

# Suicide in the world

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Global Health Estimates



World Health  
Organization

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## Introduction

Suicide is a serious global public health issue. It is among the top twenty leading causes of death worldwide, with more deaths due to suicide than to malaria, breast cancer, or war and homicide. Close to 800 000 people die by suicide every year.

The reduction of suicide mortality has been prioritized by the World Health Organization (WHO) as a global target and included as an indicator in the United Nations Sustainable Development Goals (SDGs) under target 3.4 (see Box 1), the WHO 13th General Programme of Work 2019-2023<sup>1</sup> and the WHO Mental Health Action Plan 2013-2030.<sup>2</sup> A comprehensive and coordinated response to suicide prevention is critical to ensure that the tragedy of suicide does not continue to cost lives and affect many millions of people through the loss of loved ones or suicide attempts.

### **Box 1.**

#### ***UN SDG Target 3.4***

*By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being*

#### ***Indicator 3.4.2.***

*Suicide mortality rate*

The timely registration and regular monitoring of suicide form the backbone of effective national suicide prevention strategies (WHO, 2014). In order to identify specific groups at risk for suicide, it is important for countries to use disaggregated rates by sex, age, and method. Doing so provides essential information for understanding the scope of the problem so that interventions can be tailored to meet the needs of specific populations and to adjust to trends.

<sup>1</sup> See: <https://apps.who.int/iris/bitstream/handle/10665/324775/WHO-PRP-18.1-eng.pdf> (accessed 23 August 2019).

<sup>2</sup> See: [https://www.who.int/mental\\_health/publications/action\\_plan/en](https://www.who.int/mental_health/publications/action_plan/en) (accessed 23 August 2019).

## Data sources

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This booklet presents the most recent available suicide mortality data from the WHO Global Health Estimates for the year 2016 and trend from 2000.<sup>3</sup> To facilitate comparisons across countries, rates are age-standardized according to the WHO World Standard Population<sup>4</sup> which assumes one standard age distribution of the population in all countries.

Data are presented at the global and regional level, by age and sex, as well as over time. Country-specific estimates are provided in the Annex. Estimates are calculated using mortality data reported by countries to the WHO Mortality Database<sup>5</sup> as the key input data. Full details of the methods and data sources used as well as the data and analyses can be found on the WHO Global Health Estimates website.<sup>6</sup>

<sup>3</sup> See: [https://www.who.int/healthinfo/global\\_burden\\_disease/estimates/en/](https://www.who.int/healthinfo/global_burden_disease/estimates/en/) (accessed 23 August 2019).

<sup>4</sup> See: <https://www.who.int/healthinfo/paper31.pdf> (accessed 23 August 2019).

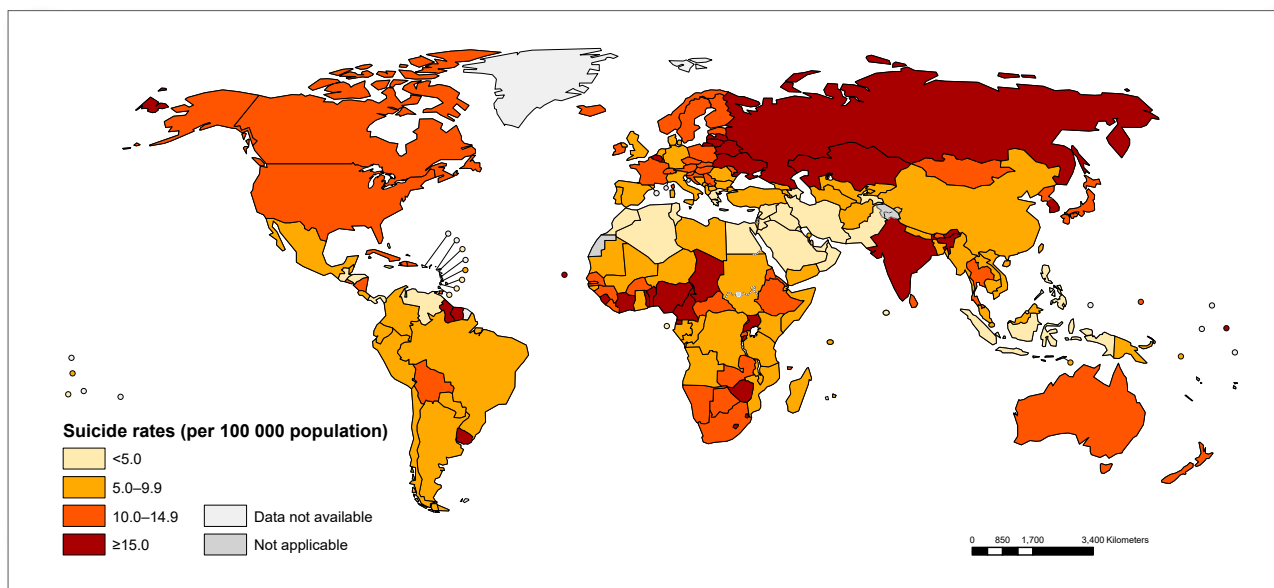
<sup>5</sup> See: [https://www.who.int/healthinfo/mortality\\_data/en/](https://www.who.int/healthinfo/mortality_data/en/) (accessed 23 August 2019).

<sup>6</sup> See: [https://www.who.int/healthinfo/global\\_burden\\_disease/en/](https://www.who.int/healthinfo/global_burden_disease/en/) (accessed 23 August 2019).

## Global epidemiology of suicide

The global age-standardized suicide rate was 10.5 per 100 000 population for 2016. Rates varied between countries from less than 5 deaths by suicide per 100 000, to over 30 per 100 000 (Figure 1).

**Figure 1. Age-standardized suicide rates (per 100 000 population), both sexes, 2016**



The global age-standardized suicide rate was higher in males (13.7 per 100 000) than in females (7.5 per 100 000) (Figures 2 and 3). While for females, the highest rates in countries were above 30 per 100 000 (Figure 2), for males they were above 45 per 100 000 (Figure 3).

**Figure 2. Age-standardized suicide rates (per 100 000 population), females, 2016**

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