

Suicide Facts:

Deaths and intentional self-harm hospitalisations

2010

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This publication reports information provided to the Ministry of Health's Mortality Collection and the National Minimum Dataset (Hospital Events) by district health boards. It has not been possible to verify the accuracy of information in some instances where additional information, such as medical records, would be required to do so. It is important to note that because these national collections are dynamic, it is necessary to wait a certain period before publishing a record of the information in them. This reduces the chances of amendments to information after publication.

Citation: Ministry of Health. 2012. *Suicide Facts: Deaths and intentional self-harm hospitalisations 2010*. Wellington: Ministry of Health.

Published in August 2012 by the
Ministry of Health
PO Box 5013, Wellington 6145, New Zealand

ISBN: 978-0-478-39339-2 (print)
ISBN: 978-0-478-38340-8 (online)
HP 5508

This document is available at www.health.govt.nz



MANATŪ HAUORA

Preface

Suicide and suicidal behaviours are a major health and social issue in New Zealand. Each year approximately 500 people take their own lives. This figure represents a tragic loss of potential and a tremendous impact on those families, friends, workplaces and communities that are affected by the loss of someone through suicide.

There are also at least 2500 admissions to hospital for intentional self-harm injuries every year. For data comparability purposes, this figure excludes certain categories of patient. These exclusions allow the best possible identification of real trends in intentional self-harm behaviour within the New Zealand population, as well as optimal regional comparison. More details about exclusions are provided in the 'Technical notes' section. It is important to recognise that the motivation for intentional self-harm varies, and therefore hospitalisation data for self-harm is not a measure of suicide attempts.

Understanding the numbers, trends and demographic profiles of people who suicide or seriously harm themselves is important for policy makers, clinicians and others who work to prevent suicide and intentional self-harm. This publication presents data by age, sex, youth, ethnicity, deprivation and district health board (DHB) area. It also includes comparisons with international data. While this publication provides the latest suicide and intentional self-harm hospitalisation data for 2010, it does not attempt to explain causes of suicidal behaviour or discuss measures to reduce suicide or intentional self-harm.

Suicide prevention in New Zealand is guided by the *New Zealand Suicide Prevention Strategy 2006–2016* and the *New Zealand Suicide Prevention Action Plan 2008–2012*. *Suicide Facts 2010* and other annual data updates assist in monitoring and evaluating the progress and success of the implementation of the strategy and action plan.

Comparability of this publication with other statistical publications on suicide

The numbers of deaths from suicide recorded in this publication differ from those released by the Chief Coroner, for a number of reasons. The Chief Coroner's data covers different time periods (years ended 30 June rather than the calendar years used in this publication). Also, the Chief Coroner's data is subject to considerable revision, as the coronial figures include deaths recorded with a provisional cause: that is, deaths for which the cause of death has not been finally determined to be suicide. The Coroner's data is, therefore, a progress count of all self-inflicted deaths that have been referred into the coronial system, and as such can change significantly over time.

The Ministry reports on those deaths that have been determined to be suicide after a completed Coronal process or those that have been provisionally flagged as intentionally self-inflicted deaths before the final Coroner's verdict has been made.

Because of changes in methodology, it is not advisable to compare self-harm hospitalisation data in this publication to *Suicide Facts* documents published before 2008. More details are included in the ‘Technical notes’ section.

Although the data in this publication is robust, it will be subject to small changes before it becomes final (data may be updated as further information is received from the coronial system). Final data will be released in the Ministry’s *Mortality and Demographic Data 2010* publication.

Contents

Key points	ix
Suicide	ix
Intentional self-harm hospitalisations	xi
Suicide deaths in 2010	1
Overview	1
Sex	3
Age	6
Ethnicity	15
Deprivation	23
District health boards	25
Methods of suicide	27
Urban and rural suicide rates	31
International comparisons	34
Intentional self-harm hospitalisations in 2010	39
Summary	39
Overview	39
Sex	42
Age	43
Ethnicity	47
Deprivation	56
District health boards	58
Technical notes	64
Data	64
International Classification of Diseases (ICD) codes	66
Serious injury outcome indicator reports	67
Definitions	68
References	72
Appendix 1: Further tables	74
Appendix 2: Further information	94

List of Tables

Table 1:	Suicide deaths and age-standardised rates, 1985–2010	2
Table 2:	Suicide deaths and age-standardised rates, by sex, 1985–2010	4
Table 3:	Suicide deaths and age-specific rates, by five-year age group and sex, 2010	7
Table 4:	Youth suicide age-specific deaths and rates, by sex, 1981–2010	11
Table 5:	Suicide deaths, by ethnicity, age and sex, 2010	17
Table 6:	Suicide deaths and age-standardised rates, Māori and non-Māori, by sex, 1996–2010	19
Table 7:	Youth suicide deaths and age-specific rates, Māori and non-Māori, by sex, 1996–2010	22
Table 8:	Suicide deaths and age-standardised rates, by NZDep2006 quintile and sex, 2010	24
Table 9:	Methods used for suicide deaths, 1997–2010	29
Table 10:	Suicide deaths and rates, by urban/rural profile, life-stage age group and sex, 2010	31
Table 11:	Intentional self-harm hospitalisation numbers and age-standardised rates, 1996–2010	40
Table 12:	Intentional self-harm hospitalisation, numbers and age-standardised rates, by sex, 1996–2010	42
Table 13:	Intentional self-harm hospitalisation numbers and age-specific rates, by sex and five-year age group, 2010	44
Table 14:	Youth intentional self-harm hospitalisation numbers and age-specific rates, by sex, 1996–2010	46
Table 15:	Intentional self-harm hospitalisations, by ethnicity, age group and sex, 2010	49
Table 16:	Intentional self-harm hospitalisation numbers and rates, by ethnicity and sex, 1996–2010	50
Table 17:	Youth intentional self-harm hospitalisation numbers and age-specific rates, Māori and non-Māori, by sex, 1996–2010	54
Table 18:	Intentional self-harm hospitalisation numbers and age-standardised rates, by NZDep2006 quintile, 2010	56
Table 19:	Intentional self-harm hospitalisation numbers and age-standardised rates, by DHB of domicile and sex, 2010	59
Table 20:	Intentional self-harm hospitalisation numbers and age-standardised rates, by DHB of domicile, 2008, 2009 and 2010 (accumulated data)	60
Table 21:	Intentional self-harm hospitalisation numbers and age-standardised rates for Māori and non-Māori, by DHB of domicile and sex, 2008, 2009 and 2010 (accumulated data)	63
Table A1:	Estimated New Zealand resident population for mean year ending 31 December 2010, by five-year age group and sex	74
Table A2:	Estimated New Zealand resident population as at 30 June 2008, by DHB of domicile, five-year age group and sex	75
Table A3:	Estimated New Zealand resident population as at 30 June 2009, by DHB of domicile, five-year age group and sex	78
Table A4:	Projected New Zealand population, by deprivation quintile, sex and five-year age group, 2010	81
Table A5:	Suicide deaths and age-standardised rates, by DHB, 2006–2010	82

Table A6:	Suicide deaths, by five-year age group and sex, 1948–2010	83
Table A7:	Suicide age-specific rates for OECD countries, by age group and sex	90
Table A8:	Intentional self-harm short-stay emergency department hospitalisations, 1996–2010 (excluded from the main body of this publication)	91
Table A9:	Intentional self-harm hospitalisations within two days of a previous intentional self-harm hospitalisation, 1997–2010 (excluded from the main body of this publication)	92
Table A10:	World Health Organization world standard population	93

List of Figures

Figure 1:	Suicide age-standardised death rate, 1948–2010	3
Figure 2:	Suicide age-standardised death rates, by sex, 1948–2010	5
Figure 3:	Suicide as a percentage of all deaths in that age group, 2010	8
Figure 4:	Suicide age-specific death rates, by five-year age group, 2010	9
Figure 5:	Suicide age-specific death rates, by life-stage age group, 1948–2010	10
Figure 6:	Youth suicide age-specific death rates, by sex, 1948–2010	12
Figure 7:	Suicide age-specific death rates, ages 25–44 years, by sex, 1948–2010	13
Figure 8:	Suicide age-specific death rates, ages 45–64 years, by sex, 1948–2010	14
Figure 9:	Suicide age-specific death rates, ages 65 years and over, by sex, 1948–2010	15
Figure 10:	Suicide age-standardised death rates, Māori and non-Māori, 1996–2010	20
Figure 11:	Suicide age-standardised death rates, Māori and non-Māori, by sex, 1996–2010	21
Figure 12:	Youth suicide age-specific death rates, by ethnicity, 1996–2010	23
Figure 13:	Suicide age-standardised death rates, by NZDep2006 quintile, 2010	25
Figure 14:	Suicide age-standardised death rates, by DHB, 2006–2010	26
Figure 15:	Methods used for suicide deaths, 2010	27
Figure 16:	Methods used for suicide deaths, by sex and broad age group, 2010	30
Figure 17:	Suicide rates, by urban/rural profile and sex, 2010	32
Figure 18:	Suicide rates, by urban/rural profile and life-stage age group, 2010	33
Figure 19:	Suicide age-standardised rates for OECD countries, males	35
Figure 20:	Suicide age-standardised rates for OECD countries, females	36
Figure 21:	Suicide age-specific rates for OECD countries, males, 15–24 years	37
Figure 22:	Suicide age-specific rates for OECD countries, females, 15–24 years	38
Figure 23:	Intentional self-harm hospitalisation age-standardised rates, 1996–2010	41
Figure 24:	Intentional self-harm hospitalisation age-standardised rates, by sex, 1996–2010	43
Figure 25:	Intentional self-harm hospitalisation age-specific rates, by age group and sex, 2010	45
Figure 26:	Youth intentional self-harm hospitalisation age-specific rates, by sex, 1996–2010	47
Figure 27:	Intentional self-harm hospitalisation age-standardised rates, Māori and non-Māori, 1996–2010	51

Figure 28:	Intentional self-harm hospitalisation age-standardised rates for Māori and non-Māori males, 1996–2010	52
Figure 29:	Intentional self-harm hospitalisation age-standardised rates for Māori and non-Māori females, 1996–2010	52
Figure 30:	Youth intentional self-harm hospitalisation age-specific rates, by ethnicity, 1996–2010	53
Figure 31:	Youth intentional self-harm hospitalisation age-specific rates, by ethnicity and sex, 1996–2010	55
Figure 32:	Intentional self-harm hospitalisation age-standardised rates, by deprivation quintile and sex, 2010	57
Figure 33:	Intentional self-harm hospitalisation age-standardised rates, by DHB of domicile, 2008, 2009 and 2010 (accumulated data)	61

Key points

Suicide

Overview

- A total of 522 people died by suicide in New Zealand in 2010.
- This equates to 11.5 deaths per 100,000 population (age-standardised).
- The 2010 suicide rate was 23.6% below the peak rate in 1998.

Sex

- There were 380 male suicide deaths (17.0 deaths per 100,000 male population, age-standardised) in 2010.
- There were 142 female suicide deaths (6.4 deaths per 100,000 female population, age-standardised) in 2010.
- The 2010 male suicide rate was 28.9% below the peak rate in 1995.
- The female suicide rate has remained relatively stable since 1948, when records began.
- The ratio of male to female suicide death rate was 2.7:1 in 2010.

Youth (15–24 years)

- In 2010 the youth suicide rate was 17.7 deaths per 100,000 people aged 15–24.
- There were 78 male youth suicide deaths (23.8 per 100,000 population) and 35 female youth suicide deaths (11.3 per 100,000 population).
- Overall, the youth suicide rate has declined by 38.3% since the peak rate in 1995.
- The Māori youth suicide rate was 35.3 per 100,000 Māori youth population: more than 2.5 times higher than that of non-Māori youth (13.4 per 100,000).

Adults

- In 2010 the total suicide rate for adults aged 25–44 was 16.3 per 100,000 population. Male rates were 29.6% lower than the peak rates in 1997; female rates showed no obvious change between 1948 (when records began) and 2010.
- The total suicide rate for adults aged 45–64 was 14.2 per 100,000 population. Rates appear to have trended upwards between 2001 and 2010.
- Adults aged 65 and over had the lowest suicide rate (9.7 per 100,000 population). Between 1950 (the peak rate) and 2010 the rate for this group fell by 66.7%.

Ethnicity

- There were 104 Māori suicide deaths in 2010. This represents an age-standardised rate of 16.0 per 100,000 Māori population.
- There were 10.4 non-Māori deaths per 100,000 population (age-standardised) in 2010.
- There were 21 suicide deaths among Pacific peoples and 28 among Asian ethnic groups in 2010.

Deprivation

- There were 14.0 deaths per 100,000 population (age-standardised) in the most deprived areas and 10.7 deaths per 100,000 population (age-standardised) in the least deprived areas in 2010. This does not represent a significant difference.
- However, quintile 2 showed a significantly lower rate than quintile 5.

District health boards

- Over the five years 2006–2010, three DHB areas (Bay of Plenty, Tairāwhiti and Southland) had significantly higher suicide rates than the total New Zealand rate.
- Waitemata, Auckland and Capital & Coast DHB areas had significantly lower suicide death rates than the country as a whole.

Urban/rural profile

- There was a significantly higher rate of suicide in rural areas when compared with urban areas (10.8 deaths per 100,000 population in urban areas, compared to 15.9 in rural areas).
 - The highest rates of rural suicide are seen in adults aged 25–44 years.
-

Intentional self-harm hospitalisations¹

Overview

- There were 2825 intentional self-harm hospitalisations in New Zealand in 2010, which equates to 66.0 hospitalisations per 100,000 population (age-standardised).
- Between 1996 (the first year of comparable data) and 2010 there was a decrease of 23.1% in rates of intentional self-harm hospitalisations.

Sex

- Male hospitalisations involving intentional self-harm decreased markedly (by 31.0%) between 1996 and 2010.
- Female hospitalisations decreased by 19.2% between 2001 (when the rate peaked) and 2010.
- The ratio of female self-harm hospitalisation rate to male was 1.9:1 in 2010.

Age

- In 2010 males aged 20–24 had the highest rate of male self-harm hospitalisations (87.1 per 100,000).
- Females aged 15–19 had the highest rate of female self-harm hospitalisations (191.8 per 100,000).

Youth (15–24 years)

- The self-harm hospitalisation rate in males aged 15–24 years showed a significant downward movement of 46.0% between 1996 and 2010.
- The self-harm hospitalisation rate in females aged 15–24 years showed a downward movement of 28.3% in the same period.

Ethnicity

- The age-standardised rate for Māori self-harm hospitalisations in 2010 was the highest since 2001 (83.6 per 100,000 Māori in 2010).
- The age-standardised rate for non-Māori self-harm hospitalisations dropped markedly (by 28.7%) between 1996 and 2010.

Deprivation

- The self-harm hospitalisation rates among the most deprived New Zealanders were more than twice those among the least deprived in 2010.
- For both males and females, the differences in self-harm hospitalisation rates between the least and most deprived were statistically significant in 2010.

DHBs

- Wairarapa DHB had the highest age-standardised rate of self-harm hospitalisation in 2010.
- Auckland and Counties Manukau DHBs had the lowest age-standardised rates of self-harm hospitalisation in 2010.

¹ For a description of the data and exclusions made in this section, refer to the 'Technical notes' section.

Suicide deaths in 2010

Overview

This section looks at suicide deaths and rates:

- in 2010 and over time
- by sex
- by five-year age groups and 'life-stage' age groupings
- by ethnicity
- by deprivation
- by DHB region of domicile
- by most common suicide methods
- by urban/rural profile

It also includes a brief comparison of New Zealand rates with other OECD countries.

A total of 522 people died by suicide in 2010, which equates to an age-standardised rate of 11.5 suicide deaths per 100,000 population. Table 1 shows the number of suicides and age-standardised rates for the period 1985–2010.

Table 1: Suicide deaths and age-standardised rates, 1985–2010

Year	Total	
	Number	Rate ¹
1985	338	10.0
1986	414	12.3
1987	463	13.6
1988	484	13.9
1989	465	13.4
1990	455	13.0
1991	474	13.7
1992	493	14.1
1993	443	12.5
1994	512	14.1
1995	543	15.0
1996	540	14.7
1997	561	14.8
1998	577	15.1
1999	516	13.4
2000	458	11.9
2001	507	12.9
2002	466	11.6
2003	517	12.4
2004	488	11.7
2005	511	12.2
2006	526	12.2
2007	487	11.0
2008	520	11.8
2009	510	11.3
2010 ²	522	11.5

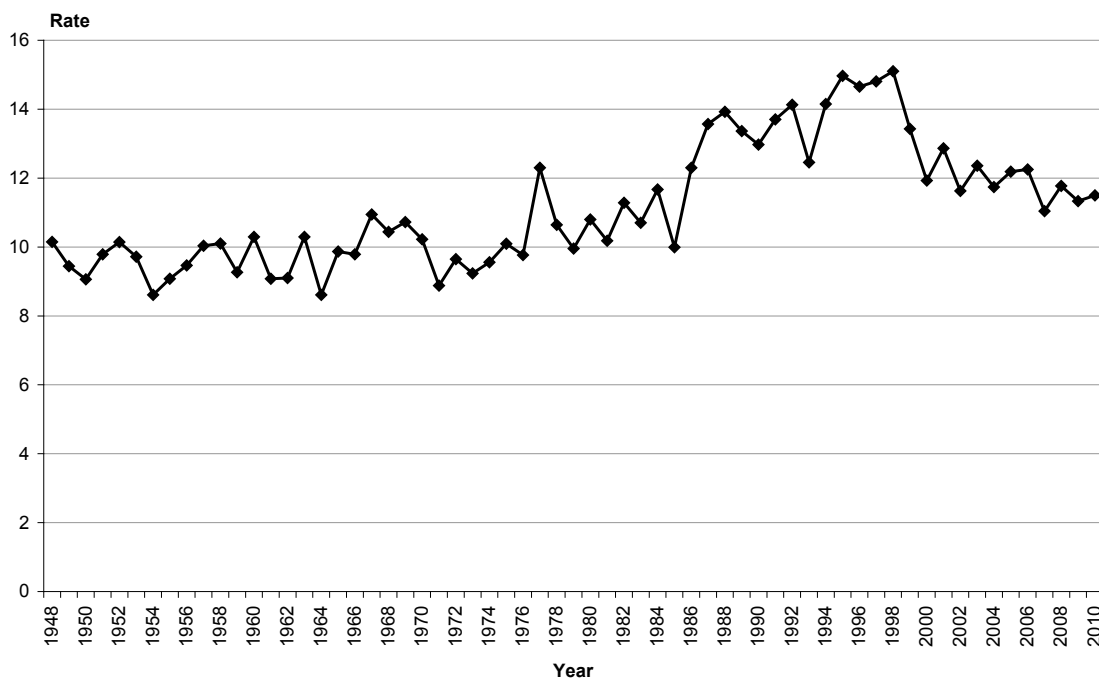
Source: New Zealand Mortality Collection

1 The rate shown is the age-standardised rate per 100,000 population, standardised to the World Health Organization (WHO) standard world population.

2 Provisional (see the 'Definitions' section).

In 1998 the rate of suicide for the total population was at its highest since 1948 (the first year for which comparable data is available). The rate generally declined between 1998 and 2010, decreasing overall by 23.6%.

Figure 1: Suicide age-standardised death rate, 1948–2010



Source: New Zealand Mortality Collection

Notes:

The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

Numbers of suicides for all years since 1948, from which the rates for this graph were calculated, are shown in Appendix 1, Table A6.

Subgroups with high suicide mortality rates

The subgroups of the New Zealand population with the highest suicide mortality rates in 2010 were males, Māori (compared to non-Māori), male youth (those aged 15–24 years) those residing in the most deprived (quintile 5) areas and those residing in rural areas². In addition, Māori males and Māori youth showed particularly high rates. Further data for these groups is presented in later sections of this publication.

Sex

Summary

In 2010:

- 380 males and 142 females died by suicide, which equates to rates of 17.0 deaths per 100,000 male population and 6.4 deaths per 100,000 female population
- the male rate was more than 2.5 times that of the female rate

² For an explanation of deprivation quintiles, see the 'Definitions' section.

- the male rate was 28.9% lower than its highest rate in 1995, while the female rate remained relatively unchanged, as it had done over a long period of time.

Table 2 shows male and female suicide death rates per 100,000 population between 1985 and 2010.

Table 2: Suicide deaths and age-standardised rates, by sex, 1985–2010

Year	Males		Females		Sex rate ratio (M:F)
	Number	Rate ¹	Number	Rate ¹	
1985	255	15.5	83	4.9	3.2
1986	301	18.3	113	6.6	2.8
1987	363	21.7	100	5.8	3.7
1988	381	22.4	103	5.7	4.0
1989	372	21.8	93	5.3	4.1
1990	363	21.1	92	5.1	4.1
1991	380	22.3	94	5.4	4.2
1992	397	23.1	96	5.4	4.2
1993	349	19.9	94	5.2	3.8
1994	409	23.1	103	5.5	4.2
1995	427	23.9	116	6.3	3.8
1996	428	23.8	112	6.1	3.9
1997	440	23.7	121	6.3	3.7
1998	445	23.7	132	6.8	3.5
1999	385	20.4	131	6.8	3.0
2000	375	20.0	83	4.2	4.7
2001	388	20.3	119	5.9	3.4
2002	353	18.0	113	5.6	3.2
2003	376	18.4	141	6.6	2.8
2004	379	18.6	109	5.2	3.6
2005	380	18.6	131	6.0	3.1
2006	388	18.6	138	6.3	3.0
2007	371	17.4	116	5.0	3.5
2008	381	17.6	139	6.2	2.8
2009	393	17.9	117	5.0	3.6
2010 ²	380	17.0	142	6.4	2.7

Source: New Zealand Mortality Collection

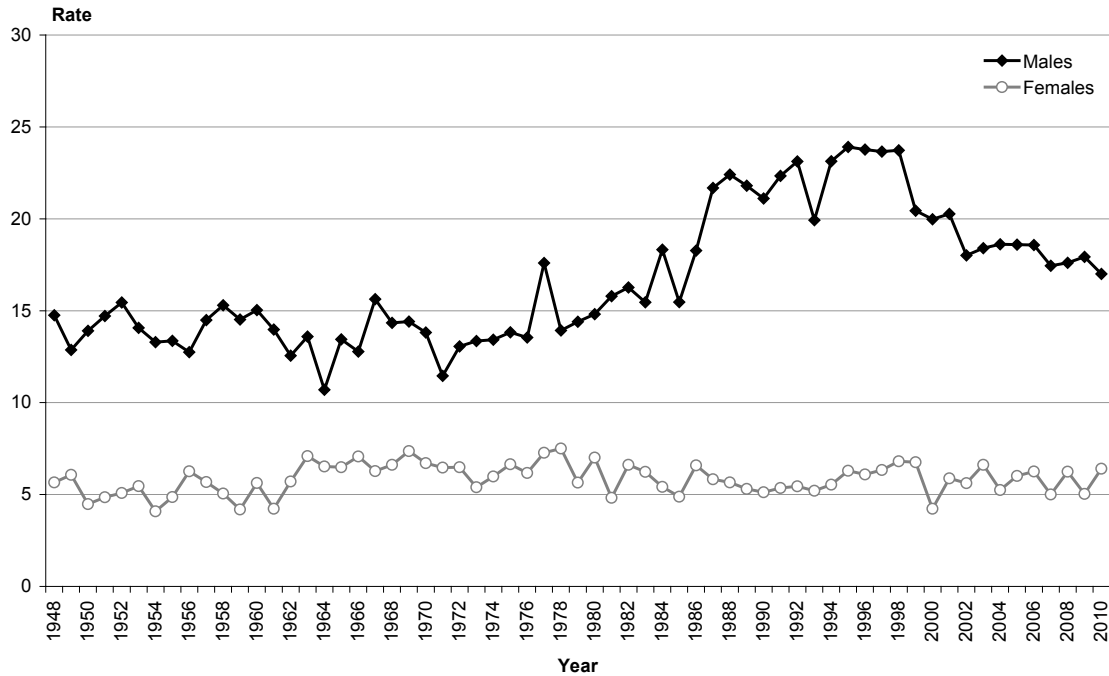
1 The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

2 Provisional (see the 'Definitions' section).

A total of 380 males (17.0 per 100,000 population) died by suicide in 2010, a decrease of 28.9% from the peak rate of 23.9 in 1995. Figure 2 illustrates this.

A total of 142 females (6.4 per 100,000 population) died by suicide in 2010. The female suicide rate remained relatively steady between 1948 and 2010.

Figure 2: Suicide age-standardised death rates, by sex, 1948–2010



Source: New Zealand Mortality Collection

Note: The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

Since records began in 1948, the rate of male suicides has been consistently higher than the rate of female suicides. In 2010 the ratio of male to female suicides was 2.7: 1.

Age

Summary

In 2010:

- the youth suicide rate was 17.7 deaths per 100,000 people aged 15–24
- the male youth suicide rate was more than twice as high as the female rate (a ratio of 2.1:1)
- adults aged 25–44 and 45–64 had similar rates of suicide to the youth rate (16.3 for ages 25–44 and 14.2 for ages 45–64)
- people aged 65 and over had a suicide rate of 9.7 per 100,000 population.

This section initially focuses on suicides by five-year age groups for 2010, and then looks at broader life-stage age groups to show trends over time.

Table 3 shows numbers of suicide deaths and age-specific rates for five-year age groups in 2010. Males had higher rates of suicide than females for every age group, with the exception of 10–14-year-olds. The highest rate for males was seen in adults aged 85 years and older; however, the small numbers in the population mean that this figure should be treated with caution, as it represents only 0.2% of all male deaths in that age group.

The highest rate for females was in the 15–19 years age group.

Table 3: Suicide deaths and age-specific rates, by five-year age group and sex, 2010

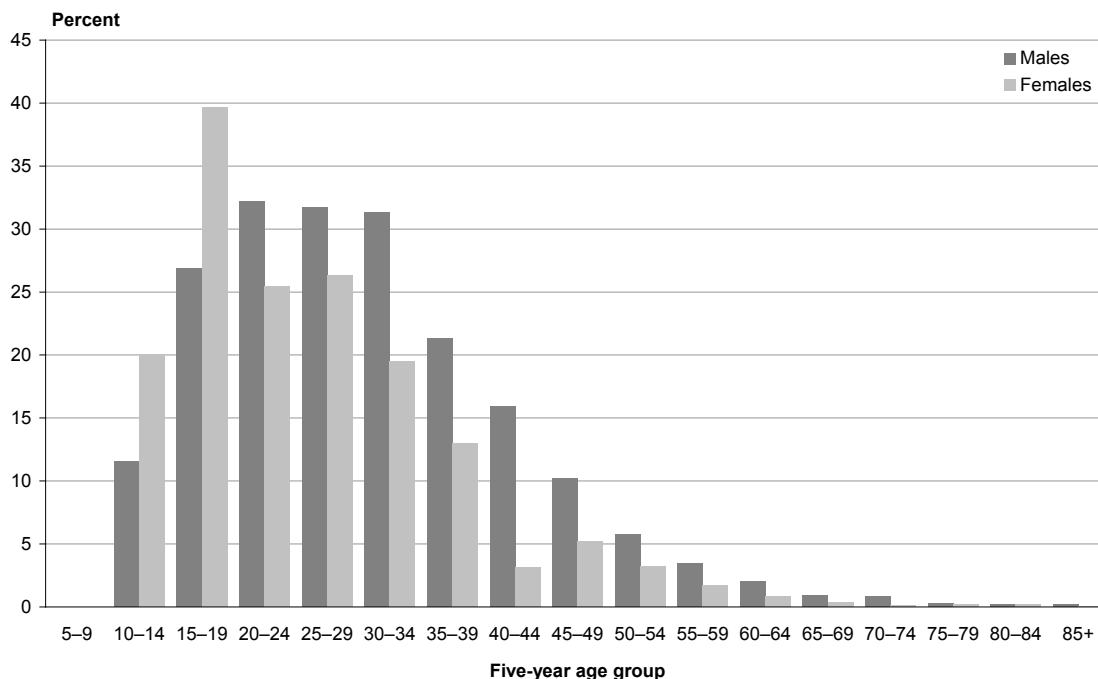
Age group	Males		Females		Total	
	Number	Rate	Number	Rate	Number	Rate
5–9	0	–	0	–	0	–
10–14	3	2.0	4	2.8	7	2.4
15–19	32	19.3	21	13.4	53	16.4
20–24	46	28.4	14	9.1	60	19.0
25–29	32	22.3	15	10.3	47	16.3
30–34	31	23.9	15	10.7	46	17.1
35–39	39	27.3	14	8.9	53	17.6
40–44	39	26.1	6	3.7	45	14.4
45–49	41	26.3	15	9.0	56	17.4
50–54	30	21.0	12	8.1	42	14.4
55–59	25	20.2	8	6.2	33	13.1
60–64	19	16.8	6	5.1	25	10.9
65–69	11	12.8	3	3.3	14	8.0
70–74	12	18.3	1	1.4	13	9.5
75–79	6	12.3	3	5.3	9	8.6
80–84	6	17.2	4	8.7	10	12.4
85+	8	33.5	1	2.2	9	12.9
Total	380	17.0	142	6.4	522	11.5

Source: New Zealand Mortality Collection

Note: The rates in this figure are age-specific rates, measuring the frequency of suicides per 100,000 population relative to particular population age groups.

Figure 3 shows the number of suicides by five-year age group as a percentage of deaths in that age group from all causes in 2010. It shows that suicide accounted for almost one-third of all deaths in males aged 20–24, 25–29 and 30–34. Almost 40% of all deaths in females aged 15–19 were caused by suicide in 2010.

