PREVENTING SUICIDE

A RESOURCE FOR SUICIDE CASE REGISTRATION



Department of Mental Health and Substance Abuse World Health Organization

This document is one of a series of resources addressed to specific social and professional groups particularly relevant to the prevention of suicide.

It has been prepared as part of SUPRE, the WHO worldwide initiative for the prevention of suicide.

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FOREWORD

Suicide is a complex phenomenon that has attracted the attention of philosophers, theologians, physicians, sociologists and artists over the centuries. According to the French philosopher Albert Camus, in The Myth of Sisyphus, it is the only serious philosophical problem.

As a serious public health problem it demands our attention, but its prevention and control, unfortunately, are no easy task. State-of-the-art research indicates that the prevention of suicide, while feasible, involves a whole series of activities, ranging from the provision of the best possible conditions for bringing up our children and youth, through the early identification and effective treatment of mental disorders, to the environmental control of risk factors. Appropriate dissemination of information and awareness-raising are essential elements in the success of suicide prevention programmes.

In 1999 WHO launched SUPRE (Suicide Prevention), its worldwide initiative for the prevention of suicide. This booklet is one of a series of resources prepared as part of SUPRE and addressed to specific social and professional groups that are particularly relevant to the prevention of suicide. It represents a link in a long and diversified chain involving a wide range of people and groups, including health professionals, educators, social agencies, governments, legislators, social communicators, law enforcers, families and communities.

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The resources are now being widely disseminated, in the hope that they will be translated and adapted to local conditions - a prerequisite for their effectiveness. Comments and requests for permission to translate and adapt them will be welcome.

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PREVENTING SUICIDE A RESOURCE FOR SUICIDE CASE REGISTRATION

Suicide was estimated to account for about one million deaths globally in 2008. Given that over 60% of suicides in the world are believed to occur in low- and middle-income countries, 1 it is unfortunate that there is comparatively little information about the burden of suicide in these areas. 2

The lack of knowledge about suicide in low- and middle-income countries is likely to be connected to the fragmented nature of registration systems for suicide mortality. In some countries, data on intentional self-harm may be included within an aggregate category of external injuries causes, which makes suicide difficult to distinguish from cases of accident or homicide. Data on suicide in other locations may only be partially available; for example, the sex of the individual may be recorded without information on the method of suicide. In other areas, reporting procedures for suicide may simply be non-existent.

There are numerous reasons for why establishing registration practices for suicide are important. First and foremost, registration systems can be helpful in quantifying the size of the problem, even more so with specification of the age, sex, and methods used of persons who die by suicide. Ascertaining this type of information is fundamental to the development of targeted suicide prevention strategies. A system for reporting registered suicide cases can also provide information on trends of suicide over time, and therefore be a valuable tool in public health and in research.

The aim of this publication is to provide a resource on how to establish or improve registration systems for suicide mortality. This includes:

- The identification of deaths due to suicide:
- Death certification of suicide cases using the International Classification of Diseases;
- Coverage of suicide registration systems (in cases where the suicide reporting system cannot function as a country-wide register);
- What information to record in case registration (including an example recording form);
- Persons involved in the data collection of suicide, and:
- The use of data collected on suicide mortality.

Identification of deaths due to suicide

The ability to accurately identify cases of suicide from other causes of death is critical in establishing reliable mortality registration practices. Often this is approached based on exclusion principles, the so-called NASH system (Natural, Accidental, Suicide and Homicide).⁴ A doctor can usually classify natural deaths, while cases of accident, suicide and homicide often require additional investigation around the circumstances of the death (see Figure 1).

The method of death is one of the first pieces of information to examine when identifying possible suicide cases. Although there is notable geographical variation across the world, the most common suicide methods are:

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