MONITORING MORTALITY AND EXCESS DEATHS IN SOUTH AFRICA

PRESENTATION TO WEBINAR ON
THE DEMOGRAPHIC IMPACT OF COVID-19
21 OCTOBER 2020

DEBBIE BRADSHAW



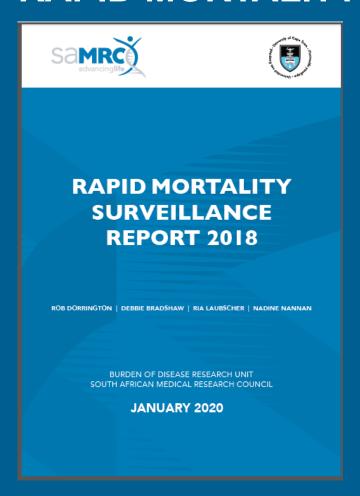
BACKGROUND

- South Africa has a well established civil registration and vital statistics system
- In the past 25 years, completeness of death registration has improved but there are challenges with the quality of cause of death information

- ~ 14.2 % are ill-defined natural causes
- ~ 16.3 % are not-sufficiently specified as underlying cause
- extensive mis-attribution of HIV/AIDS deaths
- incomplete information about manner of death for injuries
- Annual cause of death report takes about 3 years to be released



RAPID MORTALITY SURVEILLANCE



- SAMRC obtains data for the deaths registered on the National Population Register from the Department of Home Affairs on a monthly basis since 2001
- Completeness of registration is estimated, after additional data are obtained from NDOH and Stats SA ongoing analyses of completeness based on death distribution methods, comparison with direct and indirect estimates from censuses and surveys
- Annual Rapid Mortality Report gives empirical estimates of mortality indicators for the country such as life expectancy, infant and under-5 mortality rate etc.



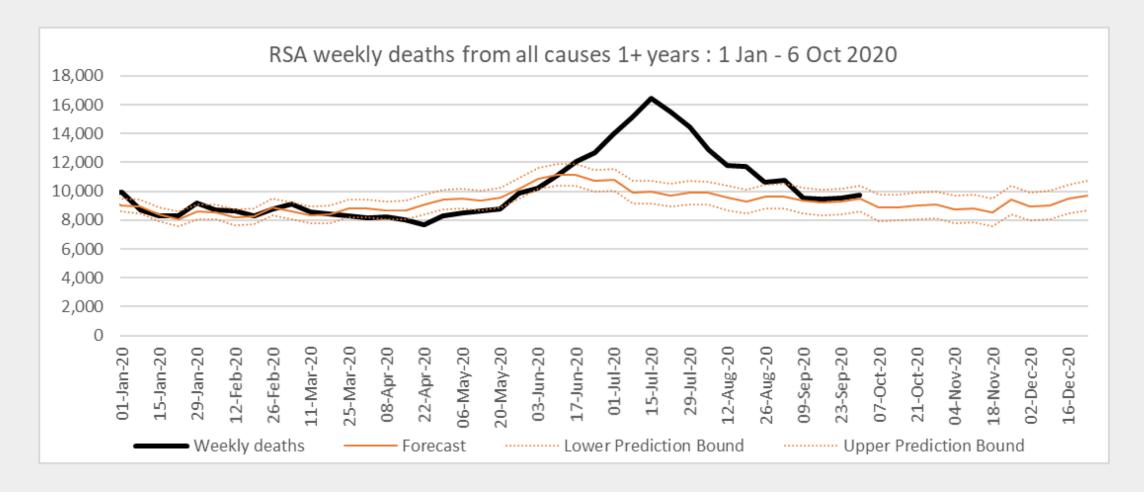
FROM ANNUAL TO WEEKLY RMS

- With COVID-19 in mind, we investigated the pattern of weekly data up till end Feb 2020 => high proportions registered within 2 weeks of death
- Requested DHA to provide data on a weekly basis during March
- The number of deaths changes during the year => estimated the predicted weekly numbers of deaths using time series analysis from previous two years after adjusting for completeness of registration
- Estimate the deaths in the last week that are still to be registered



The number of weekly deaths peaked in the week 15-22 July 2020

- Black line shows the weekly number of deaths in 2020
- Orange line shows the number predicted from historical data with bounds of uncertainty a lower bound and upper bound





EXCESS MORTALITY

Used in epidemiology and public health to measure the mortality impact of a crisis when not all causes of death are known.

