Office for National Statistics

Statistical bulletin

Suicides in the UK: 2017 registrations

Registered deaths in the UK from suicide analysed by sex, age, area of usual residence of the deceased and suicide method.

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Next release:
To be announced

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1 . Main points

- In 2017 there were 5,821 suicides registered in the UK, an age-standardised rate of 10.1 deaths per 100,000 population.
- The UK male suicide rate of 15.5 deaths per 100,000 was the lowest since our time-series began in 1981; for females, the UK rate was 4.9 deaths per 100,000, this remains consistent with the rates seen in the last 10 years.
- Males accounted for three-quarters of suicides registered in 2017 (4,382 deaths), which has been the case since the mid-1990s.
- The highest age-specific suicide rate was 24.8 deaths per 100,000 among males aged 45 to 49 years; for females, the age group with the highest rate was 50 to 54 years, at 6.8 deaths per 100,000.
- Scotland had the highest suicide rate in Great Britain with 13.9 deaths per 100,000 persons, and England the lowest with 9.2 deaths per 100,000.

2 . Things you need to know about this release

Information for the media

If you are a journalist covering a suicide-related issue, please consider following the Samaritans' media guidelines on the reporting of suicide, due to the potentially damaging consequences of irresponsible reporting. In particular, the guidelines advise on terminology and include links to sources of support for anyone affected by the themes in the article, such as Samaritans.

Where to go for help

If you are struggling to cope, please call Samaritans free on 116 123 (UK and Ireland), email jo@samaritans.org, or visit the Samaritans website to find details of the nearest branch. Samaritans is available round the clock, every single day of the year, providing a safe place for anyone struggling to cope, whoever they are, however they feel, whatever life has done to them.

Resources are also available online. "U can Cope" includes a film and resources that are designed for people in distress and those trying to support them, to instil hope, promote appropriate self-help and inform people regarding useful strategies and how they can access help and support. "Staying safe if you're not sure life's worth living" includes practical, compassionate advice and many useful links for people in distress.

Suicide definition

This release is based on the National Statistics definition of suicide; this includes all deaths from intentional self-harm for persons aged 10 years and over, and deaths where the intent was undetermined for those aged 15 years and over. This definition was revised in January 2016 and further information on the impact can be found in the 2014 suicide registrations bulletin.

Deaths from an event of undetermined intent in 10- to 14-year-olds are not included. Although for older teenagers and adults we assume that in these deaths the harm was self-inflicted, for younger children it is not clear whether this assumption is appropriate.

Northern Ireland

In this year's release, while we report data for the UK as a whole, we do not report the latest 2017 numbers of deaths and rates for Northern Ireland; these will be published later this year on the Northern Ireland Research and Statistic Agency website.

3 . Suicides in the UK

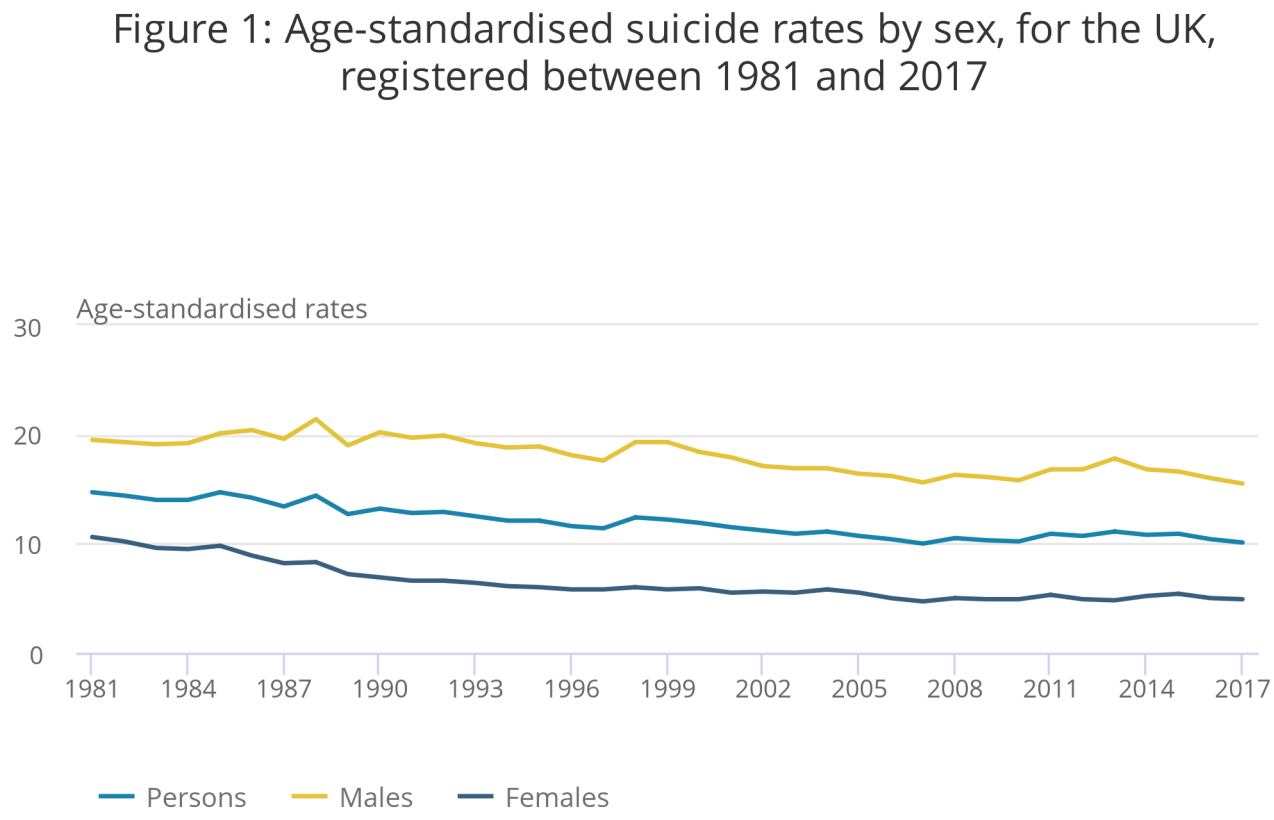
In 2017, a total of 5,821 suicides were registered in the UK. This equates to an age-standardised suicide rate of 10.1 deaths per 100,000 population; this is one of the lowest rates observed since our time series began in 1981, when the rate was 14.7 deaths per 100,000.

UK male suicide rate lowest since time series began in 1981

The 2017 suicide rate for males in the UK was 15.5 deaths per 100,000 (4,382 deaths); this is the lowest rate since the time series began in 1981. There has been a general downward trend since 1981, despite several statistically significant peaks. The highest rate in the 36-year period was in 1988 (21.4 deaths per 100,000 population).

