

REPORT ON WEEKLY DEATHS IN SOUTH AFRICA

16 – 22 OCTOBER 2022
(WEEK 42)

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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, Week 1 of 2021 is 3 January – 9 January 2021 and Week 1 of 2022 is 2 January – 8 January 2022.

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 1st wave of the pandemic, the predicted values have been used as the counterfactual.

General 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 deaths to a particular 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 of offices in the metro. 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 42** of 2022, covering the period **16 – 22 October 2022**. **Warning: Estimates for the most recent few weeks need to be treated with caution.**

The predicted numbers of weekly deaths in 2022 have been estimated using the models prepared for 2021 with population estimates for 2022. A methodological note outlining the approach for monitoring deaths during 2021 can be downloaded from the SAMRC website: [https://www.samrc.ac.za/sites/default/files/files/2021-01-24/Methodological Note on Predicted Weekly Deaths 20 Jan 2021.pdf](https://www.samrc.ac.za/sites/default/files/files/2021-01-24/Methodological%20Note%20on%20Predicted%20Weekly%20Deaths%20Jan%202021.pdf).

Briefly, the predicted values for the provinces and nationally are based on negative binomial models based on death data for the period 2014-2019. After reviewing trends in the data, separate negative binomial models have been fitted to the unnatural deaths for all provinces combined, and separate models for natural deaths for each of KwaZulu-Natal, Western Cape and the Northern Cape, and the 6 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. Predicted values for each metropolitan area continue to be based on the time-series model of data for 2018 and 2019 developed for 2020 as the trends in the sub-provincial data need further investigation to develop a comprehensive district-level model.

Trends

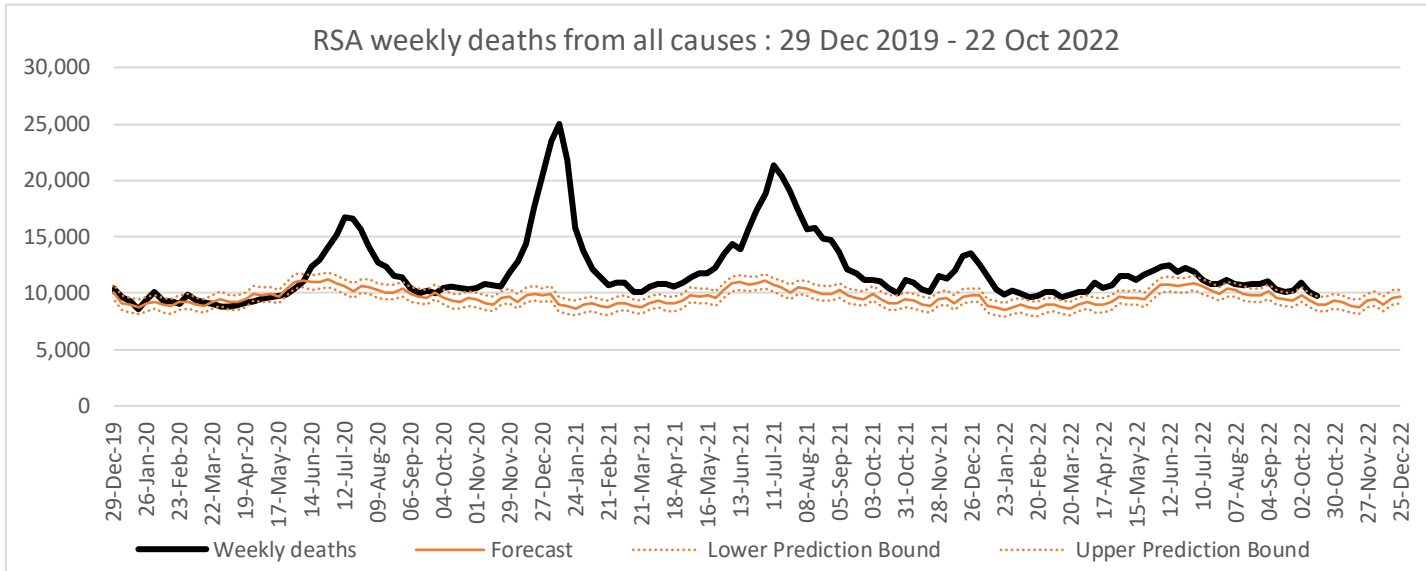
- The weekly number of deaths (all ages) from all causes has been tracking just above the upper prediction bound for several weeks. After a small peak in **Week 40** (2 – 8 Oct 2022) the numbers have dropped to **7,786** deaths in **Week 42** (16 – 22 Oct 2022). **Warning: Estimates for the most recent few weeks need to be treated with caution.**
- The number of excess deaths from natural causes (all ages) increased to **935** in **Week 40** (2 – 8 Oct 2022) and dropped to **630** in **Week 42** (16 – 22 Oct 2022).
- Since 3 May 2020, there has been a cumulative total of about **334,700** excess deaths from natural causes of persons all ages of which **85,000** occurred in 2020, **203,200** occurred in 2021 (since 3 Jan 2021) and **47,800** have occurred in 2022 by the end of **Week 42** (16 – 22 Oct 2022).

Week	Date	Weekly excess deaths from natural causes (all ages)	Cumulative excess since 3 May 2020 (all ages)	Cumulative excess since 2 January 2022 (all ages)
32	7-Aug-22 – 13-Aug-22	508	327,040	40,098
33	14-Aug-22 – 20-Aug-22	723	327,763	40,821
34	21-Aug-22 – 27-Aug-22	848	328,611	41,669
35	28-Aug-22 – 3-Sep-22	843	329,454	42,512
36	4-Sep-22 – 10-Sep-22	869	330,323	43,381
37	11-Sep-22 – 17-Sep-22	642	330,965	44,023
38	18-Sep-22 – 24-Sep-22	694	331,659	44,717
39	25-Sep-22 – 1-Oct-22	789	332,448	45,506
40	2-Oct-22 – 8-Oct-22	935	333,383	46,441
41	9-Oct-22 – 15-Oct-22	727	334,110	47,168
42	16-Oct-22 – 22-Oct-22	630	334,740	47,798

- For people under the age of 60, the number of natural deaths has been tracking close to the predicted value since mid-June 2022. The cumulative number of excess natural deaths for people under-60 years since **3 May 2020** was about **86,600**.
- The number of weekly excess deaths in the 60+ years age group has continued to track just above the upper prediction bound. In **Week 42** (16 – 22 Oct 2022), there was an decrease to **580** excess deaths with a p-score of 15%. The cumulative total number of excess natural deaths in this age group since **3 May 2020** is about **248,100**.

Week	Date	Weekly excess deaths from natural causes for persons 60+ years	p-score
32	7-Aug-22 – 13-Aug-22	539	12.1%
33	14-Aug-22 – 20-Aug-22	637	14.4%
34	21-Aug-22 – 27-Aug-22	732	17.0%
35	28-Aug-22 – 3-Sep-22	640	15.1%
36	4-Sep-22 – 10-Sep-22	602	13.9%
37	11-Sep-22 – 17-Sep-22	583	13.9%
38	18-Sep-22 – 24-Sep-22	584	14.2%
39	25-Sep-22 – 1-Oct-22	761	18.9%
40	2-Oct-22 – 8-Oct-22	778	18.5%
41	9-Oct-22 – 15-Oct-22	632	15.6%
42	16-Oct-22 – 22-Oct-22	580	14.8%

- The uptick in natural deaths experienced in **Week 40** (2 – 8 Oct 2022) in several provinces has subsided with the numbers in all provinces now falling close to the upper prediction bound or clearly within their prediction bounds.
- 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 42** (16 – 22 Oct 2022), the national excess death rate since 3 May 2020 was **562** per **100,000** population.
- The provinces with the highest cumulative numbers of excess deaths at the end of **Week 42** (16 – 22 Oct 2022), are, in order, **KwaZulu-Natal, Gauteng** 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 **Northern Cape, Eastern Cape** and **KwaZulu-Natal** using the age-standardised rates per capita (i.e., taking into account the age distribution of the provincial population). The **Western Cape**, followed by **Gauteng**, continue to have the lowest cumulative age standardised per capita rates.
- The number of unnatural deaths reached a high of **1,557** in **Week 15** (10 – 16 Apr 2022), the week of the floods in KwaZulu-Natal, and reverted to the predicted monthly cyclical pattern thereafter. After tracking within the prediction bounds for several weeks, numbers increased to the upper prediction bound in **Weeks 39 & 40**, thereafter falling closer to the predicted number with **1,202** deaths in **Week 42** (16 – 22 Oct 2022).



