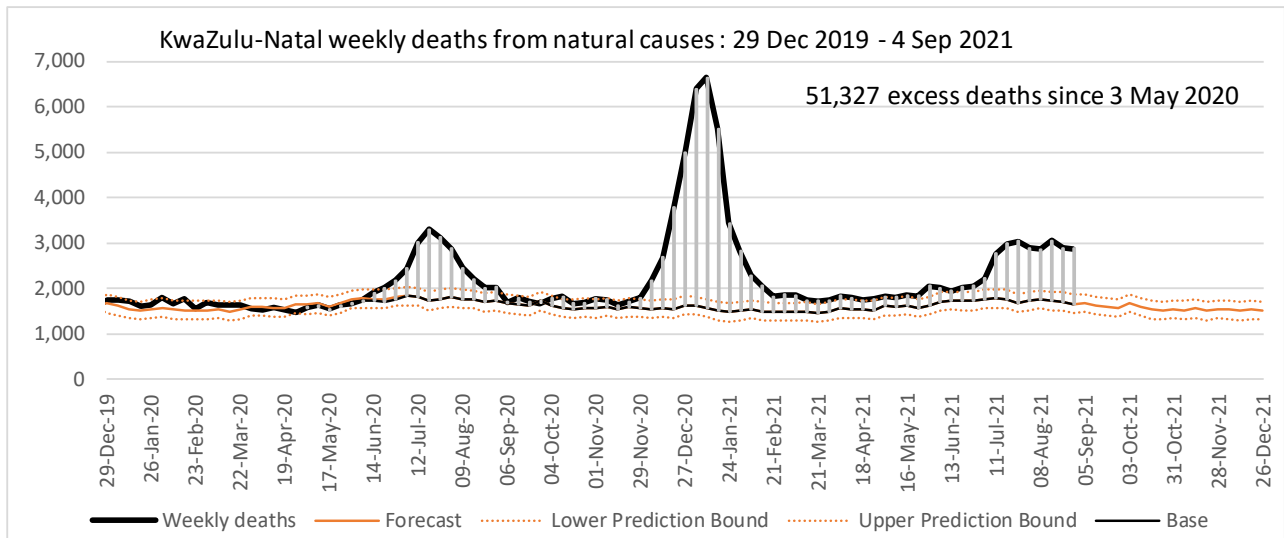




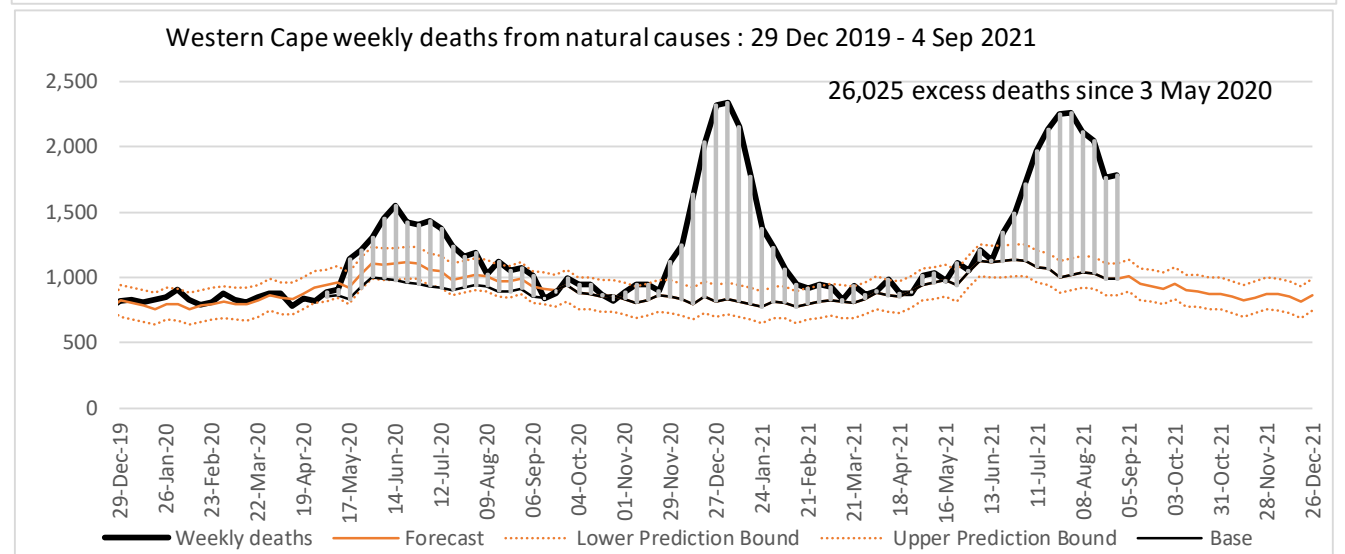
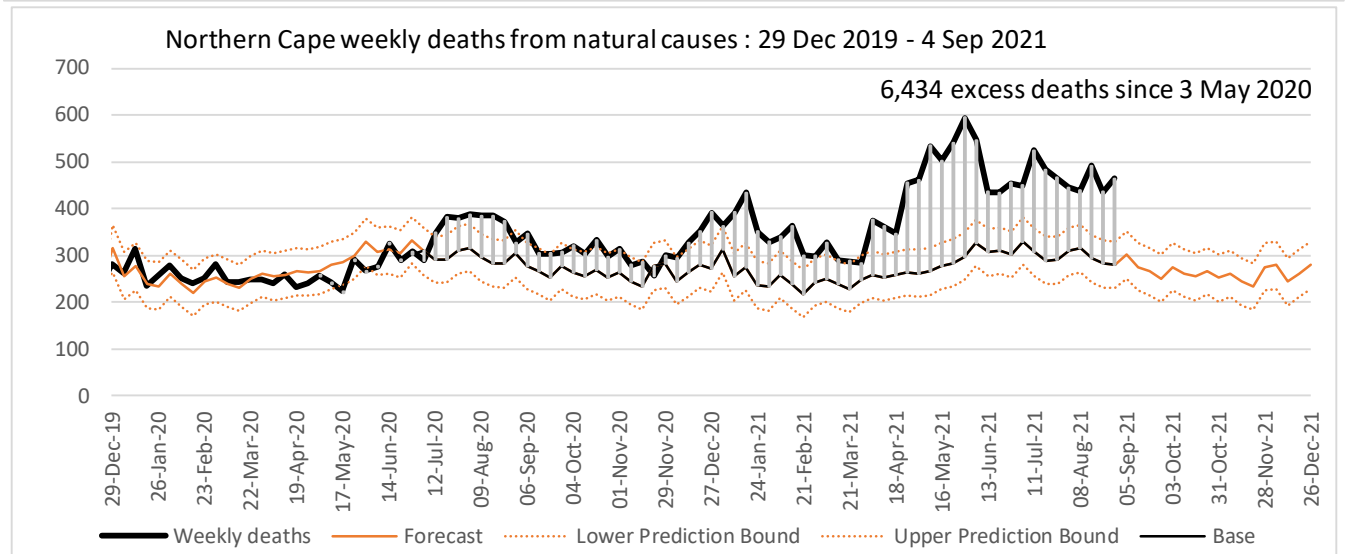
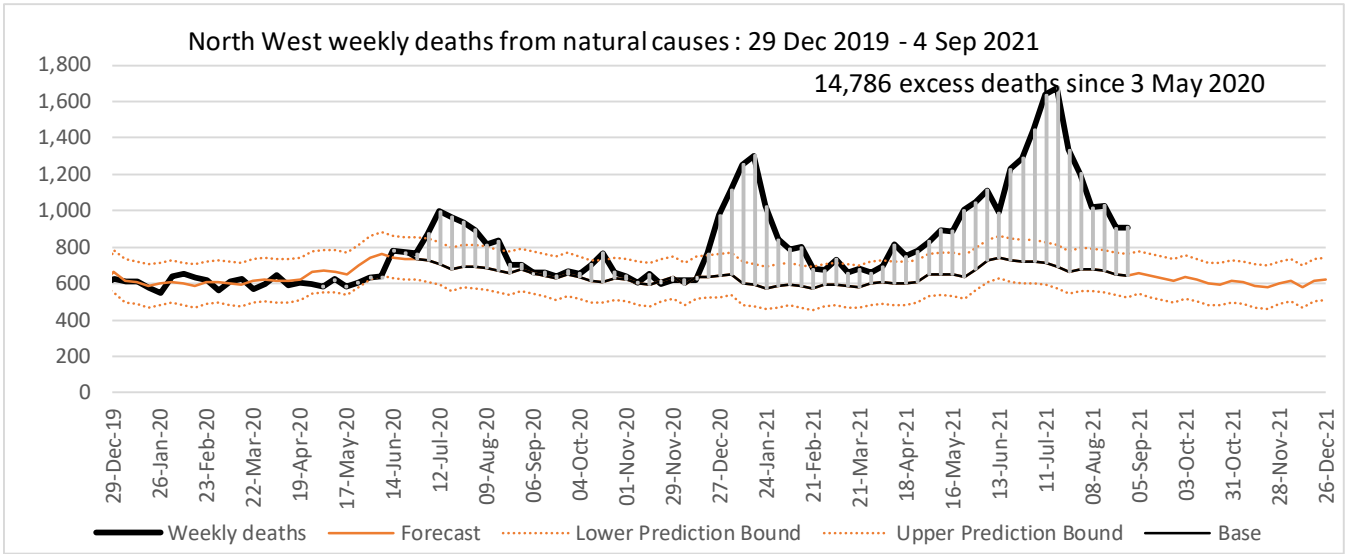