The 2017 suicide rate for females in the UK was 4.9 per 100,000 population (1,439 deaths). The female suicide rate showed a mostly consistent downward trend from 1981 to a low point in 2007, but has since remained relatively stable. Female suicide rates in the UK are consistently lower than male suicide rates. In 2017, males made up three-quarters of suicides, a proportion which has been mostly consistent since the mid-1990s.

Figure 1: Age-standardised suicide rates by sex, for the UK, registered between 1981 and 2017



Source: Office for National Statistics, National Records of Scotland and Northern Ireland Statistics and Research Agency

Notes:

1. The National Statistics definition of suicide is given in "Things you need to know about this release" section of this bulletin.

2. Figures are for persons aged 10 years and over.

3. Age-standardised suicide rates per 100,000 population, standardised to the 2013 European Standard Population. Age-standardised rates are used to allow comparison between populations which may contain different proportions of people of different ages.

4. Figures include deaths of non-residents.

5. Figures are for deaths registered, rather than deaths occurring in each calendar year. Due to the length of time it takes to complete a coroner's inquest, it can take months or even years for a suicide to be registered. More details can be found in the Quality and methodology section.

4 . Suicides by country

Scotland had the highest suicide rate in Great Britain in 2017, with 13.9 deaths per 100,000 persons. England had the lowest, with 9.2 deaths per 100,000. Figures for Northern Ireland will be published by the Northern Ireland statistics and Research Agency later this year.

When looking at rates of suicide over time by country, in England the rate for all persons has decreased significantly from 14.6 deaths per 100,000 population in 1981 to 9.2 deaths per 100,000 in 2017. This is a reduction of 37% and the third lowest rate observed since the time series began. Rates in Wales tend to fluctuate year-to-year because of the smaller numbers, and there has been no apparent downward trend over time. The rate in Wales in 2017 was higher than in the majority of years since 1981 (when it was 12.0 deaths per 100,000). Scotland had its lowest suicide rate in 2017 (13.9 deaths per 100,000) since the time series began, significantly lower than in 1981 (17.5 deaths per 100,000).

Second lowest suicide rate among males in England since our time series began in 1981

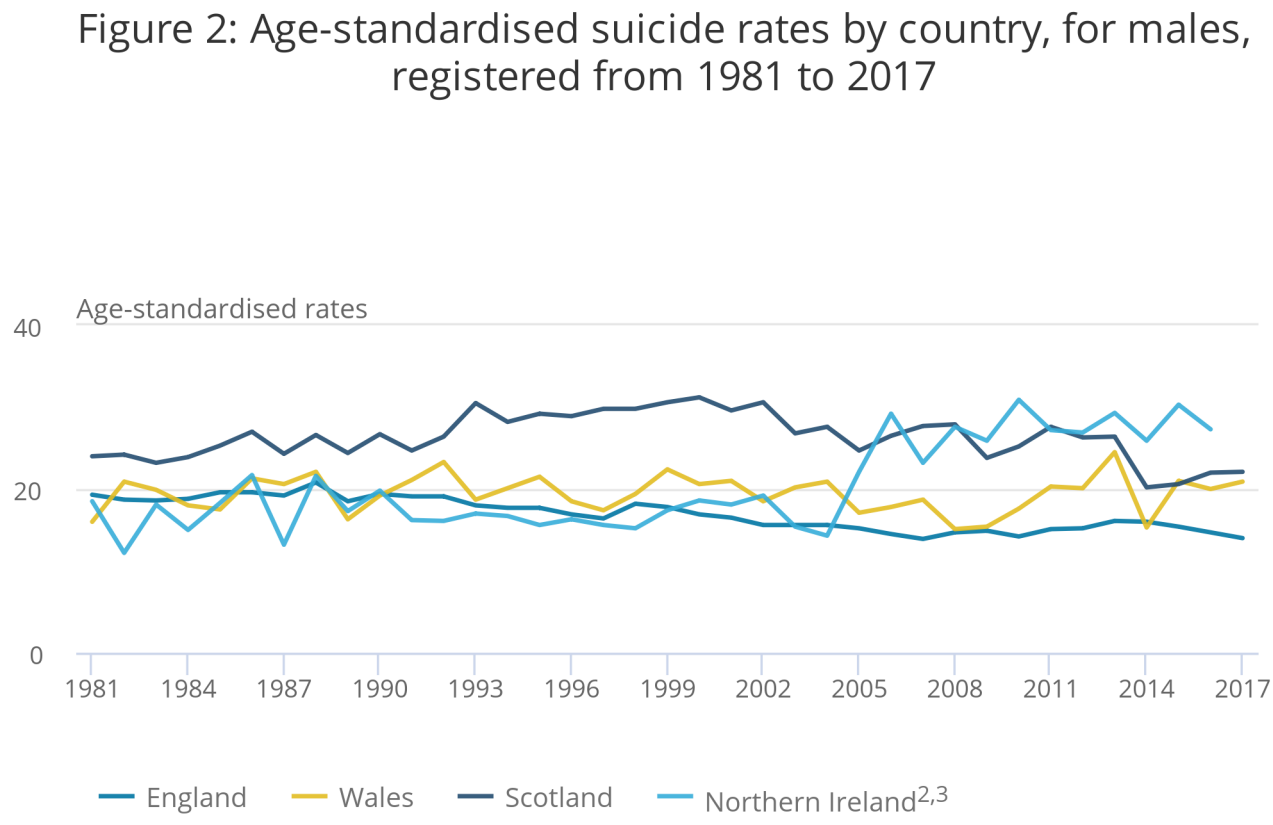
Since 1981, the male suicide rate in England has generally been on a downward trend. In 2017, the rate was 14.0 deaths per 100,000 males, the second lowest rate observed since the time series began, when the rate was 19.3 deaths per 100,000.

Across time, the male suicide rate for Wales shows a volatile pattern due to the relatively smaller number of deaths. At the beginning of the time series the rate was 16.0 deaths per 100,000, this is not significantly different from the rate seen in 2017 (20.9 deaths per 100,000).

Scotland, in recent years, had one of the largest decreases in the male suicide rate; in 2014 the rate was 20.2 deaths per 100,000, this was 23.5% lower than that observed in 2013 when the rate was 26.4 deaths per 100,000. The suicide rate for males in Scotland in 2017 was 22.1 deaths per 100,000; despite recent non-statistically significant increases, this is one of the lowest seen since 1981.

The male suicide rate in Northern Ireland was generally consistent from 1981 to 2004, and has again been mostly consistent from 2006 until now, with fluctuations because of the relatively small numbers. The large increase seen in Northern Ireland between 2004 and 2006 coincides with a change to the Coroners' Service. Prior to April 2006, there were seven Coroners' districts in Northern Ireland. Following a review of the Coroners' Service, the separate districts were amalgamated into one centralised Coroners' Service. The 2017 numbers of deaths and rates for Northern Ireland will be published later this year on the Northern Ireland Research and Statistic Agency website.