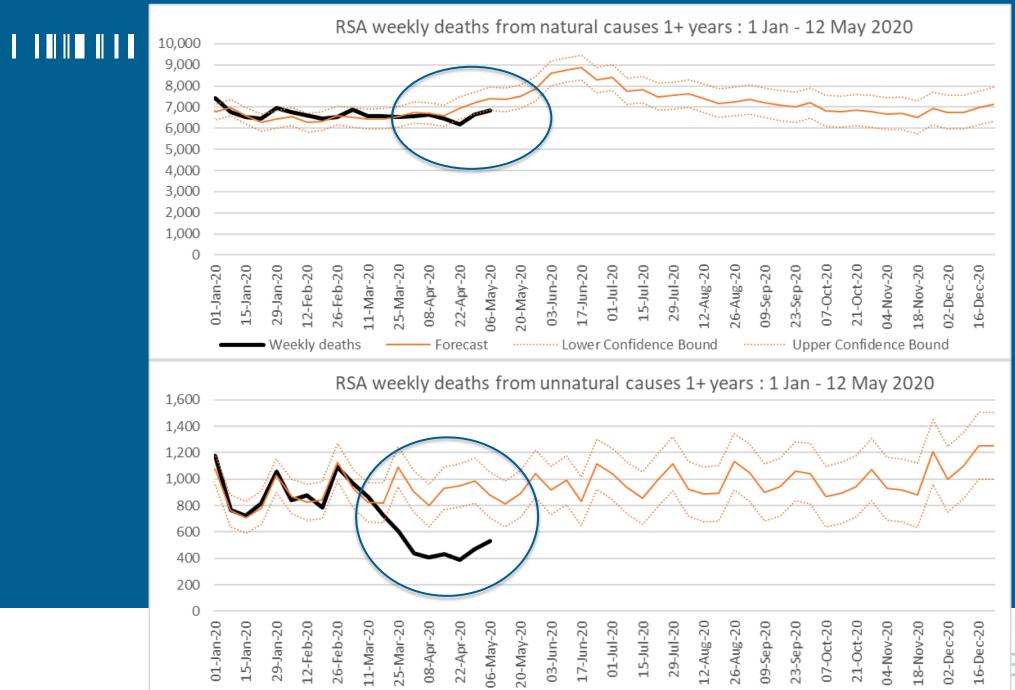
The World Health Organization defines 'EXCESS MORTALITY' as:

"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."









Forecast

..... Lower Confidence Bound

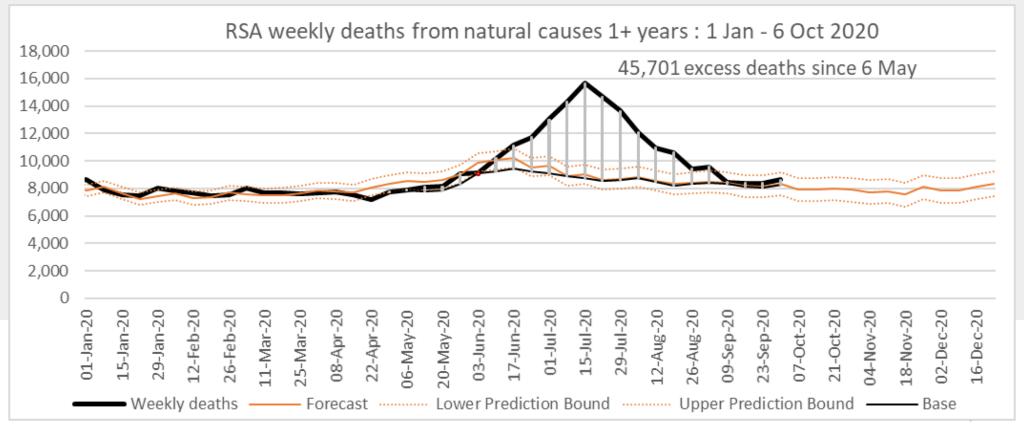
Weekly deaths



Upper Confidence Bound

Excess natural deaths using adjusted baseline to account for lower deaths during lockdown:-

- Base set to continue parallel to the predicted, at the level before confirmed COVID-19 deaths were identified
- Transitioned to meet the predicted level after the winter peak
- This measure of excess deaths aims to identify natural deaths that might have resulted from the direct and indirect effects of COVID-19

