



**Australian
Bureau of
Statistics**

**Suicides
Australia
1982-1992**

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**SUICIDES, AUSTRALIA
1982-1992**

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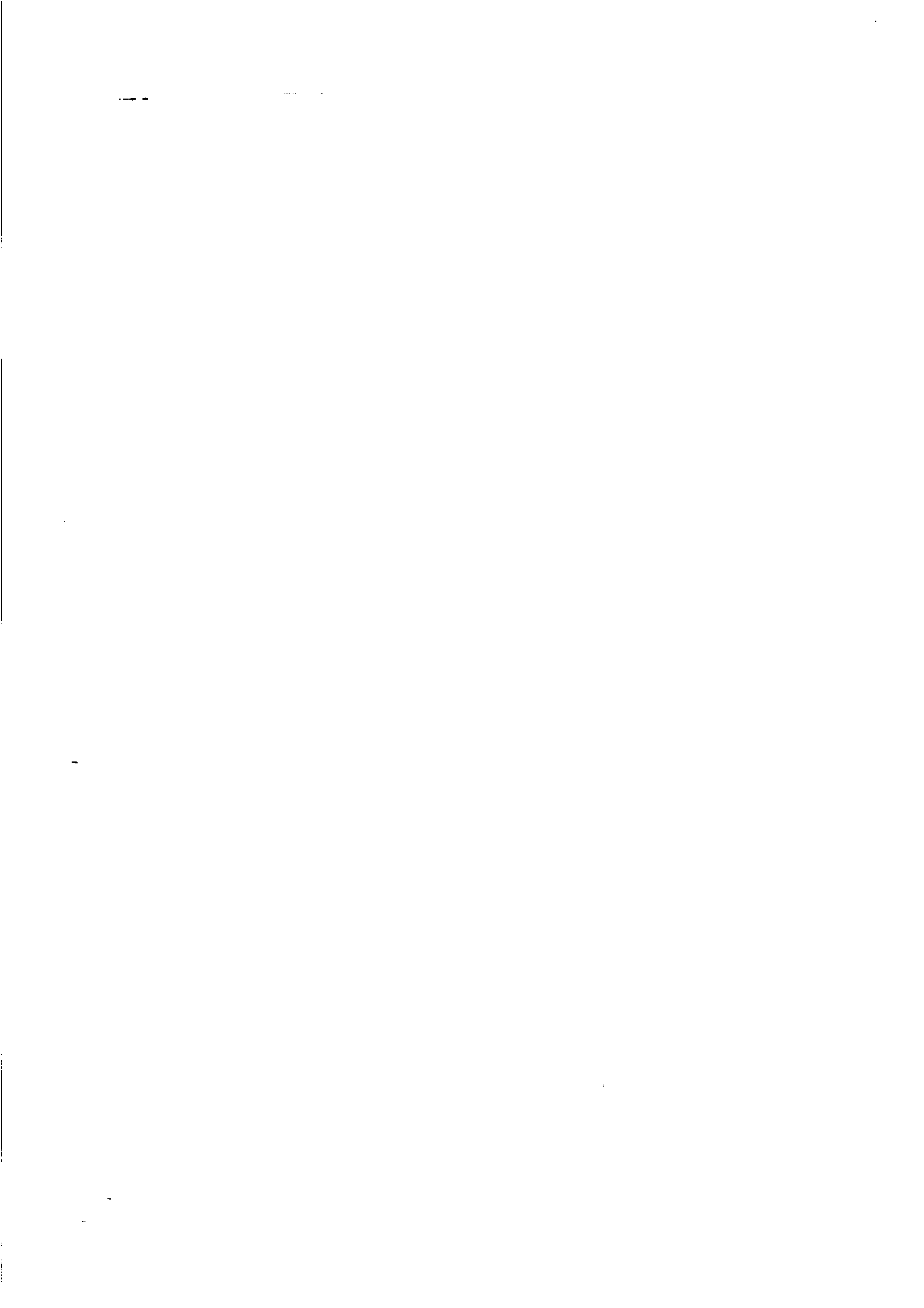
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INQUIRIES

- *for further information about statistics in this publication and the availability of related unpublished statistics. contact Peter Crowe on Canberra (06) 252 6967 or any ABS State office.*
- *for information about other ABS statistics and services please refer to the back page of this publication.*



Introduction

While the Australian Bureau of Statistics (ABS) has compiled data on suicides as far back as 1881 (see Table A), the focus of this publication is suicide in Australia for the years 1982-1992. An earlier publication titled *Suicides, Australia 1961-1981* was produced by the ABS in 1983. The definition of *Suicide* for the purpose of this publication is *the act of voluntarily and deliberately taking one's own life*. However, it is possible to deliberately take one's own life in a manner which suggests to others that the action was not deliberate. Consequently, in examining the following analysis of suicides it should be remembered that there are cases where a judicial inquiry (coroner's inquest) was unable to establish whether the injury causing death was accidentally or intentionally inflicted. The number of deaths in this category are not large but have been increasing in recent years, as Table 1 below shows, and it is possible for some undetected suicides to have been included in these data. Therefore it is possible that the number of suicides occurring in any period is understated.

TABLE 1. INJURY UNDETERMINED WHETHER ACCIDENTALLY OR PURPOSELY INFLICTED, AUSTRALIA, 1982 TO 1992

	Year										
	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992
<i>Number of deaths</i>	47	52	56	100	100	120	127	128	179	183	190

The data included in this publication relates to cases where judicial inquiries established that the deaths were due to suicide. It also refers to deaths registered in the particular year rather than deaths actually occurring in those years.

Number of Suicide Deaths

In the 11 years 1982-1992 the total number of deaths in Australia increased from 114,771 in 1982 to 123,660 in 1992. As a proportion of total deaths, suicides increased from 1.5 per cent in 1982 to 1.9 per cent in 1992.

During the reference period, as shown in Table 2, suicides accounted for in excess of 22,300 deaths with more than 2,000 deaths from suicide being registered in each of the past 6 years. It is also evident from the table that the number of male suicides is significantly higher than that for females. In fact since 1982, 78 per cent of the total number of deaths by suicide were male.

TABLE 2. SUICIDE DEATHS BY SEX AND BY YEAR OF REGISTRATION, AUSTRALIA, 1982 TO 1992

Year	Males	Females	Persons
1982	1,318	459	1,777
1983	1,308	418	1,726
1984	1,309	403	1,712
1985	1,428	399	1,827
1986	1,531	451	1,982
1987	1,773	467	2,240
1988	1,730	467	2,197
1989	1,658	438	2,096
1990	1,735	426	2,161
1991	1,847	513	2,360
1992	1,820	474	2,294
Total	17,457	4,915	22,372