Figure 2: Age-standardised suicide rates by country, for males, registered from 1981 to 2017



Source: Office for National Statistics, National Records of Scotland and Northern Ireland Research and Statistics Agency

Notes:

1. The National Statistics definition of suicide is given in "Things you need to know about this release" section of this bulletin.

2. 2017 data for Northern Ireland will be published later this year.

3. The large increase seen in Northern Ireland between 2004 and 2006 coincides with a change to the Coroner's Service.

4. Figures are for persons aged 10 years and over.

5. Age-standardised suicide rates per 100,000 population, standardised to the 2013 European Standard Population. Age-standardised rates are used to allow comparison between populations that may contain different proportions of people of different ages.

6. Figures are for persons usually resident in each area, based on boundaries as of May 2018.

7. Figures are for deaths registered, rather than deaths occurring in each calendar year. Due to the length of time it takes to complete a coroner's inquest, it can take months or even years for a suicide to be registered. More details can be found in the Quality and methodology section.

The 2017 suicide rate for females in Scotland is the lowest since 1981

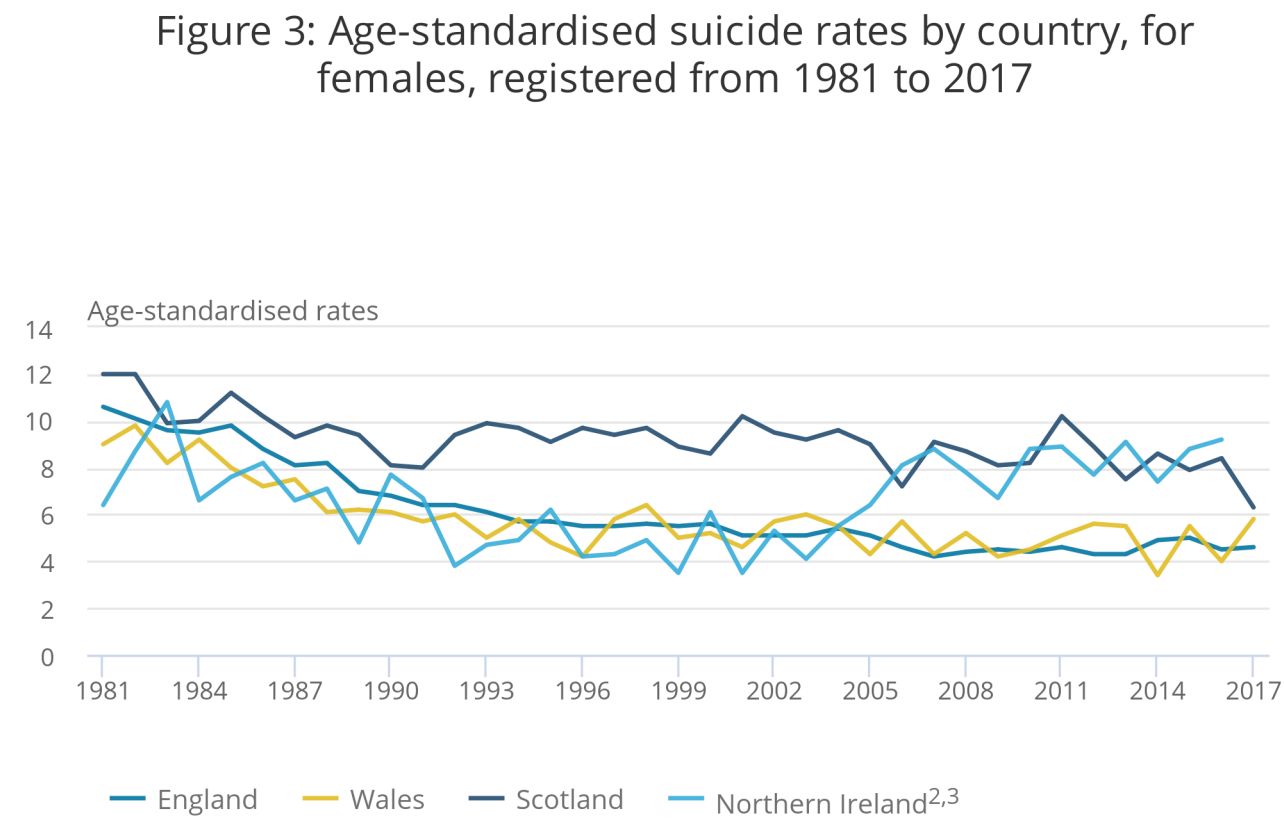
Across time, the suicide rate for females in England has more than halved, decreasing significantly from 10.6 deaths per 100,000 females in 1981 to 4.6 deaths per 100,000 in 2017. Most of this reduction was in the first half of the period.

The rate for females in Wales also decreased significantly from 9.0 deaths per 100,000 in 1981 to 4.2 deaths per 100,000 in 1996; since then, the rates have been particularly volatile and in 2017 the rate was 5.8 deaths per 100,000.

In Scotland, although the female rates have almost halved since 1981, female suicides did not fall consistently over the 1990s and 2000s in the same way as in the other countries. In 2017, the suicide rate for females in Scotland was the lowest seen since the time series began at 6.3 per 100,000 population.

Across time, the female suicide rate for Northern Ireland shows a volatile pattern. The 2017 numbers of deaths and rates for Northern Ireland will be published later this year on the Northern Ireland Research and Statistic Agency website.

Figure 3: Age-standardised suicide rates by country, for females, registered from 1981 to 2017



Source: Office for National Statistics, National Records of Scotland and Northern Ireland Research and Statistics Agency

Notes:

1. The National Statistics definition of suicide is given in "Things you need to know about this release" section of this bulletin.

2. 2017 data for Northern Ireland will be published later this year.

3. The large increase seen in Northern Ireland between 2004 and 2006 coincides with a change to the Coroner's Service.

4. Figures are for persons aged 10 years and over.

5. Age-standardised suicide rates per 100,000 population, standardised to the 2013 European Standard Population. Age-standardised rates are used to allow comparison between populations that may contain different proportions of people of different ages.

6. Figures are for persons usually resident in each area, based on boundaries as of May 2018.

7. Figures are for deaths registered, rather than deaths occurring in each calendar year. Due to the length of time it takes to complete a coroner's inquest, it can take months or even years for a suicide to be registered. More details can be found in the Quality and methodology section.

5 . Suicides in 2017 by English region

Looking at rates of suicide by English region, in 2017, the region with the highest rate was the North East (10.8 per 100,000) and the region with the lowest rate was London (7.7 per 100,000).

The rate in London in 2017 was significantly lower than the rate for the whole of England (9.2 deaths per 100,000) and all English regions except for the East Midlands, the East of England and the South East. The North East had a significantly higher rate than the East Midlands and London.