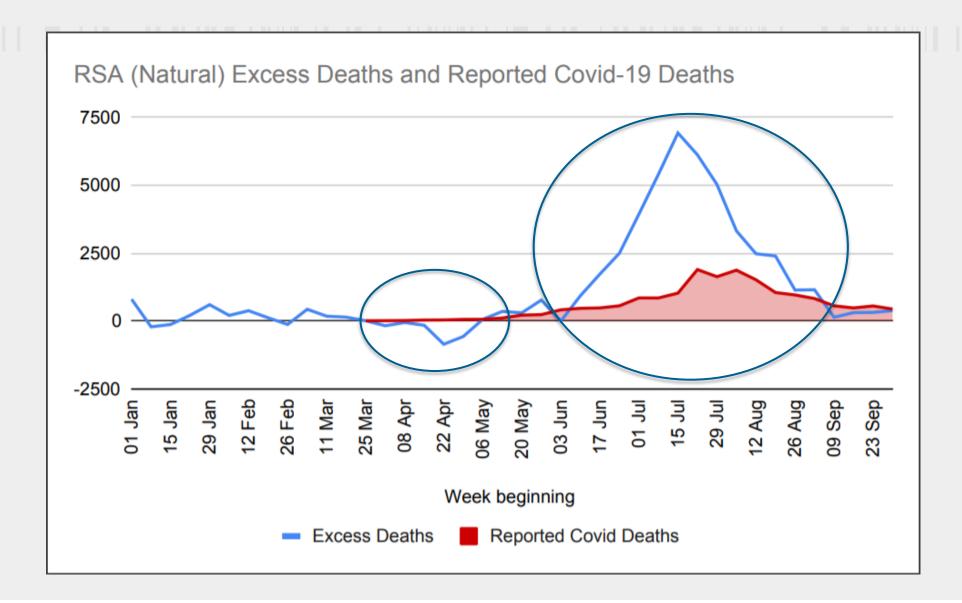


UCT Centre for Actuarial Research

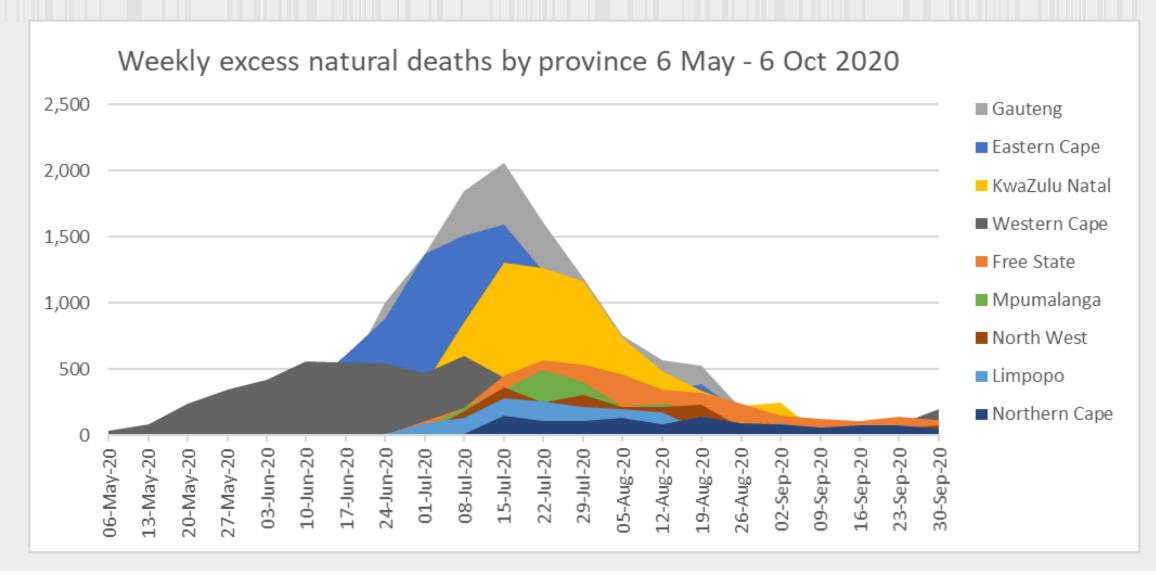
WEEK 40: 30 SEP - 6 OCT 2020

Source	Cumulative Number
Confirmed COVID-19 deaths	16,664
Excess natural deaths vs revised base	45,701
Excess natural deaths vs forecast	40,373













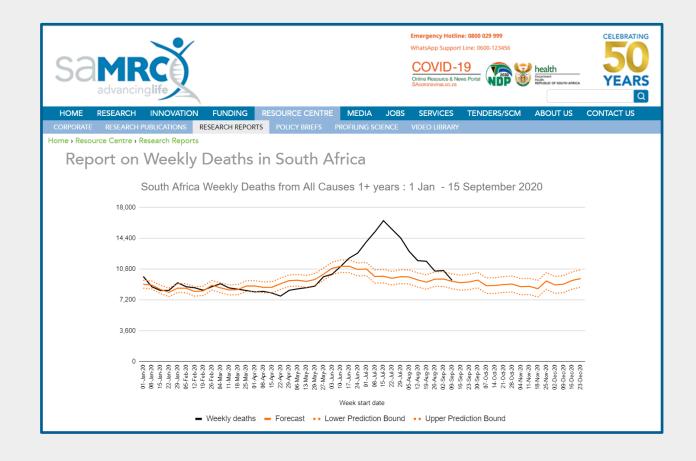
CONCLUSIONS

- There are world-wide challenges with COVID-19 data related to the availability of laboratory infrastructure and testing kits, the testing strategy as well as reporting protocols sub-Saharan Africa is particularly disadvantaged with limited laboratory infrastructure and limited mortality data systems
- Weekly tracking of deaths in near real-time has provided South Africa with an important "bird's eye view" of the pandemic to supplement other data - and indicates that the confirmed COVID-19 deaths understate the true impact of the pandemic
- Additional information is required to establish whether the excess deaths are due to COVID-19, an overburdened health service, fear of using the health service or the a consequence of stringent lockdown – but the temporal correspondence across provinces and age pattern of excess deaths suggest a large proportion are likely related to COVID-19



Acknowledgments

- Ria Laubscher for data management and analysis
- Prof Rob Dorrington and Prof Tom Moultrie for demographic analysis
- Department of Home Affairs are thanked for providing data



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