Numbers have been scaled to the estimated actual number of death and for the last week has been adjusted for delayed registrations



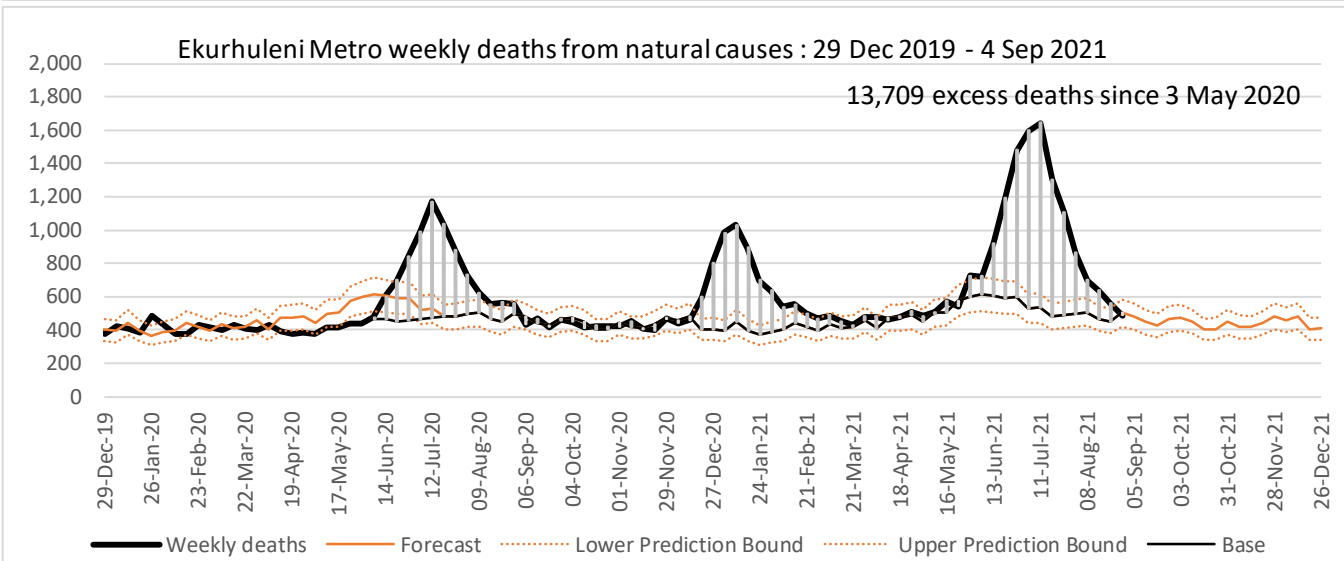
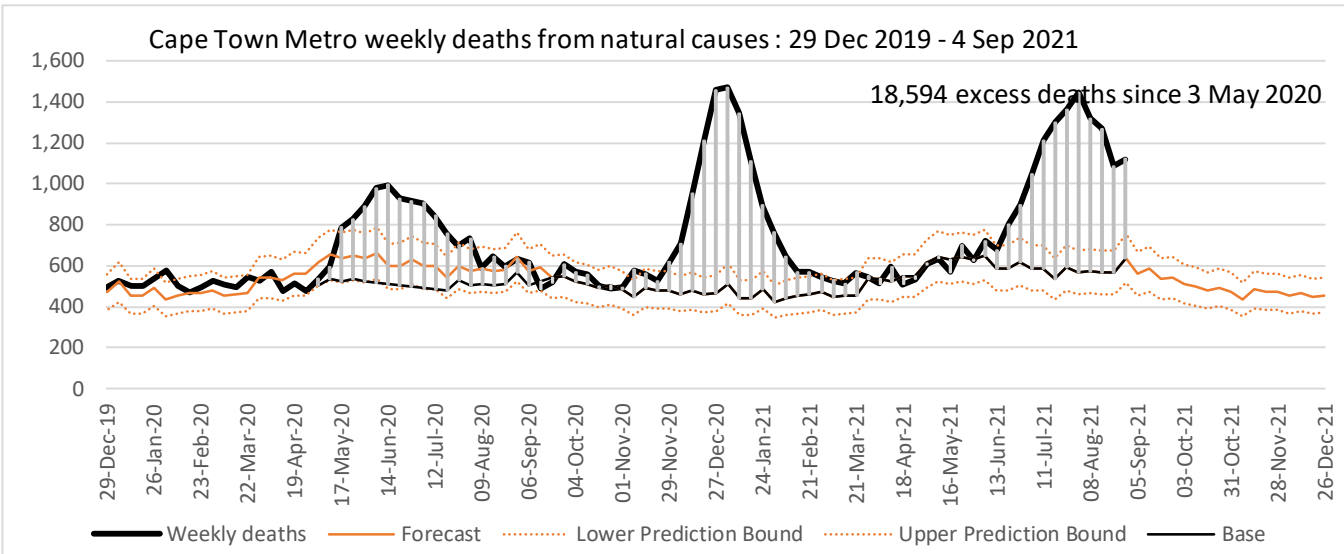