There were no significant changes from 2016 to 2017 for any of the regions of England. Since 1981, rates of suicide in the regions of England have been on a downward trend; this year we have created an interactive chart for you to see the changes over time (Figure 4).

Figure 4: Age-standardised suicide rates for English regions, 1981 to 2017

Download the data

6 . Suicide patterns by age

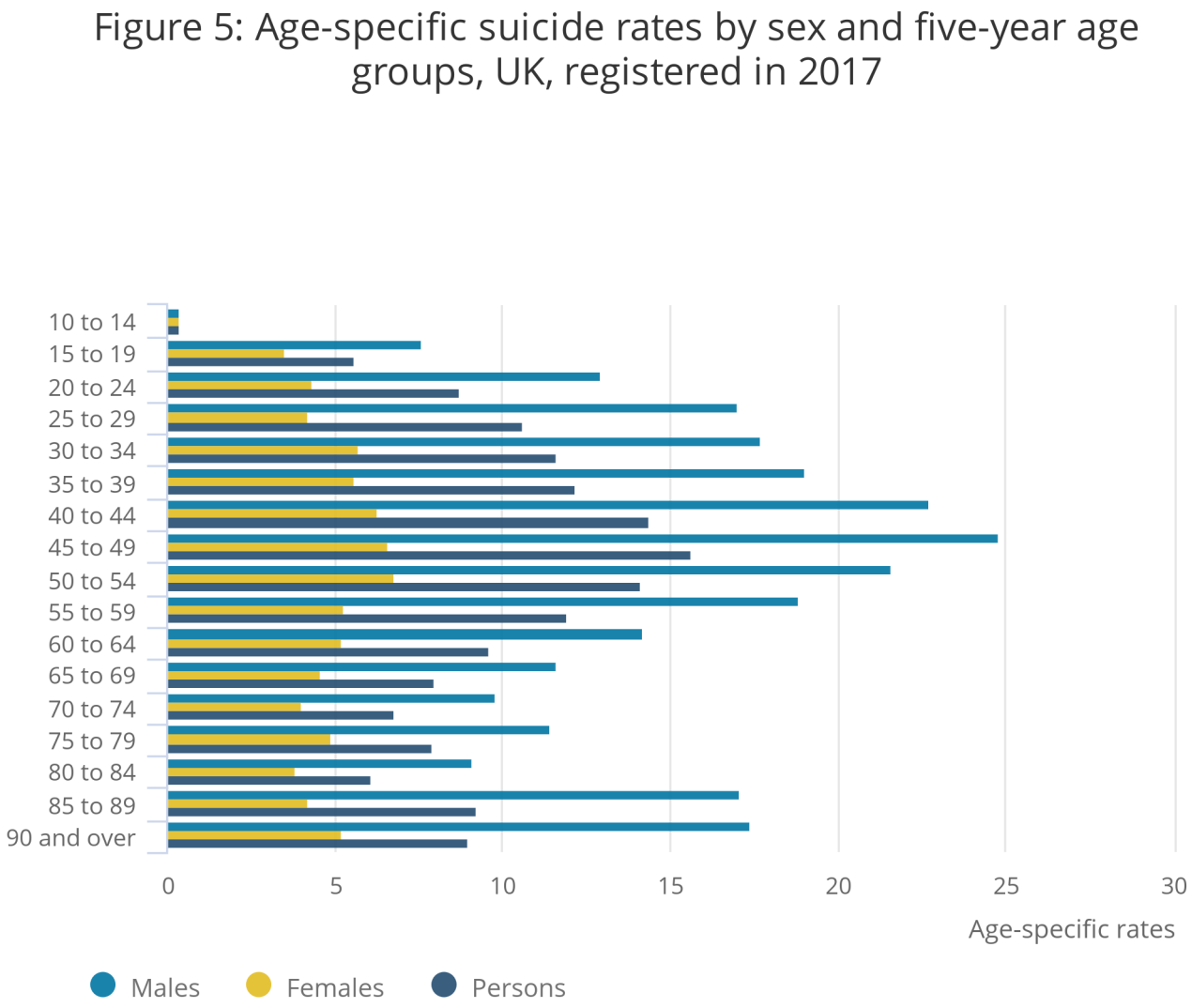
When looking at age-specific rates of suicide in 2017 (Figure 5), among all persons the rates increase with age, being highest among 45- to 49-year-olds (15.6 deaths per 100,000 population). The rates then decrease until the age of 80 to 84 years, after which they begin to rise. The suicide rate among people aged 85 years and over was higher than at 60 to 84 years.

By sex, males aged 45 to 49 years had the highest rate at 24.8 per 100,000 males, while females aged 50 to 54 years had the highest rate at 6.8 per 100,000 females.

When compared with rates from the previous year, males aged 80 to 84 years saw a significant decrease in the age-specific suicide rate, from 14.7 deaths per 100,000 in 2016 to 9.1 deaths per 100,000 in 2017, a decrease of 38.1%. There were no significant changes from 2016 to 2017 for any of the age groups for females.

As noted, suicide rates tend to increase in the oldest age groups for both males and females. Many factors contribute to this widely seen phenomenon around the world (Suicide in Older Adults), such as psychiatric illness, deterioration of physical health and functioning, and social factors.

Figure 5: Age-specific suicide rates by sex and five-year age groups, UK, registered in 2017



Source: Office for National Statistics, National Records of Scotland, Northern Ireland Statistics and Research Agency

Notes:

1. The National Statistics definition of suicide is given in "Things you need to know about this release" section of this bulletin.

2. Figures are for persons aged 10 years and over.

3. Age-specific suicide rate per 100,000 population.

4. Rates were not calculated where there were fewer than three death registrations.

5. Deaths of non-residents are included in figures for the UK.

6. Figures are for deaths registered, rather than deaths occurring in each calendar year. Due to the length of time it takes to complete a coroner's inquest, it can take months or even years for a suicide to be registered. More details can be found in the Quality and methodology section.