Figure 3: Suicide as a percentage of all deaths in that age group, 2010

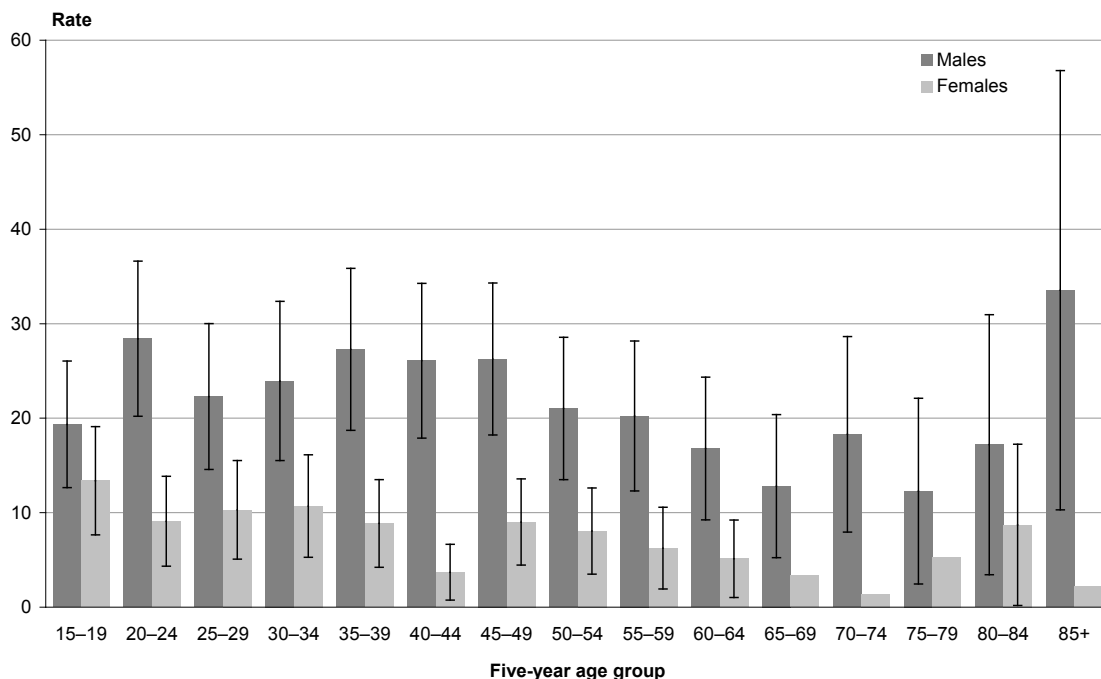


Source: New Zealand Mortality Collection

Note: The rates in this figure are age-specific rates, measuring the frequency of suicides per 100,000 population relative to particular population age groups.

Figure 4 shows age-specific suicide rates by sex for 2010 in five-year age groups. It includes confidence intervals,³ which indicate that there was a significant difference between male and female rates in all five-year age groups to the age of 64, with the exception of those aged 15–19, 25–29 and 30–34. The figure shows very broad confidence intervals for the oldest age groups, indicating that the rates are volatile, mainly because of the small number of deaths involved.

Figure 4: Suicide age-specific death rates, by five-year age group, 2010



Source: New Zealand Mortality Collection

Notes:

Confidence intervals for some older age groups are not shown because the small numbers of deaths in these categories produce nonsensical confidence intervals.

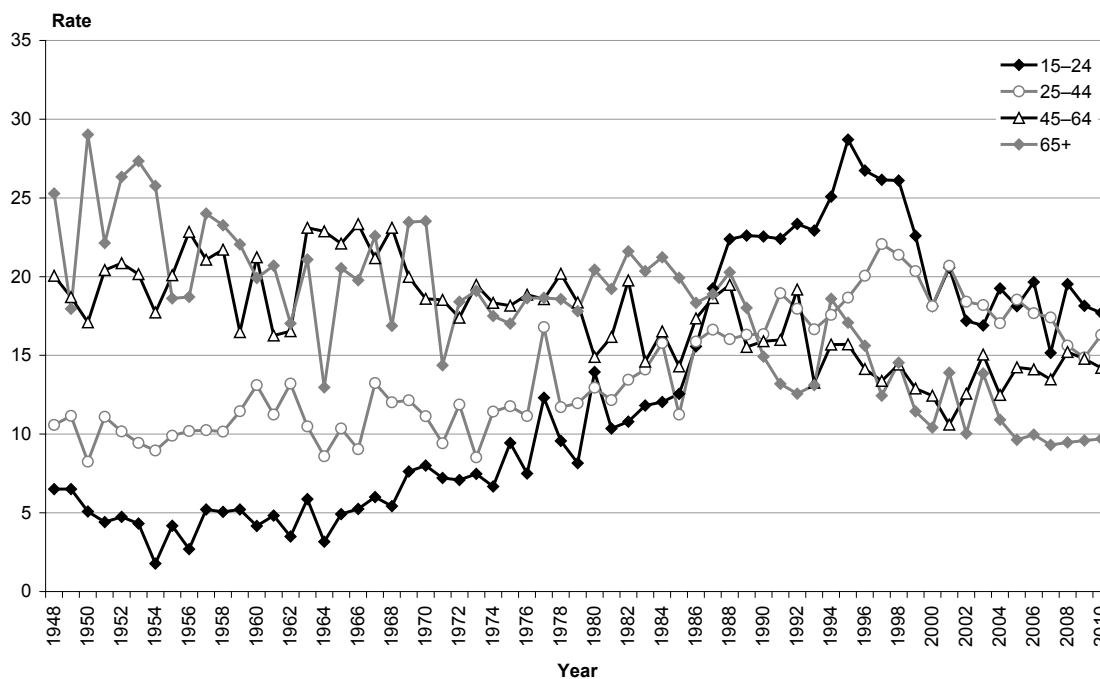
The rates in this figure are age-specific rates, measuring the frequency of suicides per 100,000 population relative to particular population age groups.

The remainder of this section focuses on suicides by four life-stage age groups: youth (15–24), adults aged 25–44, adults aged 45–64, and adults aged 65 and over.

Figure 5 shows suicide rates for life-stage groups over time, and highlights the volatility of New Zealand's suicide rates since 1948. In 1948 the differences between the four life-stage groups were distinct, with suicide rate increasing with the age. By the early 1990s this trend had almost reversed, with youth showing the highest rates of suicide and those aged 65 and over having the lowest rates. In more recent years, those aged 65 and over continued to show the lowest rates, while rates for those aged between 15 and 64 started to converge.

³ Confidence intervals are for 95% confidence; see the 'Definitions' section for more information.

Figure 5: Suicide age-specific death rates, by life-stage age group, 1948–2010



Source: New Zealand Mortality Collection

Notes:

The rates in this figure are age-specific rates, measuring the frequency of suicides per 100,000 population relative to particular population age groups.

This graph reflects data presented in Appendix 1, Table A6.

Youth (aged 15–24 years)

In 2010 death from suicide was the second most common cause of death for youth: 116 youths died from motor vehicle accidents and 113 from suicide. This equates to youth mortality rates of 18.2 per 100,000 for motor vehicle accidents and 17.7 for suicide.

Deaths from suicide in 2010 made up 30.5% of all deaths in the 15–24 years age group, accounting for 29.8% of all male youth deaths and 32.4% of female youth deaths.⁴ Table 4 shows that since its peak in 1995, the youth rate has decreased substantially. In 2010 the youth rate was 38.3% lower than in 1995.

Rates were significantly higher among males than females: in 2010 the male youth suicide rate was more than twice that of females.

⁴ These percentages have been calculated from provisional New Zealand Mortality Collection 2010 data, which had not been published at the time this report was finalised.

Table 4: Youth suicide age-specific deaths and rates, by sex, 1981–2010

Year	Males		Females		Total	
	Number	Rate ¹	Number	Rate ¹	Number	Rate ¹
1981	50	16.9	10	3.5	60	10.4
1982	52	17.5	11	3.8	63	10.8
1983	58	19.2	12	4.1	70	11.8
1984	57	18.7	15	5.1	72	12.0
1985	60	19.6	15	5.1	75	12.6
1986	68	22.9	23	8.0	91	15.6
1987	93	31.2	20	6.9	113	19.3
1988	106	35.7	25	8.7	131	22.4
1989	111	37.9	20	7.0	131	22.6
1990	111	38.0	19	6.7	130	22.5
1991	109	38.7	16	5.8	125	22.4
1992	112	39.9	17	6.2	129	23.3
1993	110	39.4	16	5.9	126	22.9
1994	111	39.9	26	9.7	137	25.1
1995	122	44.1	34	12.8	156	28.7
1996	105	39.1	38	14.3	143	26.7
1997	113	41.1	29	10.8	142	26.2
1998	105	38.5	35	13.3	140	26.1
1999	83	30.6	37	14.2	120	22.6
2000	81	29.9	15	5.8	96	18.1
2001	87	32.2	23	8.7	110	20.6
2002	65	23.2	30	11.0	95	17.2
2003	66	22.5	31	11.0	97	16.9
2004	83	27.7	30	10.5	113	19.3
2005	84	27.6	24	8.2	108	18.1
2006	95	31.1	24	8.0	119	19.7
2007	70	22.5	23	7.6	93	15.2
2008	83	26.4	38	12.5	121	19.5
2009	93	29.0	21	6.8	114	18.1
2010 ²	78	23.8	35	11.3	113	17.7

Source: New Zealand Mortality Collection

1 The rate in this figure is the age-specific rate, measuring the frequency of suicides per 100,000 population relative to particular population age groups.

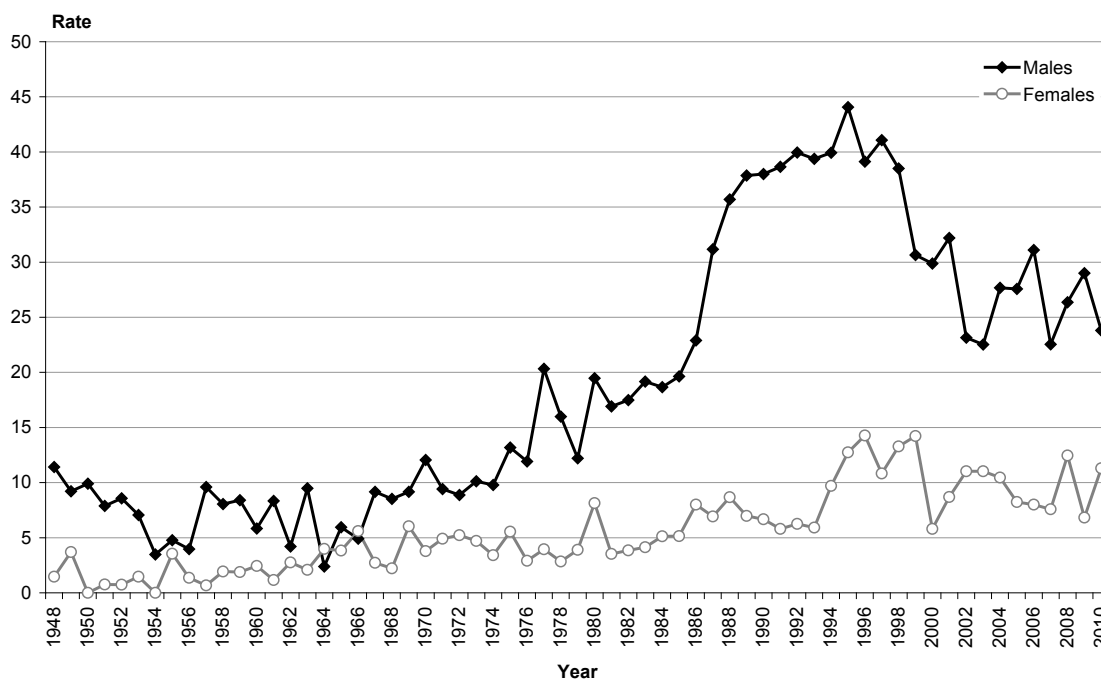
2 Provisional (see the 'Definitions' section).

Figure 6 shows trends in male and female suicide rates for youth between 1948 and 2010.

Male youth suicide rates began to rise sharply in the early 1970s and reached a peak of 44.1 per 100,000 in 1995. After that time, the rate trended downwards and had fallen by 45.9% by 2010.

Rates of female youth suicide also showed a general increase over time to a peak in 1996, although rates have remained highly variable since then.

Figure 6: Youth suicide age-specific death rates, by sex, 1948–2010



Source: New Zealand Mortality Collection

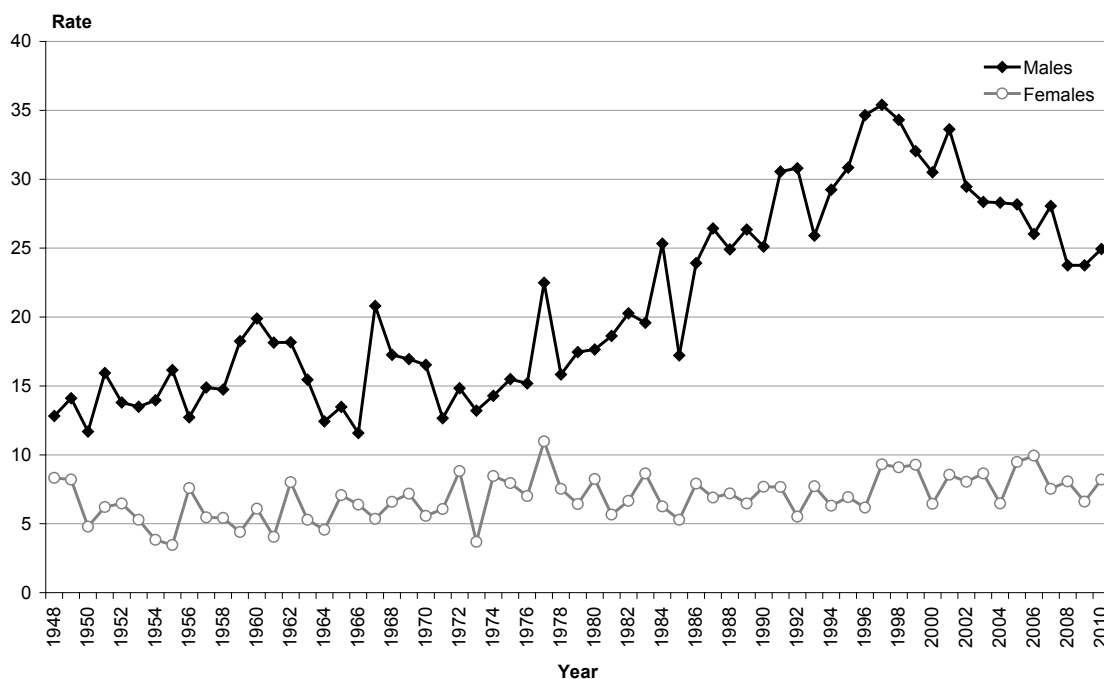
Note: The rate in this figure is the age-specific rate, measuring the frequency of suicides per 100,000 population relative to particular population age groups.

Adults aged 25–44 years

The total suicide rate for adults aged 25–44 years was 16.3 per 100,000 in 2010. The male rate was 24.9 per 100,000 males, which is more than three times the female rate of 8.2.

Between the peak rate in 1997 and 2010, suicide rates for males aged 25–44 fell by 29.6%. In contrast, the female rate for 2010 (8.2 deaths per 100,000 women) has remained relatively consistent since official records began in 1948.

Figure 7: Suicide age-specific death rates, ages 25–44 years, by sex, 1948–2010



Source: New Zealand Mortality Collection

Note: The rate in this figure is the age-specific rate, measuring the frequency of suicides per 100,000 population relative to particular population age groups.

Adults aged 45–64 years

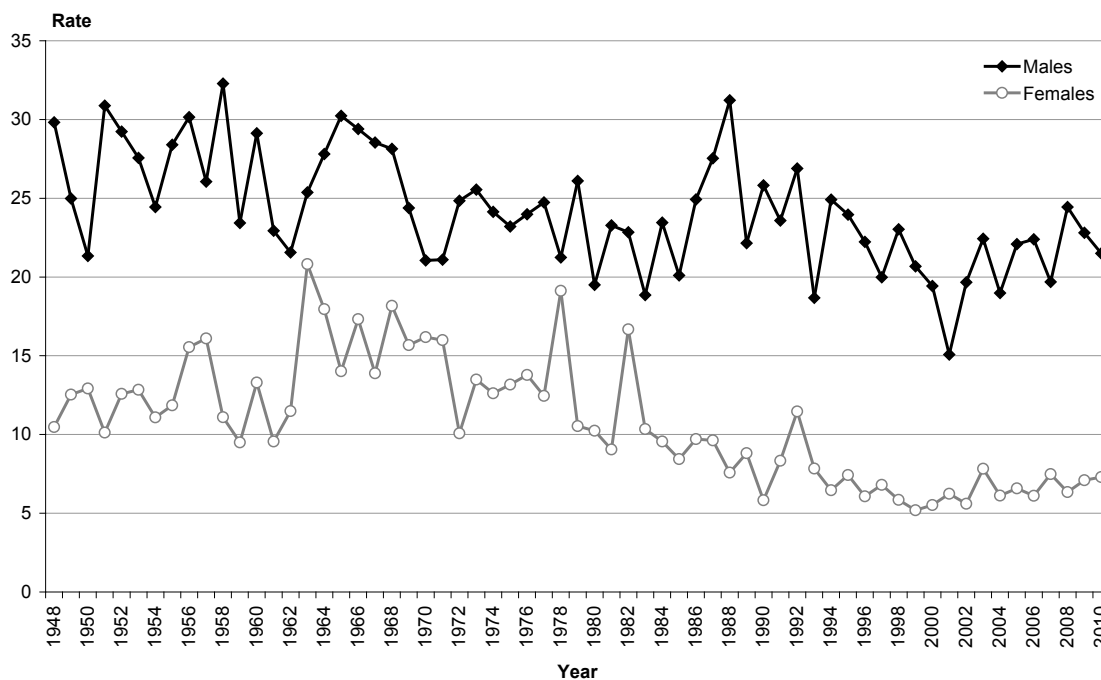
The suicide rate for adults aged 45–64 years was 14.2 per 100,000 total population in 2010. The male and female rates were 21.5 and 7.3 respectively, similar to those in the youth and 25–44 years groups. However, as Figure 8 shows, over time suicide rates for adults aged 45–64 showed very different trends to those for adults aged 25–44.

Male rates for this age group were highly volatile between 1948 and 2010, but reached a low of 15.1 suicides per 100,000 males in 2001. After that, rates appeared to rise again to previous levels (there were 21.5 suicide deaths per 100,000 males in 2010).

There was a more obvious downwards trend for females. Between 1963 and 1999 the female suicide rate dropped from 20.8 to 5.2 per 100,000 females (a reduction of

75.1%). The female rate rose again after 1999, although not as markedly as the male rate.

Figure 8: Suicide age-specific death rates, ages 45–64 years, by sex, 1948–2010



Source: New Zealand Mortality Collection

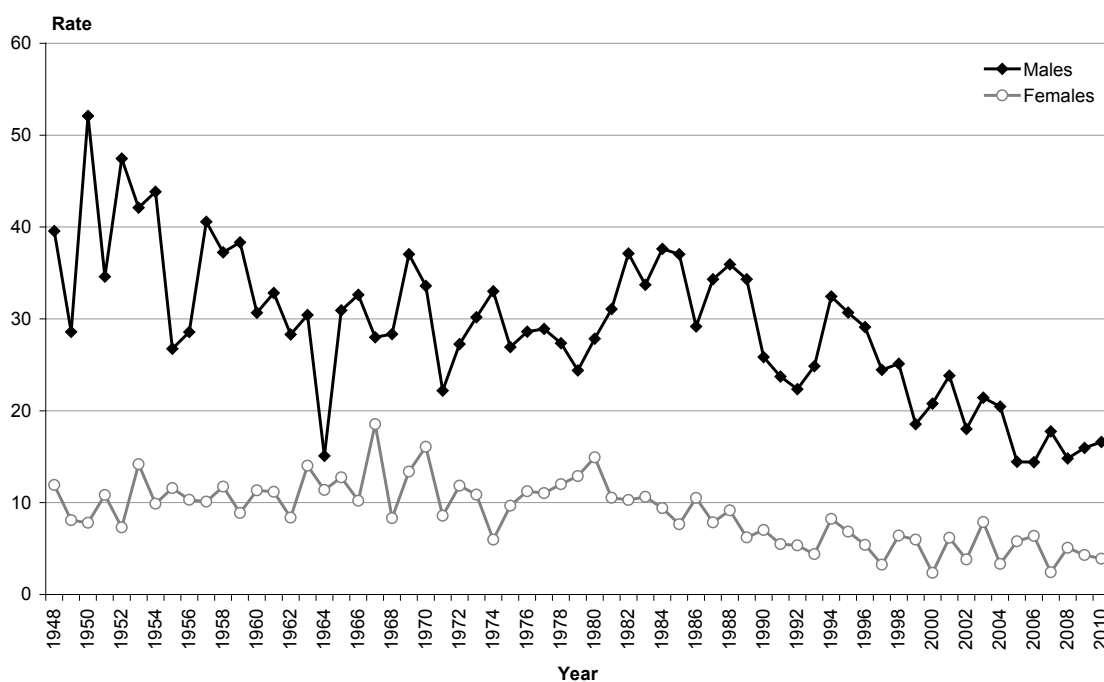
Note: The rate in this figure is the age-specific rate, measuring the frequency of suicides per 100,000 population relative to particular population age groups.

Adults aged 65 years and over

In 2010 the suicide rate for those aged 65 and over was the lowest of all the life-stage age groups (9.7 per 100,000 people), having dropped by 66.7% since its highest rate in 1950.

Figure 9 illustrates the different trends among males and females in this age group. Between 1950 and 2010 the male rate of suicide trended downwards, falling by 68.3%. The female rate also showed a general downward trend, falling by 79.1% between 1967 (when it peaked) and 2010.

Figure 9: Suicide age-specific death rates, ages 65 years and over, by sex, 1948–2010



Source: New Zealand Mortality Collection

Note: The rate in this figure is the age-specific rate, measuring the frequency of suicides per 100,000 population relative to particular population age groups.

Ethnicity⁵

Summary

- In 2010 the total Māori suicide rate was 16.0 per 100,000 population, 53.6% higher than the non-Māori rate (10.4)
- Between 1996 and 2010 non-Māori male rates trended downwards, while the trend for Māori males was less pronounced. No such trend was evident among either Māori or non-Māori females.
- In 2010 the Māori youth rate (35.3 per 100,000 population) was more than 2.5 times higher than the equivalent rate for non-Māori (13.4).
- Youth rates for non-Māori seem to trend downwards over time, but Māori rates are showing no such trend.
- There were 21 suicide deaths amongst Pacific peoples and 28 suicides amongst the Asian peoples ethnic group.

⁵ Note that ethnicity data can only be compared back to 1996 because of changes in the way ethnicity was recorded from that year.

Table 5 shows numbers of suicide deaths by ethnicity, age and sex for 2010. Note that small numbers of suicide deaths for Pacific and Asian peoples mean that rates for these groups tend to be highly variable and may be misleading; they have therefore not been calculated.

Table 5: Suicide deaths, by ethnicity, age and sex, 2010

Ethnicity	Sex	Total	Age group (years)															
			10–14	15–19	20–24	25–29	30–34	35–39	40–44	45–49	50–54	55–59	60–64	65–69	70–74	75–79	80–84	85+
Māori	Total	104	5	25	19	11	8	10	10	8	4	2	2	0	0	0	0	0
	Males	74	2	16	13	9	6	7	9	7	3	1	1	0	0	0	0	0
	Females	30	3	9	6	2	2	3	1	1	1	1	1	0	0	0	0	0
Pacific	Total	21	0	5	6	6	2	1	0	0	1	0	0	0	0	0	0	0
	Males	17	0	4	5	4	2	1	0	0	1	0	0	0	0	0	0	0
	Females	4	0	1	1	2	0	0	0	0	0	0	0	0	0	0	0	0
Asian	Total	28	0	4	1	5	4	2	3	1	0	3	2	0	2	0	0	1
	Males	16	0	0	1	3	3	1	1	0	0	2	2	0	2	0	0	1
	Females	12	0	4	0	2	1	1	2	1	0	1	0	0	0	0	0	0
Other	Total	369	2	19	34	25	32	40	32	47	37	28	21	14	11	9	10	8
	Males	273	1	12	27	16	20	30	29	34	26	22	16	11	10	6	6	7
	Females	96	1	7	7	9	12	10	3	13	11	6	5	3	1	3	4	1
Total	Total	522	7	53	60	47	46	53	45	56	42	33	25	14	13	9	10	9
	Males	380	3	32	46	32	31	39	39	41	30	25	19	11	12	6	6	8
	Females	142	4	21	14	15	15	14	6	15	12	8	6	3	1	3	4	1

Source: New Zealand Mortality Collection

Māori

One hundred and four Māori died by suicide in 2010. The age-standardised rate was 16.0 deaths per 100,000 Māori population (see Table 6). The rate ratio of Māori suicide deaths to non-Māori deaths was 1.5:1.

Māori and non-Māori comparisons

Table 6 shows suicide death numbers and rates for Māori and non-Māori, by sex, for the period 1996–2010.

In 2010 the age-standardised suicide death rate for Māori (16.0 deaths per 100,000 Māori population) was 53.6% higher than that for non-Māori (10.4 deaths per 100,000 non-Māori population).

The rate of suicide for Māori males was 23.9 deaths per 100,000 population in 2010, compared with 15.4 for non-Māori males.

Māori females also showed a higher rate of suicide than non-Māori females in 2010 (8.8 and 5.7 deaths per 100,000 females, respectively).

Pacific peoples

There were 21 deaths by suicide among the Pacific peoples ethnic group in 2010 (17 males and 4 females). It is difficult to draw conclusions about changes over time for this group because the number of suicides is consistently small. There was only one suicide death among Pacific people aged over 40 years.

Asian peoples

There were 28 suicides among the Asian peoples ethnic group in 2010 (16 males and 12 females). Again, it is difficult to draw conclusions about changes over time: not only was the number of suicides in the group small, but the population of Asian people increased markedly between 1996 and 2010.

Table 6: Suicide deaths and age-standardised rates, Māori and non-Māori, by sex, 1996–2010

Year	Number of deaths						Age-standardised rate ¹						Rate ratio		
	Māori			Non-Māori			Māori			Non-Māori			Māori:non-Māori		
	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total
1996	71	24	95	357	88	445	28.3	9.1	18.3	22.5	5.5	13.7	1.3	1.7	1.3
1997	77	26	103	363	95	458	28.0	9.4	18.5	22.4	5.8	13.9	1.3	1.6	1.3
1998	87	25	112	358	107	465	32.5	8.3	20.0	21.8	6.2	13.9	1.5	1.3	1.4
1999	58	20	78	327	111	438	19.9	6.3	12.9	19.9	6.6	13.1	1.0	1.0	1.0
2000	69	11	80	306	72	378	25.5	3.8	14.2	18.8	4.2	11.4	1.4	0.9	1.2
2001	57	22	79	331	97	428	20.3	6.7	13.3	20.0	5.4	12.5	1.0	1.2	1.1
2002	59	21	80	294	92	386	21.2	6.8	13.8	17.0	5.2	10.9	1.3	1.3	1.3
2003	67	20	87	309	121	430	22.7	6.4	14.2	17.0	6.4	11.6	1.3	1.0	1.2
2004	82	27	109	297	82	379	29.0	8.4	18.3	16.5	4.5	10.4	1.8	1.9	1.8
2005	78	26	104	302	105	407	26.9	8.3	17.2	16.8	5.4	11.0	1.6	1.5	1.6
2006	75	33	108	313	105	418	25.9	10.7	18.0	17.0	5.3	11.0	1.5	2.0	1.6
2007	74	23	97	297	93	390	25.9	7.3	16.1	15.7	4.4	9.9	1.6	1.6	1.6
2008	56	31	87	325	108	433	19.8	8.9	14.0	17.0	5.4	11.1	1.2	1.6	1.3
2009	58	25	83	335	92	427	19.3	7.4	13.1	17.4	4.4	10.7	1.1	1.7	1.2
2010 ²	74	30	104	306	112	418	23.9	8.8	16.0	15.4	5.7	10.4	1.6	1.5	1.5

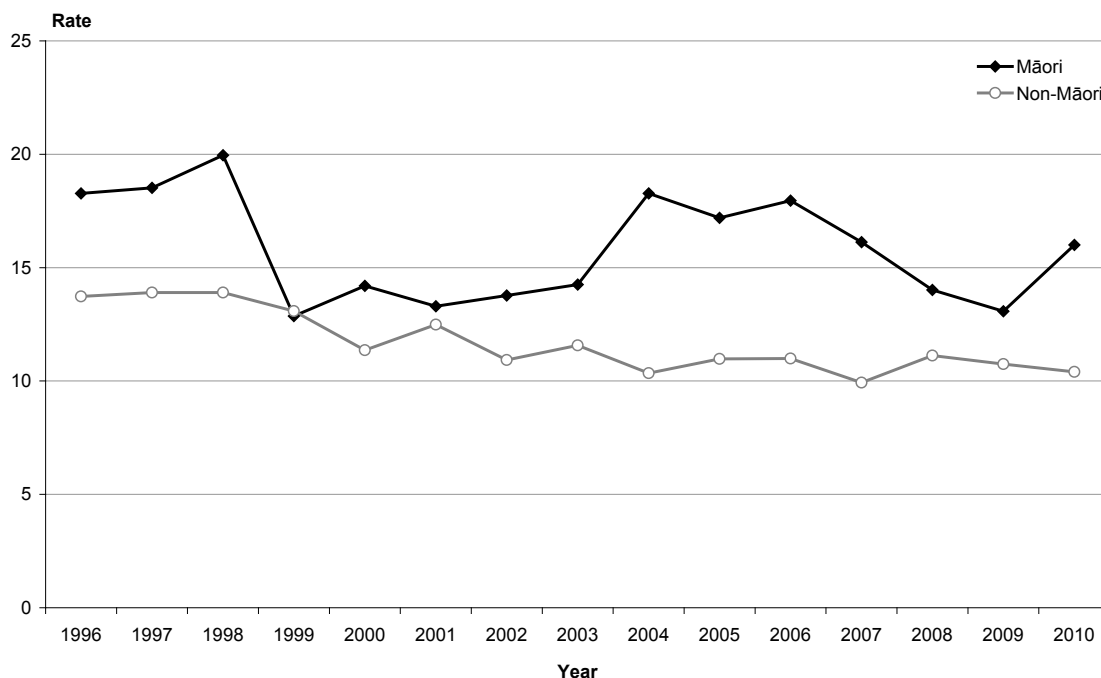
Source: New Zealand Mortality Collection

1 The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

2 Provisional (see the 'Definitions' section).

Figure 10 shows that between 1996 and 2010 Māori suicide rates were highly variable, while non-Māori suicide rates appeared to trend downwards, showing a decrease of 24.2%.