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

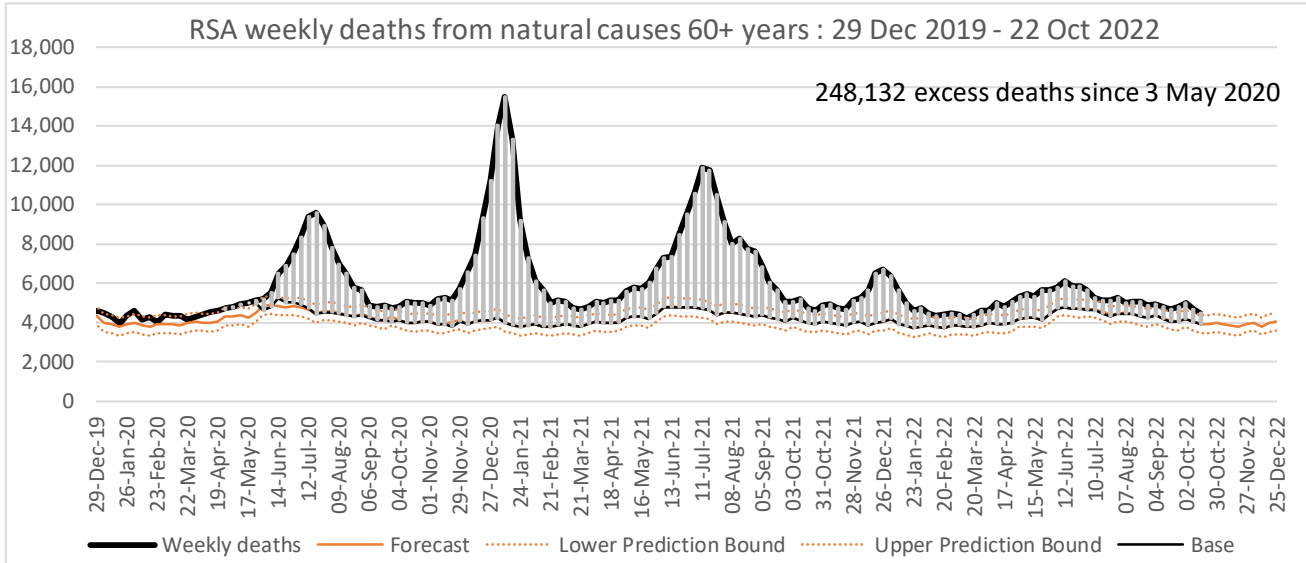
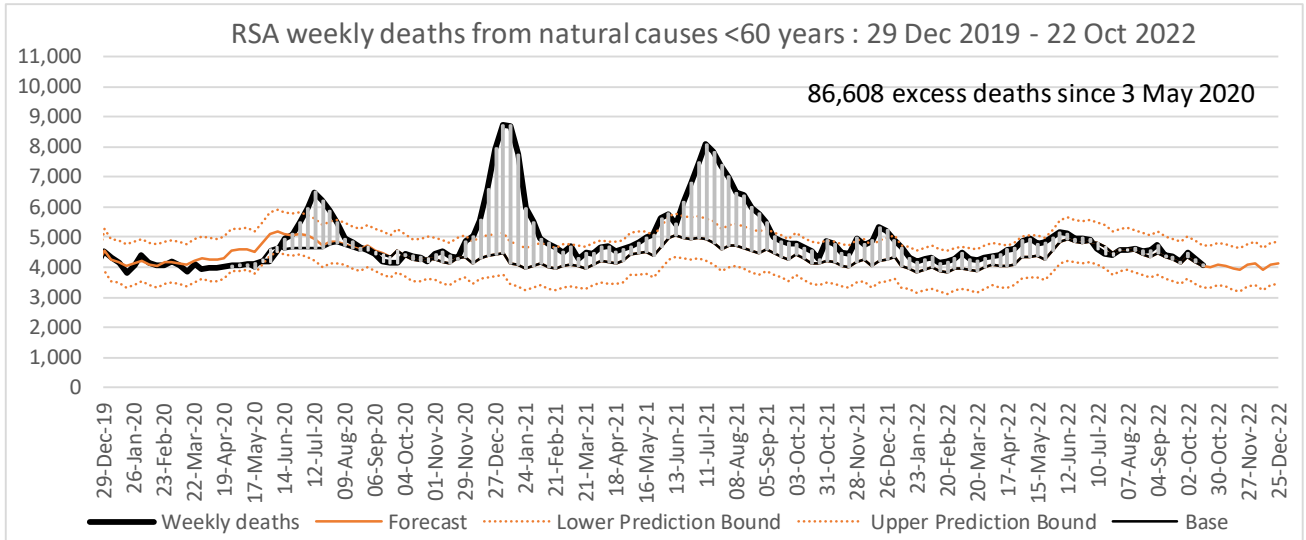
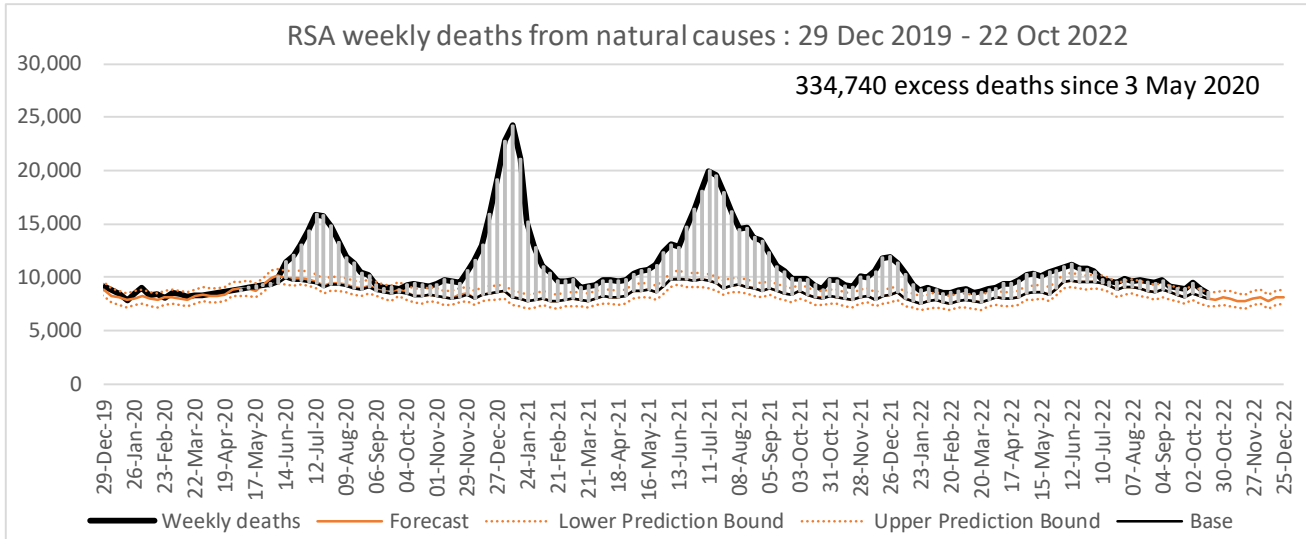
Table 1: Number of excess natural deaths of persons by province and metro relative to revised predicted number based on the observed drop during lockdown, South Africa 2020/22