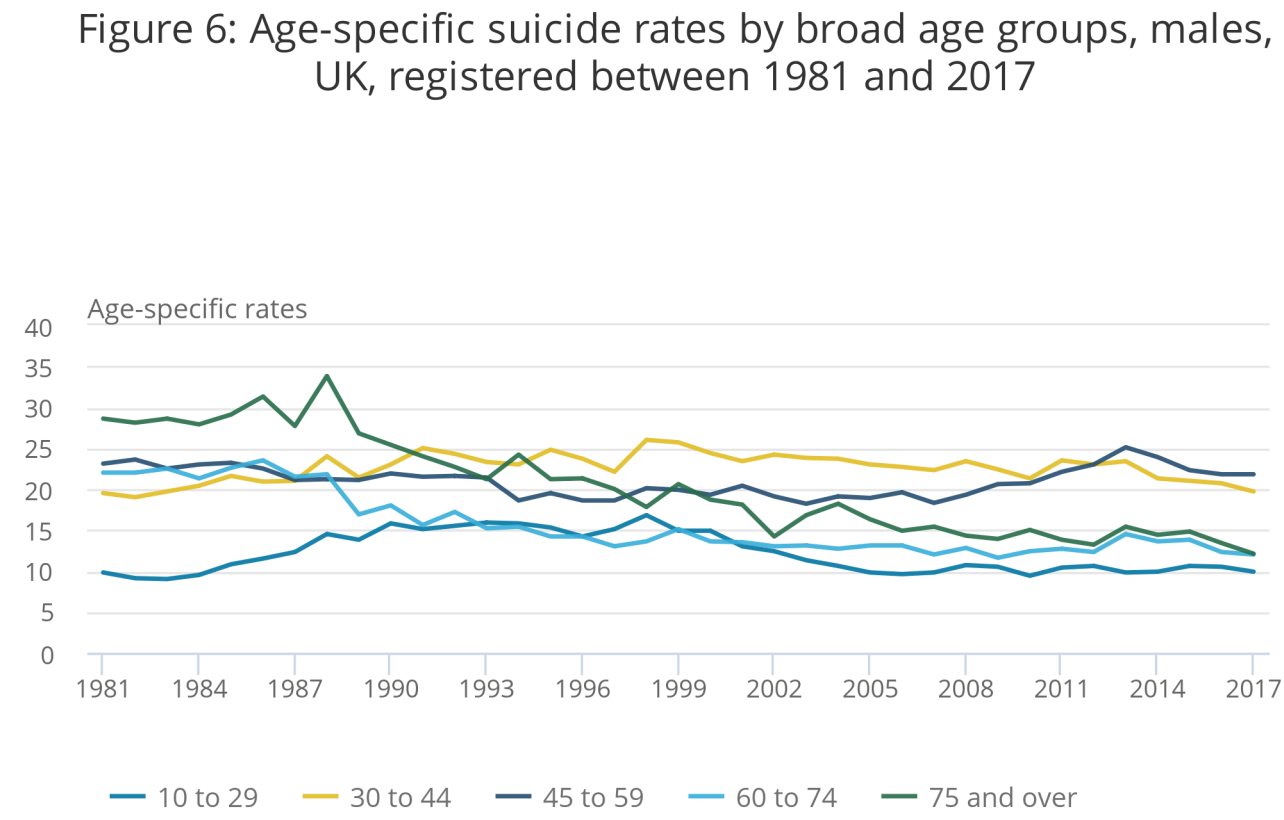
Since 2013, males aged 45 to 59 years have had the highest rate of suicide

Figure 6 shows that from 1981 to 1990, males aged 75 and over had the highest age-specific suicide rate. Over the past 36 years, between 1981 and 2017, the male rate of suicide for this age group has halved from 28.6 to 12.1 deaths per 100,000.

From 1991 to 2011, males aged 30 to 44 years tended to have the highest suicide rates. Since 2013, males aged 45 to 59 years have had the highest age-specific suicide rates, with 21.8 deaths per 100,000 population in 2017.

Generally, higher rates of suicide among middle-aged males in recent years might be due to this group being more likely to be affected by economic adversity, alcoholism and isolation. Furthermore, it could be that this group are less inclined to seek help. For more information see: Men, Suicide and Society: Why disadvantaged men in mid-life die by suicide.

Figure 6: Age-specific suicide rates by broad age groups, males, UK, registered between 1981 and 2017



Source: Office for National Statistics, National Records of Scotland, Northern Ireland Statistics and Research Agency

Notes:

1. The National Statistics definition of suicide is given in "Things you need to know about this release" section of this bulletin.
2. Figures are for persons aged 10 years and over.
3. Age-specific suicide rate per 100,000 population.
4. Rates were not calculated where there were fewer than three death registrations.
5. Deaths of non-residents are included in figures for the UK.
6. Figures are for deaths registered, rather than deaths occurring in each calendar year. Due to the length of time it takes to complete a coroner's inquest, it can take months or even years for a suicide to be registered. More details can be found in the Quality and methodology section.

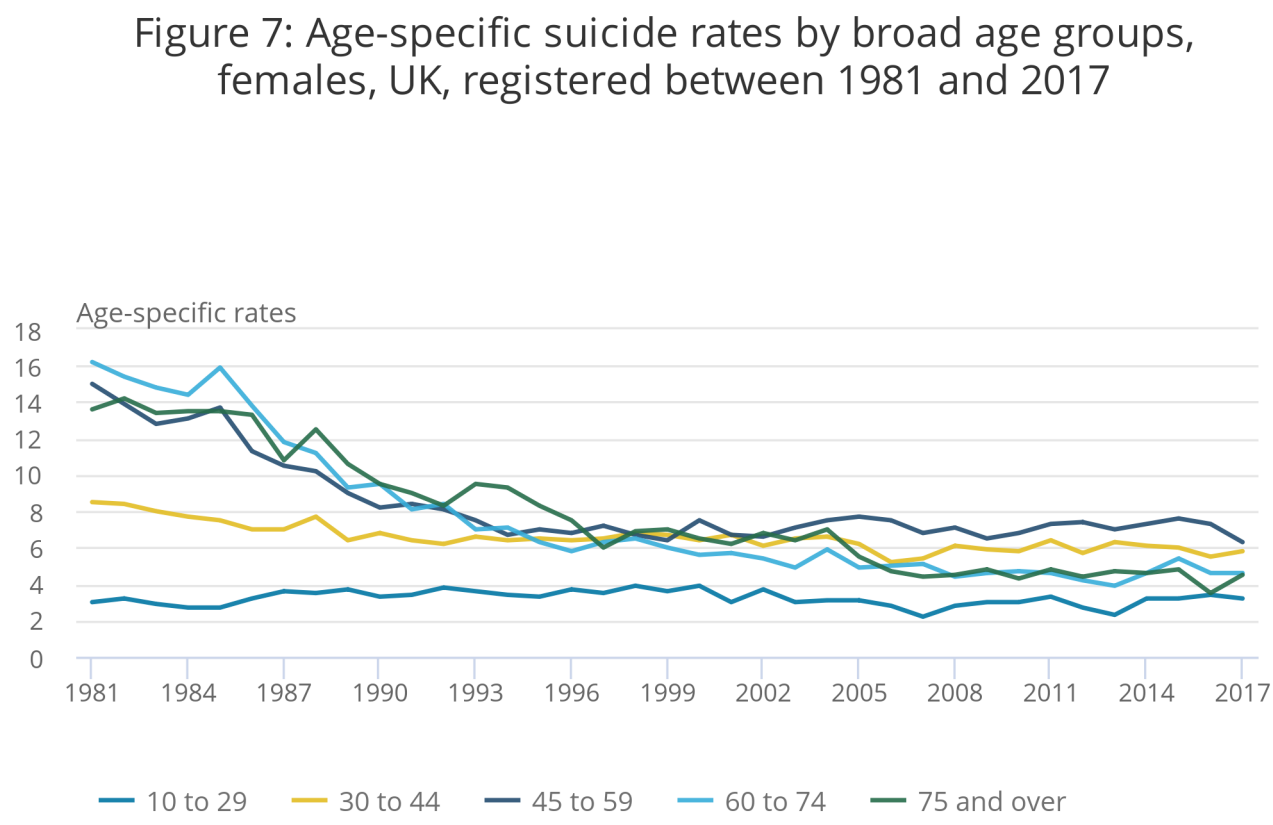
Age-specific suicide rate for females aged 45 to 59 years lowest since 1981

Although females aged 45 to 59 years had the highest age-specific suicide rate in 2017 (6.3 per 100,000), this is the lowest rate observed for this age group since the beginning of the time-series.