Figure 10: Suicide age-standardised death rates, Māori and non-Māori, 1996–2010

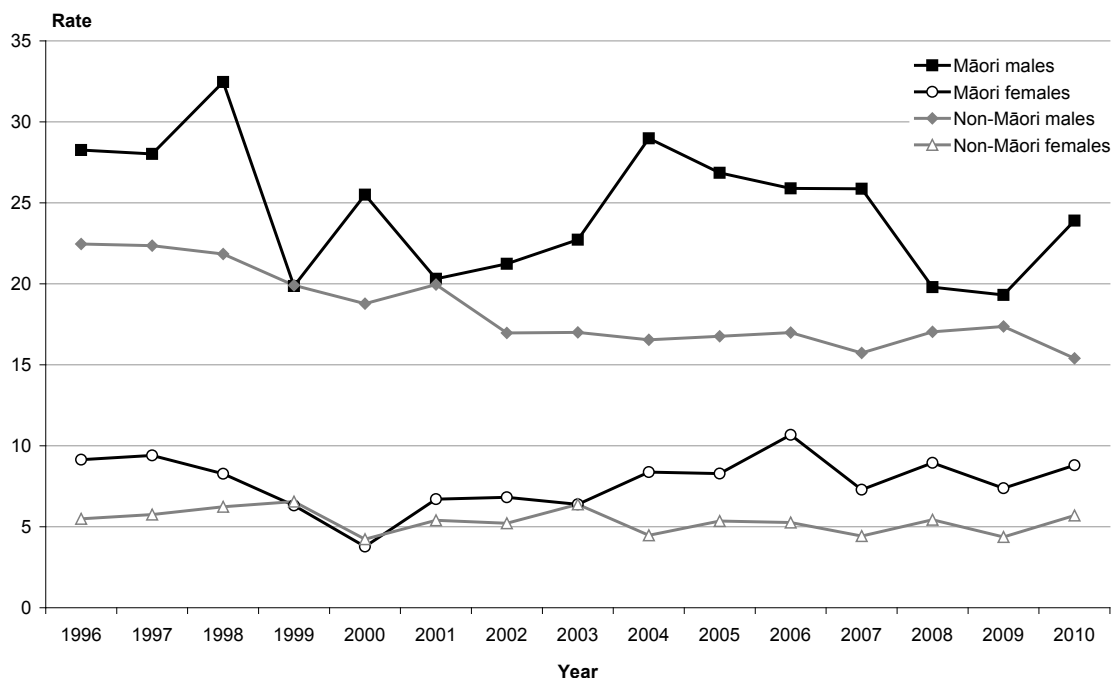


Source: New Zealand Mortality Collection

Note: The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

Figure 11 shows that the rate of suicides between 1996 and 2010 appeared to decline among non-Māori males. The rates for Māori males were highly variable year on year. There seems to be no obvious trend for either Māori or non-Māori females.

Figure 11: Suicide age-standardised death rates, Māori and non-Māori, by sex, 1996–2010



Source: New Zealand Mortality Collection

Note: The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

Youth, by sex and ethnicity

Table 7 shows rates for Māori and non-Māori youth, by sex. Māori youth suicide rates in 2010 were more than 2.5 times higher than those for non-Māori youth (35.3 and 13.4 per 100,000 population, respectively).

Table 7: Youth suicide deaths and age-specific rates, Māori and non-Māori, by sex, 1996–2010

Year	Māori						Non-Māori						Rate ratio		
	Males		Females		Total		Males		Females		Total		Māori:non-Māori		
	Number	Rate ¹	Number	Rate ¹	Number	Rate ¹	Number	Rate ¹	Number	Rate ¹	Number	Rate ¹	Males	Females	Total
1996	29	59.6	9	17.8	38	38.4	76	34.6	29	13.4	105	24.1	1.7	1.3	1.6
1997	27	51.1	9	16.9	36	33.9	86	38.7	20	9.3	106	24.3	1.3	1.8	1.4
1998	30	56.1	13	24.4	43	40.3	75	34.2	22	10.5	97	22.6	1.6	2.3	1.8
1999	23	42.4	10	18.7	33	30.6	60	27.7	27	13.1	87	20.5	1.5	1.4	1.5
2000	24	43.5	4	7.4	28	25.7	57	26.4	11	5.4	68	16.2	1.6	1.4	1.6
2001	20	35.6	9	16.4	29	26.1	67	31.3	14	6.7	81	19.1	1.1	2.5	1.4
2002	23	43.7	10	18.8	33	31.2	42	18.4	20	9.1	62	13.9	2.4	2.1	2.2
2003	20	37.1	11	20.2	31	28.6	46	19.3	20	8.8	66	14.2	1.9	2.3	2.0
2004	28	50.5	13	23.3	41	36.9	55	22.5	17	7.3	72	15.1	2.2	3.2	2.4
2005	29	50.5	10	17.4	39	34.0	55	22.2	14	6.0	69	14.3	2.3	2.9	2.4
2006	29	50.6	8	13.5	37	31.8	66	26.6	16	6.6	82	16.8	1.9	2.0	1.9
2007	23	39.5	10	16.8	33	28.1	47	18.6	13	5.3	60	12.1	2.1	3.2	2.3
2008	17	28.6	18	30.0	35	29.3	66	25.8	20	8.2	86	17.2	1.1	3.7	1.7
2009	24	39.2	11	18.1	35	28.7	69	26.6	10	4.1	79	15.6	1.5	4.4	1.8
2010 ²	29	46.1	15	24.3	44	35.3	49	18.5	20	8.0	69	13.4	2.5	3.0	2.6

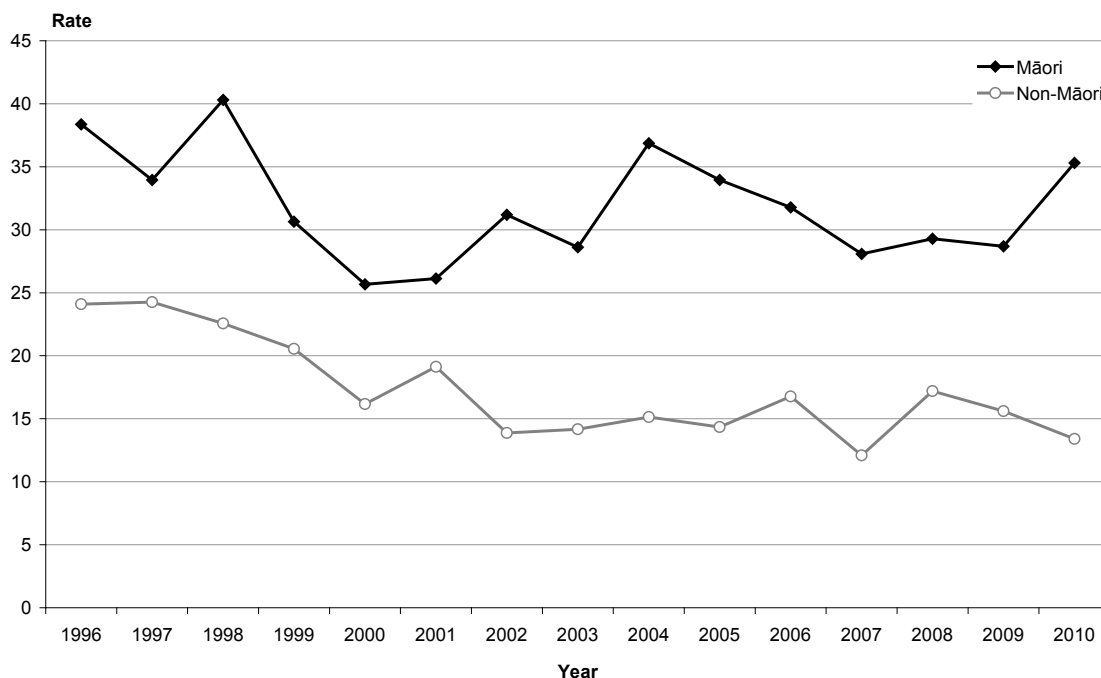
Source: New Zealand Mortality Collection

1 The rate shown is the age-specific rate, measuring the frequency of suicides relative to particular population age groups.

2 Provisional (see the 'Definitions' section).

Figure 12 shows that the non-Māori youth rate declined over time. The Māori youth rate shows more variability.

Figure 12: Youth suicide age-specific death rates, by ethnicity, 1996–2010



Source: New Zealand Mortality Collection

Note: The rate in this figure is the age-specific rate, measuring the frequency of suicides relative to particular population age groups.

Deprivation

Summary

In 2010:

- suicide rates increased with level of deprivation, although the only significant difference was seen between quintiles 2 and 5
- the lowest suicide rate was seen in those residing in the second least deprived quintile.

Deprivation has been associated with various adverse health outcomes. From the social inequalities literature it is evident that those who are most deprived generally experience poorer health (White et al 2008; Benzeval et al 2001). Suicide mortality and hospitalisation rates for intentional self-harm are presented in this publication by deprivation quintile according to the New Zealand Deprivation Index 2006 (NZDep2006) (Salmond and Crampton 2007). (See the ‘Definitions’ section of this document for more information on NZDep2006.)

In 2010 the least deprived areas had an age-standardised suicide rate of 10.7 per 100,000 population, compared with 14.0 per 100,000 population in the most deprived areas (Table 8).

Table 8: Suicide deaths and age-standardised rates, by NZDep2006 quintile and sex, 2010

Deprivation quintile		Number	Rate
1 (least deprived)	Total	100	10.7
	Males	67	14.7
	Females	33	6.8
2	Total	84	9.1
	Males	64	13.7
	Females	20	4.6
3	Total	98	10.4
	Males	71	15.0
	Females	27	6.0
4	Total	116	12.6
	Males	90	20.2
	Females	26	5.5
5 (most deprived)	Total	118	14.0
	Males	82	20.2
	Females	36	8.3

Source: New Zealand Mortality Collection

Notes

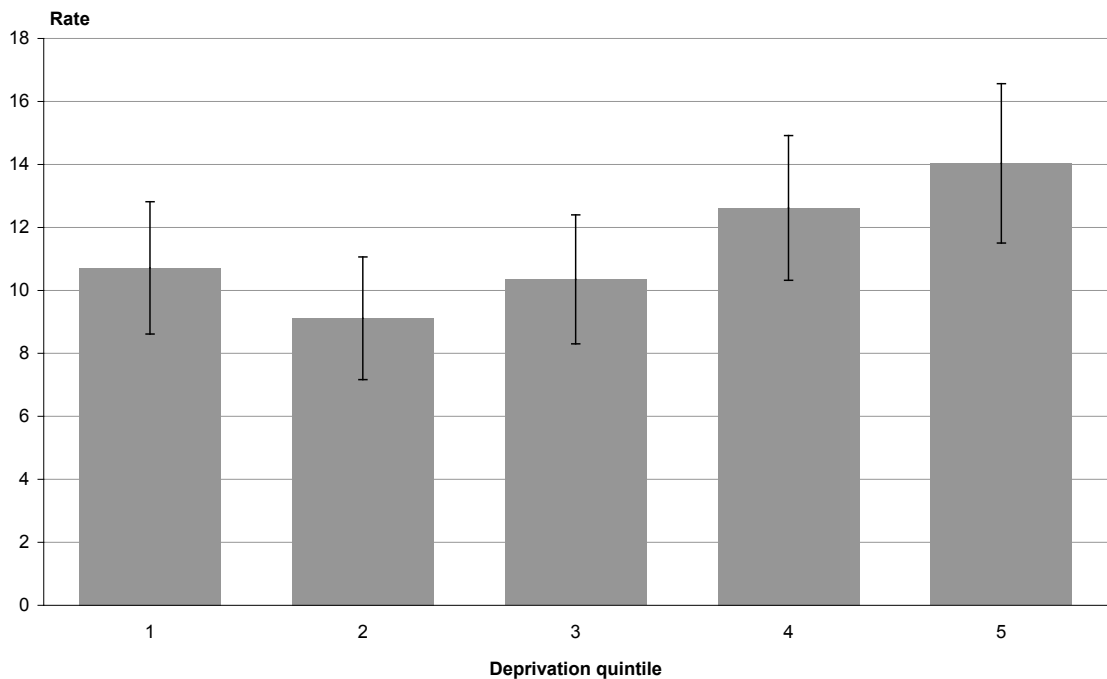
In addition to the above numbers, there were 6 suicide deaths that were not able to be assigned with a deprivation score.

The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

The confidence intervals⁶ in Figure 13 show that there was no significant difference between the most deprived and least deprived quintiles (ie, the confidence intervals on the most deprived and least deprived quintiles overlapped). However, quintile 5 was significantly higher than quintile 2 (i.e. their confidence intervals did not overlap).

⁶ Confidence intervals are for 95% confidence; see the 'Definitions' section for more information.

Figure 13: Suicide age-standardised death rates, by NZDep2006 quintile, 2010



Source: New Zealand Mortality Collection

Note: The rate in this figure is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

District health boards

Summary

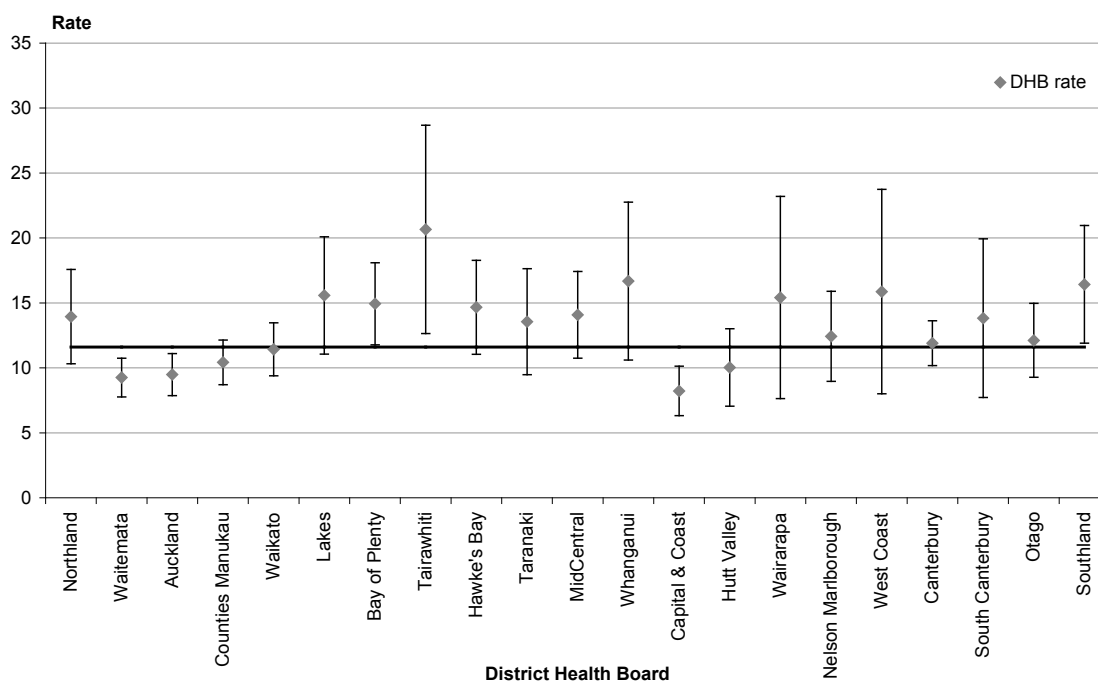
Over the five years 2006–2010:

- three DHB areas (Bay of Plenty, Tairāwhiti and Southland) had significantly higher suicide rates than the total New Zealand rate
- Waitemata, Auckland and Capital & Coast DHB areas had significantly lower suicide death rates than the country as a whole.

In this section, data for DHBs has been aggregated over five years (2006–2010) because the small number of suicides annually in some areas makes analysis uncertain.

The New Zealand rate for this five-year period⁷ was 11.6 suicides per 100,000 population; this is shown by the horizontal line in Figure 14. The figure also shows confidence intervals⁸ to aid interpretation. Where a DHB's confidence interval crosses the national rate, this means the suicide rate was not significantly different to the national rate.

Figure 14: Suicide age-standardised death rates, by DHB, 2006–2010



Source: New Zealand Mortality Collection

Notes:

The rate in this figure is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

This figure is based on information presented in Appendix 1, Table A5.

⁷ The national rate has been calculated based on the New Zealand estimated resident population as at 30 June 2008 (the mid-point) and standardised to the WHO standard world population. This population can be found in Appendix 1, Table A2.

⁸ Confidence intervals are for 99% confidence; see the 'Definitions' section for more information.

Methods of suicide

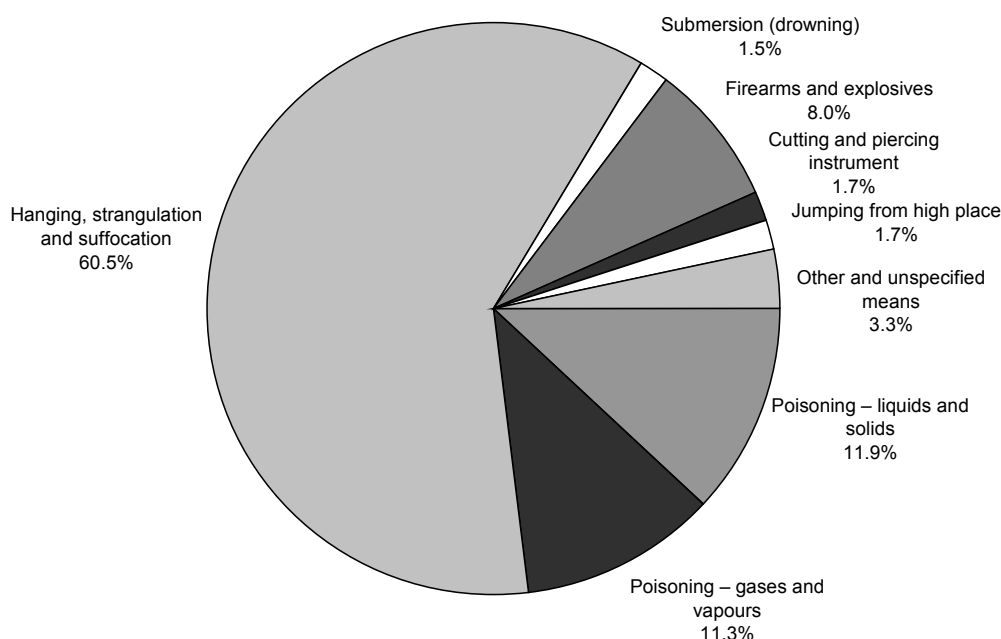
Summary

In 2010:

- hanging, strangulation and suffocation (collectively) was the most common method of suicide for both males and females (62.1% and 56.3%, respectively)
- the second most common method for males was use of poisoning by gases and vapours (13.2% of male suicides)
- the second most common method for females was poisoning by solids and liquids (27.5% of female suicides)
- poisoning by gases and vapours as a cause of suicide death decreased from 28.0% in 1997 to 11.3% in 2010
- hanging, strangulation and suffocation was the method used by 80.8% of male youth and 74.3% of female youth.

Figure 15 shows that hanging, strangulation and suffocation (collectively) was used in 60.5% of all suicide deaths. Poisoning by solids and liquids was used in 11.9% of cases, poisoning by gases and vapours was used in 11.3% of cases and firearms and explosives were used in 8.0% of cases.⁹

Figure 15: Methods used for suicide deaths, 2010



Source: New Zealand Mortality Collection

⁹ See the 'Technical notes' section for the ICD codes used for each method. Note that there is possibly some ambiguity as to the codes used to distinguish between poisoning methods.

As Table 9 shows, between 1997 and 2010 there was an increase in the proportion of suicide deaths by hanging, strangulation and suffocation (from 41.4% in 1997 to 60.5% in 2010). Over the same period, suicides from poisoning by gases and vapours sharply decreased, from 28.0% of suicide deaths in 1997 to 11.3% in 2010.

Figure 16 shows that in 2010, males were slightly more likely to use hanging, strangulation and suffocation as a method of suicide than females (this method accounted for 62.1% of male and 56.3% of female deaths).

Table 9: Methods used for suicide deaths, 1997–2010

Year	Poisoning – solids and liquids		Poisoning – gases and vapours		Hanging, strangulation and suffocation		Submersion (drowning)		Firearms and explosives		Other means		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
1997	58	10.3	157	28.0	232	41.4	17	3.0	56	10.0	41	7.3	561	100.0
1998	64	11.1	133	23.1	249	43.2	10	1.7	72	12.5	49	8.5	577	100.0
1999	52	10.1	116	22.5	241	46.7	16	3.1	47	9.1	44	8.5	516	100.0
2000	37	8.1	112	24.5	215	46.9	15	3.3	36	7.9	43	9.4	458	100.0
2001	54	10.7	110	21.7	234	46.2	7	1.4	51	10.1	51	10.1	507	100.0
2002	47	10.1	99	21.2	221	47.4	12	2.6	49	10.5	38	8.2	466	100.0
2003	58	11.2	104	20.1	247	47.8	14	2.7	41	7.9	53	10.3	517	100.0
2004	47	9.6	93	19.1	268	54.9	12	2.5	38	7.8	30	6.1	488	100.0
2005	50	9.8	110	21.5	255	49.9	13	2.5	44	8.6	39	7.6	511	100.0
2006	49	9.3	87	16.5	286	54.4	9	1.7	50	9.5	45	8.6	526	100.0
2007	44	9.0	67	13.8	282	57.9	11	2.3	47	9.7	36	7.4	487	100.0
2008	56	10.8	75	14.4	289	55.6	8	1.5	43	8.3	49	9.4	520	100.0
2009	56	11.0	50	9.8	304	59.6	5	1.0	53	10	42	8.2	510	100.0
2010 ¹	62	11.9	59	11.3	316	60.5	8	1.5	42	8.0	35	6.7	522	100.0

Source: New Zealand Mortality Collection

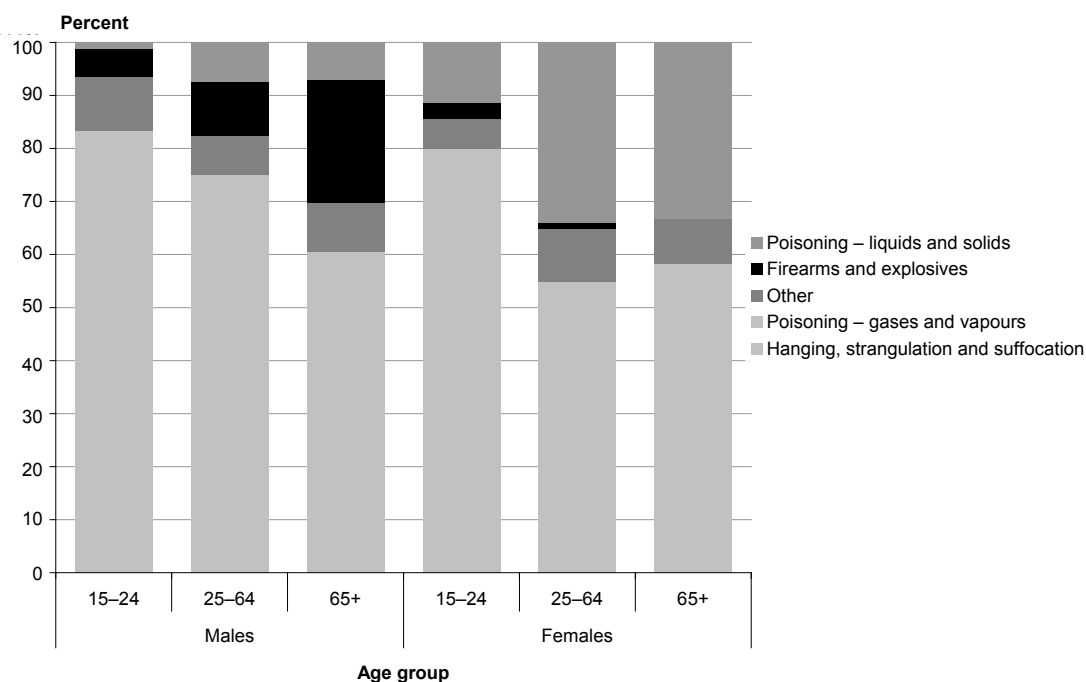
Note: 1 = provisional (see the 'Definitions' section).

Figure 16 shows how methods of suicide varied by age and sex in 2010. Hanging, strangulation and suffocation were predominantly used by both male and female youth (80.8 and 74.3%, respectively). The second most common method used by youth was ‘other’ methods for male youth (5.1%) and poisoning by solids and liquids for female youth (11.4%).

Among males aged 25–64, hanging, strangulation and suffocation was the most common suicide method (59.8%), followed by poisoning by gases and vapours (15.2%). Females in this age range most frequently used hanging, strangulation and suffocation (48.4%), followed by poisoning by solids and liquids (34.1%).

In the oldest age group (65 years and older), males most commonly used hanging, strangulation and suffocation (39.5%), followed by firearms and explosives (23.3%). Females in this age group used hanging, strangulation and suffocation (50.0%) followed by poisoning by solids and liquids (33.3%).

Figure 16: Methods used for suicide deaths, by sex and broad age group, 2010



Source: New Zealand Mortality Collection

Urban and rural suicide rates

Summary

In 2010:

- there was a significantly higher rate of suicide in rural areas when compared with urban areas
- males show a significantly higher rate of suicide in rural areas than females
- the highest rates of rural suicide are seen in the 25–44 years life-stage group.

This section of the publication looks at suicide deaths by the urban/rural profile of the person. The usual address recorded on a death certificate was used to determine whether a place of domicile was rural or urban.¹⁰

Table 10 shows the numbers of suicide deaths and rates per 100,000 population for those living in urban and rural areas. The information is also broken down by life-stage age group and sex.

The total suicide rate for those residing in urban areas was 10.8 per 100,000 population compared to 15.9 for those living in rural areas.

Table 10: Suicide deaths and rates, by urban/rural profile, life-stage age group and sex, 2010

	Numbers						Rates ¹					
	Life-stage age group						Life-stage age group					
	Total	10–14	15–24	25–44	45–64	65+	Total	10–14	15–24	25–44	45–64	65+
Urban												
Total	425	7	96	151	124	47	10.8	2.8	17.0	14.6	13.7	9.6
Males	297	3	61	110	88	35	15.5	2.4	21.2	22.2	20.0	16.1
Females	128	4	35	41	36	12	6.6	3.3	12.6	7.7	7.7	4.4
Rural												
Total	91	0	17	37	29	8	15.9	0.0	23.7	26.7	15.5	10.3
Males	77	0	17	28	24	8	26.0	0.0	43.6	41.1	25.1	19.5
Females	14	0	0	9	5	0	4.9	0.0	0.0	12.8	5.5	0.0
Total suicide deaths²	522	7	116	191	153	55	11.6	2.4	17.7	16.3	14.2	9.7

Source: New Zealand Mortality Collection

Notes:

1 The rates in this figure are age-specific rates, measuring the frequency of suicides per 100,000 population relative to particular population age groups. The total suicide death rate is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

2 In addition to the 516 individuals classed as having an urban or rural domicile, six additional people had domiciles that were unable to be assigned a classification.

¹⁰ The domicile was matched to an experimental urban/rural profile obtained from Statistics New Zealand. See Definitions for more information.

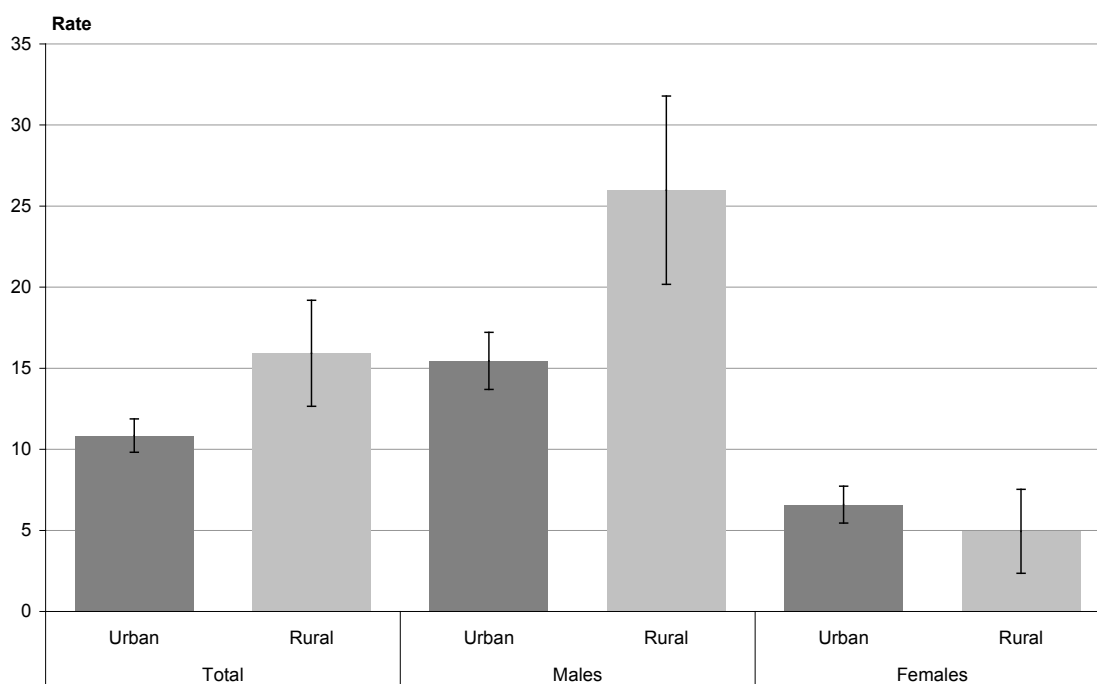
The sub-group with the highest rural rates of suicide were males aged 15–24 (43.6 per 100,000 rural males of that age). There were no suicides by females under the age of 25 in rural areas in 2010.