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 – 22 Oct 22	334,740	562	562
Province				
Eastern Cape	31 May 20 – 22 Oct 22	57,975	881	710
Free State	21 Jun 20 – 22 Oct 22	19,275	662	662
Gauteng	7 Jun 20 – 22 Oct 22	65,989	423	465
KwaZulu-Natal	7 Jun 20 – 22 Oct 22	68,759	601	691
Limpopo	21 Jun 20 – 22 Oct 22	37,353	632	553
Mpumalanga	21 Jun 20 – 22 Oct 22	25,712	534	576
Northern Cape	28 Jun 20 – 22 Oct 22	10,187	870	814
North West	28 Jun 20 – 22 Oct 22	18,275	454	466
Western Cape	3 May 20 – 22 Oct 22	31,214	442	389
Metropolitan Municipality				
Buffalo City	31 May 20 – 22 Oct 22	7,426		
City of Cape Town	3 May 20 – 22 Oct 22	24,318		
Ekurhuleni	7 Jun 20 – 22 Oct 22	14,911		
eThekweni	14 Jun 20 – 22 Oct 22	14,115		
Johannesburg	7 Jun 20 – 22 Oct 22	22,867		
Mangaung	21 Jun 20 – 22 Oct 22	6,070		
Nelson Mandela Bay	31 May 20 – 22 Oct 22	8,970		
City of Tshwane	7 Jun 20 – 22 Oct 22	12,078		

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.

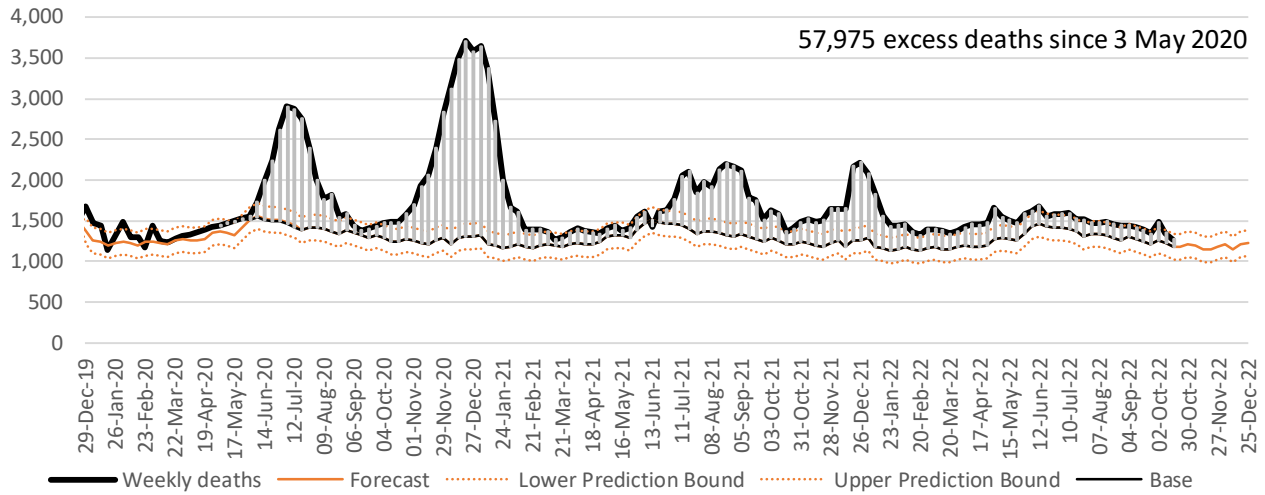
Table 2: Number of excess deaths from all causes of persons by province and metro relative to predicted number based on historical trend, South Africa 2020/22

Region	Excess deaths vs forecast	Excess deaths per 100,000 population
South Africa	339,501	570
Province		
Eastern Cape	60,947	926
Free State	19,133	657
Gauteng	63,258	405
KwaZulu-Natal	72,638	635
Limpopo	37,962	643
Mpumalanga	25,587	532
Northern Cape	10,124	865
North West	17,722	440
Western Cape	32,129	455
Metropolitan Municipality		
Buffalo City	8,040	
City of Cape Town	23,060	
Ekurhuleni	13,734	
eThekweni	13,219	
Johannesburg	23,372	
Mangaung	6,930	
Nelson Mandela Bay	9,107	
City of Tshwane	12,689	

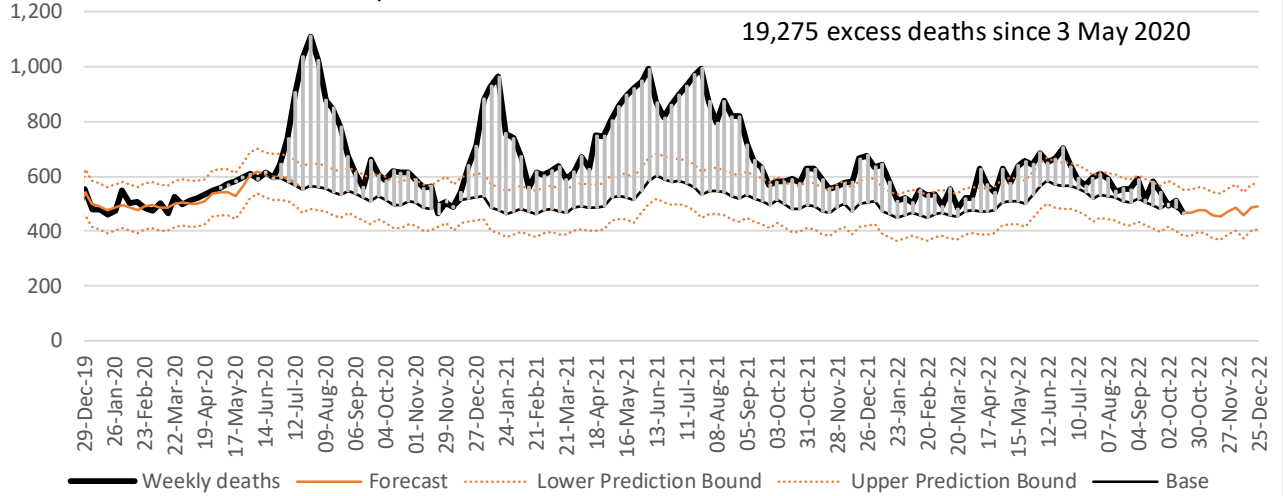


Numbers have been scaled to the estimated actual number of death and for the last week has been adjusted for delayed registrations