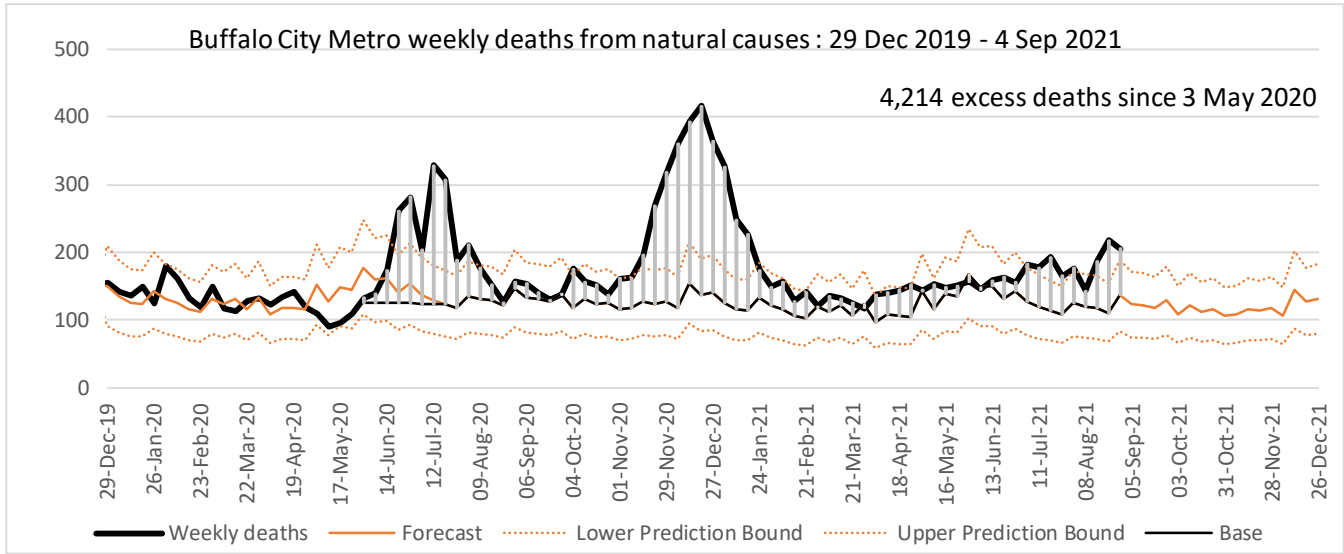
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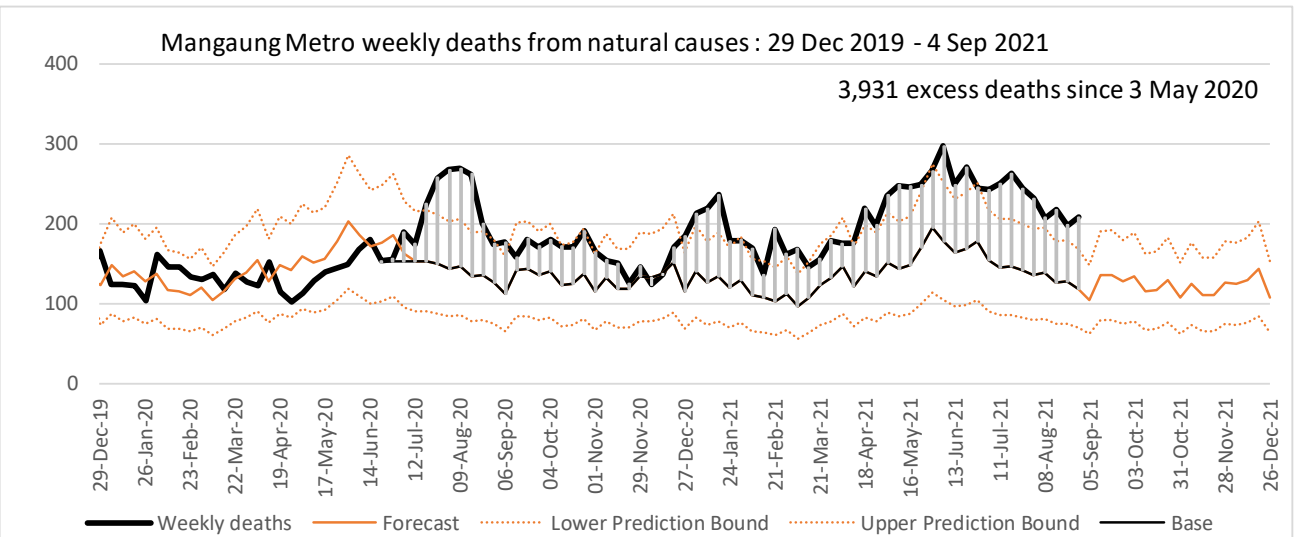
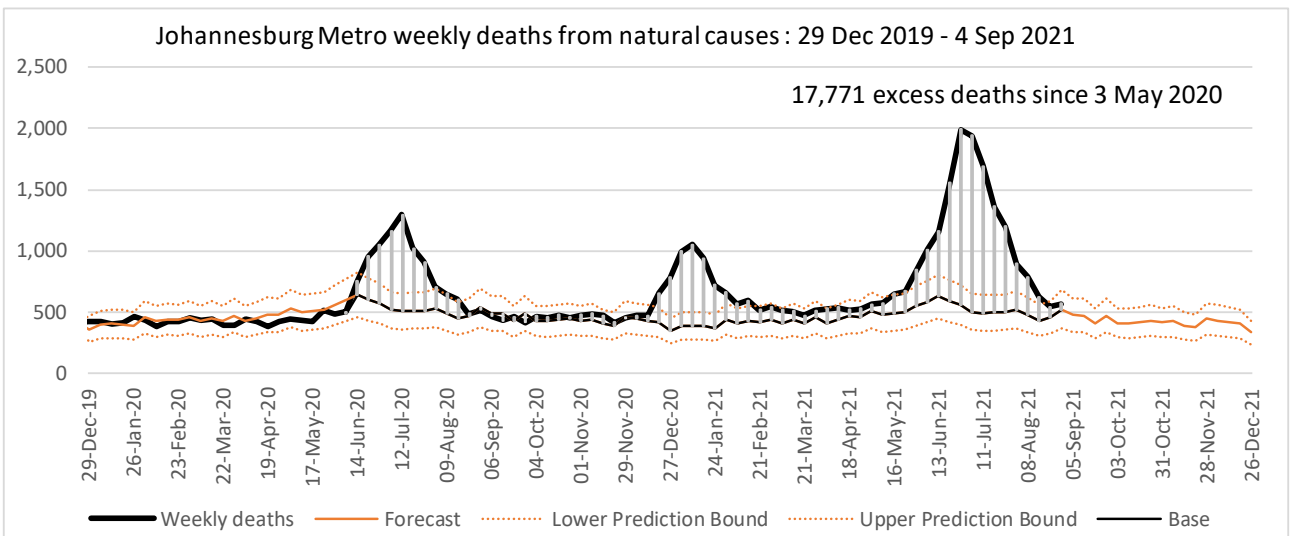