Although less than 20% of people dying of suicide lived in rural areas, the rate of death for those living in rural areas was significantly higher than those from urban areas.

Figure 17 shows that the greatest disparity was seen for males: those living in urban areas had a suicide rate of 15.5 per 100,000 people in those areas, compared to a rate of 26.0 in rural areas. This difference in rates was statistically significant.

Females showed no significant difference between rates of suicide in rural and urban areas.

Figure 17: Suicide rates, by urban/rural profile and sex, 2010

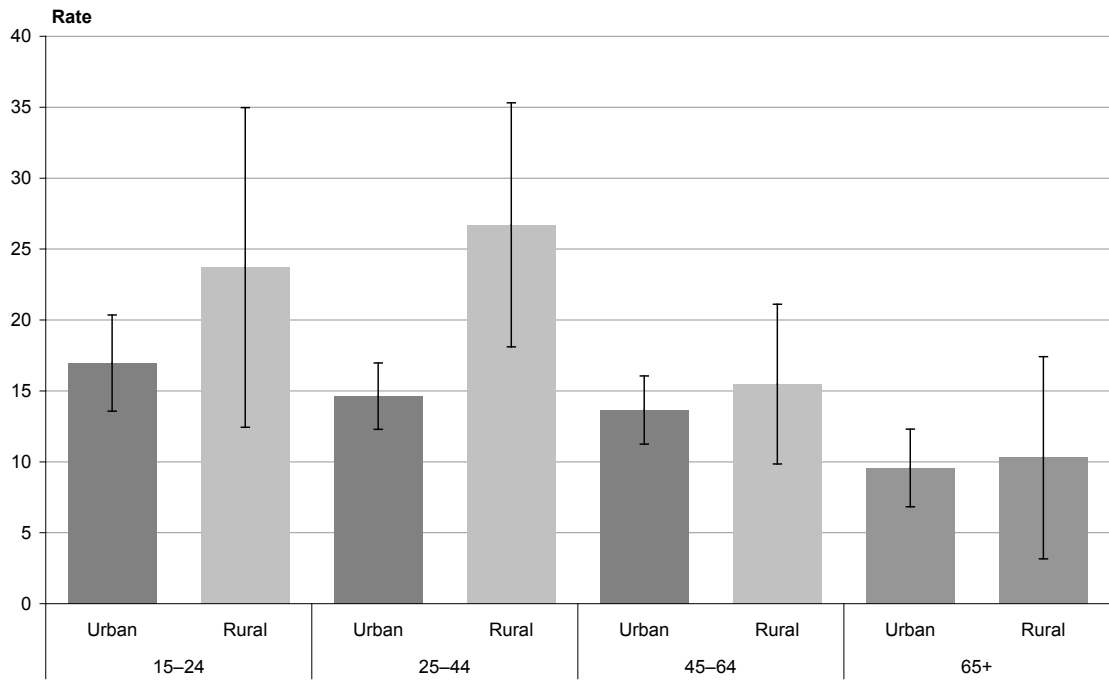


Source: New Zealand Mortality Collection

Note: The rate in this figure is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

Figure 18 shows differences in suicide rates for those living in urban and rural areas by life-stage age group and sex. Of the life-stage age groups shown, only the 24–44 years age group showed a significant difference between urban and rural rates.

Figure 18: Suicide rates, by urban/rural profile and life-stage age group, 2010



Source: New Zealand Mortality Collection

Note: The rate in this figure is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

International comparisons

Summary

- When compared with other Organisation for Economic Cooperation and Development (OECD) countries, the male suicide rate is towards the middle of the range; the rate for females is in the top third.
- Youth rates for male and female New Zealanders do not compare favourably with other OECD countries: the New Zealand male rate is the fourth-highest and the female rate the second-highest of the countries covered in this publication.
- New Zealand data is for 2010; all other countries' data is for 2009 or earlier. This should be taken into account when making comparisons between rates.

This section compares New Zealand suicide rates with those from other countries in the OECD. The countries used in this publication were members of the OECD in 2011. Two OECD countries (Iceland and Luxembourg) have been omitted from this analysis because their small populations mean that analysis of suicide rates is inherently unstable. No data is available for Turkey. In general, OECD countries are considered to produce reliable data collections and have similar economic status to New Zealand, and so their health and social statistics are often used for comparison with New Zealand's.

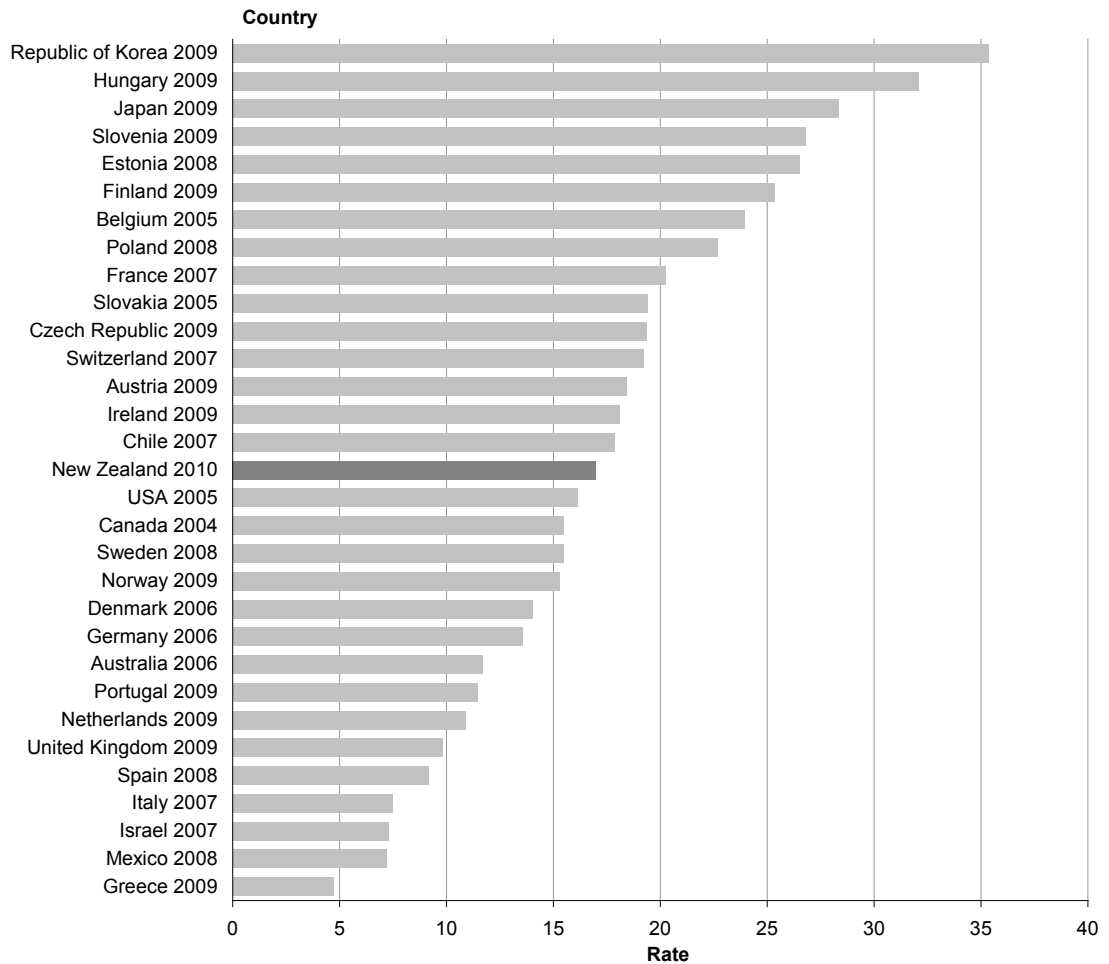
A cautious approach is recommended when comparing international suicide statistics, because many factors affect the recording and classification of suicide in different countries, including the level of proof required for a verdict; the stigma associated with suicide; the religion, social class or occupation of victims; and confidentiality (Andriessen 2006). As a result, deaths that are classified as suicide in some countries may be classified as accidental or of undetermined intent in others.

In addition, while the international figures cited here for all countries with the exception of New Zealand are the latest available from WHO (www.who.int/mental_health/prevention/suicide/country_reports/en), the years they cover are different to those covered by this publication. Hence New Zealand rates for 2010 are being compared with rates in earlier years, in which different social and/or economic conditions may have applied.

All ages

When ranked alongside other OECD countries (Figures 19 and 20), the New Zealand 2010 suicide rate for males is towards the middle of the group; the female rate is in the top third. Note that all the OECD countries have higher male than female suicide rates, as New Zealand does.

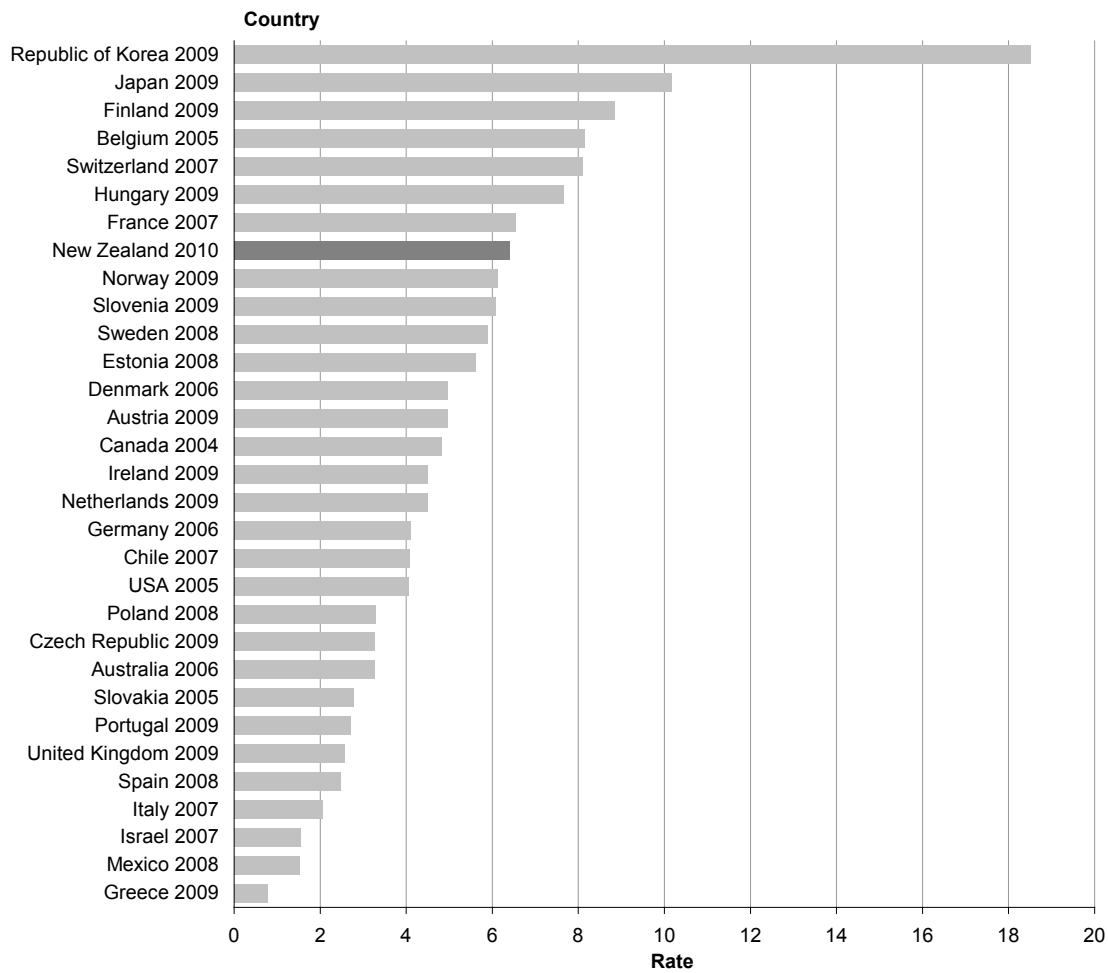
Figure 19: Suicide age-standardised rates for OECD countries, males



Source: WHO (nd)

Note: The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

Figure 20: Suicide age-standardised rates for OECD countries, females



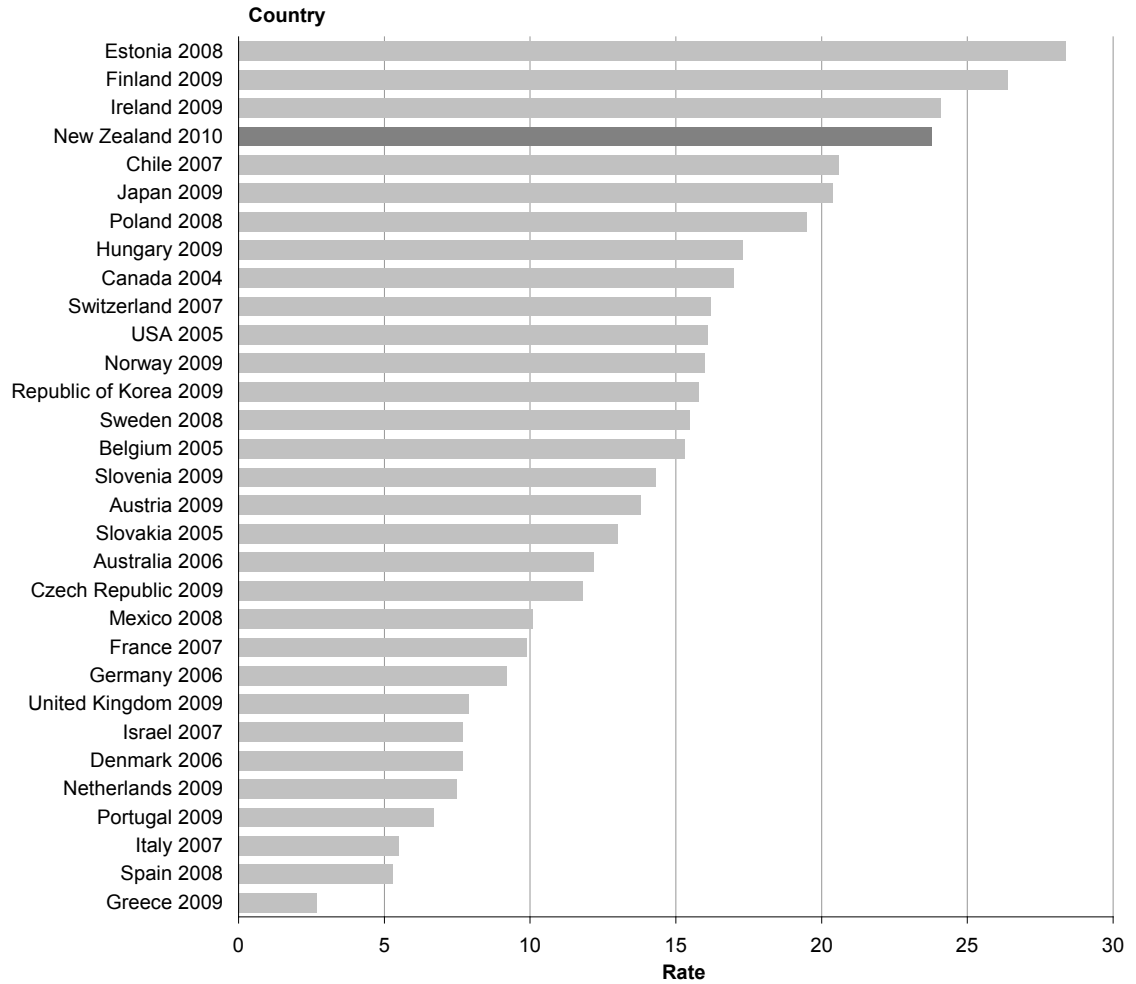
Source: WHO (nd)

Note: The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

Youth (15–24-year-olds)

When ranked alongside other OECD countries, the New Zealand suicide rate for males aged 15–24 years in 2010 was the fourth highest, behind Estonia (2008), Finland (2009) and Ireland (2009), as Figure 21 shows.

Figure 21: Suicide age-specific rates for OECD countries, males, 15–24 years

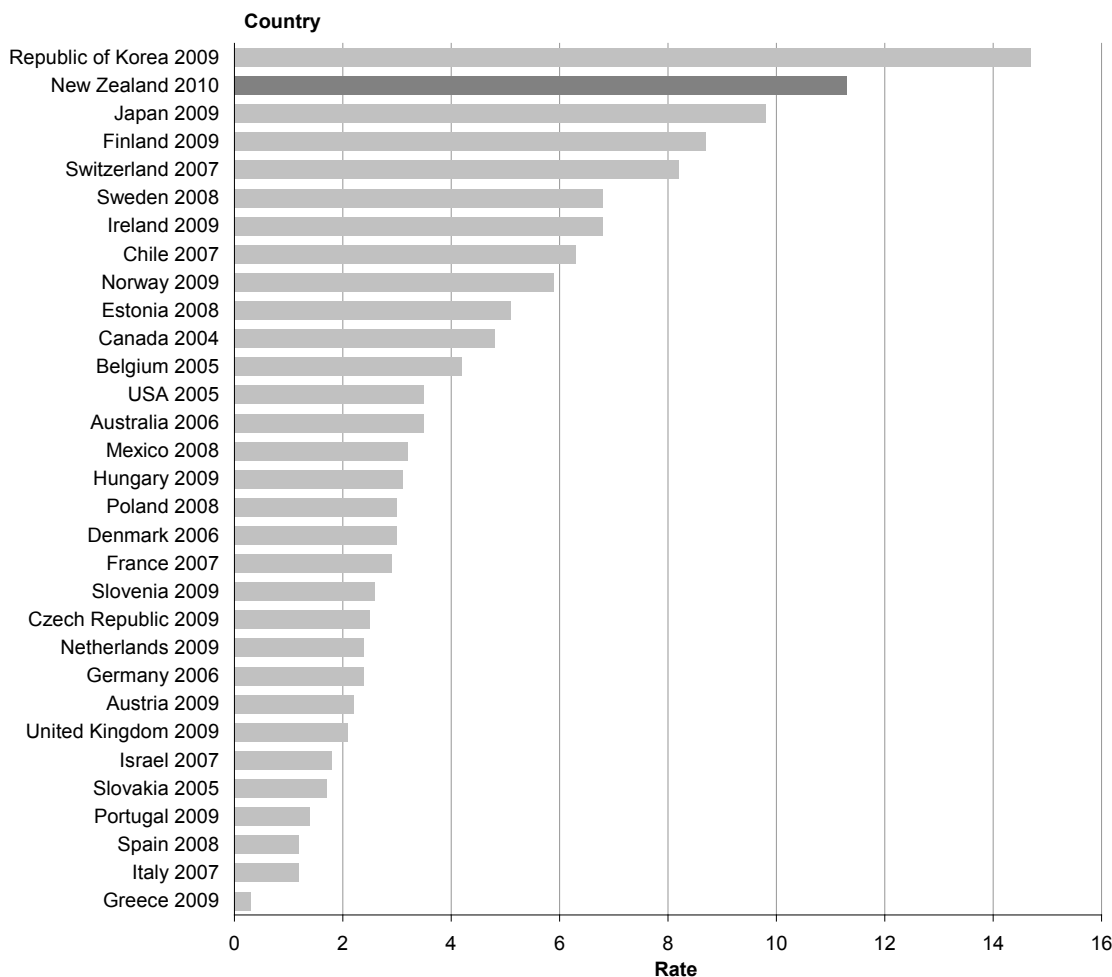


Source: WHO (nd)

Note: The rate in this figure is the age-specific rate, measuring the frequency of suicides per 100,000 population relative to particular population age groups.

As Figure 22 shows, the New Zealand female youth suicide rate in 2010 was the second highest of those in other OECD countries, behind only the Republic of Korea (2009).

Figure 22: Suicide age-specific rates for OECD countries, females, 15–24 years



Source: WHO (nd)

Note: The rate in this figure is the age-specific rate, measuring the frequency of suicides per 100,000 population relative to particular population age groups.

For completeness, Table A7 in Appendix 1 provides a brief overview of New Zealand’s suicide rates for adult age groups in comparison to other OECD countries.

Intentional self-harm hospitalisations in 2010

Summary

- Between 1996 and 2010 the rate of self-harm hospitalisations decreased by 23.1%, although rates are variable year on year.
- The motivation for intentional self-harm varies. Note that data on hospitalisation for intentional self-harm does not provide a measure of suicide attempts.
- To allow the best possible identification of trends, approximately 60% of all self-harm hospitalisation data has been excluded from this analysis (due to inconsistencies in the way DHBs report data).

Overview

This section discusses hospitalisations for intentional self-harm. For comparative purposes, the data presented here excludes patients who were only seen in an emergency department and those who were discharged within two days. This data was filtered due to inconsistent reporting between DHBs. Information collection is expected to become more consistent within the next few years, which will allow the full set of data to be included in future publications of *Suicide Facts*.

The filtering allows the best possible identification of real trends in intentional self-harm behaviour within the New Zealand population, and optimal regional comparison. The information presented here is not intended to represent a total count of those who received hospital treatment for an intentional self-harm event: approximately 60% have been excluded. See the ‘Technical notes’ section for further information.

This section presents data on intentional self-harm hospitalisations by sex, age, ethnicity, deprivation and DHB region of domicile.

Taking into account that a subset of the data has been removed, the total number of hospitalisations involving intentional self-harm showed a general decrease between 1996 (the earliest comparable year) and 2010, although there was annual variability.

Table 11 shows a decline from 3030 hospitalisations in 1996 to 2825 hospitalisations in 2010. Expressed as rates, this decline represents a clear downward movement: from 85.8 per 100,000 population in 1996 to 66.0 per 100,000 population in 2010, a drop of 23.1% overall (see Figure 23).

Table 11: Intentional self-harm hospitalisation numbers and age-standardised rates, 1996–2010

Year	Total	
	Number	Rate
1996	3030	85.8
1997	3074	83.8
1998	3103	83.5
1999	2838	76.3
2000	3017	80.9
2001	3136	83.2
2002	2902	75.2
2003	3141	80.3
2004	3000	75.5
2005	2743	68.3
2006	2869	69.6
2007	2686	64.0
2008	2468	58.2
2009	2539	59.6
2010	2825	66.0

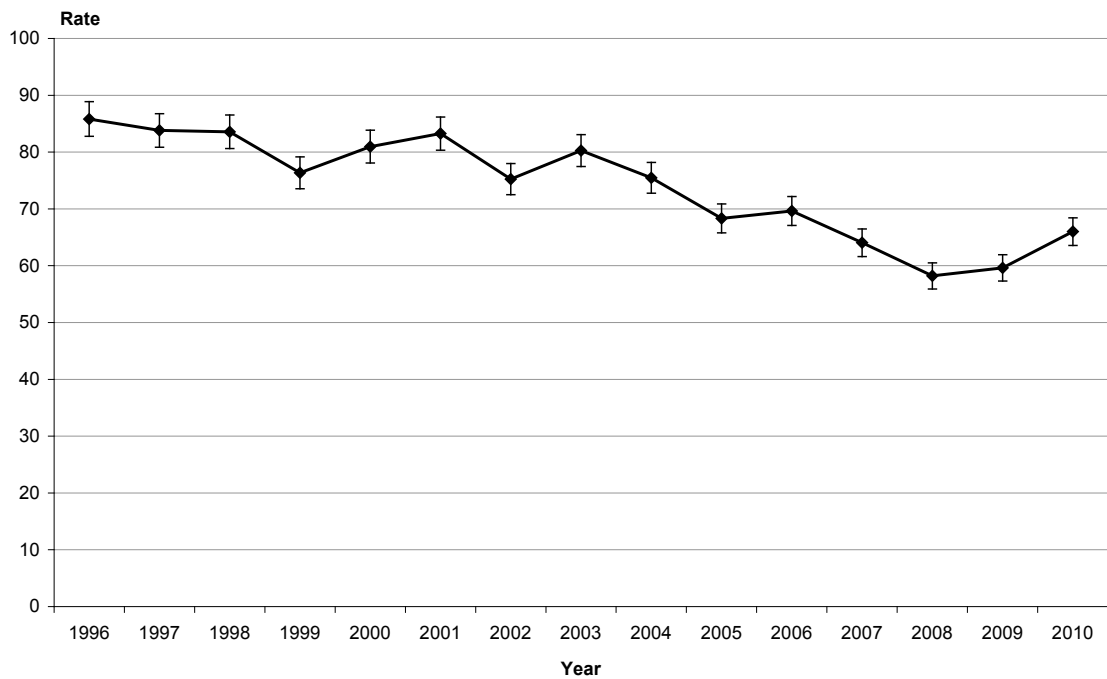
Source: New Zealand National Minimum Dataset

Note: The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

This decline may be due to a real change in behaviour within the population, but it is also likely to be due to changes in clinical practice and clinical administration over the last decade. For example, the move towards community-based mental health care is likely to have reduced the number of people who may previously have been admitted to inpatient mental health services following an intentional self-harm event.

Figure 23 shows that between 2008 and 2010 the rate of self-harm hospitalisations increased by 13.4%. This may either be the start of an upward trend or natural variation in the data; however, confidence intervals show that the 2010 rate was significantly higher than the rate in 2009.

Figure 23: Intentional self-harm hospitalisation age-standardised rates, 1996–2010



Source: New Zealand National Minimum Dataset

Note: The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

Sex

Summary

In 2010:

- females were 86.2% more frequently hospitalised for intentional self-harm than males
- there were 990 males (46.1 per 100,000 male population) and 1835 females (85.9 per 100,000 female population) hospitalised.

Table 12 shows that, in general, females are hospitalised for intentional self-harm at slightly less than twice the rate of males. It is well documented that females are more likely to be hospitalised for intentional self-harm than males (Berry and Harrison 2006).

Table 12: Intentional self-harm hospitalisation, numbers and age-standardised rates, by sex, 1996–2010

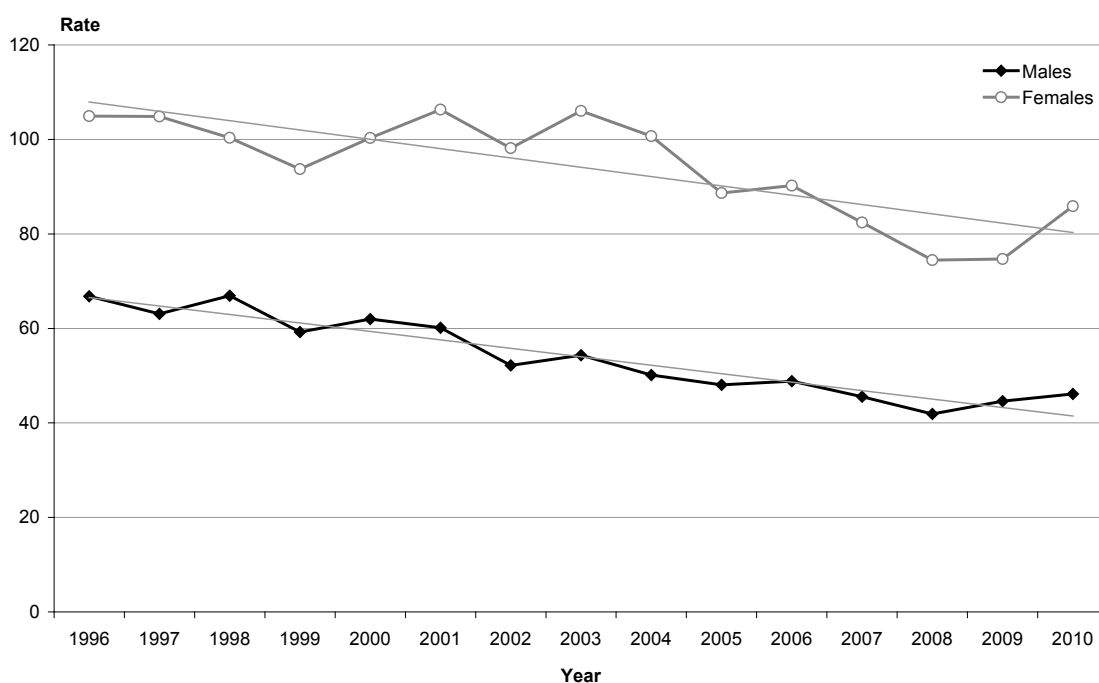
Year	Males		Females		Sex rate ratio (F:M)
	Number	Rate	Number	Rate	
1996	1173	66.8	1857	104.9	1.6
1997	1156	63.1	1918	104.8	1.7
1998	1229	66.9	1874	100.3	1.5
1999	1089	59.2	1749	93.7	1.6
2000	1148	62.0	1869	100.2	1.6
2001	1114	60.2	2022	106.2	1.8
2002	994	52.2	1908	98.1	1.9
2003	1048	54.3	2093	106.0	2.0
2004	982	50.1	2018	100.7	2.0
2005	953	48.0	1790	88.7	1.8
2006	991	48.8	1878	90.2	1.8
2007	940	45.6	1746	82.4	1.8
2008	877	41.9	1591	74.5	1.8
2009	947	44.6	1592	74.7	1.7
2010	990	46.1	1835	85.9	1.9

Source: New Zealand National Minimum Dataset

Note: The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

Figure 24 shows that for males and females, rates of hospitalisation for intentional self-harm trended downwards between 1996 and 2010; over that time rates fell by 31.0% for males and 18.1% for females. It should be noted, however, that rates for the population increased by 13.4% between 2008 and 2010.