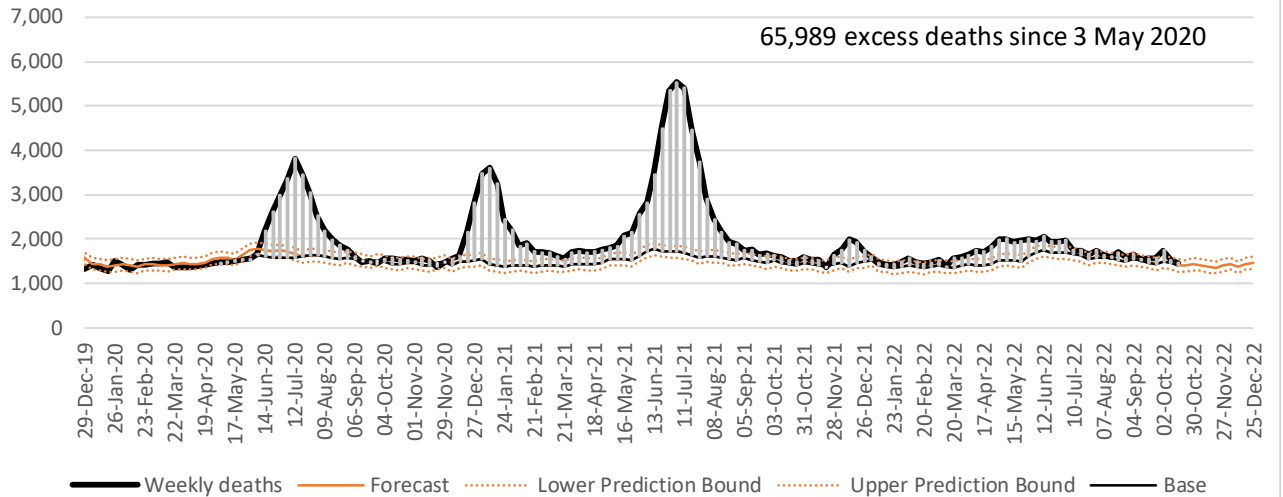
Eastern Cape weekly deaths from natural causes : 29 Dec 2019 - 22 Oct 2022



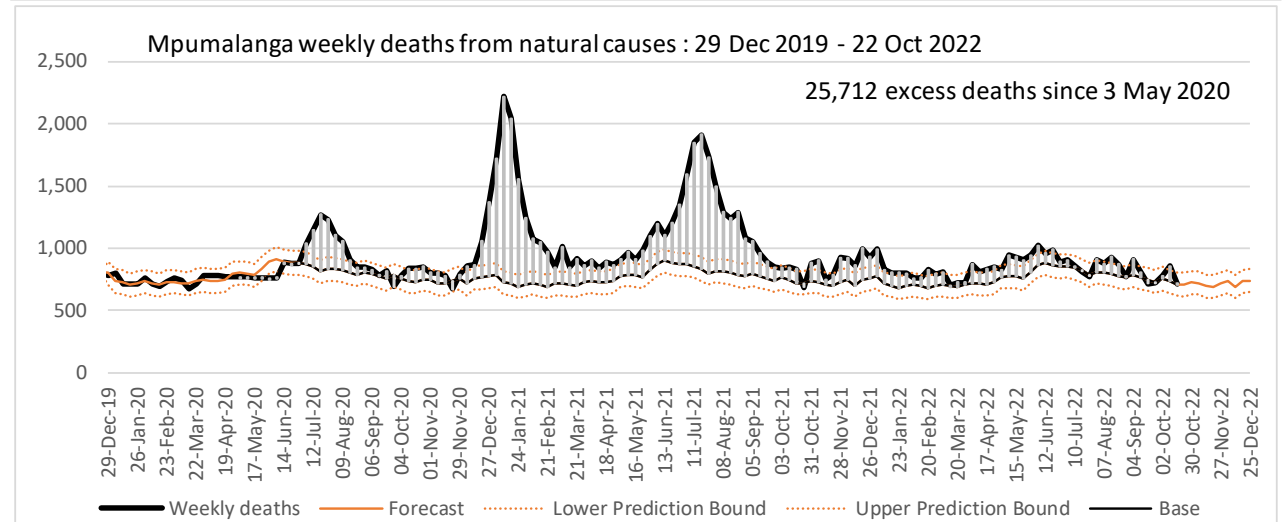
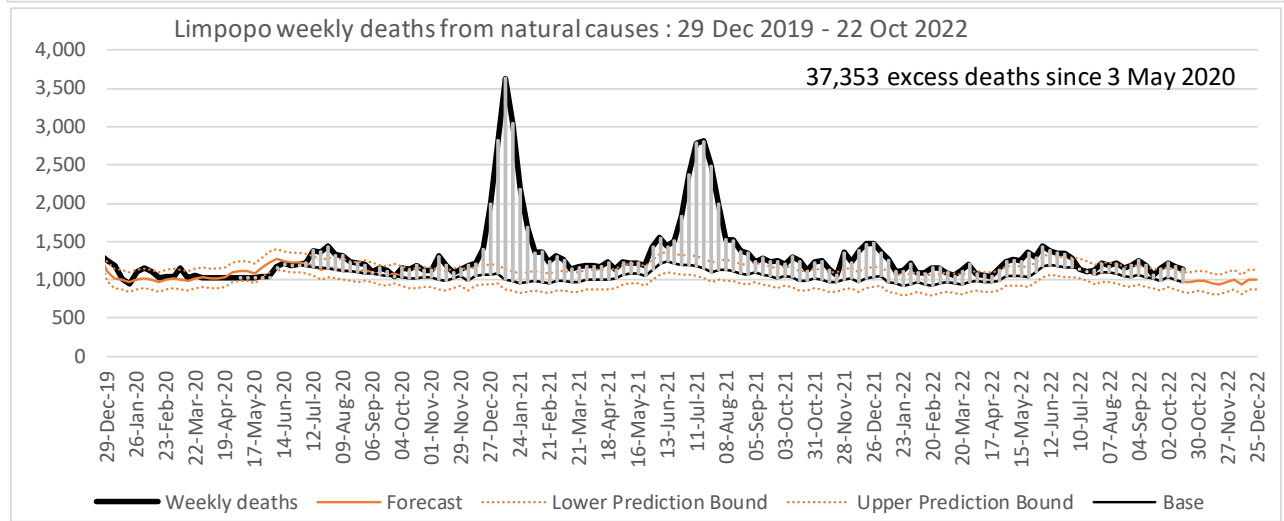
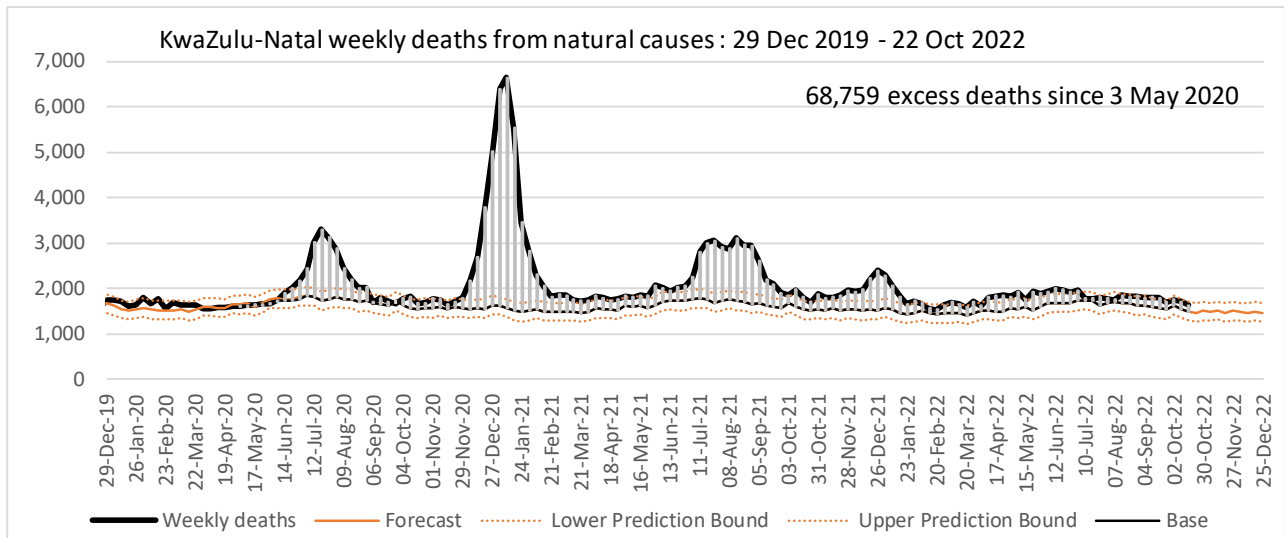
Free State weekly deaths from natural causes : 29 Dec 2019 - 22 Oct 2022