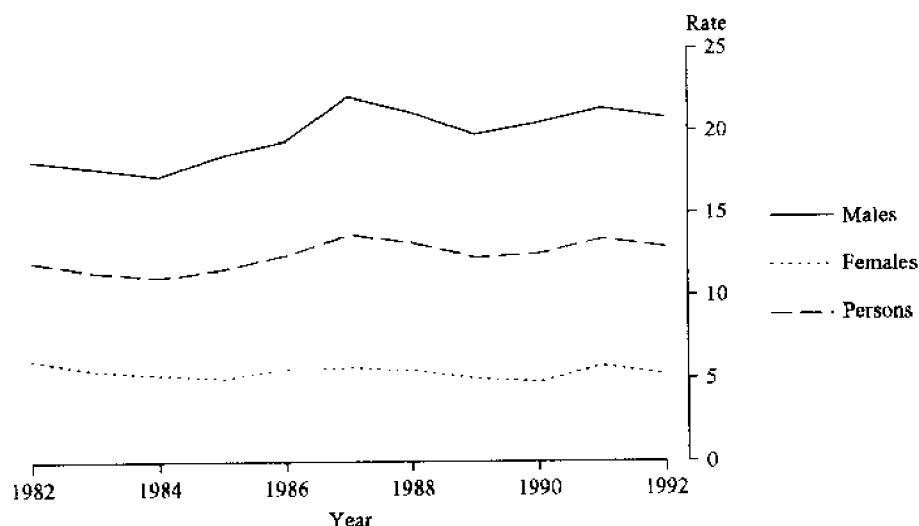
Trends in Suicide Deaths

Table A on page 13 shows that after the peak in the crude suicide rate in 1963 of 15.7 deaths per 100,000 of the mean population, the rate showed a small decline in subsequent years before stabilising in the early 1970's. Between 1973 and 1985 the crude rate remained at around 11 suicide deaths per 100,000 of the mean population but then began to rise again, peaking in 1987 at 13.8 suicide deaths per 100,000 of the mean population.

Between 1982 and 1992 the crude suicide rate increased by 12 per cent from 11.7 to 13.1 deaths per 100,000 of the mean population. However, on an age standardised basis (Diagram 1 and Table 3) the increase over the decade 1982-1992 was 7.5 per cent, indicating that a change in age composition explains some of the upward trend.

The upward trend is for males, increasing on an age standardised basis by 14 per cent between 1982 and 1992. The standardised rate for females over the same period has shown a downward trend, finishing the decade 15 per cent below 1982.

DIAGRAM 1. STANDARDISED SUICIDE RATES(a) BY SEX, AUSTRALIA, 1982 TO 1992



(a) Standardised per 100,000 mid-year 1986 population.

In 1991 the number of deaths resulting from suicide exceeded those from motor vehicle traffic accidents for the first time since 1930. There were 2,360 suicide deaths and 2,221 deaths from motor vehicle traffic accidents. In 1992, while the number of deaths from these causes actually decreased, the difference by which suicide deaths outnumbered those from motor vehicle traffic accidents increased. There were 2,294 and 2,066 deaths respectively from these causes. However, this increase in the number of suicides over motor vehicle traffic accidents is largely explained by the decreasing number of deaths from motor vehicle traffic accidents.

States and Territories

TABLE 3. STANDARDISED SUICIDE RATES(a) BY STATE OF USUAL RESIDENCE, PERSONS, AUSTRALIA, 1982 TO 1992

Year	NSW	Vic.	Qld	SA	WA	Tas.	NT	ACT	Aust.
1982	11.2	11.8	12.8	12.9	13.2	14.0	6.3	7.1	12.0
1983	10.1	12.8	11.6	10.2	11.0	16.3	15.3	12.5	11.4
1984	9.4	11.6	12.9	10.8	12.9	11.9	8.0	14.4	11.1
1985	11.7	10.2	13.6	9.9	12.3	16.1	11.3	11.9	11.6
1986	11.1	12.4	14.9	12.9	11.4	15.7	11.4	12.5	12.4
1987	11.4	15.4	15.9	13.1	13.7	15.2	10.6	15.4	13.7
1988	12.6	12.4	14.9	12.8	13.5	15.8	18.2	10.4	13.2
1989	11.6	11.3	14.6	14.0	11.9	12.9	22.1	13.4	12.4
1990	11.4	11.2	14.6	14.6	13.2	15.2	17.7	13.3	12.5
1991	12.7	13.4	14.2	15.6	12.9	14.4	10.9	11.5	13.4
1992	12.0	12.2	14.0	14.3	13.0	20.7	15.6	10.3	12.9

(a) Standardised per 100,000 mid-year 1986 population.

The standardised suicide rates for Queensland and Tasmania have consistently been above the national rate in all years between 1982 and 1992 (see Table 3). The standardised rate for the smaller States i.e. South Australia, Tasmania, Northern Territory and Australian Capital Territory have fluctuated more markedly than the larger States over the reference period.

Urban/Rural Comparison

Because comparable population estimates for statistical local areas are not available prior to 1986 an analysis of suicides by urban and rural areas has only been possible for the years 1986 to 1992 (see paragraph 7 of the explanatory notes). Table 4 shows that male standardised death rates for suicide are consistently higher in rural areas than urban areas, whereas female rates are slightly higher in urban areas compared to rural areas.

TABLE 4. SUICIDES BY USUAL RESIDENCE: URBAN AND RURAL AREAS BY SEX AND RATES(a), AUSTRALIA, 1986 TO 1992 (b)

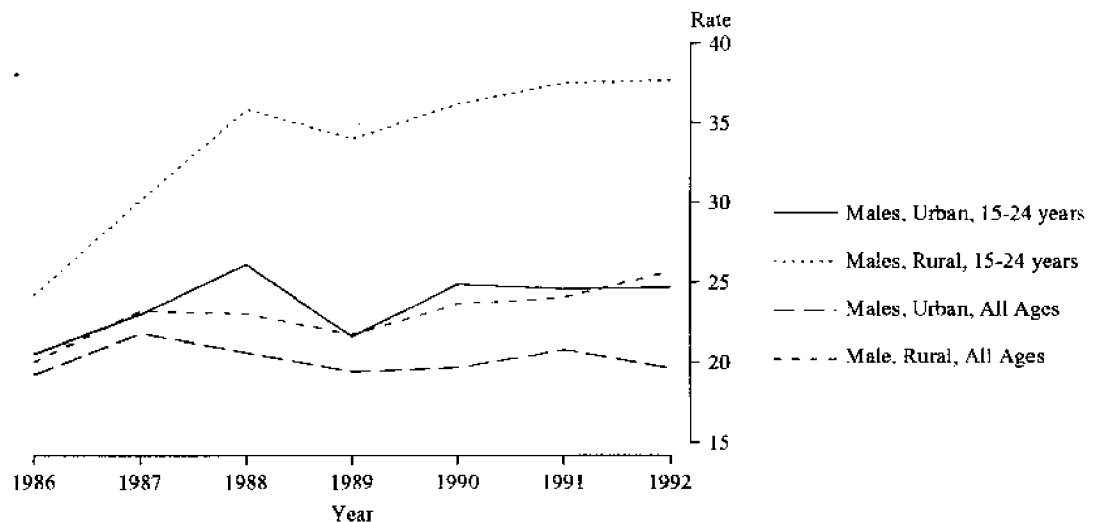
Year	Number			Rate		
	Urban	Rural	Total	Urban	Rural	Total
MALES						
1986	1,218	313	1,531	19	20	19
1987	1,397	376	1,773	22	23	22
1988	1,361	369	1,730	21	23	21
1989	1,306	352	1,658	19	22	20
1990	1,342	393	1,735	20	24	20
1991	1,465	382	1,847	21	24	21
1992	1,406	414	1,820	20	26	20
FEMALES						
1986	405	46	451	6	3	6
1987	404	63	467	6	4	6
1988	408	59	467	6	4	6
1989	375	63	438	5	4	5
1990	353	73	426	5	5	5
1991	449	64	513	6	4	6
1992	404	70	474	5	4	5
PERSONS						
1986	1,623	359	1,982	13	12	12
1987	1,801	439	2,240	14	14	14
1988	1,769	428	2,197	13	14	13
1989	1,681	411	2,096	12	13	12
1990	1,695	466	2,161	12	14	13
1991	1,914	446	2,360	13	14	13
1992	1,810	484	2,294	12	15	13

(a) Standardised per 100,000 estimated mid-year 1986 population.