Figure 24: Intentional self-harm hospitalisation age-standardised rates, by sex, 1996–2010



Source: New Zealand National Minimum Dataset

Note: The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

Age

Summary

- Males aged 20–24 years had the highest rate of male hospitalisations for intentional self-harm (87.1 per 100,000 male population) in 2010.
- Females aged 15–19 years had the highest rate of female hospitalisations for intentional self-harm (191.8 per 100,000 female population) in 2010.
- Between 1996 and 2010, youth hospitalisation rates for intentional self-harm declined by 35.4%: 46.0% among male youth and 28.3% among female youth.

This section discusses intentional self-harm hospitalisations by five-year age group, and also analyses the data for youth (those aged 15–24 years).

Table 13 shows that males aged 20–24 had the highest rate of male self-harm hospitalisation. In comparison, females aged 15–19 showed the highest female rates.

Table 13: Intentional self-harm hospitalisation numbers and age-specific rates, by sex and five-year age group, 2010

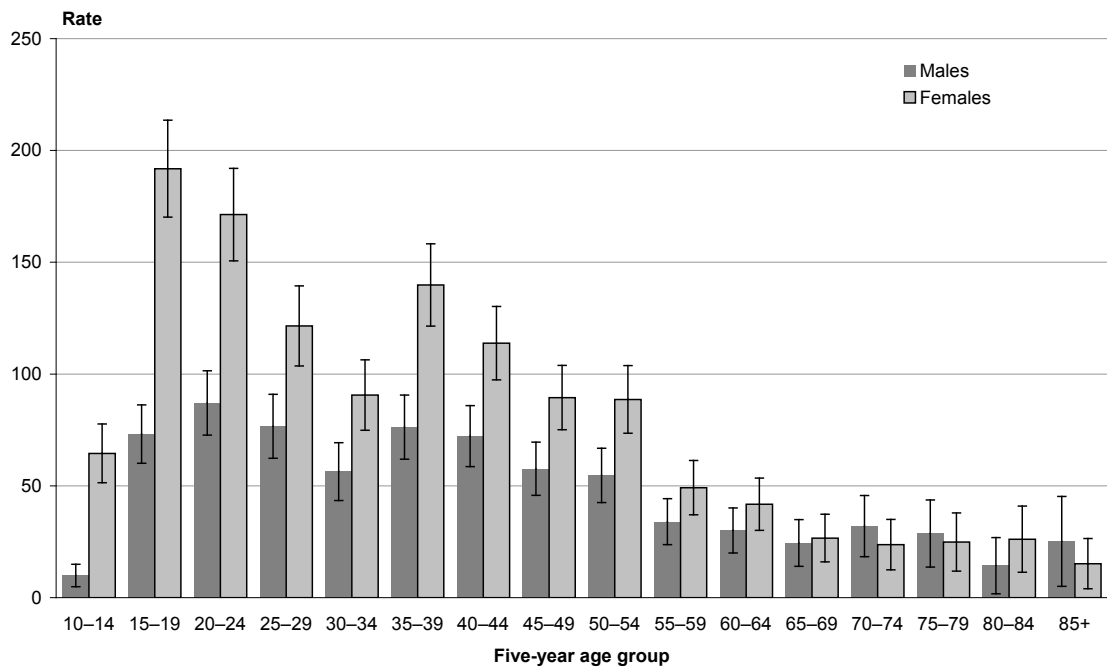
Age group (years)	Males		Females		Total	
	Number	Rate	Number	Rate	Number	Rate
5–9	2	1.4	0	0.0	2	0.7
10–14	15	9.9	93	64.5	108	36.5
15–19	121	73.2	301	191.8	422	130.9
20–24	141	87.1	264	171.3	405	128.2
25–29	110	76.6	177	121.5	287	99.2
30–34	73	56.4	127	90.6	200	74.2
35–39	109	76.3	221	139.8	330	109.6
40–44	108	72.2	185	113.8	293	93.9
45–49	90	57.6	149	89.5	239	74.1
50–54	78	54.7	132	88.6	210	72.0
55–59	42	34.0	63	49.2	105	41.7
60–64	34	30.0	49	41.8	83	36.0
65–69	21	24.5	24	26.6	45	25.6
70–74	21	32.0	17	23.7	38	27.7
75–79	14	28.7	14	24.8	28	26.6
80–84	5	14.3	12	26.1	17	21.0
85+	6	25.2	7	15.2	13	18.6
Total	990	46.1	1835	85.9	2825	66.0

Source: New Zealand National Minimum Dataset

Note: The rate in this figure is the age-specific rate, measuring the frequency of intentional self-harm hospitalisations per 100,000 population relative to particular population age groups.

Figure 25 shows that the differences between male and female rates were significant for all five-year age groups under 55 years.

Figure 25: Intentional self-harm hospitalisation age-specific rates, by age group and sex, 2010



Source: New Zealand National Minimum Dataset

Note: The rate in this figure is the age-specific rate, measuring the frequency of hospitalisations per 100,000 population relative to particular population age groups.

Youth

Table 14 shows age-specific rates of hospitalisations for intentional self-harm among those aged 15–24. In 2010 the female rate was more than twice the male rate (181.7 and 80.0 per 100,000 population, respectively).

Table 14: Youth intentional self-harm hospitalisation numbers and age-specific rates, by sex, 1996–2010

Year	Males		Females		Total	
	Number	Rate	Number	Rate	Number	Rate
1996	398	148.3	675	253.4	1073	200.7
1997	346	125.7	657	245.3	1003	184.7
1998	352	129.1	549	208.2	901	168.0
1999	276	101.9	506	194.5	782	147.3
2000	287	105.9	551	213.0	838	158.2
2001	282	104.4	615	232.6	897	167.8
2002	235	83.7	556	204.5	791	143.1
2003	275	93.9	622	221.2	897	156.2
2004	278	92.7	580	202.1	858	146.2
2005	224	73.5	503	172.8	727	122.0
2006	247	80.9	573	191.1	820	135.5
2007	219	70.5	520	171.6	739	120.4
2008	214	68.0	485	159.0	699	112.8
2009	240	74.8	489	159.0	729	116.0
2010	262	80.0	565	181.7	827	129.6

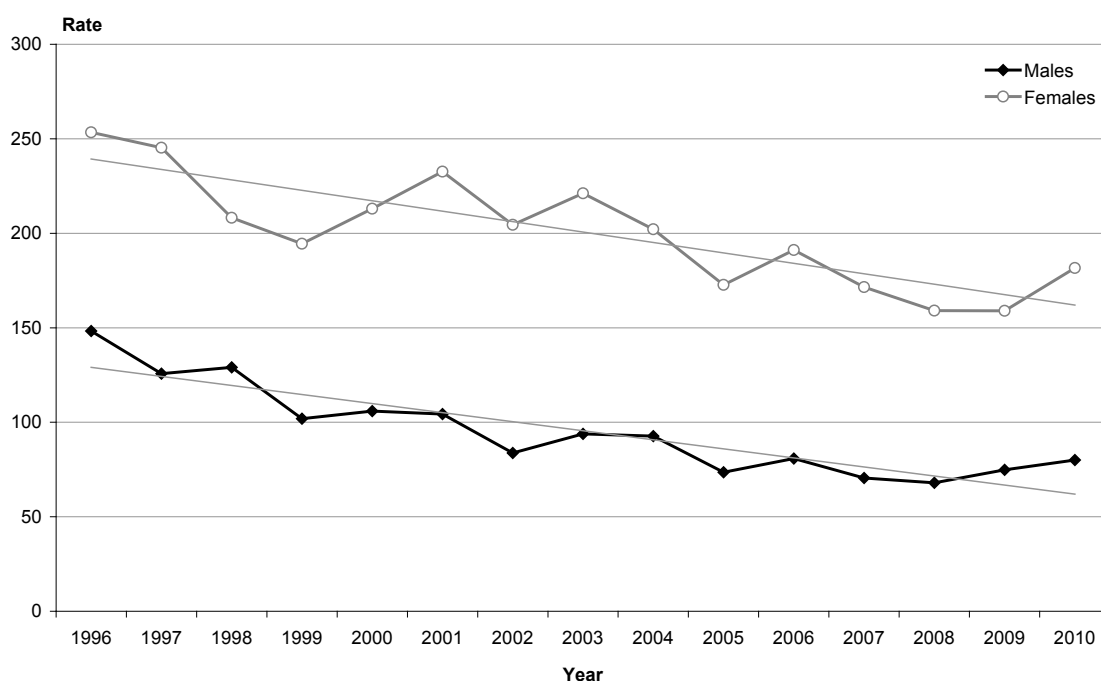
Source: New Zealand National Minimum Dataset

Note: The rate shown is the age-specific rate, measuring the frequency of intentional self-harm hospitalisations per 100,000 population relative to particular population age groups.

Figure 26 shows that there has been a reduction in youth intentional self-harm hospitalisation rates over time for both males and females. Male youth rates decreased by 46.0% and female rates by 28.3% between 1996 and 2010.

However, between 2008 and 2010, rates for intentional self-harm increased by 17.8% for male youth and by 14.2% for female youth. This may be the beginning of a trend, or it may be due to natural variation.

Figure 26: Youth intentional self-harm hospitalisation age-specific rates, by sex, 1996–2010



Source: New Zealand National Minimum Dataset

Note: The rate shown is the age-specific rate, measuring the frequency of intentional self-harm hospitalisations per 100,000 population relative to particular population age groups.

Ethnicity

Summary

- There were 83.6 Māori intentional self-harm hospitalisations per 100,000 Māori population in 2010, compared to 33.5 per 100,000 Pacific population and 64.8 per 100,000 non-Māori, non-Pacific population.
- The most common age group for Māori males to be hospitalised for intentional self-harm was 25–29 years, and for Māori females it was 15–19 years.
- Intentional self-harm hospitalisation rates for non-Māori dropped markedly between 1996 and 2010 (by 28.7%), while Māori rates increased by 13.7%.

Māori

In 2010 there were 535 intentional self-harm hospitalisations of Māori (18.9% of total intentional self-harm hospitalisations) (see Table 15). The most common age for Māori males to be hospitalised for intentional self-harm was 25–29 years (there were 41 hospitalisations for this age group, equating to 202.8 per 100,000 population). Māori females were most commonly hospitalised for intentional self-harm between the ages of 15 and 19 (there were 73 hospitalisations, equating to 220.9 per 100,000 population).

Pacific peoples

Ninety-six Pacific people were hospitalised for intentional self-harm in 2010 (3.4% of total intentional self-harm hospitalisations), equating to an age-standardised rate of 33.5 per 100,000 Pacific population. Pacific females accounted for 52.1% of these hospitalisations, a noticeably smaller proportion than the female proportion of the total population of 65.0%.

Asian peoples

In 2010 there were 99 intentional self-harm hospitalisations of Asian people (3.5% of total intentional self-harm hospitalisations). Age-standardised rates have not been calculated because reliable 2010 population data was not available for Asian peoples at the time of analysis. Females accounted for 65.7% of all Asian intentional self-harm hospitalisations.

Other groups

There were 2095 intentional self-harm hospitalisations for ethnic groups classified as 'Other' in 2010 (74.2% of total intentional self-harm hospitalisations). The most common age for males in the 'Other' group to be hospitalised was 20–24, while females were more commonly hospitalised between the ages of 15 and 19. Females accounted for 67.2% of intentional self-harm hospitalisations in this group.

Table 16 shows age-specific rates calculated using groupings of Māori, Pacific and non-Māori/non-Pacific populations. Rates of hospitalisations for intentional self-harm among Māori and Pacific people remained stable over the period 1996–2010; however, Pacific rates were on average about 44% lower than Māori rates. Non-Māori/non-Pacific rates fell by 29.2% over the period.

Table 15: Intentional self-harm hospitalisations, by ethnicity, age group and sex, 2010

Ethnicity	Sex	Total	Age group (years)																	
			0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+
Māori	Total	535	0	1	35	108	86	72	35	70	45	41	22	5	9	3	2	1	0	0
	Males	223	0	1	5	35	35	41	19	27	21	20	9	2	4	2	1	1	0	0
	Females	312	0	0	30	73	51	31	16	43	24	21	13	3	5	1	1	0	0	0
Pacific	Total	96	0	0	7	28	18	15	6	6	7	2	5	1	0	0	1	0	0	0
	Males	46	0	0	2	13	11	4	4	4	4	0	3	1	0	0	0	0	0	0
	Females	50	0	0	5	15	7	11	2	2	3	2	2	0	0	0	1	0	0	0
Asian	Total	99	0	0	3	15	17	17	8	8	8	6	3	2	1	3	4	3	0	1
	Males	34	0	0	0	3	8	4	5	2	3	2	1	1	1	1	3	0	0	0
	Females	65	0	0	3	12	9	13	3	6	5	4	2	1	0	2	1	3	0	1
Other	Total	2095	0	1	63	271	284	183	151	246	233	190	180	97	73	39	31	24	17	12
	Males	687	0	1	8	70	87	61	45	76	80	68	65	38	29	18	17	13	5	6
	Females	1408	0	0	55	201	197	122	106	170	153	122	115	59	44	21	14	11	12	6
Total	Total	2825	0	2	108	422	405	287	200	330	293	239	210	105	83	45	38	28	17	13
	Males	990	0	2	15	121	141	110	73	109	108	90	78	42	34	21	21	14	5	6
	Females	1835	0	0	93	301	264	177	127	221	185	149	132	63	49	24	17	14	12	7

Source: New Zealand National Minimum Dataset

Table 16: Intentional self-harm hospitalisation numbers and rates, by ethnicity and sex, 1996–2010

Year	Number									Rate								
	Māori			Pacific peoples			Non-Māori/non-Pacific			Māori			Pacific peoples			Non-Māori/non-Pacific		
	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total
1996	147	249	396	32	32	64	994	1576	2570	56.3	89.7	73.5	32.8	31.3	31.8	69.9	113.5	91.5
1997	178	262	440	23	51	74	955	1605	2560	64.0	87.9	76.1	26.1	50.0	38.2	64.7	112.0	88.0
1998	217	268	485	29	34	63	983	1572	2555	76.7	91.9	84.5	29.4	35.0	32.2	66.6	107.2	86.7
1999	194	260	454	28	48	76	867	1441	2308	67.4	85.0	76.3	29.6	47.0	38.4	58.9	98.5	78.5
2000	191	293	484	38	41	79	919	1535	2454	66.7	96.2	81.6	35.7	38.1	37.0	62.0	105.8	83.6
2001	211	302	513	30	42	72	873	1678	2551	71.7	96.6	84.1	26.6	35.3	30.8	59.2	113.9	86.5
2002	152	268	420	46	59	105	796	1581	2377	53.0	87.9	70.8	40.7	50.3	45.5	51.4	103.6	77.5
2003	193	305	498	29	52	81	827	1736	2563	66.1	97.1	82.0	25.1	46.1	36.2	53.3	112.0	82.6
2004	178	259	437	27	41	68	777	1718	2495	60.8	81.9	71.4	22.2	35.8	29.3	49.5	110.2	79.7
2005	187	275	462	40	42	82	726	1473	2199	63.9	85.2	74.6	33.3	33.3	33.2	45.8	93.8	69.7
2006	174	299	473	36	34	70	781	1545	2326	60.2	93.5	77.2	28.5	25.9	27.2	47.5	95.5	71.5
2007	194	269	463	36	40	76	710	1437	2147	68.0	82.9	75.3	29.6	30.4	29.9	42.4	86.7	64.5
2008	152	262	414	47	36	83	678	1293	1971	52.3	79.8	66.3	35.2	26.3	30.6	39.5	77.5	58.4
2009	176	281	457	35	42	77	736	1269	2005	59.7	83.7	71.6	27.0	29.7	28.3	43.0	75.9	59.4
2010	223	312	535	46	50	96	721	1473	2194	75.2	92.5	83.6	32.2	34.8	33.5	41.4	88.3	64.8

Source: New Zealand National Minimum Dataset

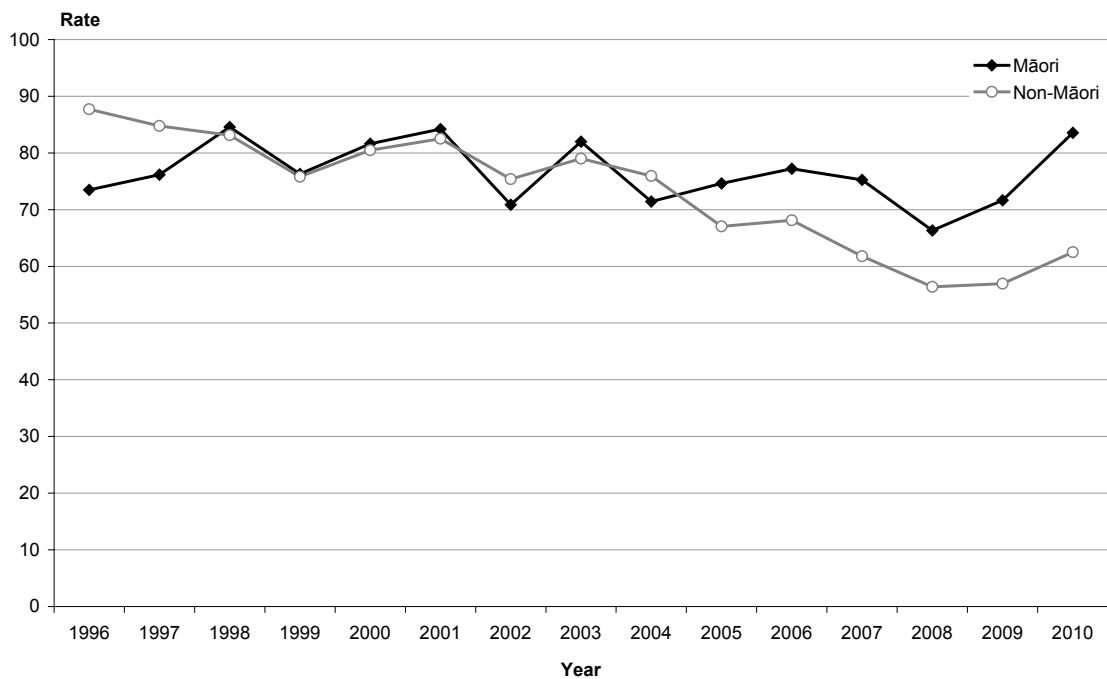
Note: The rate shown is the age-specific rate, measuring the frequency of intentional self-harm hospitalisations per 100,000 population relative to particular population age groups.

Figure 27 shows rates for Māori and non-Māori intentional self-harm hospitalisations. Between 1996 and 2010 rates for Māori were variable year on year and have shown no real trend.

Rates for non-Māori dropped by 28.7% between 1996 and 2010, although they have shown an increase since 2008.

In 2010 the Māori rate of self-harm hospitalisations was 33.7% higher than the non-Māori rate. This difference was statistically different.

Figure 27: Intentional self-harm hospitalisation age-standardised rates, Māori and non-Māori, 1996–2010



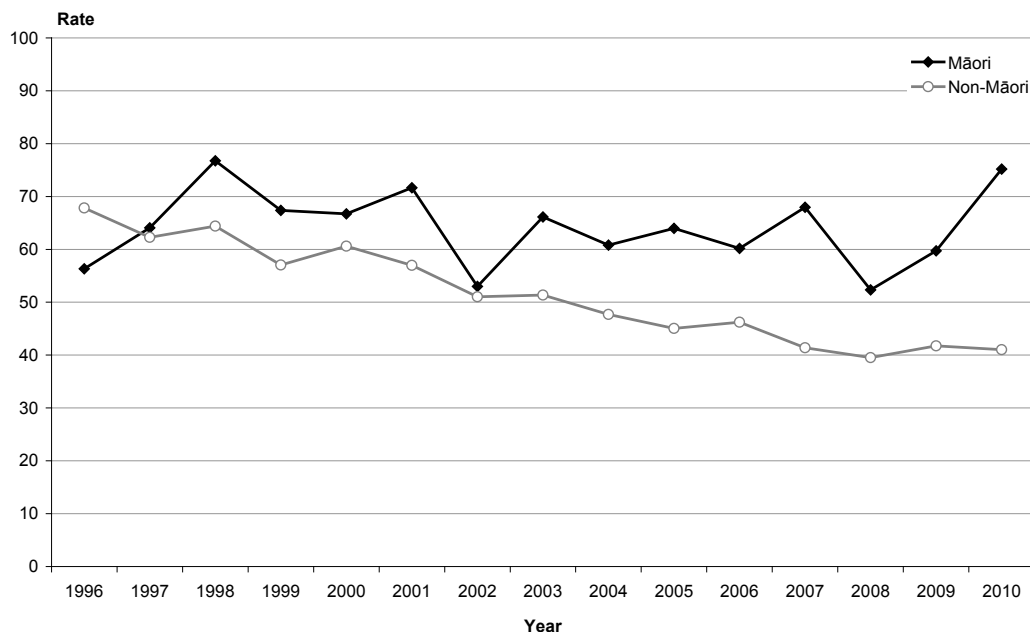
Source: New Zealand National Minimum Dataset

Note: The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

Figure 28 shows rates of intentional self-harm hospitalisation for Māori and non-Māori males. Rates for non-Māori males showed a decline between 1996 and 2010, falling by 39.5%. Rates of self-harm hospitalisation for Māori males have been variable over time, and are showing no signs of improvement.

Figure 29 shows comparative rates for females. The female non-Māori rate of self-harm hospitalisation fell by 33.1% between 1996 and 2010 to 84.0 per 100,000 non-Māori females. As with Māori males, the rate for Māori females showed no obvious downward trend over this time.

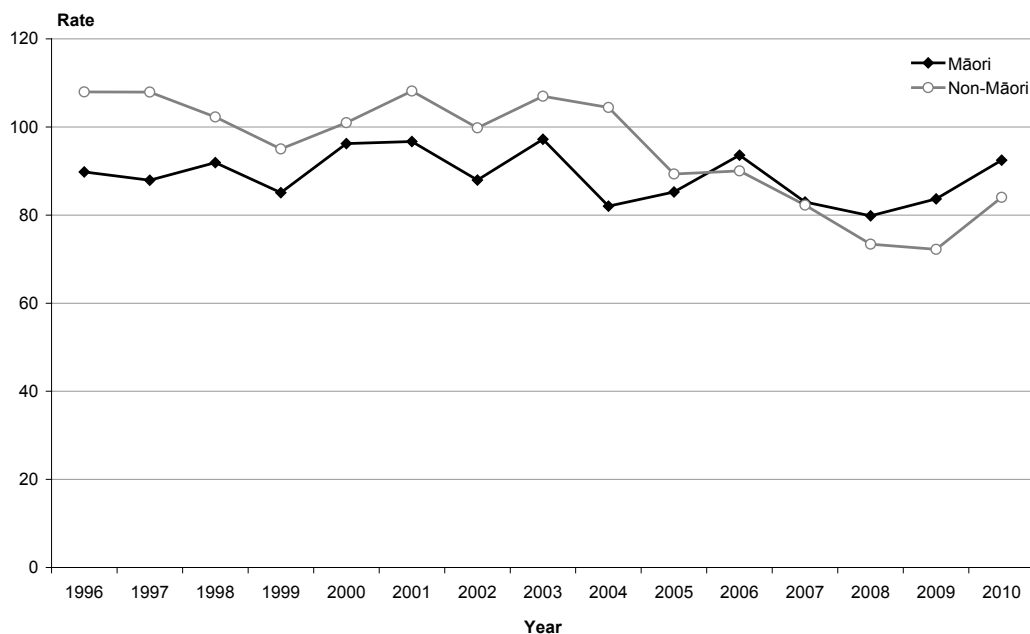
Figure 28: Intentional self-harm hospitalisation age-standardised rates for Māori and non-Māori males, 1996–2010



Source: New Zealand National Minimum Dataset

Note: The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

Figure 29: Intentional self-harm hospitalisation age-standardised rates for Māori and non-Māori females, 1996–2010



Source: New Zealand National Minimum Dataset

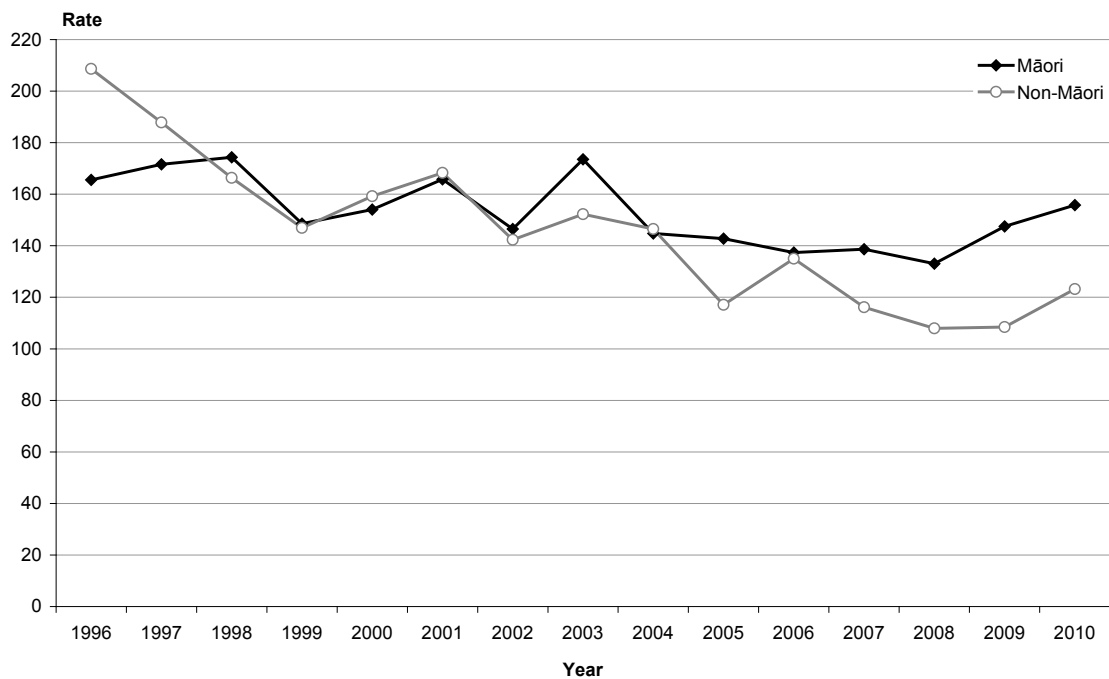
Note: The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

Youth

Figure 30 and Table 17 show numbers and rates of self-harm hospitalisation for youth between 1996 and 2010.

Rates for Māori youth have shown no real change over time, with rates varying between approximately 133 and 175 hospitalisations per 100,000 Māori youths every year. Non-Māori youth, however, have shown a strong downward trend, with the 2010 rates 40.9% lower than in 1996. However, rates for both Māori and non-Māori youth have shown an increase since 2008, as is seen in the self-harm hospitalisation rates for the total population (as shown in Figure 23).

Figure 30: Youth intentional self-harm hospitalisation age-specific rates, by ethnicity, 1996–2010



Source: New Zealand National Minimum Dataset

Note: The rate in this figure is the age-specific rate, measuring the frequency of intentional self-harm hospitalisations relative to particular population age groups.

Table 17: Youth intentional self-harm hospitalisation numbers and age-specific rates, Māori and non-Māori, by sex, 1996–2010

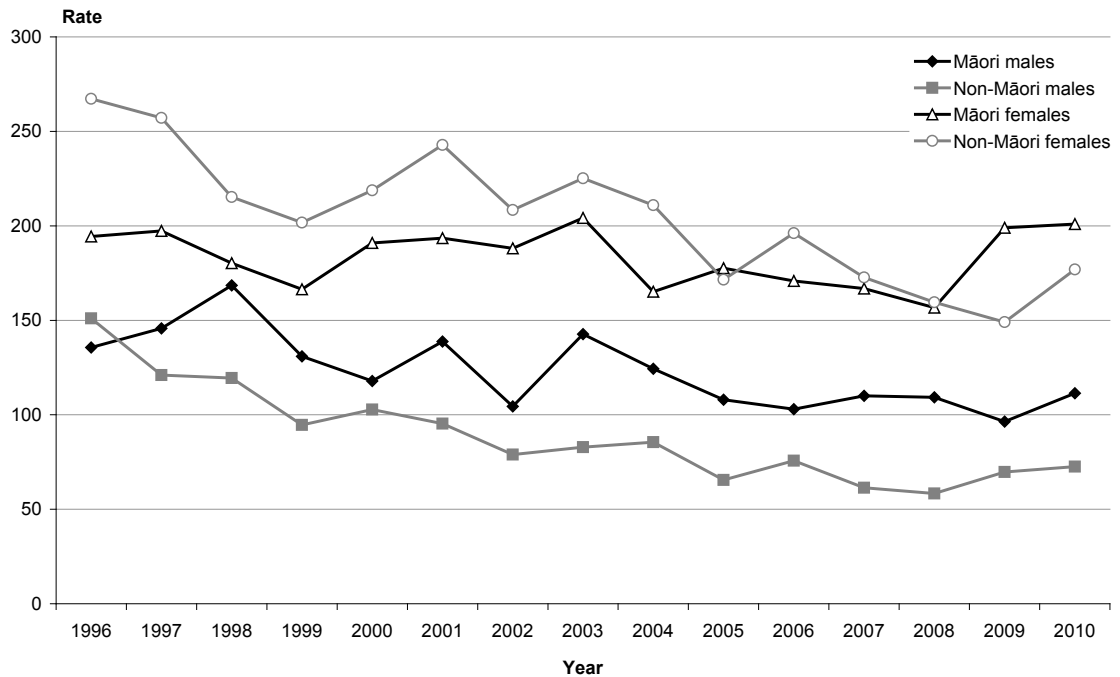
Year	Māori						Non-Māori					
	Males		Females		Total		Males		Females		Total	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
1996	66	135.7	98	194.4	164	165.6	332	151.1	577	267.2	909	208.6
1997	77	145.8	105	197.3	182	171.6	269	121.0	552	257.2	821	187.9
1998	90	168.4	96	180.3	186	174.4	262	119.5	453	215.3	715	166.4
1999	71	131.0	89	166.4	160	148.6	205	94.6	417	201.7	622	146.9
2000	65	117.9	103	191.0	168	154.0	222	102.8	448	218.8	670	159.2
2001	78	138.8	106	193.5	184	165.8	204	95.3	509	242.8	713	168.3
2002	55	104.4	100	188.1	155	146.5	180	78.9	456	208.4	636	142.3
2003	77	142.7	111	204.2	188	173.6	198	82.9	511	225.2	709	152.2
2004	69	124.3	92	165.1	161	144.8	209	85.5	488	211.0	697	146.5
2005	62	107.9	102	177.6	164	142.8	162	65.5	401	171.6	563	117.1
2006	59	102.9	101	170.8	160	137.4	188	75.7	472	196.1	660	135.0
2007	64	110.0	99	166.8	163	138.7	155	61.4	421	172.7	576	116.1
2008	65	109.2	94	156.7	159	133.0	149	58.4	391	159.6	540	107.9
2009	59	96.4	121	199.0	180	147.5	181	69.7	368	149.1	549	108.4
2010	70	111.4	124	200.9	194	155.7	192	72.6	441	176.9	633	123.2

Source: New Zealand National Minimum Dataset

Note: The rate shown is the age-specific rate, measuring the frequency of intentional self-harm hospitalisations relative to particular population age groups.