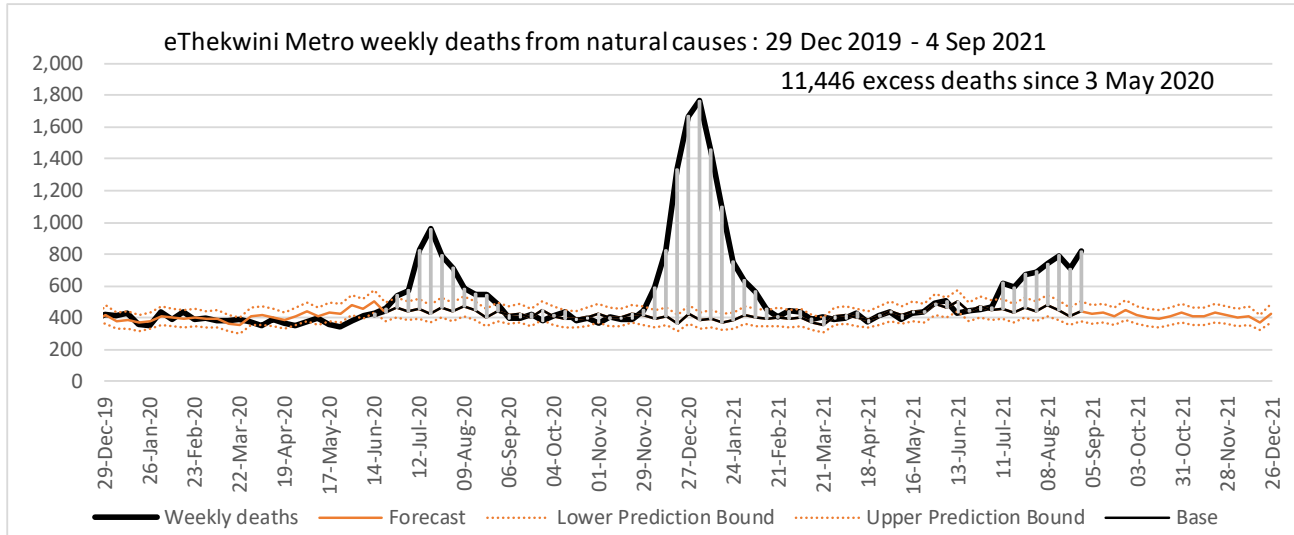
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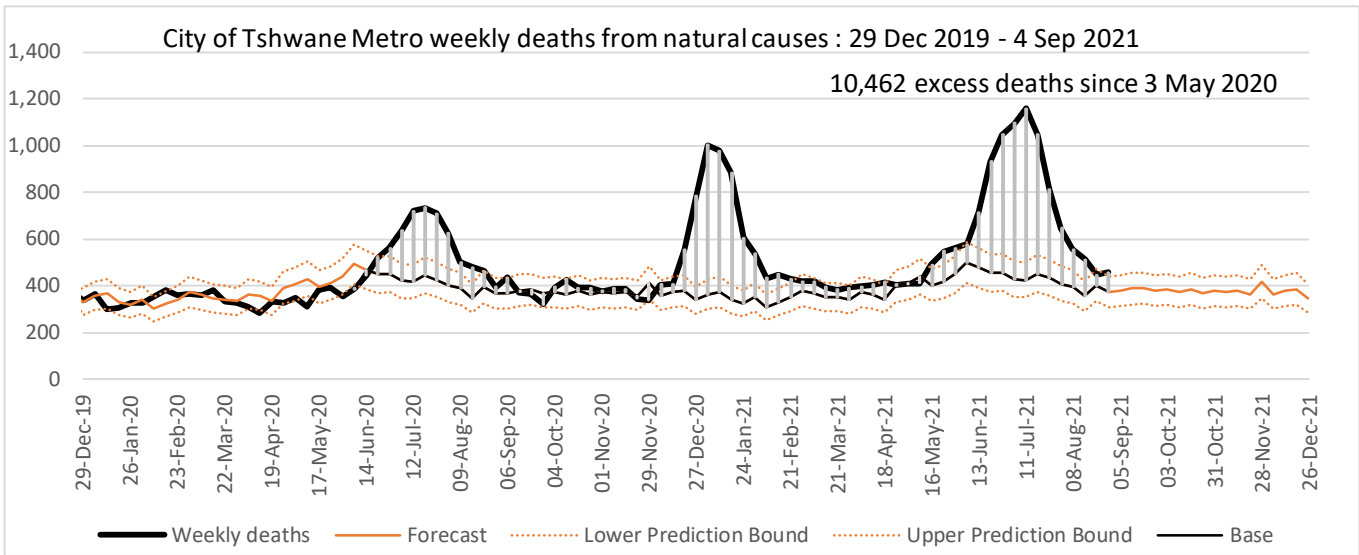
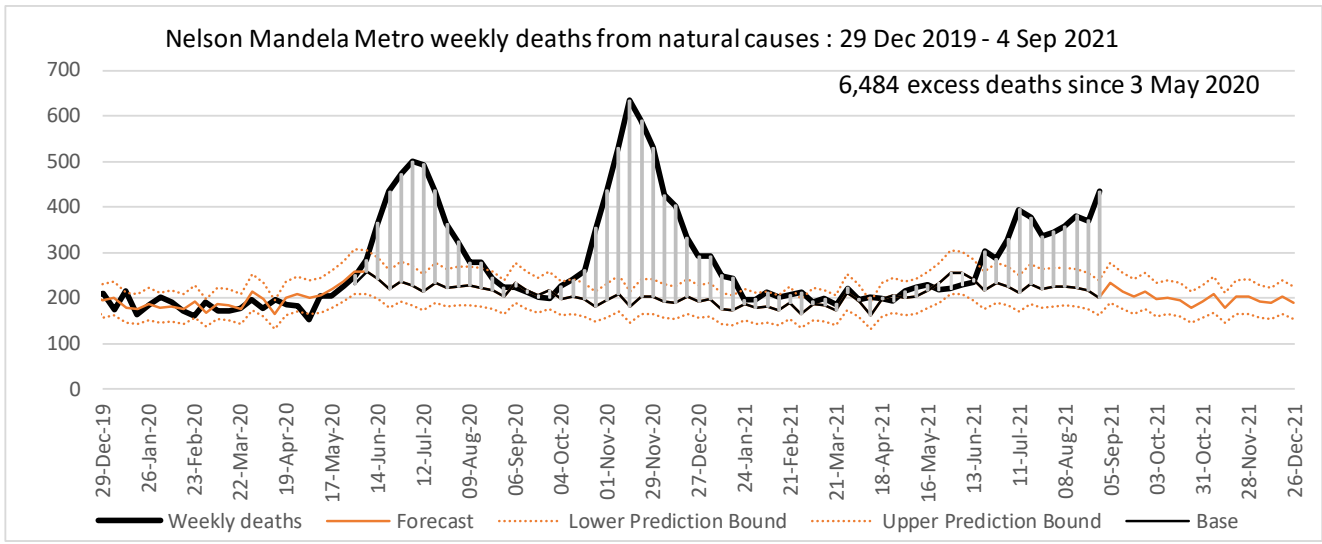
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