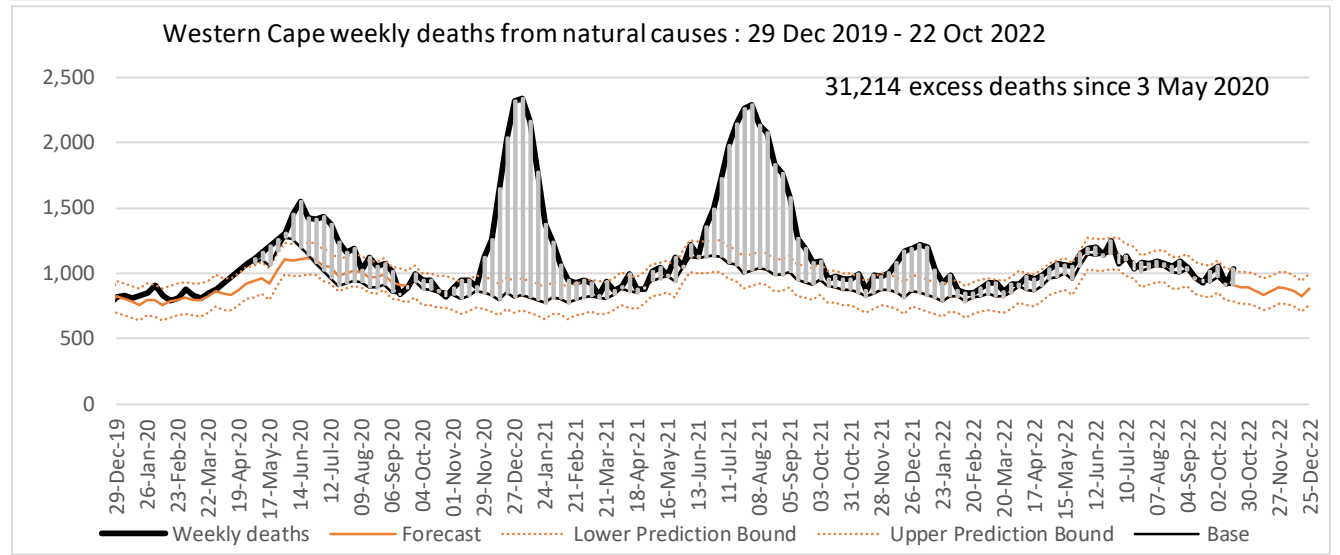
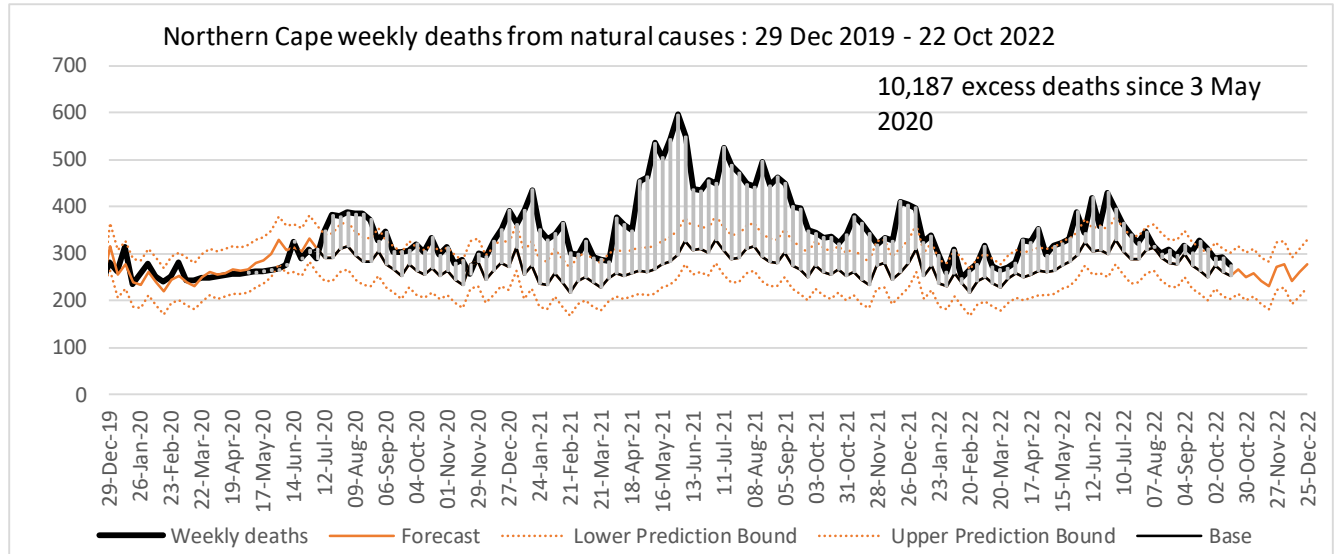
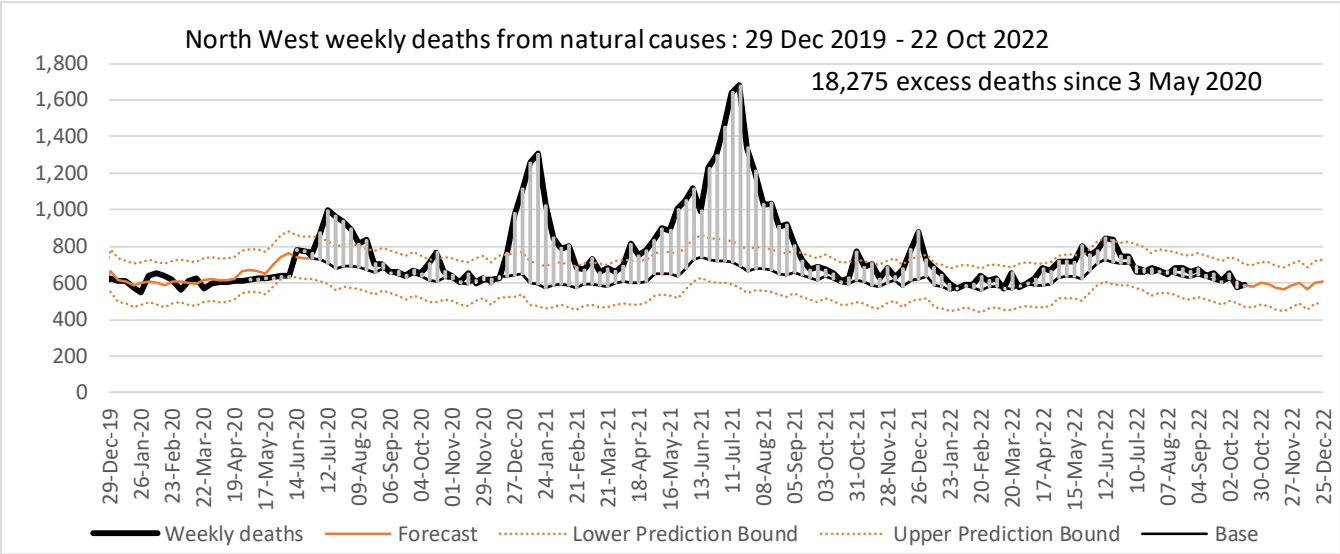
Gauteng weekly deaths from natural causes : 29 Dec 2019 - 22 Oct 2022