(b) See paragraph 6 of the Explanatory Notes.

Males in the 15-24 years age group have a considerably higher age specific suicide rate for rural areas than does its urban counterpart. The age specific suicide rate for this group was 24 deaths per 100,000 of mid-year population in 1986 rising to 36 in 1988 and remaining around that level in subsequent years. By comparison, urban males in the 15-24 years age group had an age specific rate of 21 deaths per 100,000 of mid-year population in 1986 rising to 26 in 1988 before settling at 25 deaths per 100,000 of mid-year population in 1990, 1991 and 1992. Diagram 2 shows these trends more clearly.

DIAGRAM 2. MALE SUICIDE DEATH RATES(a) BY AGE, URBAN/RURAL COMPARISON, AUSTRALIA, 1986 TO 1992

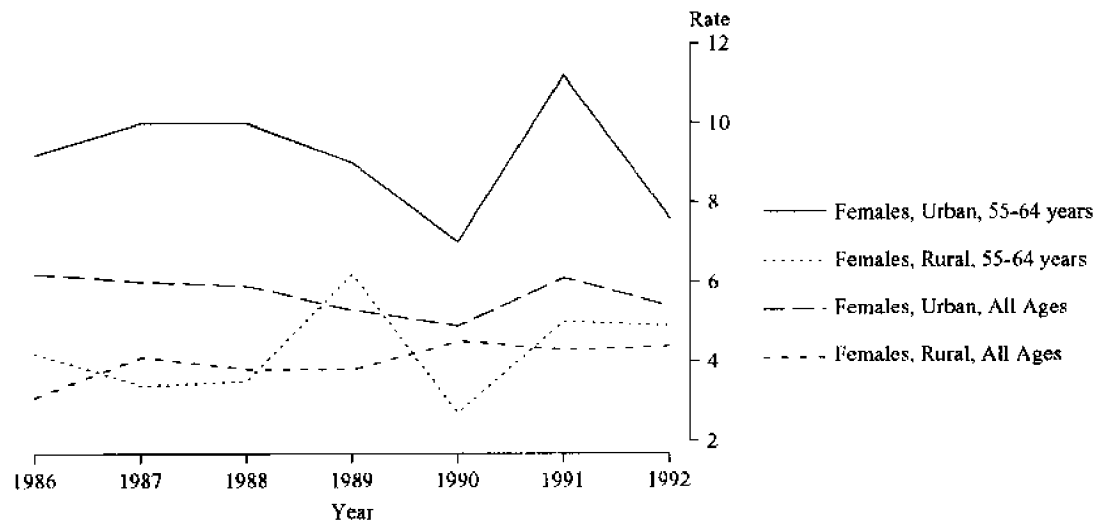


(a) per 100,000 of mid-year population.

The rate of female suicides has been lower for most age groups in rural areas than in urban areas. The standardised death rate for female suicides in rural areas was 3 per 100,000 of the mid-year population in 1986. This increased to 5 in 1990 then decreased to 4 in 1991 and 1992. In contrast, the standardised death rate for suicides in urban Australia declined from 6 per 100,000 of mid-year population in 1986 to 5 per 100,000 of mid-year population in 1990 before increasing again to 7 per 100,000 of mid-year population in 1991. It fell back to 5 per 100,000 of mid-year population again in 1992.

The most notable difference in female suicide rates when comparing urban and rural areas is in the older age groups. This is particularly evident in the 55-64 years age group for which the age specific death rate in urban areas has been between 7 and 12 suicides per 100,000 of the mid-year population which is considerably higher than the equivalent rates of between 3 and 6 suicides per 100,000 of mid-year population in rural areas. These trends are shown in Diagram 3.

DIAGRAM 3. FEMALE SUICIDE DEATH RATES(a) BY AGE, URBAN/RURAL COMPARISONS, AUSTRALIA, 1986 TO 1992



(a) per 100,000 of mid-year population.

In the years 1986 to 1992 the most common methods of suicide in urban areas were those included in the group hanging, strangulation and suffocation as defined in the International Classification of Diseases (ICD) Ninth Revision. Deaths in this group accounted for 24.6 per cent of all suicides in urban areas. By comparison 45.0 per cent of suicides in rural areas resulted from the use of firearms and explosives as defined in the ICD. Table 5 shows the distribution of suicide methods between urban and rural areas.

TABLE 5. AGGREGATED SUICIDES BY USUAL RESIDENCE: LEADING METHODS BY URBAN AND RURAL AREAS, AUSTRALIA, 1986 TO 1992

Method of Suicide	Urban		Rural		Total	
	Number	Per cent	Number	Per cent	Number	Per cent
Hanging, strangulation and suffocation	3,022	24.6	616	20.2	3,638	23.7
Firearms and explosives	2,207	18.0	1,374	45.0	3,579	23.3
Gases	2,557	20.8	545	17.9	3,102	20.2
Poisoning by solid or liquid substances	2,432	19.8	324	10.6	2,756	18.0
Other methods	2,059	16.8	196	6.4	2,255	14.7
Total	12,277	100.0	3,053	100.0	15,330	100.0

Age Group and Sex

The sex ratio of all suicides fluctuated from a low of 287 males per 100 females in 1982 to a high of 407 males per 100 females in 1990. The highest male to female suicide ratio has been in the 15-24 and 25-34 years age groups. In the 15-24 years age group the ratios were particularly high in 1988 and 1989, with 647 and 726 male deaths from suicide in the respective years for every 100 females. The ratios for the individual age groups are shown in Table 6 below. There has been substantial variation in these ratios during the reference period.

TABLE 6. SUICIDES BY YEAR OF REGISTRATION: MALE SUICIDE RATIOS PER 100 FEMALE SUICIDES, BY AGE GROUP, AUSTRALIA, 1982 TO 1992

Year	Age group							All ages (a)
	15-24	25-34	35-44	45-54	55-64	65-74	75 and over	
1982	614	359	253	182	213	226	296	287
1983	564	383	287	232	225	283	272	313
1984	444	373	313	224	288	314	305	325
1985	508	575	380	258	261	269	162	358
1986	408	455	325	225	297	300	344	340
1987	421	479	385	338	341	256	358	380
1988	647	400	358	312	273	318	232	370
1989	726	442	342	353	271	241	279	379
1990	632	420	440	330	404	284	228	407
1991	437	407	417	354	214	298	282	360
1992	491	431	348	419	327	342	228	384
Total Ratio	519	425	352	286	276	281	264	355

(a) Includes 1-14 years age group.