Māori male youths tend to have higher rates of intentional self-harm hospitalisation than non-Māori male youths, whereas the ethnic disparity is less defined for females, as shown in Figure 31.

Figure 31: Youth intentional self-harm hospitalisation age-specific rates, by ethnicity and sex, 1996–2010



Source: New Zealand National Minimum Dataset

Note: The rate in this figure is the age-specific rate, measuring the frequency of intentional self-harm hospitalisations per 100,000 population relative to particular population age groups.

Deprivation

Summary

In 2010:

- rates of self-harm hospitalisation increased with deprivation
- those in the most deprived quintiles (quintiles 4 and 5) had rates more than twice the comparable rate of those in the least deprived quintile (quintile 1)
- for both males and females, the differences between rates for the least and most deprived quintiles are statistically significant.

As discussed in the ‘Suicide deaths’ section of this publication, deprivation has been found to be associated with various adverse health outcomes: those who are most deprived generally experience poorer health.

Table 18 shows that in 2010 the rate of intentional self-harm hospitalisations for the least deprived quintile (quintile 1), 40.0 per 100,000 quintile 1 population, was less than half the rate of the most deprived quintiles (quintiles 4 and 5).

Table 18: Intentional self-harm hospitalisation numbers and age-standardised rates, by NZDep2006 quintile, 2010

Deprivation quintile		Number	Rate
1 least deprived	Total	338	40.0
	Males	107	24.7
	Females	231	55.9
2	Total	400	47.2
	Males	135	31.0
	Females	265	63.8
3	Total	554	64.7
	Males	181	41.0
	Females	373	88.9
4	Total	759	90.2
	Males	260	61.8
	Females	499	118.4
5 most deprived	Total	762	90.6
	Males	298	73.6
	Females	464	106.8

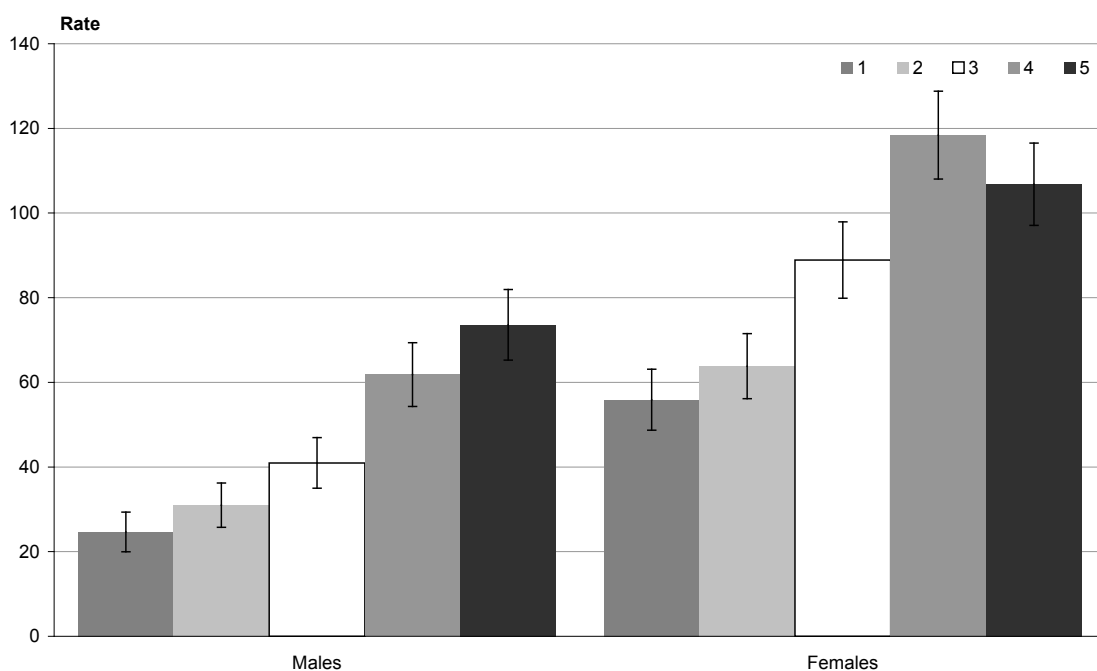
Source: New Zealand National Minimum Dataset

Note: The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

Figure 32 shows 2010 intentional self-harm hospitalisation rates and confidence intervals by deprivation quintile and sex. There was a significant difference between male rates in the least and most deprived quintiles: the rate in the most deprived quintile (73.6 per 100,000 population) was three times higher than the rate in the least deprived quintile (24.7 per 100,000 population). However, there was no significant difference between rates in quintiles 1 and 2, or between rates in quintiles 4 and 5.

Similarly, there was no significant difference between female rates in the two least deprived quintiles. However, the rates for quintiles 1 and 2 were significantly lower than the rates for quintiles 3, 4 and 5. In 2010 the female rate was highest in quintile 4 (118.4 per 100,000 population); this rate was more than twice as high as the rate in the least deprived quintile (55.9 per 100,000 population).

Figure 32: Intentional self-harm hospitalisation age-standardised rates, by deprivation quintile and sex, 2010



Source: New Zealand National Minimum Dataset

Note: The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

District health boards

Summary

Over 2008–2010:

- half of the DHB regions had significantly higher rates for intentional self-harm hospitalisations than the national rate, with Wairarapa being notably higher than all others
- Auckland, Counties Manukau, Hawke’s Bay and MidCentral DHB regions had significantly lower rates than the national rate.

Hospitalisation data has been filtered to allow as much consistency as possible over time and between DHBs (see the ‘Technical notes’ section for more information). However, filtering cannot completely eliminate differences caused by different methods of managing patients and keeping records.

2010 data

Table 19 shows that the DHB region with the highest age-standardised rate of intentional self-harm hospitalisations in 2010 was Wairarapa. Auckland and Counties Manukau DHB regions had the lowest rates. The Hawke’s Bay and Whanganui DHB regions were the only ones in which the rate of male intentional self-harm hospitalisations exceeded that of females. Nelson Marlborough DHB region had the highest female-to-male rate ratio: 4.0 females hospitalised for every male.

Table 19: Intentional self-harm hospitalisation numbers and age-standardised rates, by DHB of domicile and sex, 2010

DHB	Males		Females		Total		Sex rate ratio (F:M)
	Number	Rate	Number	Rate	Number	Rate	
Northland	42	60.0	71	98.6	113	79.5	1.6
Waitemata	127	48.1	199	73.5	326	60.9	1.5
Auckland	73	30.0	87	36.6	160	33.2	1.2
Counties Manukau	67	28.6	90	36.3	157	32.1	1.3
Waikato	100	57.8	129	72.5	229	65.3	1.3
Lakes	27	56.0	46	94.5	73	75.3	1.7
Bay of Plenty	67	71.8	105	109.7	172	90.6	1.5
Tairāwhiti	9	39.7	21	95.6	30	67.9	2.4
Hawke's Bay	38	55.1	35	45.8	73	50.5	0.8
Taranaki	35	68.6	65	136.9	100	103.0	2.0
MidCentral	22	28.6	62	78.0	84	53.5	2.7
Whanganui	23	76.3	20	66.1	43	70.1	0.9
Capital & Coast	65	43.6	231	148.4	296	97.3	3.4
Hutt Valley	30	43.4	86	120.5	116	82.2	2.8
Wairarapa	20	110.8	35	213.1	55	162.3	1.9
Nelson Marlborough	26	39.0	92	155.0	118	95.7	4.0
West Coast	12	82.8	20	131.0	32	105.5	1.6
Canterbury	108	42.7	217	91.3	325	66.9	2.1
South Canterbury	14	60.8	19	82.8	33	71.8	1.4
Otago	68	70.5	162	168.7	230	120.4	2.4
Southland	16	29.2	40	78.5	56	53.1	2.7
Overseas and undefined	1	...	3	...	4

Source: New Zealand National Minimum Dataset

Notes:

The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

... = not available.

Aggregated data, 2008–2010

Since intentional self-harm hospitalisation rates vary considerably from year to year, it is useful to consider age-standardised rates based on three years' accumulated data: in this case 2008–2010. Table 20 and Figure 33 show accumulated rates for each DHB region by sex.

Table 20: Intentional self-harm hospitalisation numbers and age-standardised rates, by DHB of domicile, 2008, 2009 and 2010 (accumulated data)

DHB	Males		Females		Total		Sex rate ratio (F:M)
	Number	Rate	Number	Rate	Number	Rate	
Northland	117	58.6	244	116.9	361	87.6	2.0
Waitemata	364	46.2	564	70.3	928	58.3	1.5
Auckland	231	32.3	235	33.8	466	32.8	1.0
Counties Manukau	198	29.0	269	36.4	467	32.6	1.3
Waikato	293	57.5	444	84.8	737	71.4	1.5
Lakes	88	63.4	125	86.2	213	74.3	1.4
Bay of Plenty	188	66.4	252	88.9	440	77.4	1.3
Tairāwhiti	27	41.7	62	97.8	89	70.2	2.3
Hawke's Bay	82	40.7	104	45.2	186	43.0	1.1
Taranaki	91	60.4	168	111.6	259	86.0	1.8
MidCentral	83	34.6	138	55.2	221	44.9	1.6
Whanganui	48	55.0	79	92.2	127	73.2	1.7
Capital & Coast	160	36.1	466	102.5	626	70.1	2.8
Hutt Valley	88	44.2	265	121.6	353	83.1	2.7
Wairarapa	52	101.3	114	229.0	166	165.4	2.3
Nelson Marlborough	90	45.8	259	145.6	349	94.4	3.2
West Coast	35	83.0	55	110.6	90	95.7	1.3
Canterbury	291	38.2	649	90.8	940	64.3	2.4
South Canterbury	43	62.0	58	89.9	101	75.8	1.5
Otago	170	59.7	343	120.5	513	90.5	2.0
Southland	67	41.4	115	75.6	182	58.0	1.8
Overseas and undefined	8	...	10	...	18

Source: New Zealand National Minimum Dataset

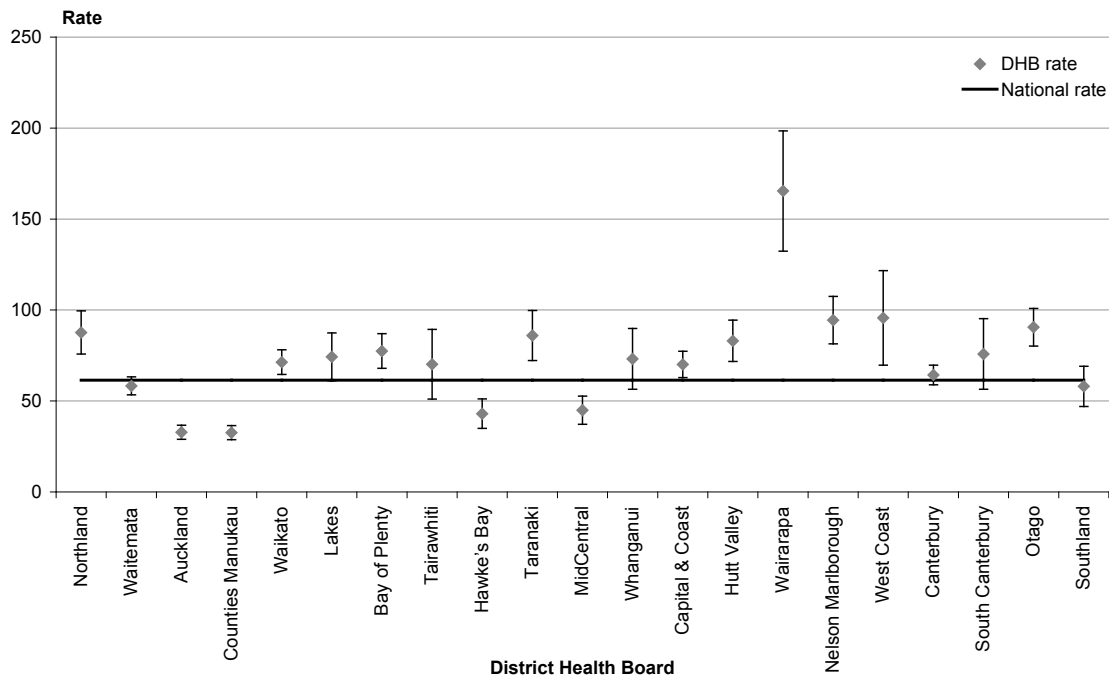
Note: The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

... = not available.

The national figure was 61.4 intentional self-harm hospitalisations per 100,000 population over the three years: the horizontal line in Figure 33 represents this.¹¹ The figure also provides confidence intervals¹² to aid interpretation.

Figure 33 shows clearly that Wairarapa had the highest rate for intentional self-harm hospitalisations across all DHB regions over 2008–2010. Half of all DHBs had rates that were significantly higher than the national rate. Auckland, Counties Manukau, Hawke’s Bay and MidCentral DHB regions had significantly lower rates.

Figure 33: Intentional self-harm hospitalisation age-standardised rates, by DHB of domicile, 2008, 2009 and 2010 (accumulated data)



Source: New Zealand National Minimum Dataset

Note: The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

¹¹ The national rate has been calculated based on the New Zealand estimated resident population as at 30 June 2009 (the mid-point) and standardised to the WHO standard world population. This population can be found in Appendix 1, Table A3.

¹² Confidence intervals are for 99% confidence; see the ‘Definitions’ section for more information.

Ethnicity

Table 21 indicates considerable variation between DHB regions for Māori and non-Māori rates of intentional self-harm hospitalisations over the period 2008–2010.

Among Māori, the highest rates were in the South Canterbury DHB region for males and the Wairarapa DHB region for females. The highest non-Māori rates for both males and females were seen in the Wairarapa DHB region. However, when the data is broken down into population subgroups, the numbers in some subgroups (for example, Māori males) are small and should be treated with caution.

Table 21: Intentional self-harm hospitalisation numbers and age-standardised rates for Māori and non-Māori, by DHB of domicile and sex, 2008, 2009 and 2010 (accumulated data)

DHB	Māori				Non-Māori				Māori:non-Māori rate ratio	
	Males		Females		Males		Females		Males	Females
	Number	Rate	Number	Rate	Number	Rate	Number	Rate		
Northland	45	72.1	86	118.0	72	50.5	158	116.1	1.4	1.0
Waitemata	60	87.6	60	85.8	304	42.0	495	67.9	2.1	1.3
Auckland	28	50.5	29	49.9	203	30.4	206	31.8	1.7	1.6
Counties Manukau	51	50.4	67	54.1	147	25.2	202	32.8	2.0	1.6
Waikato	81	75.8	113	96.1	212	51.7	331	80.1	1.5	1.2
Lakes	24	55.8	49	92.3	64	67.1	76	82.7	0.8	1.1
Bay of Plenty	41	63.4	73	95.5	147	67.9	179	82.8	0.9	1.2
Tairāwhiti	15	48.5	34	101.2	12	28.5	28	89.6	1.7	1.1
Hawke's Bay	33	69.6	32	56.6	49	29.8	72	40.4	2.3	1.4
Taranaki	23	93.1	27	105.8	68	50.8	141	113.7	1.8	0.9
MidCentral	15	36.2	17	35.7	68	33.9	121	59.9	1.1	0.6
Whanganui	10	51.8	20	78.4	38	55.7	59	98.7	0.9	0.8
Capital & Coast	26	56.6	59	118.2	134	33.4	407	100.2	1.7	1.2
Hutt Valley	28	82.1	26	67.2	60	35.2	239	132.5	2.3	0.5
Wairarapa	4	48.5	30	307.3	48	107.2	84	201.7	0.5	1.5
Nelson Marlborough	5	26.2	14	78.0	85	47.9	245	156.0	0.5	0.5
West Coast	3	58.8	7	105.0	32	83.7	48	103.2	0.7	1.0
Canterbury	25	43.9	37	66.7	266	37.7	612	94.0	1.2	0.7
South Canterbury	8	152.3	5	89.1	35	53.4	53	90.3	2.9	1.0
Otago	11	53.9	39	193.9	159	60.0	304	114.1	0.9	1.7
Southland	14	68.6	20	108.4	53	36.6	95	71.4	1.9	1.5
Overseas and undefined	1	...	2	...	7	...	8

Source: New Zealand National Minimum Dataset

Note: The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

Technical notes

Data

Population denominator

The suicide and self-harm hospitalisation rates presented in this report and the last four years' publications will differ from those given in editions of *Suicide Facts* prior to *Suicide Facts: Deaths and intentional self-harm hospitalisations 2006*. In the 2006, 2007, 2008, 2009 and 2010 data, any population analysis is based on New Zealand population estimates as calculated by Statistics New Zealand. In *Suicide Facts* publications using data for 2005 or earlier, different population denominators were used (note that the only exception to this is the deprivation data and data for Pacific peoples, for which population projections have been used).

Suicide deaths

All suicide mortality data in this publication was obtained from the New Zealand Mortality Collection, except for the international numbers used in international comparisons, which were obtained from the WHO.

In New Zealand, classification of a death as suicide is subject to a coroner's inquiry, and only on completion of this inquiry can a death be officially classified as suicide. In some cases an inquest may be heard several years after the death, particularly if there are factors relating to the death that need to be investigated first (for example, deaths in custody). Consequently, a provisional suicide classification may be made before a coroner's verdict. The suicide mortality data used in this report is provisional 2010 data. Twenty-five deaths that were registered in 2010 are still subject to coroners' findings, and no provisional cause of death had been assigned to them at the time of data extraction. Although none of these 25 deaths are included in this publication, some of these may later be classed as suicide.

The number of provisionally classified deaths from suicide in 2010 presented in this report may differ slightly from the number for the same year presented in future reports, when the data has been finalised. The Ministry of Health will release the final data in the publication *Mortality and Demographic Data 2010*.

The suicide data in this report is based on deaths that were registered in 2010 at the office of Births, Deaths and Marriages. While most deaths are registered in the year the death occurred, a few deaths (approximately 2%) are registered in later years.

Small numbers and rates

Caution is advised when interpreting rates derived from small numbers as they may fluctuate markedly over time. This may apply to both small numbers of cases and/or small population groups.

Filtering of data on hospitalisation for intentional self-harm

Data for the section on intentional self-harm hospitalisation was extracted for the years from 1996 onwards for comparison of trends (hospitalisation data can only be compared consistently back to this year because of changes in the recording and reporting of data in July 1995).

When considering all the information in the ‘Self-harm hospitalisations’ section, it is very important to note that a large subset of the data has been removed. This is because DHBs had differing admission practices, which resulted in differences in the data reported. The excluded data represents patients who were discharged from an emergency department after a length of stay of less than two days. It is evident in Table A8 that these events were reported very differently within individual DHBs between 1996 and 2010. The data that was clearly inconsistent having been removed, the remaining data can be used to make meaningful comparisons across years and DHBs.

Table A8 in Appendix 1 shows admissions that have been excluded from the main 1996–2010 data presented in this document.

The data presented here also excludes any admissions for an intentional self-harm incident within two days of a previous discharge involving intentional self-harm (see Table A9). It is not unusual for patients to be transferred between hospitals after an intentional self-harm event. In many cases, DHBs were recording such transfers as additional admissions. These admissions usually occurred within two days of the previous discharge, thereby artificially inflating the numbers of recorded admissions. For the sake of consistency, and to give a more accurate picture of changes within the population, all admissions involving intentional self-harm within two days of a previous admission for intentional self-harm have been removed from the data set.

The data shown in Tables A8 and A9 having been removed, any trends found within the remaining data are more likely to be due to changes in population behaviour rather than to changes in administrative procedures within or across DHBs. The Ministry of Health is endeavouring to address inconsistencies in data collection.

The hospitalisations for intentional self-harm data recorded in this publication does not therefore represent the total number of people receiving hospital treatment for intentional self-harm. Even once consistency issues between DHBs are addressed, the total extent of intentional self-harm is still difficult to capture, because many people who intentionally self-harm do not seek hospital treatment.

It is important to note that hospitalisations for intentional self-harm represent individual events of self-harm rather than individual people: a single person can contribute numerous unique intentional self-harm events to the data set.

Between 1996 and 2010 there were two hospitalisations reported for intentional self-harm among children aged under five. These admissions have not been excluded from the data.

The data-filtering methods used in this report mean that data within this publication cannot be compared with that in any previous documents published by the Ministry of Health in this series prior to the 2008 publication *Suicide Facts: Deaths and intentional self-harm hospitalisations 2006*.

Percentage calculations

All percentage calculations comparing numbers or rates between years have been undertaken using the raw data. Due to rounding, this may mean that the resultant information is slightly different to any calculations based on tabular data supplied in this publication.

International Classification of Diseases (ICD) codes

For the years 2000–2010 the *International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification* (ICD-10-AM) codes used for mortality and hospitalisation data were X60–X84: Intentional self-harm (National Centre for Classification in Health).

Prior to the year 2000 the codes used were E950–E959: Suicide and self-inflicted injury from the WHO *International Statistical Classification of Diseases and Related Health Problems, 9th Revision, Clinical Modification* (ICD-9-CM). Note that code E959 was excluded from hospitalisation data in this publication because it covers ‘late effects’ and hence is not relevant to current episodes.

For this publication, the intentional self-harm codes used to distinguish between methods were as follows:

- X66–X67: Poisoning by gases and vapours
- X60–X65, X68–X69: Poisoning by solids and liquids
- X70: Hanging, strangulation and suffocation
- X71: Submersion (drowning)
- X72–X75: Firearms and explosives
- X78: Sharp object
- X80: Jumping from a high place
- X76–X77, X79, X81–X84: Other methods.

Serious injury outcome indicator reports

Statistics New Zealand produces the annual serious injury outcome indicator reports. These indicators report on numbers and rates of suicide death. The information for the reports is sourced from the New Zealand Mortality Collection, and is therefore broadly comparable with the information published in *Suicide Facts*. The Mortality Collection is a dynamic database and any small discrepancies in data between the two publications are due to changes in the database over time.

The serious injury outcome indicator reports also present data on ‘Serious non-fatal intentional self-harm injury’. These indicators cover only a subset of the self-harm hospitalisation data held within *Suicide Facts* and therefore cannot be directly compared.

For more information and access to the indicator technical report, please see this web page: www.stats.govt.nz/browse_for_stats/health/injuries/serious-injury-outcome-indicators-reports.aspx.

If you require further information relating to the methodology, classifications and processes used, and how they differ between publications, please contact data-enquiries@moh.govt.nz.

Definitions

Age-specific rates

An age-specific rate measures the frequency with which an event occurs relative to the number of people in a defined age group. In this document, age-specific rates are given in both five-year age groups and life-stage age groups.

Age-standardised rates and rate ratios

An age-standardised rate is a rate that has been adjusted to take account of differences in the age distribution of the population over time or between different groups (for example, different ethnic groups). An age-standardised rate ratio is the ratio of two groups' rates, taking into account differences in the groups' size and age structure.

This publication has used the WHO standard world population in determining age-standardised rates and rate ratios (see Table A10).

Comparison with international data

A cautious approach is recommended when comparing international suicide statistics, because many factors affect the recording and classification of suicide in different countries, including the level of proof required for a verdict; the stigma associated with suicide; the religion, social class or occupation of victims; and confidentiality (Andriessen 2006). As a result, deaths that are classified as suicide in some countries may be classified as accidental or of undetermined intent in others.

Furthermore, statistical measures, such as confidence intervals, cannot account for these differences. Providing them may create a false sense of confidence in the recording of differences. Confidence intervals have therefore been excluded from the section on international comparisons in this publication. The data used in this publication to make international comparisons is the most recent available. Note that 2010 data is not yet available for any of the other countries referred to in this report.

Confidence intervals and statistical significance

The confidence intervals in this publication have been calculated for age-standardised rates at the 95% level using the methods presented in Keyfitz 1966, except for rates for DHB data, which have been calculated at the 99% level.

A confidence interval is a range of values used to describe the uncertainty around a single value (such as an age-standardised rate). Confidence intervals describe how different the estimate could have been if chance had led to a different set of data. Confidence intervals are calculated with a stated probability: typically 95% (which would indicate that there is a 95% chance that the true value lies within the confidence intervals).

Confidence intervals can assist in comparing rates between different groups. If two confidence intervals do not overlap, then it is reasonable to assume that the difference is not due to chance. If they do overlap, it is not possible to draw any conclusion about the significance of any difference between them.

Deprivation

The New Zealand Deprivation Index is a measure of socioeconomic status calculated for small geographic areas. The calculation uses a range of variables from the 2006 Census of Population and Dwellings, which represent nine dimensions of social deprivation. The Deprivation Index is calculated at the level of meshblocks (geographical units containing a median of 90 people), and the Ministry of Health maps these to domicile codes, which are built up to the relevant geographic scale using weighted average census usually resident population counts.

The nine variables (proportions in small areas) in the index, by decreasing weight, are:

1. income: people aged 18–64¹³ receiving a means-tested benefit
2. income: people living in an equivalised¹⁴ household whose income is below a certain threshold
3. home ownership: people not living in their own home.
4. support: people aged under 65 living in a single-parent family
5. employment: people aged 18–64 who are unemployed
6. qualifications: people aged 18–64 with no qualifications
7. living space: people living in an equivalised household below a bedroom occupancy threshold
8. communication: people with no access to a telephone
9. transport: people with no access to a car.

Further information is available from www.health.govt.nz, search for 'NZDep2006 Index of Deprivation'.

¹³ The upper age boundary of 65 has been increased from the NZDep2001 value of 60 to better reflect societal norms.

¹⁴ Equivalisation is a method used to control for household composition.

District health board rates

Age-standardised rates were calculated for each DHB region (using 2001 boundaries). When interpreting regional differences in hospitalisation rates for intentional self-harm among DHBs, it should be noted that DHBs differ in their reporting and patient management practices.

Ethnicity

There are different methods for outputting ethnicity data. This publication uses 'prioritised ethnicity', by which each person represented in the data is allocated to a single ethnic group using the priority system Māori > Pacific peoples > Asian > European/other (Ministry of Health 2004). The aim of prioritisation is to ensure that where it is necessary to assign people to a single ethnic group, ethnic groups that are small or important in terms of policy are not swamped by the European ethnic group (Ministry of Health 2004). This method is also a more robust method of dealing with the low rate of multiple ethnicities in health sector data.

This publication uses two ethnic classifications for analysing suicides and intentional self-harm hospitalisations: the first comprises Māori, Pacific peoples, Asian peoples and European/other, and the second divides the population into Māori and non-Māori.

Prior to 1996, the concept of ethnicity was based on biological race (that is, percentage of blood), as recorded on death registration forms, and on a sociocultural concept (that is, cultural affiliation) as defined in the Census. Since September 1995 death certificates have included a question comparable with the self-identified ethnicity question in the 1996 Census, which allows for multiple ethnic identities. New Zealand Census – Mortality Study adjustors can be applied to mortality counts from 1996 to 1999 (Blakely 2002). This adjusts data to allow for an undercount of Māori and Pacific people. (They are not used in this publication.) From 2000 onwards comparisons across all ethnic groups have been possible because adjustors are not necessary. For further discussion on inconsistencies in ethnicity collection, refer to *Decades of Disparity: Ethnic mortality trends in New Zealand 1980–1999* (Ajwani et al 2003).

Median

The median is the middle score in a range of scores, so that one half of the values will lie above it and one half below it. It is a more appropriate measure of centrality than the mean or average score, where an extremely high or low value would give a distorted measure.

Numbers, rates and ratios

The number of suicide deaths refers to the actual number of people who have died by suicide. The number of hospitalisations refers to the number of discharges from hospital with an intentional self-harm code on the patient record.

The rate of suicide or intentional self-harm hospitalisation refers to the frequency with which these events occur relative to the number of people in a defined population and a defined time period.

The rate ratio refers to the frequency with which these events are reported in one population group compared with another.

Provisional data

The label 'provisional' relates to information that is not final; that is, it is subject to change. See 'Suicide deaths' in the 'Technical notes' section for more information.