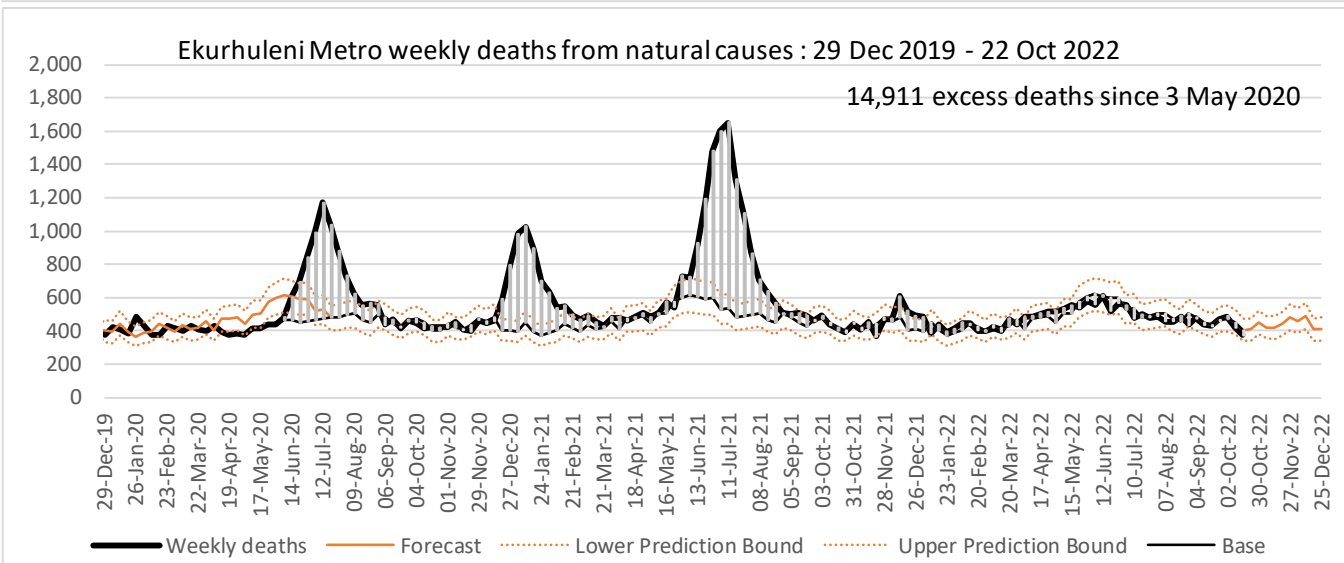
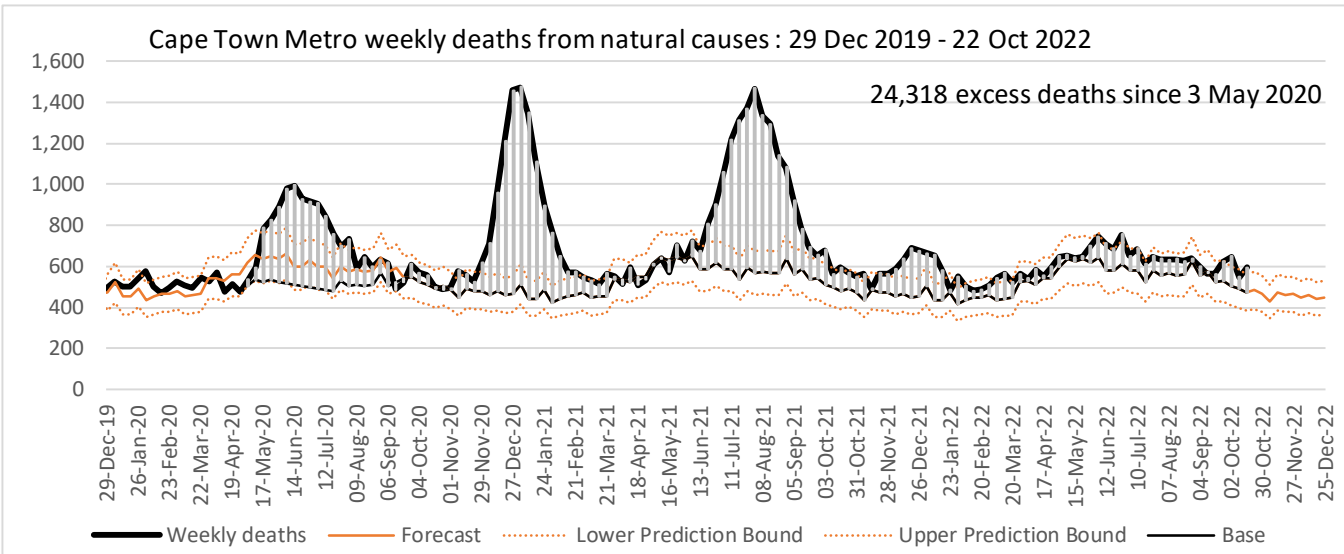
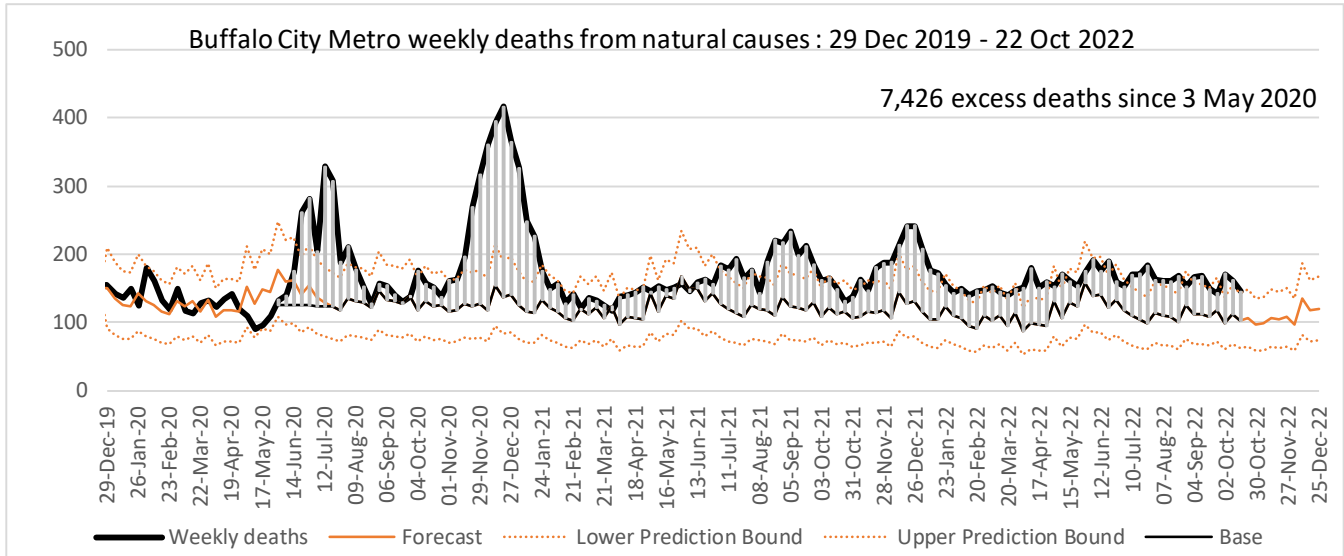
Numbers have been scaled to the estimated actual number of death and for the last week has been adjusted for delayed registrations