Increases in the age and sex-specific suicide rates in recent years have been confined mainly to the younger age groups for both males and females, most noticeably for the 15-24 years age group, particularly for males. The male rate in this age group increased from 19 deaths per 100,000 of the mid-year population in 1982 to 27 deaths in 1992. The female rate has fluctuated over the reference period but overall has increased from 3 deaths per 100,000 of mid-year population in 1982 to 6 deaths per 100,000 of mid-year population in 1992 (see Table 7).

In the 25-34 years age group as a proportion of total deaths suicides have increased from 18 per cent in 1982 to 21 per cent in 1992. Suicide deaths as a proportion of total deaths in the 15-24 years age group have doubled from 12 per cent in 1982 to 24 per cent in 1992. This increase in the percentage contribution of suicides to total deaths in these age groups is partly explained by a decrease in the number of deaths from other causes, particularly deaths due to motor vehicle traffic accidents as mentioned earlier.

Age specific death rates in the middle and older age groups for both males and females have generally fallen since the peak in 1987. The highest rate of 45 suicide deaths per 100,000 mid-year population, was recorded in 1987 for males in the 75 years and over age group.

TABLE 7. SUICIDES BY YEAR OF REGISTRATION: RATES^(a) BY 10 YEAR AGE GROUPS AND SEX, AUSTRALIA, 1982 TO 1992

Year	Age group							Total
	15-24	25-34	35-44	45-54	55-64	65-74	75 and over	
MALES								
1982	19	25	20	22	24	28	40	17
1983	19	24	19	21	24	29	39	17
1984	19	24	20	23	24	25	30	17
1985	24	27	22	21	22	25	27	18
1986	21	28	24	23	25	27	37	19
1987	24	29	28	28	30	29	45	22
1988	28	28	26	24	24	28	40	21
1989	24	30	22	24	23	27	34	20
1990	27	29	25	21	25	26	32	20
1991	27	30	30	26	21	23	38	21
1992	27	30	25	26	23	27	30	21
FEMALES								
1982	3	7	8	13	11	10	8	6
1983	3	6	7	10	11	9	8	5
1984	4	7	7	11	8	6	6	5
1985	5	5	6	9	8	8	10	5
1986	5	6	8	11	8	8	6	6
1987	6	6	8	9	9	9	7	6
1988	4	7	7	8	9	7	10	6
1989	3	7	7	7	8	10	7	5
1990	4	7	6	7	6	8	8	5
1991	6	7	7	8	10	7	8	6
1992	6	7	7	6	7	7	8	5
PERSONS								
1982	11	16	14	17	18	18	19	12
1983	11	15	13	16	17	18	19	11
1984	12	15	14	17	16	15	15	11
1985	15	16	14	15	15	15	16	12
1986	13	17	16	17	16	16	17	12
1987	15	18	18	18	19	18	21	14
1988	16	18	17	17	16	17	21	13
1989	14	19	15	16	16	18	17	12
1990	16	18	16	14	16	16	17	13
1991	17	19	19	17	16	14	19	14
1992	17	19	16	16	15	16	16	13

(a) Age-specific death rates per 100,000 of mid-year population for each relevant year.

Marital Status

In analysing suicide by marital status i.e. whether persons were married, divorced, widowed or never married, only the population over the age of 15 years was included. Of the four marital status categories, divorced persons had the highest average crude suicide rate over the period 1982-1992 with 34 deaths per 100,000 of divorced mean population. Divorced females had a higher suicide rate than females in any other marital status category with 18 deaths per 100,000 of the divorced female mean population during the reference period. By comparison, divorced males had an average crude suicide rate of 54 deaths per 100,000 of the divorced male mean population.

The highest proportion of suicide deaths for both divorced males and females occurred in the 35-44 years age group with 32 per cent and 31 per cent of total suicides for divorced males and females respectively.

Persons who had never married had the next highest rate of suicide for the reference period with 21 suicides per 100,000 of the mean population. The average crude suicide rate for males who had never married was 32 deaths per 100,000 of the male never married mean population, while the female rate in the same category was 8 deaths per 100,000 of the female never married mean population.

The highest proportion of suicide deaths for both males and females who had never married occurred in the 15-24 years age group. Forty five per cent of both male and female suicides in the never married category occurred in this age group. This age

group also represents the highest proportion of never married persons. The proportion of the never married population in the 15-24 years age group has increased over the reference period. In 1992 the median age for males to marry was 26.9 years while for females the median age was 24.7 years. By comparison the 1982 median ages at which males and females married were 24.6 and 22.4 years of age respectively.

There were 5 female suicide deaths per 100,000 of the female never married mid-year population in the 15-24 years age group for the period 1982 to 1992, compared with 24 male suicide deaths per 100,000 of the mid-year population in this age group over the same period. By contrast the age specific death rate in the 25 years and over age group for the period was 13 female suicide deaths per 100,000 of the female never married mid-year population and 46 male suicide deaths per 100,000 of the male never married mid-year population.

The widowed population had an average crude suicide rate of 20 deaths per 100,000 of the widowed mean population. The male suicide rate for this marital status category was the highest for males in any category with 56 deaths per 100,000 of the widowed male mean population. Widowed females recorded a suicide rate of 11 deaths per 100,000 of that mean population.

The highest proportion of suicides in the widowed category are in the older population. Males most at risk appear to be in the 75 and over age group which contributed 40 per cent of total widowed male suicides. Females in the 65-74 years age group had the highest proportion (35 per cent) of widowed female suicides.

TABLE 8. SUICIDES BY YEAR OF REGISTRATION: BY SEX AND MARITAL STATUS, NUMBER AND RATE(a), AUSTRALIA, 1982 TO 1992

Year	Sex	Number					Rate			
		Never Married	Married	Widowed	Divorced	Not Stated	Never Married	Married	Widowed	Divorced
1982	M	515	591	79	92	29	29	17	56	45
	F	84	215	95	62	3	6	6	15	25
1983	M	473	576	90	111	51	26	16	64	50
	F	98	183	85	48	2	7	5	13	18
1984	M	504	560	69	110	57	27	16	49	47
	F	116	188	60	38	1	8	5	9	13
1985	M	586	564	70	138	66	30	15	49	55
	F	106	155	73	60	2	7	4	11	20
1986	M	583	637	81	147	71	29	17	56	56
	F	116	210	68	55	—	8	6	10	17
1987	M	731	754	110	148	18	35	20	74	54
	F	145	175	79	66	1	9	5	12	20
1988	M	753	725	87	147	12	35	19	57	51
	F	138	189	71	67	1	8	5	11	19
1989	M	738	637	96	169	10	34	17	61	57
	F	106	202	66	61	2	6	5	10	17
1990	M	772	687	87	168	15	35	18	54	54
	F	119	161	68	74	4	7	4	10	19
1991	M	835	703	90	200	13	37	18	54	62
	F	171	197	70	71	2	10	5	10	18
1992	M	828	708	73	192	14	36	18	44	56
	F	153	176	80	61	2	8	4	12	14
Total	M	7,318	7,142	932	1,622	356	32	17	56	54
	F	1,352	2,051	815	663	20	8	5	11	18

(a) Rates per 100,000 of the mid-year population by marital status.