Urban/rural profile

This publication has classified deaths by the urban/rural profile of the person committing suicide. The address recorded on a death certificate was used to determine whether a place of domicile was rural or urban. Statistics New Zealand has developed an experimental urban/rural profile which was used to allocate a profile to the death. For more information on urban/rural profiles see http://www.stats.govt.nz/browse_for_stats/people_and_communities/geographic-areas/urban-rural-profile-update.aspx.

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Appendix 1: Further tables

Table A1: Estimated New Zealand resident population for mean year ending 31 December 2010, by five-year age group and sex

	Total	Five-year age group																	
		0–4	5–9	10–14	15–19	20–24	25–29	30–34	35–39	40–44	45–49	50–54	55–59	60–64	65–69	70–74	75–79	80–84	85+
Total																			
Total	4,370,200	311,780	287,040	295,640	322,330	316,020	289,210	269,710	300,980	312,060	322,700	291,600	251,570	230,400	175,950	137,270	105,200	80,800	69,910
Males	2,145,900	159,940	147,050	151,500	165,410	161,910	143,580	129,510	142,940	149,550	156,140	142,670	123,510	113,150	85,860	65,600	48,860	34,890	23,850
Females	2,224,300	151,840	139,980	144,150	156,920	154,100	145,630	140,200	158,040	162,510	166,560	148,930	128,060	117,250	90,090	71,670	56,340	45,920	46,050
Māori																			
Total	663,900	89,050	69,710	68,810	67,970	56,590	42,520	41,690	42,990	40,310	39,000	32,110	24,030	18,140	12,310	9090	5280	2780	1480
Males	326,200	45,920	35,760	35,310	34,930	27,910	20,220	19,500	19,960	18,910	18,310	15,200	11,480	8640	5790	4250	2370	1140	550
Females	337,700	43,130	33,940	33,500	33,040	28,680	22,300	22,190	23,020	21,400	20,700	16,900	12,550	9500	6520	4840	2910	1640	940
Non-Māori																			
Total	3,706,300	222,730	217,330	226,830	254,360	259,430	246,690	228,020	257,990	271,750	283,700	259,490	227,540	212,260	163,640	128,180	99,920	78,020	68,430
Males	1,819,700	114,020	111,290	116,190	130,480	134,000	123,360	110,010	122,980	130,640	137,830	127,470	112,030	104,510	80,070	61,350	46,490	33,750	23,300
Females	1,886,600	108,710	106,040	110,650	123,880	125,420	123,330	118,010	135,020	141,110	145,860	132,030	115,510	107,750	83,570	66,830	53,430	44,280	45,110

Source: Statistics New Zealand

Table A2: Estimated New Zealand resident population as at 30 June 2008, by DHB of domicile, five-year age group and sex

	Total	Five-year age group																	
		0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+
Northland																			
Total	157,370	11,490	11,200	11,840	11,130	8520	6970	7400	9270	10,540	11,720	11,620	10,440	10,040	8120	6500	4590	3370	2610
Males	77,450	5880	5650	6070	5860	4400	3410	3420	4390	5030	5560	5610	5100	4980	4040	3290	2240	1560	960
Females	79,920	5610	5550	5770	5270	4120	3560	3980	4880	5510	6160	6010	5340	5060	4080	3210	2350	1810	1650
Waitemata																			
Total	537,070	38,480	35,500	37,470	40,410	36,920	35,730	34,180	39,420	42,440	41,770	35,530	29,160	26,870	20,100	15,230	11,270	8770	7820
Males	263,590	19,860	18,290	19,150	20,760	19,010	17,950	16,430	18,720	20,310	20,090	17,290	14,200	13,070	9550	7210	5230	3790	2680
Females	273,480	18,620	17,210	18,320	19,650	17,910	17,780	17,750	20,700	22,130	21,680	18,240	14,960	13,800	10,550	8020	6040	4980	5140
Auckland																			
Total	450,240	29,530	24,690	24,150	30,570	40,580	47,900	38,540	36,260	33,450	32,590	27,560	22,670	19,170	13,600	10,090	7110	5840	5940
Males	221,600	15,320	12,720	12,470	15,470	20,360	23,540	18,710	17,480	16,270	16,040	13,520	11,100	9470	6620	4760	3380	2450	1920
Females	228,640	14,210	11,970	11,680	15,100	20,220	24,360	19,830	18,780	17,180	16,550	14,040	11,570	9700	6980	5330	3730	3390	4020
Counties Manukau																			
Total	490,650	42,190	39,280	39,490	40,160	37,380	32,410	30,760	34,060	35,900	35,220	30,080	24,890	21,860	16,290	11,790	8170	5900	4820
Males	240,350	21,530	20,270	20,020	20,530	18,900	15,790	14,320	15,920	17,020	17,010	14,750	12,110	10,740	7900	5690	3670	2580	1600
Females	250,300	20,660	19,010	19,470	19,630	18,480	16,620	16,440	18,140	18,880	18,210	15,330	12,780	11,120	8390	6100	4500	3320	3220
Waikato																			
Total	364,180	27,520	25,460	26,370	27,960	25,980	22,790	21,010	23,410	24,520	25,570	23,910	21,120	19,290	15,250	11,990	9360	6930	5740
Males	179,200	14,090	12,890	13,570	14,370	13,410	11,530	10,230	11,130	11,670	12,340	11,640	10,320	9450	7350	5820	4390	3010	1990
Females	184,980	13,430	12,570	12,800	13,590	12,570	11,260	10,780	12,280	12,850	13,230	12,270	10,800	9840	7900	6170	4970	3920	3750
Lakes																			
Total	102,570	8090	7580	7880	7480	6370	5780	5940	6820	7080	7590	6890	6030	5600	4410	3260	2480	1850	1440
Males	50,320	4150	3900	4060	3910	3170	2850	2750	3270	3340	3610	3420	2940	2720	2160	1590	1170	800	510
Females	52,250	3940	3680	3820	3570	3200	2930	3190	3550	3740	3980	3470	3090	2880	2250	1670	1310	1050	930
Bay of Plenty																			
Total	210,120	14,740	14,390	15,060	14,770	11,400	10,710	10,990	13,120	14,180	15,290	14,450	13,020	12,410	10,410	8810	6830	5220	4320
Males	102,490	7650	7460	7780	7650	5850	5210	5320	6070	6590	7350	6880	6310	6010	4960	4210	3250	2370	1570
Females	107,630	7090	6930	7280	7120	5550	5500	5670	7050	7590	7940	7570	6710	6400	5450	4600	3580	2850	2750

	Total	Five-year age group																	
		0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+
Tairāwhiti																			
Total	46,510	3940	3730	3830	3580	2920	2530	2470	2930	3030	3330	3220	2840	2340	1800	1410	1150	810	650
Males	22,690	1990	1940	1950	1880	1460	1170	1170	1390	1400	1560	1590	1440	1150	890	650	510	330	220
Females	23,820	1950	1790	1880	1700	1460	1360	1300	1540	1630	1770	1630	1400	1190	910	760	640	480	430
Hawke's Bay																			
Total	155,290	11,610	10,860	11,760	11,170	8940	7880	8180	9890	10,420	11,640	10,670	9740	9240	7100	5490	4480	3290	2930
Males	75,660	5880	5520	6030	5790	4560	3890	3870	4620	5000	5510	5170	4710	4540	3540	2570	2070	1400	990
Females	79,630	5730	5340	5730	5380	4380	3990	4310	5270	5420	6130	5500	5030	4700	3560	2920	2410	1890	1940
Taranaki																			
Total	109,200	7890	7140	7570	7750	6550	6020	5960	6980	7320	8090	7620	6770	6300	4930	4020	3340	2670	2280
Males	53,950	4090	3740	3870	4030	3460	3060	2900	3300	3500	3970	3660	3420	3110	2470	1910	1550	1150	760
Females	55,250	3800	3400	3700	3720	3090	2960	3060	3680	3820	4120	3960	3350	3190	2460	2110	1790	1520	1520
MidCentral																			
Total	167,300	11,670	10,760	11,550	13,360	13,170	10,160	8920	10,310	10,690	11,820	10,840	9760	9080	7470	6060	4890	3630	3160
Males	81,470	5870	5470	5880	6780	6790	4990	4250	4860	5050	5640	5310	4690	4450	3610	2940	2260	1550	1080
Females	85,830	5800	5290	5670	6580	6380	5170	4670	5450	5640	6180	5530	5070	4630	3860	3120	2630	2080	2080
Whanganui																			
Total	63,300	4480	4090	4630	4640	4010	3170	2960	3730	4010	4700	4510	4050	3700	2950	2590	2050	1650	1380
Males	31,080	2320	2070	2420	2400	2120	1650	1390	1800	1900	2280	2180	2000	1810	1420	1170	920	740	490
Females	32,220	2160	2020	2210	2240	1890	1520	1570	1930	2110	2420	2330	2050	1890	1530	1420	1130	910	890
Capital & Coast																			
Total	291,300	19,710	17,360	17,080	20,200	26,090	24,530	21,660	22,540	21,950	21,300	18,030	15,170	13,550	10,060	7680	5870	4470	4050
Males	141,340	9960	8820	8670	10110	12,700	12,110	10,430	10,550	10,530	10,330	8760	7350	6560	4890	3590	2690	1900	1390
Females	149,960	9750	8540	8410	10090	13,390	12,420	11,230	11,990	11,420	10,970	9270	7820	6990	5170	4090	3180	2570	2660
Hutt Valley																			
Total	143,750	10,920	10,110	10,150	10,820	9700	8540	8810	10,310	10,600	10,920	9920	8030	7330	5500	4100	3300	2500	2190
Males	70,850	5570	5230	5230	5590	5080	4080	4280	4900	5140	5330	4900	3990	3620	2700	1920	1480	1090	720
Females	72,900	5350	4880	4920	5230	4620	4460	4530	5410	5460	5590	5020	4040	3710	2800	2180	1820	1410	1470
Wairarapa																			
Total	40,280	2750	2530	2770	2650	1980	1780	1830	2360	2660	2940	3030	2920	2760	2270	1770	1370	1080	830
Males	19,700	1390	1280	1400	1360	1040	890	860	1120	1270	1450	1450	1460	1360	1130	850	660	460	270
Females	20,580	1360	1250	1370	1290	940	890	970	1240	1390	1490	1580	1460	1400	1140	920	710	620	560

	Total	Five-year age group																	
		0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+
Nelson Marlborough																			
Total	138,200	8720	8480	8850	8970	7250	6700	7130	9130	9940	10,900	10,750	9590	9330	7090	5250	4190	3130	2800
Males	68,500	4470	4310	4610	4810	3820	3420	3480	4380	4760	5230	5310	4760	4620	3560	2600	1970	1350	1040
Females	69,700	4250	4170	4240	4160	3430	3280	3650	4750	5180	5670	5440	4830	4710	3530	2650	2220	1780	1760
West Coast																			
Total	32,700	2200	1980	2050	2200	1700	1600	1720	2070	2360	2710	2640	2250	2160	1690	1240	900	650	580
Males	16,640	1160	1040	1040	1160	900	820	820	980	1160	1340	1410	1210	1120	860	640	470	300	210
Females	16,060	1040	940	1010	1040	800	780	900	1090	1200	1370	1230	1040	1040	830	600	430	350	370
Canterbury																			
Total	508,240	33,810	31,060	31,780	37,120	37,300	31,080	30,630	35,620	37,140	38,110	34,730	30,350	28,290	21,010	16,610	13,210	10,790	9600
Males	250,060	17,410	15,710	16,320	19,100	19,760	15,800	14,730	16,880	18,100	18,570	17,090	14,870	13,840	10,290	7820	6020	4510	3240
Females	258,180	16,400	15,350	15,460	18,020	17,540	15,280	15,900	18,740	19,040	19,540	17,640	15,480	14,450	10,720	8790	7190	6280	6360
South Canterbury																			
Total	55,910	3370	3210	3690	3750	2880	2340	2600	3370	3680	4240	4160	3930	3830	2970	2610	2150	1710	1420
Males	27,540	1760	1660	1910	1980	1540	1150	1270	1620	1770	2030	2040	2000	1920	1460	1210	1020	730	470
Females	28,370	1610	1550	1780	1770	1340	1190	1330	1750	1910	2210	2120	1930	1910	1510	1400	1130	980	950
Otago																			
Total	190,480	10,640	10,370	10,640	16,380	18,740	12,130	10,090	11,550	11,910	13,430	13,250	11,810	10,980	8440	6660	5450	4320	3690
Males	93,430	5460	5340	5490	8020	9480	6050	4930	5590	5680	6520	6620	5900	5410	4160	3210	2520	1810	1240
Females	97,050	5180	5030	5150	8360	9260	6080	5160	5960	6230	6910	6630	5910	5570	4280	3450	2930	2510	2450
Southland																			
Total	112,700	8140	7020	7170	7280	6830	7630	7550	8060	7870	8770	8010	6770	6120	4730	3760	3010	2120	1860
Males	56,480	4250	3600	3640	3930	3570	3790	3750	3990	3810	4370	4010	3520	3110	2410	1820	1400	920	590
Females	56,220	3890	3420	3530	3350	3260	3840	3800	4070	4060	4400	4000	3250	3010	2320	1940	1610	1200	1270
Total																			
Total	4,367,775	311,890	286,810	295,790	322,355	315,225	288,400	269,360	301,240	311,715	322,680	291,475	251,355	230,295	176,235	136,940	105,190	80,705	70,115
Males	2,144,670	160,060	146,915	151,585	165,490	161,390	143,165	129,335	142,980	149,320	156,150	142,645	123,430	113,090	86,000	65,485	48,880	34,805	23,945
Females	2,223,105	151,830	139,895	144,205	156,865	153,835	145,235	140,025	158,260	162,395	166,530	148,830	127,925	117,205	90,235	71,455	56,310	45,900	46,170

Source: Statistics New Zealand

Table A3: Estimated New Zealand resident population as at 30 June 2009, by DHB of domicile, five-year age group and sex

	Total	Five-year age group																	
		0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+
Northland																			
Total	155,870	11,350	11,290	12,080	11,250	8160	6610	7420	9590	10,700	11,770	11,430	10,320	9690	7980	6010	4650	3120	2450
Males	76,730	5740	5730	6200	5870	4210	3200	3460	4550	5070	5590	5570	5090	4810	4000	3040	2270	1450	880
Females	79,140	5610	5560	5880	5380	3950	3410	3960	5040	5630	6180	5860	5230	4880	3980	2970	2380	1670	1570
Waitemata																			
Total	528,190	37,630	35,650	37,350	40,520	35,440	34,240	33,530	40,210	42,140	41,340	34,340	28,780	25,730	19,390	14,350	11,210	8690	7650
Males	258,790	19,310	18,310	19,120	20,640	18,190	17,160	16,000	19,120	20,190	20,020	16,670	14,050	12,440	9280	6790	5220	3750	2530
Females	269,400	18,320	17,340	18,230	19,880	17,250	17,080	17,530	21,090	21,950	21,320	17,670	14,730	13,290	10,110	7560	5990	4940	5120
Auckland																			
Total	444,360	29,140	24,780	24,620	31,180	39,890	46,550	37,270	36,130	33,250	32,220	26,820	22,270	18,140	13,350	9480	7190	5870	6210
Males	218,290	15,060	12,710	12,740	15,700	19,920	22,830	18,020	17,410	16,230	15,870	13,150	10,970	8950	6480	4520	3370	2430	1930
Females	226,070	14,080	12,070	11,880	15,480	19,970	23,720	19,250	18,720	17,020	16,350	13,670	11,300	9190	6870	4960	3820	3440	4280
Counties Manukau																			
Total	480,320	41,150	39,320	39,150	40,280	35,310	31,320	30,090	34,560	35,700	34,530	28,940	24,240	20,910	15,680	11,050	8020	5620	4450
Males	235,220	21,090	20,230	19,830	20,490	17,810	14,990	14,090	16,160	16,960	16,770	14,240	11,840	10,260	7640	5240	3640	2440	1500
Females	245,100	20,060	19,090	19,320	19,790	17,500	16,330	16,000	18,400	18,740	17,760	14,700	12,400	10,650	8040	5810	4380	3180	2950
Waikato																			
Total	360,100	27,220	25,430	26,610	28,420	25,120	22,240	20,770	23,980	24,570	25,650	23,450	20,600	18,500	14,910	11,310	9290	6630	5400
Males	177,160	13,880	12,870	13,750	14,510	13,010	11,130	10,060	11,370	11,780	12,320	11,470	10,020	9080	7310	5500	4340	2920	1840
Females	182,940	13,340	12,560	12,860	13,910	12,110	11,110	10,710	12,610	12,790	13,330	11,980	10,580	9420	7600	5810	4950	3710	3560
Lakes																			
Total	102,360	8110	7720	7990	7620	6050	5620	6020	7090	7140	7710	6800	5950	5430	4360	3150	2540	1740	1320
Males	50,210	4180	3950	4070	3960	3020	2740	2820	3370	3400	3680	3350	2910	2640	2200	1520	1210	760	430
Females	52,150	3930	3770	3920	3660	3030	2880	3200	3720	3740	4030	3450	3040	2790	2160	1630	1330	980	890
Bay of Plenty																			
Total	207,030	14,570	14,490	15,210	14,840	10,740	10,300	10,750	13,390	14,060	15,350	14,130	12,710	11,950	10,210	8320	6870	5010	4130
Males	100,850	7490	7530	7800	7640	5480	4980	5190	6190	6580	7400	6720	6170	5830	4850	3980	3280	2220	1520
Females	106,180	7080	6960	7410	7200	5260	5320	5560	7200	7480	7950	7410	6540	6120	5360	4340	3590	2790	2610

	Total	Five-year age group																	
		0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+
Tairāwhiti																			
Total	46,280	3905	3735	3920	3640	2775	2445	2495	3030	3060	3365	3140	2830	2220	1810	1375	1145	785	605
Males	22,645	1980	1950	1990	1915	1390	1140	1155	1420	1425	1615	1550	1430	1110	910	645	495	325	200
Females	23,635	1925	1785	1930	1725	1385	1305	1340	1610	1635	1750	1590	1400	1110	900	730	650	460	405
Hawke's Bay																			
Total	154,330	11,260	11,090	11,900	11,330	8510	7800	8340	10,170	10,470	11,880	10,410	9700	8880	6940	5240	4420	3190	2800
Males	75,260	5780	5620	6150	5780	4350	3820	3960	4800	5010	5650	5070	4700	4360	3420	2490	2030	1340	930
Females	79,070	5480	5470	5750	5550	4160	3980	4380	5370	5460	6230	5340	5000	4520	3520	2750	2390	1850	1870
Taranaki																			
Total	108,815	7715	7240	7760	7935	6280	5970	6020	7200	7385	8225	7475	6695	6040	4850	3895	3350	2600	2180
Males	53,705	3975	3780	3930	4135	3310	3005	2935	3390	3575	4020	3635	3360	2995	2390	1860	1545	1115	750
Females	55,110	3740	3460	3830	3800	2970	2965	3085	3810	3810	4205	3840	3335	3045	2460	2035	1805	1485	1430
MidCentral																			
Total	166,670	11,580	10,950	11,740	13,420	12,820	9890	9000	10,560	10,860	12,060	10,590	9550	8790	7410	5800	4970	3620	3060
Males	81,220	5910	5590	5960	6810	6590	4770	4320	4950	5170	5830	5140	4630	4300	3590	2770	2330	1520	1040
Females	85,450	5670	5360	5780	6610	6230	5120	4680	5610	5690	6230	5450	4920	4490	3820	3030	2640	2100	2020
Whanganui																			
Total	63,505	4375	4205	4780	4680	3810	3040	3035	3845	4120	4830	4490	4020	3615	3050	2510	2185	1625	1290
Males	31,035	2240	2125	2500	2415	1980	1565	1440	1815	1950	2355	2200	1975	1765	1425	1150	1010	695	430
Females	32,470	2135	2080	2280	2265	1830	1475	1595	2030	2170	2475	2290	2045	1850	1625	1360	1175	930	860
Capital & Coast																			
Total	287,440	19,520	17,460	17,070	20,070	25,130	24,660	21,430	22,970	21,670	21,040	17,320	14,840	13,120	9790	7170	5830	4470	3880
Males	139,380	9990	8790	8740	9980	12,180	12,050	10,290	10,780	10,470	10,180	8440	7190	6370	4750	3370	2600	1940	1270
Females	148,060	9530	8670	8330	10,090	12,950	12,610	11,140	12,190	11,200	10,860	8880	7650	6750	5040	3800	3230	2530	2610
Hutt Valley																			
Total	142,910	10,700	10,210	10,320	10,950	9170	8570	8890	10,650	10,690	11,030	9570	7970	7050	5380	3910	3400	2410	2040
Males	70,420	5490	5300	5300	5620	4790	4090	4310	5070	5210	5330	4750	3990	3510	2620	1860	1530	1020	630
Females	72,490	5210	4910	5020	5330	4380	4480	4580	5580	5480	5700	4820	3980	3540	2760	2050	1870	1390	1410
Wairarapa																			
Total	40,135	2685	2590	2800	2745	1895	1780	1880	2475	2645	2970	3055	2845	2695	2180	1665	1360	1070	800
Males	19,610	1345	1325	1425	1400	990	865	915	1170	1275	1390	1530	1405	1365	1045	825	640	440	260
Females	20,525	1340	1265	1375	1345	905	915	965	1305	1370	1580	1525	1440	1330	1135	840	720	630	540

	Total	Five-year age group																	
		0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+
Nelson Marlborough																			
Total	137,220	8600	8590	8920	9225	6900	6755	7215	9365	9900	11,080	10,515	9485	8880	6790	4985	4105	3200	2710
Males	67,925	4400	4405	4650	4855	3720	3365	3505	4515	4710	5340	5230	4690	4435	3395	2465	1915	1370	960
Females	69,295	4200	4185	4270	4370	3180	3390	3710	4850	5190	5740	5285	4795	4445	3395	2520	2190	1830	1750
West Coast																			
Total	32,580	2185	1990	2190	2215	1605	1610	1725	2185	2385	2790	2545	2245	2025	1660	1135	955	645	490
Males	16,560	1150	1030	1115	1170	865	785	820	1025	1200	1395	1345	1215	1045	875	570	480	315	160
Females	16,020	1035	960	1075	1045	740	825	905	1160	1185	1395	1200	1030	980	785	565	475	330	330
Canterbury																			
Total	500,030	32,290	30,030	31,560	36,440	36,120	30,660	31,000	36,200	37,110	37,920	34,040	30,060	26,960	20,550	15,810	13,530	10,510	9240
Males	245,800	16,540	15,270	16,110	18,770	19,130	15,440	14,880	17,310	18,170	18,570	16,700	14,690	13,210	10,060	7420	6100	4410	3020
Females	254,230	15,750	14,760	15,450	17,670	16,990	15,220	16,120	18,890	18,940	19,350	17,340	15,370	13,750	10,490	8390	7430	6100	6220
South Canterbury																			
Total	55,845	3365	3315	3815	3855	2610	2425	2675	3505	3735	4330	4110	3855	3645	2985	2475	2095	1670	1380
Males	27,530	1745	1715	1970	2010	1440	1175	1305	1690	1795	2080	2055	1950	1800	1480	1160	980	720	460
Females	28,315	1620	1600	1845	1845	1170	1250	1370	1815	1940	2250	2055	1905	1845	1505	1315	1115	950	920
Otago																			
Total	188,650	10,680	10,400	10,870	16,070	17,960	12,110	10,330	11,850	12,160	13,630	12,880	11,450	10,430	8190	6340	5510	4160	3630
Males	92,300	5460	5360	5650	7810	9070	5970	4990	5700	5840	6640	6410	5700	5170	4060	2990	2580	1720	1180
Females	96,350	5220	5040	5220	8260	8890	6140	5340	6150	6320	6990	6470	5750	5260	4130	3350	2930	2440	2450
Southland																			
Total	112,695	8005	7065	7290	7580	6745	7705	7540	8110	7995	8815	7860	6750	5960	4685	3655	3050	2105	1780
Males	56,450	4120	3640	3730	4030	3495	3840	3795	3965	3900	4375	4005	3510	3000	2385	1810	1405	905	540
Females	56,245	3885	3425	3560	3550	3250	3865	3745	4145	4095	4440	3855	3240	2960	2300	1845	1645	1200	1240
Total																			
Total	4,315,335	306,035	287,550	297,945	324,265	303,040	282,300	267,425	307,065	311,745	322,535	283,910	247,165	220,660	172,150	129,635	105,675	78,740	67,495
Males	2,117,090	156,875	147,230	152,730	165,510	154,940	138,910	128,260	145,770	149,910	156,420	139,230	121,485	108,445	84,165	61,975	48,970	33,805	22,460
Females	2,198,245	149,160	140,320	145,215	158,755	148,100	143,390	139,165	161,295	161,835	166,115	144,680	125,680	112,215	87,985	67,660	56,705	44,935	45,035

Source: Statistics New Zealand

Table A4: Projected New Zealand population, by deprivation quintile, sex and five-year age group, 2010

	Total	Five-year age group																	
		0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+
Total population																			
Total	4,373,540	311,140	287,551	296,435	322,875	313,746	289,646	271,426	302,806	312,741	323,234	291,446	251,437	230,280	176,310	136,925	105,130	80,831	69,580
Males	2,147,314	159,910	147,266	151,945	165,395	160,276	143,525	130,605	143,795	149,920	156,519	142,706	123,496	112,985	86,016	65,455	48,894	34,946	23,659
Females	2,226,226	151,230	140,286	144,490	157,480	153,470	146,121	140,821	159,011	162,821	166,716	148,741	127,941	117,295	90,295	71,470	56,236	45,885	45,921
Quintile 1																			
Total	902,125.5	57,378.8	59,790.2	63,259.4	62,752.6	44,318.8	42,262.3	48,980.9	65,941.5	74,914.1	80,226.8	73,764.2	63,083.8	55,152.2	38,904.8	27,328.8	19,437.0	13,792.8	10,836.5
Males	447,483.8	29,446.2	30,499.9	32,276.4	32,675.6	23,731.9	21,056.4	22,896.9	30,575.8	35,776.8	38,864.1	36,713.5	31,553.4	27,923.4	19,625.4	13,709.2	9,640.6	6,441.3	4,077.0
Females	454,641.7	27,932.6	29,290.3	30,983.0	30,077.0	20,586.9	21,205.9	26,084.0	35,365.7	39,137.3	41,362.7	37,050.7	31,530.4	27,228.8	19,279.4	13,619.6	9,796.4	7,351.5	6,759.5
Quintile 2																			
Total	884,929.3	56,692.9	54,892.3	57,729.6	60,166.7	53,739.2	56,417.0	56,182.5	64,511.0	67,614.7	70,631.0	63,690.4	54,930.2	50,033.4	37,777.8	28,307.8	21,371.6	16,205.9	14,035.3
Males	436,377.7	29,120.8	27,938.0	29,920.3	31,456.2	28,158.0	27,986.2	27,164.1	30,600.9	32,262.0	34,523.6	31,147.1	27,119.2	24,696.6	18,534.2	13,736.6	10,058.5	7,256.0	4,699.4
Females	448,551.6	27,572.1	26,954.3	27,809.3	28,710.5	25,581.2	28,430.8	29,018.4	33,910.1	35,352.7	36,107.4	32,543.3	27,811.0	25,336.8	19,243.6	14,571.2	11,313.1	8,949.9	9,335.9
Quintile 3																			
Total	867,643.9	57,029.4	52,064.3	54,792.7	59,911.5	63,145.7	63,218.2	57,515.3	61,092.0	61,337.4	62,867.7	56,238.4	49,111.5	46,461.7	36,736.5	29,315.3	22,770.1	18,005.1	16,031.1
Males	425,789.2	29,202.5	26,812.0	27,994.8	30,890.2	32,511.7	31,679.7	28,032.2	29,366.6	29,535.7	30,519.1	27,339.3	23,883.2	22,536.5	17,799.1	13,964.3	10,538.9	7,659.3	5,524.1
Females	441,854.7	27,826.9	25,252.3	26,797.9	29,021.3	30,634.0	31,538.5	29,483.1	31,725.4	31,801.7	32,348.6	28,899.1	25,228.3	23,925.2	18,937.4	15,351.0	12,231.2	10,345.8	10,507.0
Quintile 4																			
Total	857,470.0	60,887.9	52,908.6	53,887.1	62,433.1	72,335.8	66,204.2	56,711.8	57,767.0	56,080.1	56,982.4	51,479.8	44,861.9	42,327.3	34,161.9	28,529.1	23,469.0	19,305.0	17,138.0
Males	418,008.8	31,553.6	27,128.2	2,694.4	31,824.8	36,443.6	32,792.3	27,778.7	27,868.1	27,222.4	27,536.5	25,059.9	21,649.7	20,280.4	16,162.7	13,065.0	10,500.1	7,921.3	5,527.1
Females	439,461.2	29,334.3	25,780.4	26,192.7	30,608.3	35,892.2	33,411.9	28,933.1	29,898.9	28,857.7	29,445.9	26,419.9	23,212.2	22,046.9	17,999.2	15,464.1	12,968.9	11,383.7	11,610.9
Quintile 5																			
Total	861,371.0	79,151.0	67,895.7	66,766.0	77,611.5	80,206.3	61,544.2	52,035.4	53,494.2	52,794.3	52,526.5	46,273.4	39,449.7	36,305.8	28,729.3	23,444.3	18,082.3	13,521.9	11,539.2
Males	419,654.1	40,587.2	34,887.5	34,059.2	38,548.2	39,430.6	30,010.8	24,733.2	25,383.7	25,123.1	25,075.5	22,445.9	19,290.6	17,548.3	13,894.4	10,980.0	8,156.3	5,667.8	3,831.8
Females	441,716.9	38,563.8	33,008.2	32,706.8	39,063.3	40,775.7	31,533.4	27,302.2	28,110.5	27,671.2	27,451.0	23,827.5	20,159.1	18,757.5	14,834.9	12,464.3	9,926.0	7,854.1	7,707.4

Source: Statistics New Zealand

Table A5: Suicide deaths and age-standardised rates, by DHB, 2006–2010

DHB	Number	Rate
Northland	98	13.9
Waitemata	256	9.3
Auckland	228	9.5
Counties Manukau	244	10.4
Waikato	209	11.4
Lakes	79	15.6
Bay of Plenty	148	14.9
Tairāwhiti	44	20.7
Hawke's Bay	109	14.7
Taranaki	73	13.6
MidCentral	118	14.1
Whanganui	50	16.7
Capital & Coast	124	8.2
Hutt Valley	75	10.0
Wairarapa	26	15.4
Nelson Marlborough	85	12.4
West Coast	27	15.9
Canterbury	314	11.9
South Canterbury	34	13.8
Otago	120	12.1
Southland	87	16.4

Source: New Zealand Mortality Collection

Note: The rate shown is the age-standardised rate per 100,000 population, standardised to the WHO standard world population.