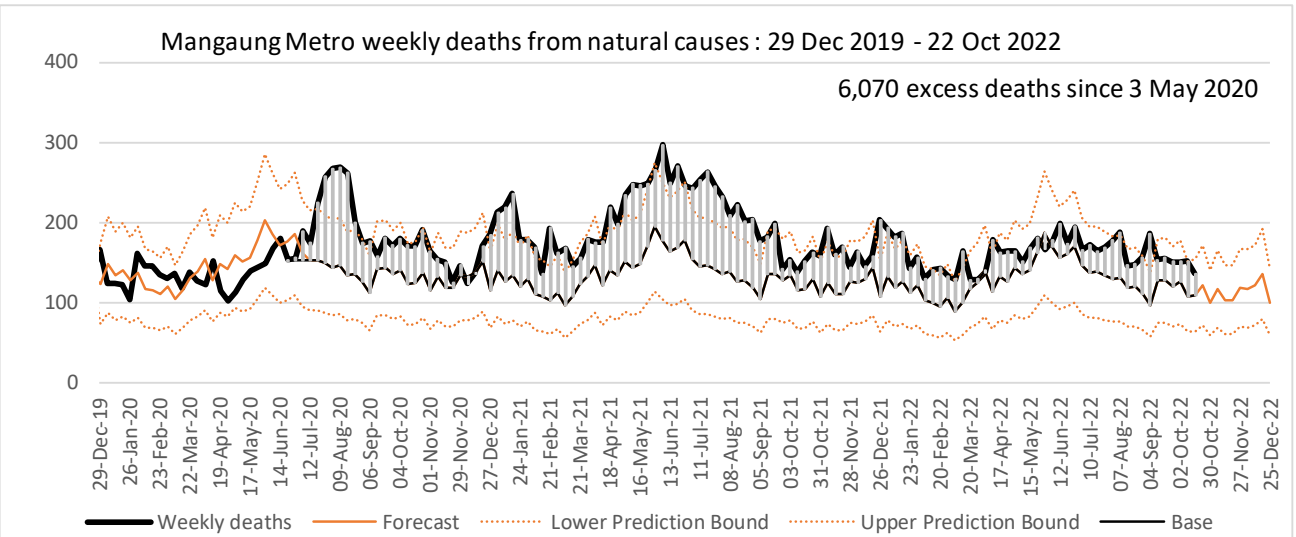
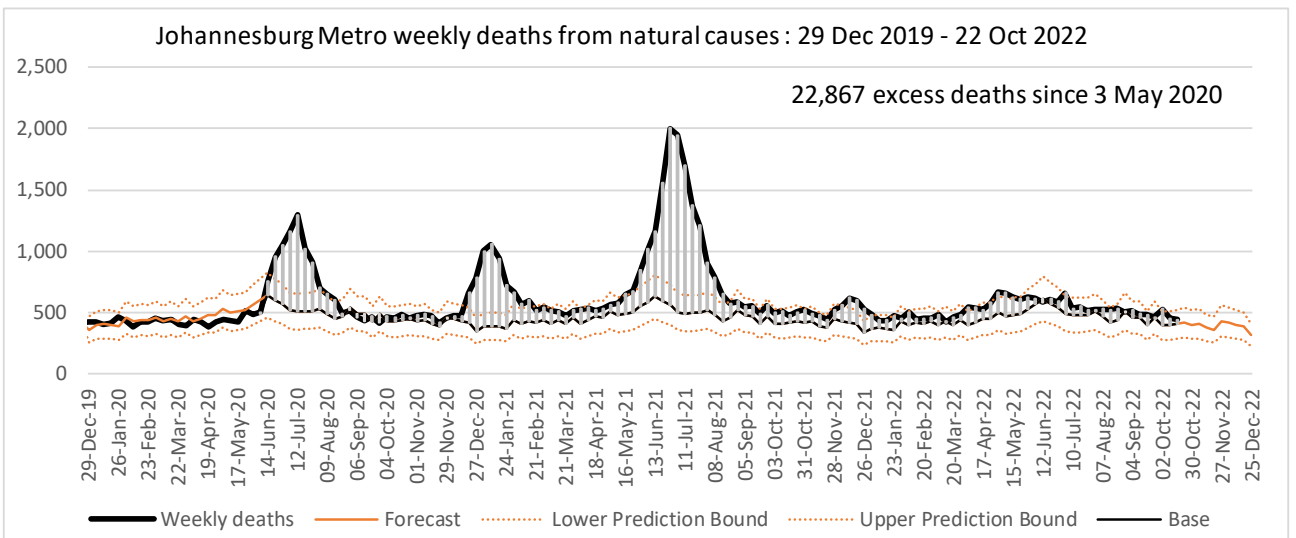
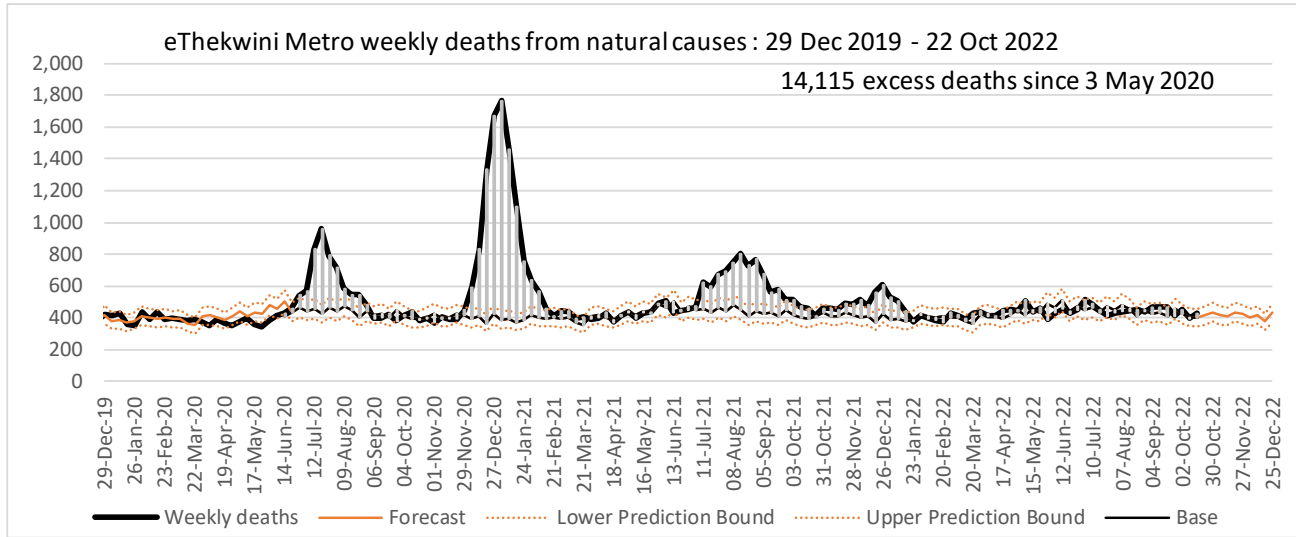
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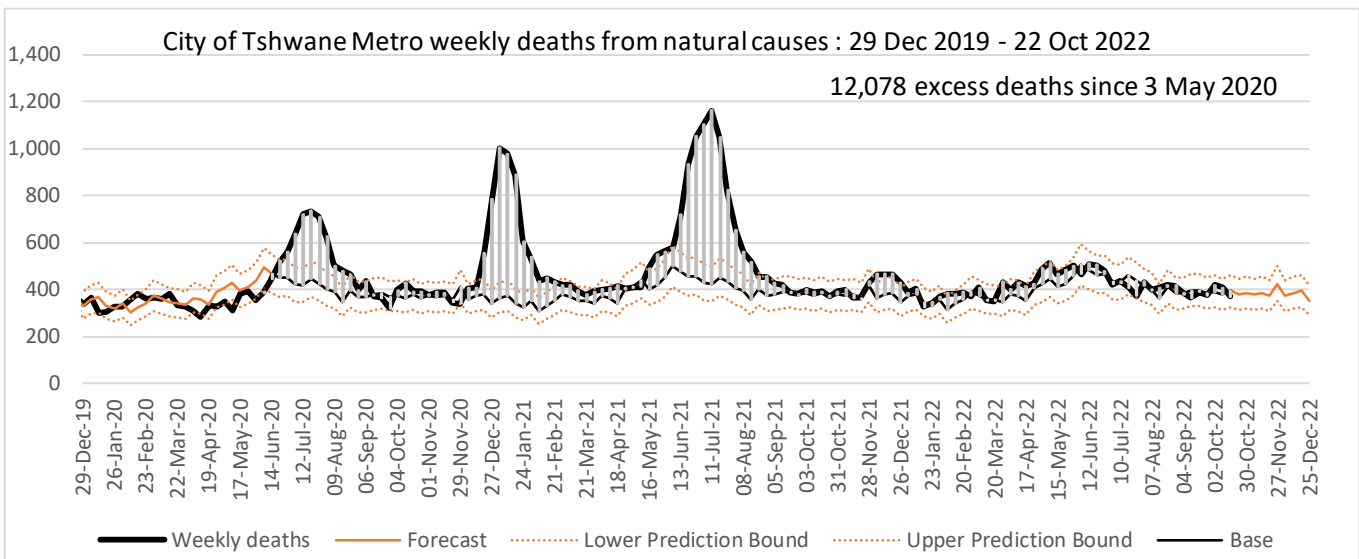
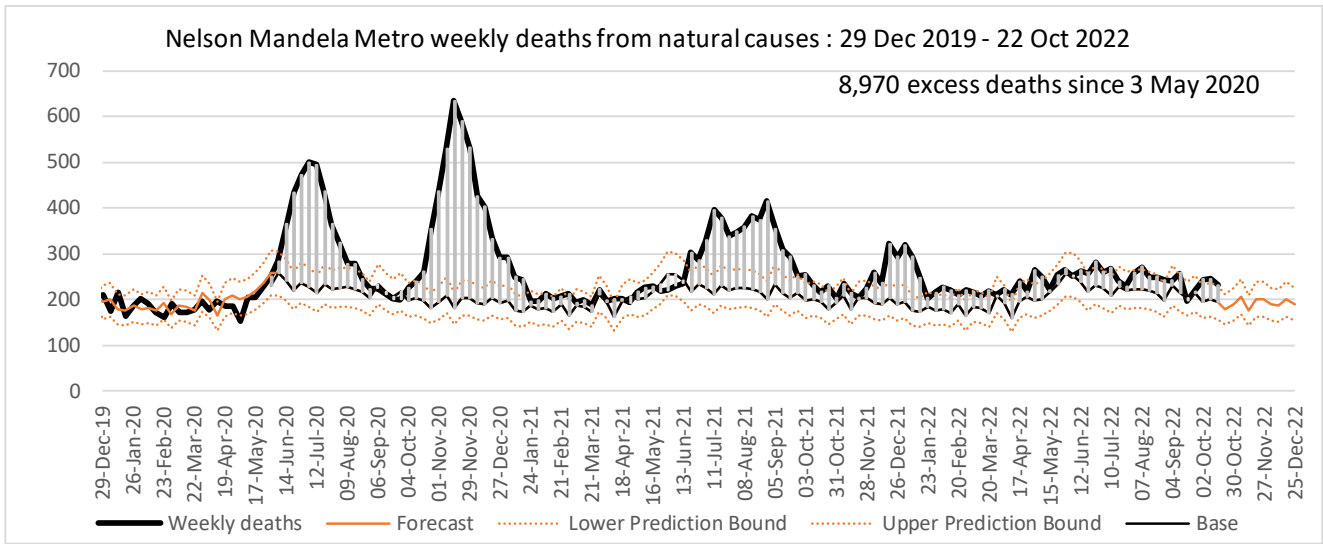
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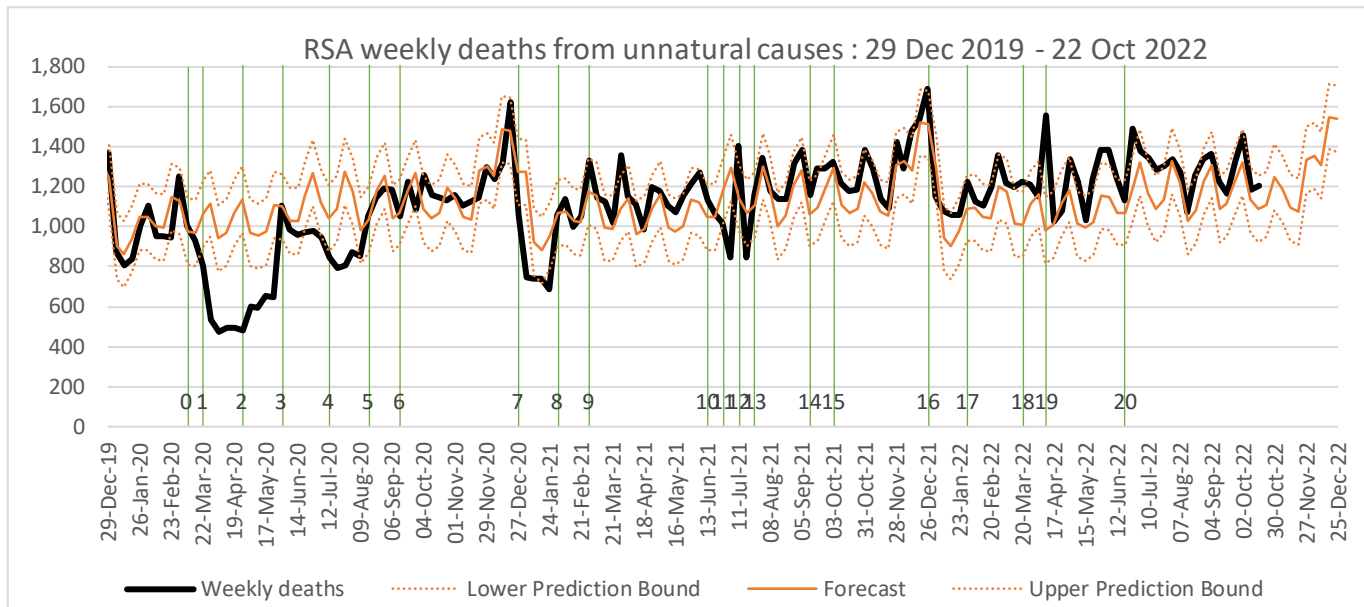
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Numbers have been scaled to the estimated actual number of death and for the last week has been adjusted for delayed registrations. As only a quarter to a third of unnatural deaths in the most recent week are processed at the time of the survey, the 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, curfew 9pm-4am
- 12 Week of unrest in KZN and GT
- 13 Week lockdown changed to level 3 advanced (alcohol 4 days/w, curfew 10pm-4am)
- 14 Week lockdown changed to level 2 advanced (alcohol 5 days/w, curfew 11pm-4am)
- 15 Week lockdown changed to level 1 advanced (no alcohol post 11pm, curfew 12pm-4am, large gatherings)
- 16 Week lockdown level 1 advanced (removed limits on alcohol & curfew, allowed larger gatherings)
- 17 Week lockdown level 1 advanced (allowed full school attendance, reduced isolation & quarantine requirements)
- 18 Week lockdown level 1 advanced (no masks outdoors, larger gathering permitted, no travel testing for vaccinated)
- 19 KZN floods
- 20 All COVID restrictions lifted on 22 June