Persons who were married had the lowest average crude suicide rate of all marital status categories for the reference period with 11 suicides per 100,000 of the married mean population. The married male suicide rate was 17 deaths per 100,000 of the married mean population, while married females had a rate of 5 deaths per 100,000 of the mean population.

The highest proportion of suicides for both married males and females was in the 35-44 years age group, which contributed 25 per cent of total suicides of both married men and women.

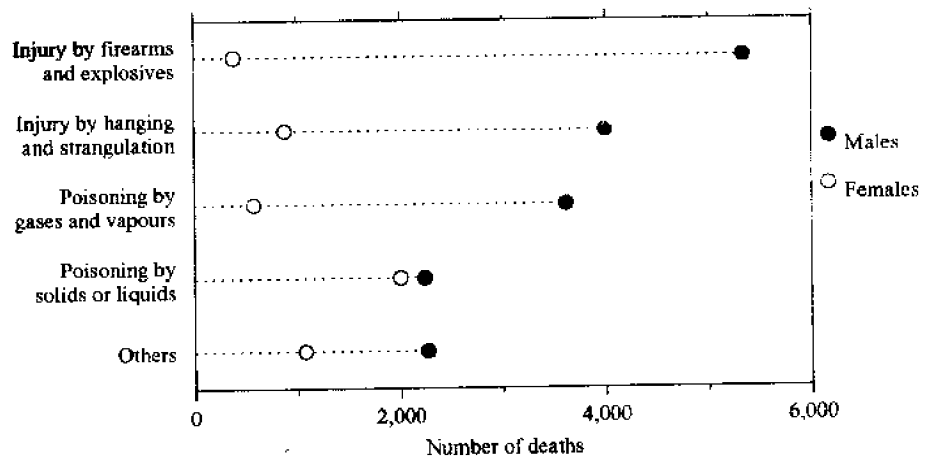
Methods of Suicide

There has been a change in the pattern of suicide methods between the years 1982 and 1992. In 1982 suicide deaths from the use of firearms and explosives accounted for 31 per cent of total suicides. By 1992 this had decreased to 21 per cent of all suicides. Suicide as a result of poisoning by solid or liquid substances also showed a gradual decrease over the reference period from 22 per cent of all suicides in 1982 to 17 per cent in 1992.

By comparison, suicides from hanging, strangulation and suffocation and poisoning by gases and vapours have both increased as a proportion of total suicides over the 11 year period. The number of deaths resulting from hanging, strangulation and suffocation increased from 17 to 26 per cent of all suicides between 1982 and 1992, while poisoning by gases and vapours increased from 14 per cent to 21 per cent over the same period.

Since 1989 the number of deaths from hanging, strangulation and suffocation has been greater than the number of suicides resulting from the use of firearms and explosives. However, aggregated over the reference period the leading methods of suicide are by means of firearms and explosives resulting in 5,720 deaths (see diagram 4).

DIAGRAM 4. METHODS OF SUICIDES BY SEX.
AUSTRALIA, 1982 TO 1992



The percentage of male suicides by hanging, strangulation and suffocation increased from 19 to 27 per cent of total male suicides between 1982 and 1992. The increases occurred in the age groups between 15-44 years and the 75 years and over age group. The other age groups either decreased slightly or remained unchanged.

Male suicides involving the use of firearms and explosives decreased from 39 per cent of total male suicides in 1982 to 25 per cent in 1992. The most notable decrease in the uses of these methods occurred for males aged 15-24 years where 50 per cent of male suicides in this age group were attributed to the use of firearms and explosives in 1982 and 28 per cent in 1992. There were also large decreases in the 25-34, 35-44 and 75 years and over age groups.

Females suicides resulting from hanging, strangulation and suffocation increased from 14 to 20 per cent of total female suicides between 1982 and 1992. The most notable increase in females committing suicide by this means was in the 75 years and over age group where 35 per cent of this age group used this method in 1992 compared to 8 per cent in 1982. The 15-24 and 65-74 years age groups also showed large increases in the proportion of female deaths from hanging, strangulation and suffocation.

The percentage of female suicides using poisoning by gases and vapours increased by more than half in the reference period from 8 per cent of total female suicides in 1982 to 13 per cent in 1992. The increase in female suicides using poisoning by gases and vapours occurred in most age groups, with the largest increase in the group 15-24 years. The proportion of female suicides in this group using this method increased from 12 per cent in 1982 to 25 per cent in 1992.

TABLE 9. SUICIDES BY YEAR OF REGISTRATION: BY METHOD OF SUICIDE, BY SEX, AUSTRALIA, 1982 TO 1992

Methods used	Sex	Year										
		1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992
		<i>percentage</i>										
Poisoning by solid or liquid substances	M	13	14	16	13	12	13	12	11	13	13	12
	F	47	49	40	37	40	44	40	37	38	38	39
	P	22	22	22	18	18	19	18	16	18	18	17
Poisoning by gases and vapours	M	16	16	18	20	23	21	21	22	22	22	23
	F	8	8	8	13	14	11	15	12	12	14	13
	P	14	14	15	19	21	19	20	20	20	21	21
Hanging, strangulation and suffocation	M	19	19	18	18	18	23	25	28	27	26	27
	F	14	14	15	19	15	17	19	20	23	21	20
	P	17	18	17	18	18	22	23	26	26	25	26
Firearms and explosives	M	39	37	37	36	33	30	28	25	26	26	25
	F	8	8	11	11	9	8	7	7	8	4	5
	P	31	30	31	30	28	26	24	22	23	22	21
Other methods	M	13	14	11	13	14	13	14	14	12	13	13
	F	23	21	26	20	22	20	19	24	19	23	23
	P	16	16	15	15	15	14	15	16	13	14	15

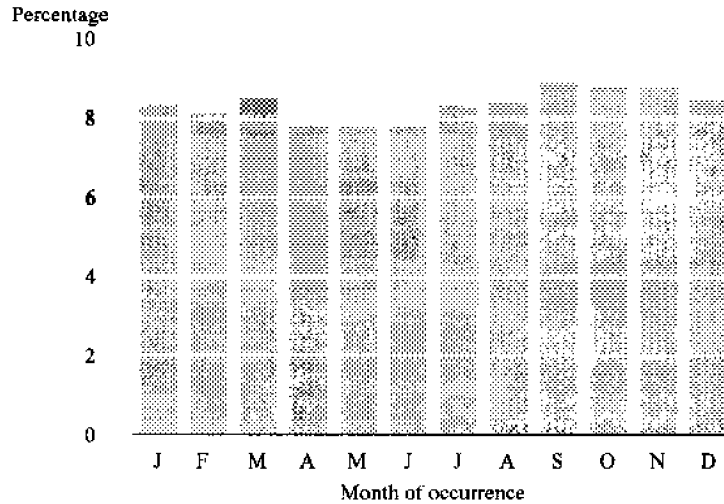
While most female suicides were a result of poisoning by solid or liquid substances the percentage of female suicides using these methods decreased from 47 per cent of total female suicides in 1982 to 39 per cent in 1992. The largest decrease using these methods of suicide occurred in the 15-24 years age group. In 1982, 50 per cent of female suicides in this age group resulted from poisoning by solid or liquid substances whereas this had decreased to 27 per cent of suicides in 1992. Most of the other age groups showed smaller decreases of between 3 per cent and 8 per cent in the proportion of suicides using these methods. The exception was the 25-34 years age group where the proportion of suicides from poisoning by solid or liquid substances increased from 36 per cent in 1982 to 39 per cent in 1992.