The most noticeable change over time for females is the substantial fall in the rates among those aged over 45 years. From 1981 to 2017, the female rate had fallen by 58% for those aged 45 to 59 years, by 71.6% for those aged 60 to 74 years and by 66.9% for those aged 75 years and over.

All except one of the age groups for females (10- to 29-year-olds) have seen significant decreases in the age-specific suicide rates from 1981 to 2017.

Figure 7: Age-specific suicide rates by broad age groups, females, UK, registered between 1981 and 2017



Source: Office for National Statistics, National Records of Scotland, Northern Ireland Statistics and Research Agency

Notes:

1. The National Statistics definition of suicide is given in "Things you need to know about this release" section of this bulletin.

2. Figures are for persons aged 10 years and over.

3. Age-specific suicide rate per 100,000 population.

4. Rates were not calculated where there were fewer than three death registrations.

5. Deaths of non-residents are included in figures for the UK.

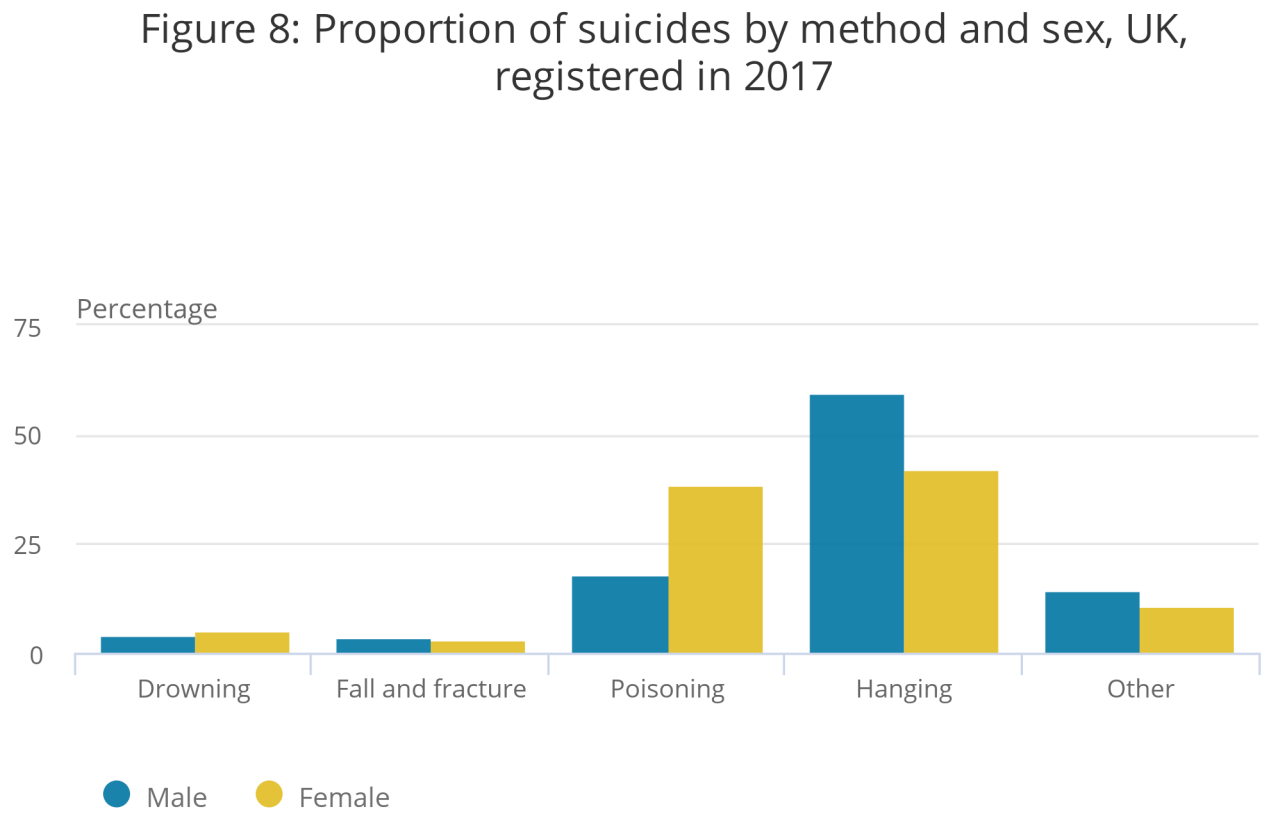
6. Figures are for deaths registered, rather than deaths occurring in each calendar year. Due to the length of time it takes to complete a coroner's inquest, it can take months or even years for a suicide to be registered. More details can be found in the Quality and methodology section.

7 . Suicide methods

In 2017 in the UK, as in previous years, the most common method of suicide for both males and females was hanging, suffocation or strangulation (all grouped together). This accounted for 59.7% of all suicides among males and 42.1% of all suicides among females (see Figure 8).

The second most common method of suicide was poisoning, accounting for 18.2% of all suicides among males and 38.3% of all suicides among females.

Figure 8: Proportion of suicides by method and sex, UK, registered in 2017



Source: Office for National Statistics, National Records of Scotland, Northern Ireland Statistics and Research Agency

Notes:

1. The National Statistics definition of suicide is given in "Things you need to know about this release" section of this bulletin.