Table A6: Suicide deaths, by five-year age group and sex, 1948–2010

		Total	Five-year age group																	
			0–4	5–9	10–14	15–19	20–24	25–29	30–34	35–39	40–44	45–49	50–54	55–59	60–64	65–69	70–74	75–79	80–84	85+
1948	Total	187	0	0	0	6	12	8	17	17	14	16	24	14	18	19	12	9	1	0
	Males	134	0	0	0	5	11	6	9	9	10	12	18	8	15	15	7	8	1	0
	Females	53	0	0	0	1	1	2	8	8	4	4	6	6	3	4	5	1	0	0
1949	Total	176	0	0	0	5	13	16	19	11	14	19	17	16	16	14	10	2	2	2
	Males	119	0	0	0	4	9	9	12	10	7	15	11	9	10	8	10	1	2	2
	Females	57	0	0	0	1	4	7	7	1	7	4	6	7	6	6	0	1	0	0
1950	Total	172	0	0	0	8	6	4	13	15	13	15	13	22	13	23	17	2	5	3
	Males	128	0	0	0	8	6	3	9	12	8	8	8	17	6	19	14	2	5	3
	Females	44	0	0	0	0	0	1	4	3	5	7	5	5	7	4	3	0	0	0
1951	Total	188	0	0	0	4	8	9	20	15	17	22	22	20	12	16	14	6	2	1
	Males	141	0	0	0	4	7	6	15	11	12	20	17	12	8	14	9	5	1	0
	Females	47	0	0	0	0	1	3	5	4	5	2	5	8	4	2	5	1	1	1
1952	Total	198	0	0	1	6	7	18	13	11	15	14	20	24	21	13	13	13	7	2
	Males	148	0	0	1	5	7	12	9	8	10	10	12	21	12	11	10	12	7	1
	Females	50	0	0	0	1	0	6	4	3	5	4	8	3	9	2	3	1	0	1
1953	Total	196	0	0	1	4	8	7	9	15	23	14	24	24	16	19	17	11	1	3
	Males	140	0	0	1	4	6	6	8	7	18	10	18	14	11	12	15	7	1	2
	Females	56	0	0	0	0	2	1	1	8	5	4	6	10	5	7	2	4	0	1
1954	Total	177	0	0	1	2	3	19	10	13	10	9	20	26	15	20	15	9	3	2
	Males	134	0	0	1	2	3	13	10	11	7	8	14	18	8	16	12	7	2	2
	Females	43	0	0	0	0	0	6	0	2	3	1	6	8	7	4	3	2	1	0
1955	Total	187	0	0	0	3	9	19	11	10	18	19	20	25	17	11	13	7	4	1
	Males	136	0	0	0	2	5	15	10	9	14	16	13	18	10	3	10	6	4	1
	Females	51	0	0	0	1	4	4	1	1	4	3	7	7	7	8	3	1	0	0
1956	Total	199	0	0	0	2	6	12	10	14	24	22	36	19	17	14	8	10	3	2
	Males	132	0	0	0	1	5	10	7	10	11	13	25	13	11	11	4	7	2	2
	Females	67	0	0	0	1	1	2	3	4	13	9	11	6	6	3	4	3	1	0

		Total	Five-year age group																	
			0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+
1957	Total	215	0	0	1	4	12	13	21	12	15	21	29	19	20	21	14	10	3	0
	Males	153	0	0	1	4	11	9	16	11	9	15	18	11	11	18	8	8	3	0
	Females	62	0	0	0	0	1	4	5	1	6	6	11	8	9	3	6	2	0	0
1958	Total	220	0	0	2	7	9	11	10	17	23	29	34	14	17	17	11	8	4	7
	Males	164	0	0	2	6	7	8	9	12	16	23	26	9	12	13	6	7	2	6
	Females	56	0	0	0	1	2	3	1	5	7	6	8	5	5	4	5	1	2	1
1959	Total	204	0	0	0	6	11	13	15	18	23	23	19	20	11	9	14	11	9	2
	Males	157	0	0	0	5	9	10	13	16	17	18	15	14	5	5	11	9	8	2
	Females	47	0	0	0	1	2	3	2	2	6	5	4	6	6	4	3	2	1	0
1960	Total	230	0	0	0	6	8	16	12	19	32	33	19	27	17	12	16	8	4	1
	Males	165	0	0	0	3	7	15	9	14	23	26	13	18	9	6	11	7	3	1
	Females	65	0	0	0	3	1	1	3	5	9	7	6	9	8	6	5	1	1	0
1961	Total	204	0	0	1	4	13	18	12	22	16	22	19	27	7	18	14	7	3	1
	Males	155	0	0	1	4	11	16	8	19	13	13	14	20	6	13	8	6	3	0
	Females	49	0	0	0	0	2	2	4	3	3	9	5	7	1	5	6	1	0	1
1962	Total	208	0	0	0	5	8	14	19	20	28	20	18	17	23	9	12	9	3	3
	Males	142	0	0	0	4	4	10	17	12	18	11	13	9	18	6	8	8	2	2
	Females	66	0	0	0	1	4	4	2	8	10	9	5	8	5	3	4	1	1	1
1963	Total	244	0	0	0	5	18	9	14	15	27	35	28	28	20	12	20	7	5	1
	Males	157	0	0	0	5	14	7	11	12	19	21	14	14	12	8	13	3	3	1
	Females	87	0	0	0	0	4	2	3	3	8	14	14	14	8	4	7	4	2	0
1964	Total	207	0	0	0	2	11	13	12	11	18	27	25	30	30	10	11	5	2	0
	Males	127	0	0	0	1	4	8	9	8	15	20	14	16	18	5	3	5	1	0
	Females	80	0	0	0	1	7	5	3	3	3	7	11	14	12	5	8	0	1	0
1965	Total	242	0	0	0	6	15	14	15	17	20	29	32	25	24	9	16	13	6	1
	Males	161	0	0	0	2	11	9	9	11	15	20	25	17	13	6	10	7	5	1
	Females	81	0	0	0	4	4	5	6	6	5	9	7	8	11	3	6	6	1	0

		Total	Five-year age group																	
			0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+
1966	Total	246	0	0	3	10	13	4	11	20	23	28	39	26	25	14	18	6	5	1
	Males	156	0	0	2	4	7	2	8	12	16	21	22	13	18	8	13	5	4	1
	Females	90	0	0	1	6	6	2	3	8	7	7	17	13	7	6	5	1	1	0
1967	Total	274	0	0	1	6	21	11	21	27	27	27	26	32	24	18	15	11	5	2
	Males	191	0	0	1	5	16	8	18	24	19	19	16	20	18	9	6	8	3	1
	Females	83	0	0	0	1	5	3	3	3	8	8	10	12	6	9	9	3	2	1
1968	Total	265	0	0	2	8	17	10	18	27	23	34	33	25	29	22	7	5	4	1
	Males	179	0	0	1	6	14	8	12	21	16	23	18	17	15	17	4	4	2	1
	Females	86	0	0	1	2	3	2	6	6	7	11	15	8	14	5	3	1	2	0
1969	Total	278	0	0	2	13	23	21	18	15	25	31	22	31	22	25	14	10	4	2
	Males	181	0	0	2	6	16	16	11	9	20	20	10	20	14	13	10	8	4	2
	Females	97	0	0	0	7	7	5	7	6	5	11	12	11	8	12	4	2	0	0
1970	Total	271	0	1	2	15	24	12	11	17	33	26	28	28	18	24	16	7	9	0
	Males	178	0	1	2	12	18	8	10	11	26	19	17	13	7	16	8	5	5	0
	Females	93	0	0	0	3	6	4	1	6	7	7	11	15	11	8	8	2	4	0
1971	Total	237	0	0	2	15	21	14	10	20	19	28	29	22	22	11	13	7	2	2
	Males	149	0	0	2	10	14	7	5	15	16	17	16	12	12	6	9	5	1	2
	Females	88	0	0	0	5	7	7	5	5	3	11	13	10	10	5	4	2	1	0
1972	Total	262	0	0	2	12	24	20	25	13	24	22	28	27	19	17	17	7	1	4
	Males	173	0	0	1	10	13	12	15	9	16	16	20	19	13	8	12	5	1	3
	Females	89	0	0	1	2	11	8	10	4	8	6	8	8	6	9	5	2	0	1
1973	Total	261	0	0	3	19	20	18	17	12	14	29	35	21	24	14	16	11	5	3
	Males	181	0	0	2	14	13	12	15	11	10	22	22	15	12	7	13	7	3	3
	Females	80	0	0	1	5	7	6	2	1	4	7	13	6	12	7	3	4	2	0
1974	Total	273	0	0	2	13	23	24	17	20	24	26	19	28	31	19	17	3	4	3
	Males	187	0	0	1	10	17	13	12	15	14	21	13	15	19	16	12	3	3	3
	Females	86	0	0	1	3	6	11	5	5	10	5	6	13	12	3	5	0	1	0

		Total	Five-year age group																	
			0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+
1975	Total	293	0	0	1	20	32	25	16	25	24	30	20	26	28	20	10	5	7	4
	Males	195	0	0	1	12	25	17	9	19	15	20	13	16	17	12	7	4	5	3
	Females	98	0	0	0	8	7	8	7	6	9	10	7	10	11	8	3	1	2	1
1976	Total	291	0	0	1	15	27	28	18	17	24	25	22	31	31	19	18	11	3	1
	Males	198	0	0	1	11	23	18	13	13	16	15	11	21	22	15	8	9	1	1
	Females	93	0	0	0	4	4	10	5	4	8	10	11	10	9	4	10	2	2	0
1977	Total	365	0	0	2	26	44	41	33	34	25	30	29	28	20	20	11	11	8	3
	Males	256	0	0	1	23	36	29	23	20	18	25	20	13	13	12	6	8	6	3
	Females	109	0	0	1	3	8	12	10	14	7	5	9	15	7	8	5	3	2	0
1978	Total	322	0	0	3	18	37	29	22	20	23	29	25	30	32	15	20	13	4	2
	Males	208	0	0	2	17	30	21	16	12	15	16	15	13	17	9	13	8	3	1
	Females	114	0	0	1	1	7	8	6	8	8	13	10	17	15	6	7	5	1	1
1979	Total	302	0	0	0	23	24	31	26	21	19	31	27	23	24	16	17	14	5	1
	Males	213	0	0	0	17	19	22	21	14	14	24	22	12	17	9	9	8	4	1
	Females	89	0	0	0	6	5	9	5	7	5	7	5	11	7	7	8	6	1	0
1980	Total	337	0	0	2	34	47	34	30	24	19	16	34	20	15	17	19	13	7	6
	Males	225	0	0	2	20	38	25	17	18	13	11	16	16	13	10	12	6	5	3
	Females	112	0	0	0	14	9	9	13	6	6	5	18	4	2	7	7	7	2	3
1981	Total	320	0	0	4	17	43	26	27	30	20	24	19	25	25	15	23	11	8	3
	Males	241	0	0	4	14	36	16	21	25	17	19	12	19	17	12	17	6	3	3
	Females	79	0	0	0	3	7	10	6	5	3	5	7	6	8	3	6	5	5	0
1982	Total	364	0	0	1	18	45	34	35	29	19	18	23	47	26	21	25	10	10	3
	Males	257	0	0	1	16	36	27	28	21	12	10	14	27	15	17	18	7	6	2
	Females	107	0	0	0	2	9	7	7	8	7	8	9	20	11	4	7	3	4	1
1983	Total	352	0	0	4	24	46	37	27	34	29	18	21	27	19	30	15	14	5	2
	Males	250	0	0	3	20	38	26	22	25	15	12	12	20	11	24	8	9	4	1
	Females	102	0	0	1	4	8	11	5	9	14	6	9	7	8	6	7	5	1	1

		Total	Five-year age group																	
			0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+
1984	Total	389	0	0	4	25	47	49	38	30	29	23	22	27	25	18	18	16	14	4
	Males	297	0	0	2	21	36	41	28	26	22	17	16	18	18	13	14	12	11	2
	Females	92	0	0	2	4	11	8	10	4	7	6	6	9	7	5	4	4	3	2
1985	Total	338	0	0	5	30	45	36	28	21	21	23	21	25	16	25	20	14	6	2
	Males	255	0	0	2	25	35	26	25	15	15	17	17	14	12	20	14	11	5	2
	Females	83	0	0	3	5	10	10	3	6	6	6	4	11	4	5	6	3	1	0
1986	Total	414	0	0	4	38	53	43	31	41	37	23	30	23	28	22	14	15	9	3
	Males	301	0	0	2	29	39	34	19	32	29	19	20	14	22	14	10	9	7	2
	Females	113	0	0	2	9	14	9	12	9	8	4	10	9	6	8	4	6	2	1
1987	Total	463	0	0	8	36	77	64	39	30	30	33	27	35	18	18	11	17	16	4
	Males	363	0	0	7	29	64	51	28	24	26	24	18	26	16	14	8	14	11	3
	Females	100	0	0	1	7	13	13	11	6	4	9	9	9	2	4	3	3	5	1
1988	Total	484	0	0	2	54	77	53	48	28	31	34	23	30	32	17	25	19	10	1
	Males	381	0	0	2	47	59	40	32	24	28	32	18	27	19	12	21	14	6	0
	Females	103	0	0	0	7	18	13	16	4	3	2	5	3	13	5	4	5	4	1
1989	Total	465	0	1	7	58	73	66	35	30	34	31	26	15	24	25	17	7	11	5
	Males	372	0	1	7	50	61	50	29	26	27	23	20	10	16	21	10	7	10	4
	Females	93	0	0	0	8	12	16	6	4	7	8	6	5	8	4	7	0	1	1
1990	Total	455	0	0	2	44	86	53	40	42	34	27	25	25	22	14	14	13	10	4
	Males	363	0	0	2	37	74	43	29	35	22	23	19	20	19	9	10	8	9	4
	Females	92	0	0	0	7	12	10	11	7	12	4	6	5	3	5	4	5	1	0
1991	Total	474	0	0	4	45	80	65	49	42	39	41	28	13	18	18	14	10	7	1
	Males	380	0	0	4	41	68	53	42	33	27	31	19	11	13	15	6	9	7	1
	Females	94	0	0	0	4	12	12	7	9	12	10	9	2	5	3	8	1	0	0
1992	Total	493	0	0	5	44	85	71	42	39	34	33	30	27	34	13	15	8	7	6
	Males	397	0	0	4	39	73	60	38	34	25	24	18	18	27	9	13	5	6	4
	Females	96	0	0	1	5	12	11	4	5	9	9	12	9	7	4	2	3	1	2

		Total	Five-year age group																	
			0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+
1993	Total	443	0	0	3	40	86	50	55	36	33	35	19	17	17	20	13	12	5	2
	Males	349	0	0	2	34	76	38	40	33	22	29	11	13	9	18	9	10	4	1
	Females	94	0	0	1	6	10	12	15	3	11	6	8	4	8	2	4	2	1	1
1994	Total	512	0	0	7	56	81	53	63	32	38	34	25	23	25	20	24	10	14	7
	Males	409	0	0	5	44	67	44	49	27	32	26	17	19	23	17	17	6	10	6
	Females	103	0	0	2	12	14	9	14	5	6	8	8	4	2	3	7	4	4	1
1995	Total	543	0	0	6	59	97	66	50	47	38	44	29	23	14	26	16	15	10	3
	Males	427	0	0	4	45	77	58	38	38	29	35	20	20	9	21	14	9	8	2
	Females	116	0	0	2	14	20	8	12	9	9	9	9	3	5	5	2	6	2	1
1996	Total	540	0	0	7	59	84	73	69	49	31	38	25	24	15	20	22	8	10	6
	Males	428	0	0	3	38	67	64	57	42	24	27	19	21	13	18	16	5	8	6
	Females	112	0	0	4	21	17	9	12	7	7	11	6	3	2	2	6	3	2	0
1997	Total	561	0	0	8	72	70	83	71	51	50	31	29	24	18	13	17	10	9	5
	Males	440	0	0	5	53	60	70	54	40	36	22	21	17	16	12	15	7	9	3
	Females	121	0	0	3	19	10	13	17	11	14	9	8	7	2	1	2	3	0	2
1998	Total	577	0	0	12	66	74	80	56	56	56	40	23	28	22	16	22	14	8	4
	Males	445	0	0	8	40	65	66	45	46	37	30	17	24	19	14	14	14	4	2
	Females	132	0	0	4	26	9	14	11	10	19	10	6	4	3	2	8	0	4	2
1999	Total	516	0	0	6	48	72	67	59	61	48	33	33	23	15	9	18	13	8	3
	Males	385	0	0	3	29	54	56	50	45	29	25	26	19	13	4	14	10	6	2
	Females	131	0	0	3	19	18	11	9	16	19	8	7	4	2	5	4	3	2	1
2000	Total	458	0	0	4	42	54	71	55	51	31	30	31	26	16	14	13	5	9	6
	Males	375	0	0	3	31	50	58	47	40	25	23	25	21	11	12	13	5	6	5
	Females	83	0	0	1	11	4	13	8	11	6	7	6	5	5	2	0	0	3	1
2001	Total	507	0	0	3	43	67	59	62	57	61	27	23	20	21	17	13	17	13	4
	Males	388	0	0	1	30	57	42	50	46	50	18	15	16	15	13	10	14	7	4
	Females	119	0	0	2	13	10	17	12	11	11	9	8	4	6	4	3	3	6	0

		Total	Five-year age group																	
			0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+
2002	Total	466	0	0	0	40	55	52	56	57	48	35	30	28	18	14	12	6	6	9
	Males	353	0	0	0	25	40	43	39	43	40	27	21	25	13	11	10	5	4	7
	Females	113	0	0	0	15	15	9	17	14	8	8	9	3	5	3	2	1	2	2
2003	Total	517	0	0	5	51	46	46	55	60	51	47	41	25	24	12	17	17	14	6
	Males	376	0	0	4	35	31	35	44	37	44	34	28	21	18	8	11	14	9	3
	Females	141	0	0	1	16	15	11	11	23	7	13	13	4	6	4	6	3	5	3
2004	Total	488	0	0	6	50	63	50	45	57	47	41	24	32	20	11	12	12	9	9
	Males	379	0	0	4	34	49	44	32	44	40	31	17	23	17	9	8	11	7	9
	Females	109	0	0	2	16	14	6	13	13	7	10	7	9	3	2	4	1	2	0
2005	Total	511	0	0	2	45	63	56	54	55	51	41	39	42	15	18	5	12	6	7
	Males	380	0	0	0	36	48	44	40	42	33	32	31	29	13	13	3	8	2	6
	Females	131	0	0	2	9	15	12	14	13	18	9	8	13	2	5	2	4	4	1
2006	Total	526	0	0	6	61	58	54	48	53	54	38	43	46	14	13	16	4	6	12
	Males	388	0	0	2	49	46	36	37	37	38	30	31	36	13	8	11	1	4	9
	Females	138	0	0	4	12	12	18	11	16	16	8	12	10	1	5	5	3	2	3
2007	Total	487	0	0	2	41	52	40	52	60	53	46	42	31	19	10	9	10	13	7
	Males	371	0	0	1	29	41	34	45	45	35	38	29	20	12	10	9	10	10	3
	Females	116	0	0	1	12	11	6	7	15	18	8	13	11	7	0	0	0	3	4
2008	Total	520	0	0	5	56	65	47	41	48	47	53	43	41	23	15	12	6	11	7
	Males	381	0	0	2	31	52	34	36	30	34	40	35	32	19	11	7	5	7	6
	Females	139	0	0	3	25	13	13	5	18	13	13	8	9	4	4	5	1	4	1
2009	Total	506	0	0	9	54	60	35	49	41	49	49	46	37	25	8	12	7	16	9
	Males	391	0	0	5	42	51	23	41	35	35	36	39	27	18	5	10	6	11	7
	Females	115	0	0	4	12	9	12	8	6	14	13	7	10	7	3	2	1	5	2
2010 provisional	Total	522	0	0	7	53	60	47	46	53	45	56	42	33	25	14	13	9	10	9
	Males	380	0	0	3	32	46	32	31	39	39	41	30	25	19	11	12	6	6	8
	Females	142	0	0	4	21	14	15	15	14	6	15	12	8	6	3	1	3	4	1

Source: New Zealand Mortality Collection

Table A7: Suicide age-specific rates for OECD countries, by age group and sex

Country	Age-specific rate per 100,000 population					
	25–44		45–64		65+	
	Males	Females	Males	Females	Males	Females
Australia (2006)	16.8	4.6	17.1	4.8	15.0	4.4
Austria (2009)	19.8	4.7	30.4	9.5	52.9	14.8
Belgium (2005)	34.1	10.5	40.6	17.1	44.2	13.6
Canada (2004)	22.5	6.6	23.1	8.4	17.8	4.6
Chile (2007)	24.4	5.8	23.5	4.9	29.4	2.9
Czech Republic (2009)	23.4	2.9	37.6	7.0	36.3	7.3
Denmark (2006)	16.5	5.4	22.4	9.4	43.0	12.3
Estonia (2008)	31.0	5.3	45.2	11.2	43.4	10.4
Finland (2009)	34.5	12.6	39.4	15.6	35.4	7.5
France (2007)	27.4	8.1	34.5	13.9	49.3	12.8
Germany (2006)	15.6	4.4	23.2	7.9	35.6	11.3
Greece (2009)	6.0	1.3	9.3	1.1	8.2	1.5
Hungary (2009)	32.8	7.4	67.5	17.3	75.2	17.6
Ireland (2009)	28.7	6.1	21.9	5.8	14.0	4.0
Israel (2007)	9.8	1.6	9.5	2.4	15.2	3.5
Italy (2007)	8.6	2.6	12.0	3.6	21.1	4.5
Japan (2009)	36.3	13.6	53.9	14.5	42.0	18.5
Mexico (2008)	10.3	1.8	8.2	1.4	12.1	0.8
Netherlands (2009)	14.0	6.2	21.0	8.7	16.6	7.1
New Zealand (2010)	24.9	8.2	21.5	7.3	16.6	3.9
Norway (2009)	21.4	8.5	23.3	10.1	23.0	4.7
Poland (2008)	27.8	3.1	42.4	6.8	32.5	5.9
Portugal (2009)	10.4	2.5	21.0	5.1	40.4	9.2
Republic of Korea (2009)	36.5	26.8	59.8	20.4	118.5	50.9
Slovakia (2005)	23.2	3.0	40.1	5.8	32.2	5.6
Slovenia (2009)	32.3	3.8	53.4	14.3	63.1	20.8
Spain (2008)	11.4	3.1	15.1	4.4	25.6	6.2
Sweden (2008)	18.3	7.3	25.9	9.1	30.4	8.2
Switzerland (2007)	18.8	7.3	31.4	13.5	61.4	26.1
United Kingdom (2009)	16.5	3.9	15.3	4.3	9.7	3.3
United States of America (2005)	21.8	5.8	24.0	7.2	29.3	4.0
Median	21.8	5.4	23.5	7.9	32.2	7.1
Maximum	36.5	26.8	67.5	20.4	118.5	50.9
Minimum	6.0	1.3	8.2	1.1	8.2	0.8

Sources: (1) WHO (nd); (2) OECD (nd).

Note: The rate shown is the age-specific rate, measuring the frequency of suicides per 100,000 population relative to particular population age groups.

Table A8: Intentional self-harm short-stay emergency department hospitalisations, 1996–2010 (excluded from the main body of this publication)

DHB of domicile	Year of discharge														
	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Northland					8	18	35	38	43	55	73	66	63	79	88
Waitemata		9	7	104	206	313	452	380	320	310	370	422	468	433	387
Auckland	151	126	92	62	248	387	396	383	444	419	489	462	518	497	531
Counties Manukau	120	94	133	173	250	311	372	376	373	451	436	468	505	481	546
Waikato	8	9	20	23	56	128	166	185	203	224	245	71	148	248	310
Lakes		2	1	2	4	13	35	39	56	59	53	53	75	59	53
Bay of Plenty				1	12	1		13	12	5	22	70	91	94	92
Tairāwhiti				3	2									2	8
Taranaki	3	3	2	1	4	4	11	24	7	1			25	62	76
Hawke's Bay		2			1						43	67	88	150	175
MidCentral									19	114	131	181	177	190	192
Whanganui				2	1	3	20	12	13	11	16	18	44	89	77
Capital & Coast	6	5	4	4		2	1	1	3	2	7	1	20	215	317
Wairarapa	4	2													1
North Island 'Other'	1				1										
Nelson Marlborough	6	10	3	2	5	2							18	50	64
West Coast	15	10	7	8	9	14	20	14	9	23	3	4		1	0
Canterbury	13	117	246	309	342	433	460	508	408	443	519	427	514	497	566
South Canterbury		1							1						
Otago	3	10	15	12	64	84	82	104	154	136	122	134	105	110	119
Southland	2	4	9	3	8	1		1	1	1	18	18	26	44	56
South Island 'Other'				4	6	11	4	8	15	12	4	2	10	11	7
Total New Zealand	332	404	539	713	1227	1725	2054	2086	2081	2267	2551	2464	2895	3312	3665

Source: New Zealand National Minimum Dataset

Notes:

A 'short stay' is a stay of one day or less; see the 'Technical notes' section for more detail.

There were no events excluded from the data set for Hutt Valley DHB.

Table A9: Intentional self-harm hospitalisations within two days of a previous intentional self-harm hospitalisation, 1997–2010 (excluded from the main body of this publication)

DHB of domicile	Year of discharge														
	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Northland	8	3	11	11	17	15	11	16	20	15	8	13	11	12	23
Waitemata	16	16	14	20	42	36	28	44	58	34	44	45	43	32	49
Auckland	6	17	37	31	28	20	35	32	27	19	16	16	23	31	30
Counties Manukau	2	7	12	21	22	19	16	9	11	9	10	15	13	5	3
Waikato	21	9	22	31	44	77	58	34	42	52	29	31	27	42	31
Lakes	6	11	7	4	12	14	16	10	6	3	6	11	7	11	9
Bay of Plenty	3	7	8	18	31	15	9	14	23	20	11	21	21	19	27
Tairāwhiti	1	4	7	1	1	8	5	4	3	5	2	7	3	7	5
Taranaki	12	4	9	18	24	18	10	14	17	20	25	19	18	16	21
Hawke's Bay	3	9	5	1	9	9	3	5	2	1	7	1	4		4
MidCentral	8	11	21	21	23	11	21	19	21	11	15	11	9	5	12
Whanganui	2	3	5	6	2	2	2	1		1		5	1		3
Capital & Coast	27	18	14	13	20	16	5	14	14	7	8	12	10	15	50
Hutt Valley	5	8	15	32	15	23	40	32	12	9	10	16	5	9	17
Wairarapa	5	4	4	2	4	4	6	7	2		2	1	8		3
Nelson Marlborough	2	8	3		2	2	2	5	5	5	8	7	3	8	7
West Coast	7	5	3	8	13	12	12	19	10	14	9	10	8	6	7
Canterbury	10	9	25	79	70	94	57	82	81	57	50	29	15	13	23
South Canterbury	1	3	1	4	11	11	10	12	6	3	6	3	1	2	2
Otago	9	16	6	2	7	8	10	6	11	8	8	12	7	29	45
Southland	2	5	2	4	11	12	9	7	4	7	7	10	5	7	5
Other	1	2	3	3	2		2	2		2	1	1			1
Total New Zealand	157	179	234	330	410	426	367	388	375	302	282	296	242	269	377

Source: New Zealand National Minimum Dataset

Table A10: World Health Organization world standard population

Age group	Population
0–4	8860
5–9	8690
10–14	8600
15–19	8470
20–24	8220
25–29	7930
30–34	7610
35–39	7150
40–44	6590
45–49	6040
50–54	5370
55–59	4550
60–64	3720
65–69	2960
70–74	2210
75–79	520
80–84	910
85+	635
Total	100,035

Source: Ahmad et al 2001

Appendix 2: Further information

General information about suicide prevention

For general information about suicide and suicide prevention, contact:

Suicide Prevention Information New Zealand (SPINZ)
PO Box 10-051
Dominion Road
Auckland 1446
Ph: (09) 300 7035
Fax: (09) 300 7020
Email: info@spinz.org.nz
Website: www.spinz.org.nz

To find out more about the *New Zealand Suicide Prevention Strategy 2006–2016*, see the Ministry of Health's suicide prevention web page:
www.health.govt.nz/our-work/mental-health-and-addictions/suicide-prevention

Statistics

For health data, including suicide statistics, contact:

Analytical Services
National Collections and Reporting
National Health Board
Ministry of Health
PO Box 5013
Wellington
Ph: (04) 496 2000
Fax: (04) 816 2898
Email: data-enquiries@moh.govt.nz
Website: www.health.govt.nz

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For more copies of this publication, or *Suicide Facts* for previous years, see the Ministry of Health website or contact SPINZ (see above).