The percentage of female suicides using firearms and explosives was the lowest of all methods used by either sex. In 1982, 8 per cent of total female suicides were as a result of the use of firearms and explosives and this had decreased to 5 per cent by 1992.

Month of Occurrence

Suicides are fairly evenly distributed by month, with a slightly higher proportion occurring in spring and another peak in March. The pattern is similar for males and females. Allowance has been made for the different number of days in each month in presenting the information shown in Diagram 5.

**DIAGRAM 5. AGGREGATED SUICIDES 1982 TO 1992
MONTH OF OCCURRENCE(a), PERSONS,
AUSTRALIA**



(a) To facilitate comparison, data has been adjusted to take account of variations in the number of days in each month.

Overseas Born

There are no significant differences overall in the standardised death rate for suicide of persons born in Australia and those born overseas. However, suicide was generally more prevalent for persons born in Eastern Europe and to a lesser extent those born in Western Europe, compared to the Australian - born. Southern Europe and Asia have the lowest standardised suicide death rates for persons born outside of Australia.

**TABLE 10. STANDARDISED SUICIDE RATES (a) BY BIRTHPLACE (b),
AUSTRALIA, 1982 TO 1992**

Year	Australia	U.K. and Ireland	Southern Europe	Eastern Europe	Western Europe	Oceania	Asia ^(c)	Total Overseas Born
1982	11	12	7	31	19	14	8	13
1983	11	12	8	21	16	10	12	12
1984	11	11	5	17	17	17	9	11
1985	11	12	6	20	17	14	7	12
1986	12	13	6	17	19	14	8	12
1987	14	14	7	28	17	17	8	13
1988	13	15	8	20	14	17	9	13
1989	12	13	7	16	16	14	8	12
1990	13	12	5	14	19	14	8	11
1991	14	14	9	22	19	13	8	12
1992	13	13	8	24	17	14	7	12

(a) Standardised per 100,000 mid-year 1986 population.

(b) Birthplace regions as defined in the Australian Standard Classification of Countries for Social Statistics (ASCCSS), catalogue number 1269 0.

(c) Asia includes the following regions as defined in the ASCSS: South East Asia, North East Asia and Southern Asia.

**Years of
Potential
Life Lost**

Years of potential life lost measures the extent of *premature* mortality, where *premature* mortality is assumed to be deaths of persons between the ages of 1 and 76 years. By estimating years of potential life lost due to suicides of people aged 1 to 75 years, it is possible to assess the significance of this trauma as a cause of untimely death. Table 11 below presents years of potential life lost and the corresponding rates for deaths due to suicide for the period 1982 to 1992. See the technical note on page 16 for the method used to calculate years of potential life lost.

TABLE 11. DEATHS OF PERSONS AGED 1 TO 75 YEARS: SUICIDES BY YEARS OF POTENTIAL LIFE LOST, AUSTRALIA, 1982 TO 1992

Year	Years of potential life lost (a)		Rate (b)		
	Suicide	All causes	Suicide	All causes	%
1982	58,372	1,050,456	403	7,257	5.6
1983	57,449	965,449	392	6,585	6.0
1984	57,333	960,691	387	6,480	6.0
1985	63,030	1,009,147	420	6,722	6.2
1986	66,527	983,534	437	6,462	6.8
1987	74,138	970,286	480	6,285	7.6
1988	74,120	998,842	473	6,370	7.4
1989	69,934	980,938	439	6,156	7.1
1990	73,631	951,908	456	5,893	7.7
1991	80,392	924,343	492	5,656	8.7
1992	78,163	918,423	473	5,560	8.5
Total	753,089	10,714,017	—	—	—

(a) Years of potential life lost standardised for age according to the 1986 mid-year population.

(b) Rates are per 100,000 of mid-year population aged 1 to 75 years.

The average contribution of suicides to total years of potential life lost for all causes of death was 7 per cent over this period.

Years of potential life lost due to suicides have increased as a proportion of total years of potential life lost from all causes of death, from 5.6 per cent of the total in 1982 to 8.7 per cent in 1991 before decreasing slightly to 8.5 per cent in 1992.

International Comparison

In comparing the rate of suicide in Australia to those rates recorded in other countries, it is important to take account of the age and sex differences in the populations of those countries. By calculating the age-standardised death rate for each country using the direct age-standardisation method and a standard population, it is possible to directly compare the suicide mortality rate of Australia with overseas countries. Twenty countries including Australia have been selected representing a cross section of the world community. Care should be exercised in interpreting the data below as they refer to different years. This data is the latest published in the World Health Organisation's *1992 World Health Statistics* with the exception of Australia which shows 1992 data and is the latest available.

TABLE 12. STANDARDISED SUICIDE RATES^(a) BY COUNTRY AND SEX

Country	Year	Males	Females	Persons
Argentina	1989	9.1	3.4	6.2
Australia	1992	16.6	4.1	10.4
Canada	1990	17.5	4.4	10.9
Chile	1989	9.6	1.5	5.5
Finland	1991	39.3	8.8	24.0
Germany	1990	17.1	6.5	11.7
Greece	1990	4.1	1.1	2.6
Hungary	1991	42.2	13.3	27.3
Ireland	1990	13.5	4.5	9.0
Italy	1989	7.5	2.7	5.1
Japan	1991	14.4	7.8	11.0
Mauritius	1991	16.9	7.9	12.4
Mexico	1990	4.4	0.7	2.6
Netherlands	1990	9.4	5.3	7.4
New Zealand	1989	20.4	4.9	12.6
Poland	1991	20.3	3.6	11.8
Singapore	1990	13.2	10.2	11.8
UK	1991	10.2	2.7	6.4
USA	1989	16.6	4.0	10.2
Yugoslavia	1990	16.6	6.8	11.6

(a) See paragraph 9 of the Explanatory Notes.

The Australian suicide rate is similar to that experienced in many other countries, including the United States and Canada. However, it is higher than the rates recorded in the United Kingdom and Italy, but lower than Hungary and Finland.