2. Figures are for persons aged 10 years and over.

3. Deaths of non-residents are included in figures for the UK.

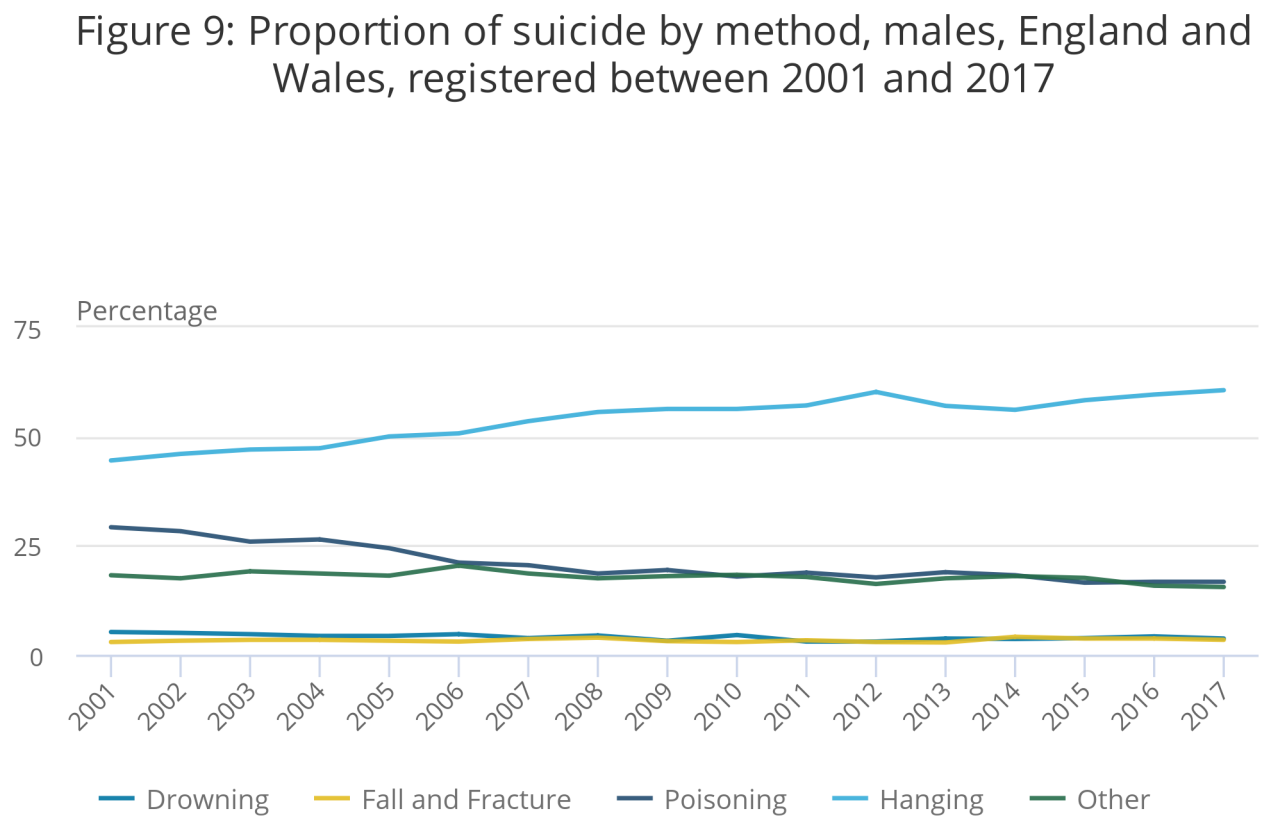
4. Figures are for deaths registered, rather than deaths occurring in each calendar year. Due to the length of time it takes to complete a coroner's inquest, it can take months or even years for a suicide to be registered. More details can be found in the Quality and methodology section.

5. 'Other' category includes methods of suicide such as firearm, contact with sharp object and jumping/lying in front of a moving object.

6. Table 19 in the reference table, named 'Suicide in the United Kingdom', has more information regarding definitions.

For males in England and Wales, hanging, suffocation or strangulation (all grouped together) has always been the most common suicide method. The percentage of male hangings has shown a general upward trend from 2001 to 2017 (Figure 9).

Figure 9: Proportion of suicide by method, males, England and Wales, registered between 2001 and 2017



Source: Office for National Statistics

Notes:

1. The National Statistics definition of suicide is given in "Things you need to know about this release" section of this bulletin.

2. 'Other' category includes methods of suicide such as firearm, contact with sharp object and jumping/lying in front of a moving object.

3. Figures are for persons aged 10 years and over.

4. Deaths of non-residents are included in figures for England and Wales.

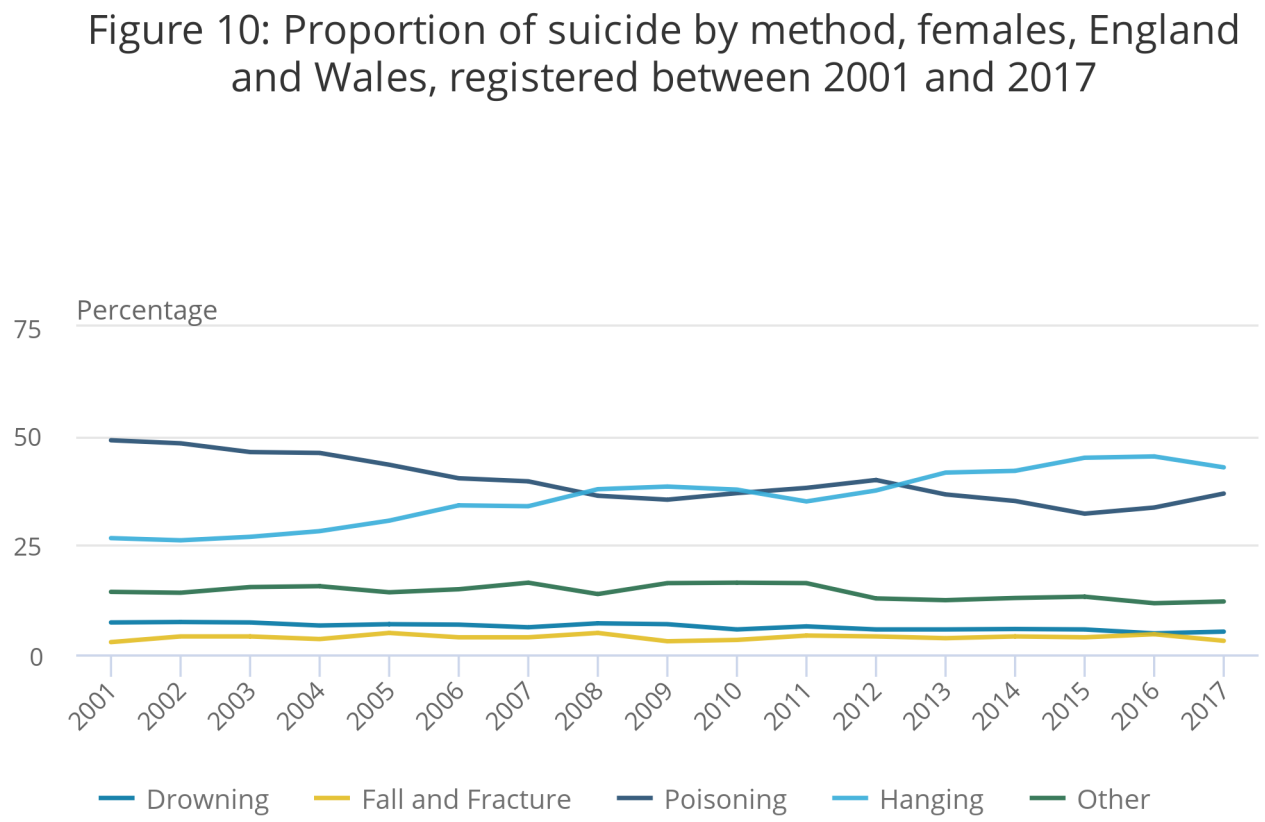
5. Figures are for deaths registered, rather than deaths occurring in each calendar year. Due to the length of time it takes to complete a coroner's inquest, it can take months or even years for a suicide to be registered. More details can be found in the Quality and methodology section.