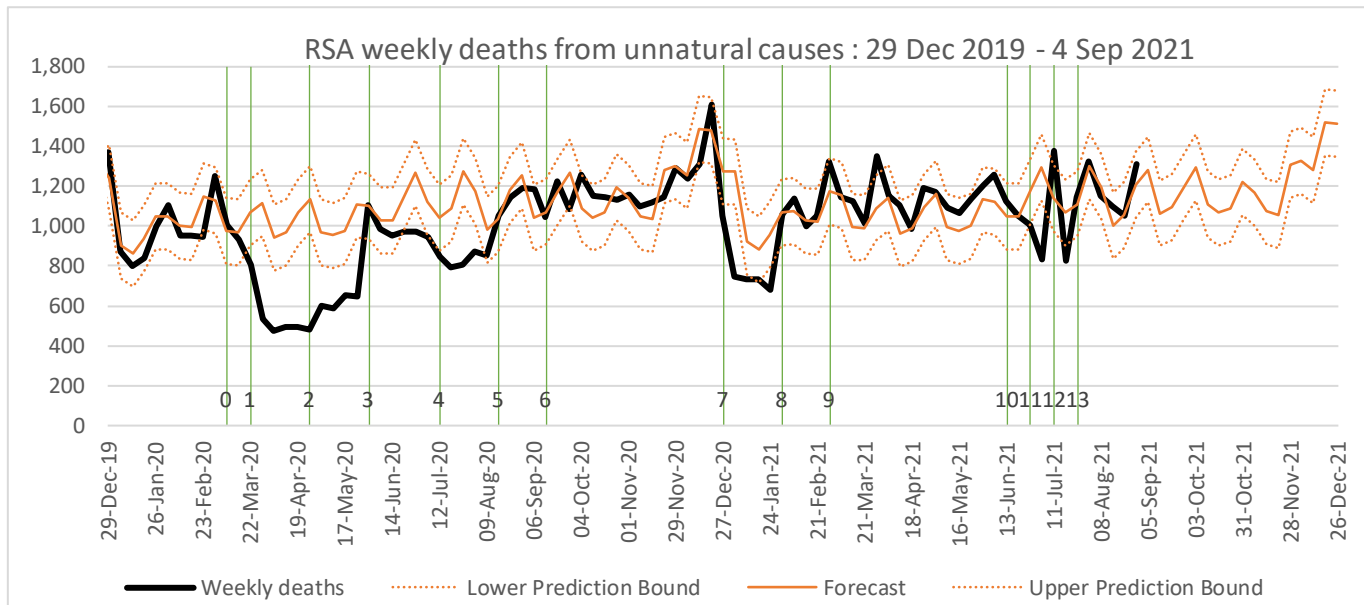
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Numbers have been scaled to the estimated actual number of death and for the last week has been adjusted for delayed registrations. As only a quarter to a third of unnatural deaths in the most recent week are processed at the time of the survey, the 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 (re-banning 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
- 10 Week lockdown changed to level 3 advanced (limiting alcohol and a extending of curfew)
- 11 Week lockdown changed to level 4, with re-banning of alcohol and longer curfew
- 12 Week of unrest in KZN and GT
- 13 Week lockdown changed to level 3 advanced (limiting alcohol and reducing curfew)