TABLE A. SUICIDES: AUSTRALIA, 1881 TO 1992

Year	Number			Rate(a)			Year	Number			Rate(a)		
	Males	Females	Persons	Males	Females	Persons		Males	Females	Persons	Males	Females	Persons
1881	214	36	250	17.5	3.5	11.0	1937	573	148	721	16.6	4.4	10.5
1882	169	35	204	13.3	3.2	8.7	1938	574	172	746	16.4	5.0	10.8
1883	201	34	235	15.2	3.0	9.6	1939	602	179	781	17.1	5.2	11.2
1884	214	39	253	15.5	3.3	9.9	1940	559	173	732	15.7	5.0	10.4
1885	222	41	263	15.5	3.4	9.9	1941	463	161	624	12.9	4.6	8.8
1886	238	36	274	16.0	2.9	10.0	1942	432	162	594	12.0	4.5	8.3
1887	n.a.	n.a.	353	n.a.	n.a.	12.5	1943	376	140	516	10.3	3.9	7.1
1888	n.a.	n.a.	376	n.a.	n.a.	12.8	1944	362	178	540	9.9	4.9	7.4
1889	n.a.	n.a.	347	n.a.	n.a.	11.5	1945	394	173	567	10.6	4.7	7.7
1890	n.a.	n.a.	338	n.a.	n.a.	10.9	1946	513	219	732	13.7	5.9	9.8
1891	n.a.	n.a.	357	n.a.	n.a.	11.2	1947	546	200	746	14.4	5.3	9.8
1892	n.a.	n.a.	373	n.a.	n.a.	11.4	1948	578	159	737	15.0	4.1	9.6
1893	n.a.	n.a.	425	n.a.	n.a.	12.8	1949	599	174	773	15.1	4.4	9.8
1894	n.a.	n.a.	408	n.a.	n.a.	12.0	1950	567	193	760	13.8	4.8	9.3
1895	n.a.	n.a.	421	n.a.	n.a.	12.2	1951	608	197	805	14.3	4.7	9.6
1896	n.a.	n.a.	437	n.a.	n.a.	12.4	1952	694	225	919	15.9	5.3	10.6
1897	391	93	484	20.6	5.5	13.5	1953	698	261	959	15.6	6.0	10.9
1898	367	84	451	19.0	4.9	12.4	1954	724	245	969	15.9	5.5	10.8
1899	372	83	455	19.1	4.8	12.3	1955	701	245	946	15.1	5.4	10.3
1900	343	78	421	17.4	4.4	11.3	1956	751	270	1,021	15.7	5.8	10.8
1901	375	77	452	18.9	4.3	11.9	1957	844	326	1,170	17.3	6.9	12.1
1902	387	64	451	19.2	3.5	11.7	1958	910	297	1,207	18.3	6.1	12.3
1903	435	78	513	21.4	4.2	13.2	1959	827	288	1,115	16.3	5.8	11.1
1904	426	72	498	20.7	3.8	12.6	1960	778	314	1,092	15.0	6.2	10.6
1905	431	89	520	20.7	4.6	13.0	1961	901	348	1,249	16.9	6.7	11.8
1906	403	96	499	19.1	4.9	12.3	1962	1,011	458	1,469	18.7	8.9	13.7
1907	385	76	461	18.0	3.8	11.2	1963	1,143	575	1,718	20.7	10.6	15.7
1908	413	84	497	19.0	4.2	11.9	1964	1,071	549	1,620	19.0	9.9	14.5
1909	398	97	495	18.0	4.7	11.6	1965	1,075	610	1,685	18.7	10.8	14.8
1910	432	84	516	19.1	4.0	11.8	1966	1,017	607	1,624	17.4	10.5	14.0
1911	446	98	544	19.1	4.5	12.1	1967	1,125	653	1,778	18.9	11.1	15.1
1912	514	118	632	21.2	5.3	13.6	1968	1,022	505	1,527	16.9	8.5	12.7
1913	516	131	647	20.5	5.7	13.4	1969	1,025	477	1,502	16.6	7.8	12.2
1914	534	109	643	20.7	4.6	13.0	1970	1,076	475	1,551	17.1	7.6	12.4
1915	537	122	659	20.9	5.0	13.2	1971	1,150	588	1,738	17.5	9.0	13.3
1916	466	111	577	18.8	4.5	11.7	1972	1,085	540	1,625	16.2	8.2	12.2
1917	408	94	502	16.7	3.8	10.2	1973	1,036	492	1,528	15.3	7.3	11.3
1918	408	90	498	16.4	3.5	9.9	1974	1,073	494	1,567	15.6	7.2	11.4
1919	440	106	546	16.9	4.1	10.5	1975	1,050	478	1,528	15.1	6.9	11.0
1920	516	120	636	18.9	4.6	11.9	1976	1,098	406	1,504	15.6	5.8	10.7
1921	510	111	621	18.4	4.1	11.4	1977	1,128	438	1,566	15.9	6.2	11.0
1922	441	92	533	15.6	3.4	9.6	1978	1,126	469	1,595	15.7	6.5	11.1
1923	492	107	599	17.0	3.8	10.5	1979	1,198	479	1,677	16.5	6.6	11.6
1924	534	119	653	18.0	4.2	11.2	1980	1,199	408	1,607	16.3	5.5	10.9
1925	569	131	700	18.8	4.5	11.8	1981	1,259	413	1,672	16.9	5.5	11.2
1926	583	128	711	18.9	4.3	11.7	1982	1,318	459	1,777	17.4	6.0	11.7
1927	598	142	740	18.9	4.7	12.0	1983	1,308	418	1,726	17.0	5.4	11.2
1928	635	142	777	19.7	4.6	12.3	1984	1,309	403	1,712	16.8	5.2	11.0
1929	644	141	785	19.7	4.5	12.3	1985	1,428	399	1,827	18.1	5.1	11.6
1930	791	152	943	24.0	4.8	14.6	1986	1,531	451	1,982	19.1	5.6	12.4
1931	689	138	827	20.7	4.3	12.7	1987	1,773	467	2,240	21.8	5.7	13.8
1932	598	156	754	17.9	4.8	11.5	1988	1,730	467	2,197	21.0	5.6	13.3
1933	633	157	790	18.8	4.8	11.9	1989	1,658	438	2,096	19.8	5.2	12.5
1934	643	183	826	19.0	5.6	12.4	1990	1,735	426	2,161	20.4	5.0	12.7
1935	612	181	793	17.9	5.5	11.8	1991	1,847	513	2,360	21.4	5.9	13.7
1936	611	178	789	17.8	5.3	11.6	1992	1,820	474	2,294	20.9	5.4	13.1

(a) Rates per 100,000 mean population.

EXPLANATORY NOTES

Introduction

This publication contains statistics on deaths from suicide in Australia which have been compiled from data made available by the Registrars of Births, Deaths and Marriages in the States and Territories. The primary purpose of this publication is to provide an insight into the trends in suicide deaths in Australia. It updates information on suicide published by the Australian Bureau of Statistics (ABS) in *Suicides Australia, 1961-1981*. Additional information is available on request (see paragraph 11).

Scope and Coverage

2. The statistics in this publication include all deaths where the underlying cause was determined as being suicide or self inflicted injury (E950-E959), as classified under the Ninth (1975) revision of the International Classification of Diseases (ICD) (see paragraph 8).

3. Unless otherwise stated, these statistics relate to the number of deaths registered, not those which actually occurred, in the years shown. Because nearly all suicide deaths would have been the subject of a coronial enquiry, delays can occur in the registration of these deaths. As a consequence, about 15-18 per cent of suicide deaths occurring in one year are not registered until the following year or later.

Source of data

4. The registration of deaths is the responsibility of the individual State and Territory Registrar of Births, Deaths and Marriages. Normally, deaths which are thought to be suicide are subject to a coronial enquiry. The coroner's report in such instances is used to provide some of the detail required for the normal death registration process. Other information about the deceased is supplied by a relative or other person acquainted with the deceased, or by an official of the institution where the death occurred. This information is provided to the ABS by individual Registrars for compilation into aggregated statistics shown in this publication.