6. Table 19 in the reference table, named 'Suicide in the United Kingdom', has more information regarding definitions.

For females in England and Wales, between 2001 and 2007, poisoning was the most common suicide method. Since 2013 this has changed to hanging, suffocation or strangulation (Figure 10).

Analysis reported in the academic literature has shown an increase in the proportion of suicides from hanging in the UK, particularly among females. This may be related to restrictions on the availability of other methods, such as drugs used in overdose, and to a misconception that hanging is a quick and painless way to die. Analysis conducted using our data in 2012 revealed that there was a major reduction in deaths involving the pain-killing drug co-proxamol following its withdrawal in 2005. A separate study published in 2013 found that UK legislation to reduce the size of paracetamol packages was followed by a significant reduction in the number of deaths due to paracetamol overdose.

Figure 10: Proportion of suicide by method, females, England and Wales, registered between 2001 and 2017



Source: Office for National Statistics

Notes:

1. The National Statistics definition of suicide is given in "Things you need to know about this release" section of this bulletin.

2. 'Other' category includes methods of suicide such as firearm, contact with sharp object and jumping/lying in front of a moving object.

3. Figures are for persons aged 10 years and over.

4. Deaths of non-residents are included in figures for England and Wales.

5. Figures are for deaths registered, rather than deaths occurring in each calendar year. Due to the length of time it takes to complete a coroner's inquest, it can take months or even years for a suicide to be registered. More details can be found in the Quality and methodology section.

6. Table 19 in the reference table, named 'Suicide in the United Kingdom', has more information regarding definitions.

A study by the World Health Organisation (WHO) in 2008, which compared methods of suicide by country, found that methods vary between countries and that this difference is driven primarily by the availability of means. For example, while hanging was the most common method in the majority of countries, suicide involving firearms was the most common method in the United States and jumping from a height was the most common method in Hong Kong. The report also highlighted differences in method between the sexes, with males tending to choose a more violent mechanism, such as hanging or suicide by firearm, whereas females choose less violent mechanisms, such as poisoning.

8 . Links to related statistics

Deaths registered in England and Wales (series DR)

Deaths registered in England and Wales (series DR) provides data on deaths registered by age, sex and selected underlying cause of death. Tables also provide both mortality rates and numbers of deaths over time. Table 7 shows that suicide is one of the leading causes of death in persons below the age of 50 years.

ONS visual article: Who is most at risk of suicide?

An article created in collaboration with the Samaritans, discussing factors such as marital status and levels of deprivation in relation to suicide.

ONS article: Estimating suicide among higher education students, England and Wales: Experimental Statistics

An article created using mortality data linked to Higher Education Statistics Agency (HESA) data to estimate suicides among higher education students by sex, age and ethnicity.

ONS article: Suicide by occupation, England: 2011 to 2015

This report describes recent analysis of deaths from suicide in different occupational groups among those aged 20 to 64 years. Such analysis can inform targeted suicide prevention measures and provide a broader understanding of influences on suicide.

NOMIS

Enables you to query a single data source in greater depth and download data. NOMIS provides mortality statistics for England and Wales, broken down by calendar year of registration (currently 2013 to 2016), age, sex, underlying cause of death and area of usual residence of the deceased.

Instructions: ‘Query data’, ‘Life Events’, ‘Mortality statistics - underlying cause, sex and age’, make desired selections and download.

National Records of Scotland (NRS)

The National Records of Scotland (NRS) provides the official suicide statistics for Scotland.

Northern Ireland Statistics and Research Agency (NISRA)

The Northern Ireland Statistics and Research Agency (NISRA) provides the official suicide statistics for Northern Ireland.

Samaritans

This Samaritans report pulls together the data about deaths by suicide for the UK and Republic of Ireland.

Coroners' statistics

Coroners' statistics (including statistics on the verdicts returned at inquests) are available from the GOV.UK website.

Eurostat

European comparison of suicide statistics.

World Health Organization (WHO)

International comparison of suicide statistics.

Special extracts

Special extracts and tabulations of suicide data (and other causes of mortality) for England and Wales are available to order (subject to legal frameworks, disclosure control, resources and agreement of costs, where appropriate). User requested data will be published on our website. Such requests or enquiries should be made to:

Mortality Analysis Team,
Life Events and Population Sources Division,
Office for National Statistics,
Government Buildings,
Cardiff Road,
Newport,
NP10 8XG
Tel: +44 (0)1633 651901
Email: mortality@ons.gov.uk

The ONS charging policy can be found on our website (PDF, 65 KB).

9 . Quality and methodology

Registration delays

In common with most other UK mortality statistics, suicide figures are presented for deaths registered in a calendar year, which enables figures to be published in a timely manner. The alternative would be to publish statistics based on the year in which the death occurred, however, this would delay the publication, cause repeated revisions to historical data and be inconsistent with other published mortality figures.

Publishing suicide figures based on year of registration means that many deaths appear in the statistics of a year that is later than the year in which the death occurred. Differences in the death registration systems in England, Wales, Scotland and Northern Ireland mean that the length of registration delays varies between these countries and has implications for the comparability of mortality statistics across the UK. That is, the UK suicide figures for deaths registered in 2017 will comprise deaths occurring in different time periods for different countries of the UK. However, as suicide trends tend to change relatively slowly over time, this is unlikely to have a great impact on the usability of UK suicide statistics.

For further information on registration delays see Reference Table 18 and Section 8 of Suicides in the UK: 2016 registrations.

Data ownership

The Office for National Statistics holds mortality data for England and Wales. Figures for the UK include data kindly provided by National Records of Scotland and Northern Ireland Statistics and Research Agency.

User guide

The User guide to mortality statistics provides further information on the collection, production and quality of the underlying mortality data on which suicide death statistics are based.

Suicide rates

The Suicide rates Quality and Methodology Information report contains important information on:

- the strengths and limitations of the data and how it compares with related data
- uses and users of the data
- how the output was created
- the quality of the output including the accuracy of the data comparability between countries

Life Events user feedback

As a user of our statistics, we would welcome your feedback on this publication. Please get in touch either via email at mortality@ons.gov.uk or telephone on +44 (0)1633 651901.