Geographical classifications

5. Statistics for States and Territories shown in this publication have been compiled in respect of the State or Territory of usual residence of the deceased, regardless of where in Australia the death occurred and was registered. Statistics compiled on a State or Territory of registration basis are available on request.

6. Statistics for areas classified as urban were defined as being urban centres with population greater than 20,000 persons, based on 1991 Population Census figures. The balance of Australia was defined as being rural.

7. Urban/Rural breakdowns are only given for the years 1986 onwards due to the unavailability of comparable population data prior to 1986, required to calculate age-specific and standardised death rates for these years.

Cause of death classification used in this publication

8. Deaths from suicide in this publication are classified according to the Ninth (1975) Revision of the World Health Organisation's International Classification of Diseases (ICD) which was adopted for world-wide use from 1979. Details relate to those deaths where suicide was established as the underlying cause of death by a coronial enquiry.

Death rates

9. Three forms of death rates are shown in this publication. These are *Crude death rates*, *Standardised death rates*, and *Age-specific death rates*, as defined below:

- *Crude death rates* relate to the total number of deaths for specific causes and are the number of deaths for those causes per 100,000 of the estimated mean resident population for the year ended 31 December.
- *Standardised death rates* relate to the overall death rates that would have prevailed in a standard population if it had experienced at each age the death rates of the population being studied. The standard population used in these calculations is the Australian Population as at 30 June 1986. For the international comparison, the populations used are those published in the World Health Organisation's *1992 World Health Statistics, Annual*.
- *Age-specific death rates* relate to deaths for age groups other than under one year and are the number of deaths per 100,000 of the mid-year estimated resident population in a particular age/sex group.

Additional statistics available

10. Tables containing more detailed cause of death information by sex and/or age group are available on hardcopy and microfiche from any ABS office. These tables are available on a State or Territory of usual residence or State or Territory of registration basis.

11. In addition, information on other particulars is available (see Appendix). Users who are interested in obtaining tabulations of cause of death by any of these particulars can be provided with the information in one or more of the following forms: photocopy, magnetic tape and electronic media, computer printout, and clerically extracted

tabulation. Generally, a charge is levied for providing unpublished information.

Related publications

12. Users may also wish to refer to the following related publications:

Births, Australia (3301.0) - issued annually

Deaths, Australia (3302.0) - issued annually

Causes of Death, Australia (3303.0) - issued annually

Perinatal Deaths, Australia (3304.0) - issued annually

Suicides Australia, 1961-1981 (3309.0) - irregular

Deaths, New South Wales (3312.1) - issued annually

Deaths, Victoria (3312.2) - issued annually

Deaths, Queensland (3312.3) - issued annually

Deaths, South Australia (3312.4) - issued annually

Deaths, Western Australia (3312.5) - issued annually

Deaths, Tasmania (3312.6) - issued annually

13. Current publications produced by the ABS are listed in the *Catalogue of Publications and Products, Australia* (1101.0). The ABS also issues, on Tuesdays and Fridays, a *Publications Advice* (1105.0) which lists publications to be released in the next few days. The Catalogue and Publications Advice are available from any ABS office.

Symbols and other usages

14. The following standard symbols are used in this publication:

ABS Australian Bureau of Statistics

ICD International Classification of Diseases
(produced by the World Health Organisation)

M Males

F Females

P Persons

n.a. Data not available

TECHNICAL NOTE

YEARS OF POTENTIAL LIFE LOST

Estimates of years of potential life lost (YPLL) were calculated for deaths of persons aged 1 to 75 years based on the assumption that deaths occurring between ages 1 and 76 years are considered untimely.

$$YPLL = \sum_x (D_x (76 - A_x))$$

A_x = Adjusted age at death. As age at death is only available in completed years the midpoint of the reported age was chosen (e.g. age at death 34 years was adjusted to 34.5).

D_x = Registered number of deaths at age x due to a particular cause of death

YPLL was standardised for age using the following formula:

$$YPLL_s = \sum_x (D_x (76 - A_x) C_x)$$

where the age correction factor C_x is defined for age x as:

$$C_x = \frac{N_{xs}}{N_s} \cdot \frac{1}{N_x} \cdot N$$

N = Number of persons aged 1-75 years in the relevant mid-year population

N_x = Number of persons aged x years in the relevant mid-year population

N_{xs} = Number of persons aged x in the standard mid-year population

N_s = Number of persons aged 1-75 years in the standard mid-year population

The Australian population at 30 June 1986 was chosen as the standard population.

Estimates of YPLL by cause of death, as presented in Table 11 indicate the number of years lost due to suicide based on the assumption that up to exact age 76 years the deceased would not have died from any other cause. YPLL therefore should not be used as a measure of gains in life expectancy should suicide be eliminated or reduced.

APPENDIX

Causes of death data is available from the calendar year 1966 in a variety of forms through the ABS special data service. Please note that for comparability purposes, the data conforms to the different revisions of the International Classification of Diseases (ICD), namely:

ICD 7 1966 to 1967
ICD 8 1968 to 1978
ICD 9 1978 to the present.

Documentation is available detailing the relationship between the ninth revision of the ICD and earlier revisions (ICD 7 and ICD 8).

DATA ITEMS AVAILABLE FOR CROSS TABULATION WITH CAUSE OF DEATH

- State or Territory of registration of death
- Month and year of the registration of death
- Place of usual residence of deceased - State or Territory
 - Statistical Division
 - Statistical Local Area
- Sex of deceased
- Age of deceased in completed years
- Date of death of deceased
- Country of birth of deceased
- Duration of residence in Australia (where deceased are not Australian born)
- Marital status of deceased
- Number of issue of deceased
- Aboriginality (for all States except Queensland)
- Postmortem indicator
- Drowning indicator (where Drowning is mentioned on the Death Certificate) (from 1992)
- AIDS indicator (where AIDS is mentioned on the Death Certificate)
- Certifier of cause of death (Doctor or Coroner).

CAUSE OF DEATH TABLES ON MICROFICHE

UR1 Deaths by State/Territory of usual residence x cause of death (S list) x sex x 5 year age groups
 UR2 Deaths by State/Territory of usual residence x cause of death (ICD-3 digit) x sex
 UR3 Deaths by State/Territory of usual residence x cause of death (ICD-3 digit) x sex x 5 year age groups
 RG1 Deaths by State/Territory of registration x cause of death (S list) x sex x 5 year age groups
 RG2 Deaths by State/Territory of registration x cause of death (ICD-3 digit) x sex
 RG3 Deaths by State/Territory of registration x cause of death (ICD-3 digit) x sex x 5 year age group.

STANDARD CAUSES OF DEATH TABLES

COD1 Causes of death (ICD-3 digit) x age x sex x State/Territory of usual residence
 COD2 Causes of death (ICD-3 digit) x age x sex x State/Territory of registration
 COD3 Causes of death (ICD-3 digit) x country of birth x sex x age
 COD4 Causes of death (ICD-3 digit) x month x state
 COD5 Causes of death (ICD-3 digit) x marital status x sex x age.



For more information ...

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