

Embargo: 14:00 Geneva time, Monday 9 September 2019

Suicide in the world

Global Health Estimates



**World Health
Organization**

Suicide in the world

Global Health Estimates



World Health
Organization

WHO/MSD/MER/19.3

© World Health Organization 2019

Some rights reserved. This work is available under the Creative Commons Attribution-NonCommercial-ShareAlike 3.0 IGO licence (CC BY-NC-SA 3.0 IGO; <https://creativecommons.org/licenses/by-nc-sa/3.0/igo>).

Under the terms of this licence, you may copy, redistribute and adapt the work for non-commercial purposes, provided the work is appropriately cited, as indicated below. In any use of this work, there should be no suggestion that WHO endorses any specific organization, products or services. The use of the WHO logo is not permitted. If you adapt the work, then you must license your work under the same or equivalent Creative Commons licence. If you create a translation of this work, you should add the following disclaimer along with the suggested citation: “This translation was not created by the World Health Organization (WHO). WHO is not responsible for the content or accuracy of this translation. The original English edition shall be the binding and authentic edition”.

Any mediation relating to disputes arising under the licence shall be conducted in accordance with the mediation rules of the World Intellectual Property Organization.

Suggested citation. [Title]. [Place of publication]: World Health Organization; [Year]. Licence: CC BY-NC-SA 3.0 IGO.

Cataloguing-in-Publication (CIP) data. CIP data are available at <http://apps.who.int/iris>.

Sales, rights and licensing. To purchase WHO publications, see <http://apps.who.int/bookorders>. To submit requests for commercial use and queries on rights and licensing, see <http://www.who.int/about/licensing>.

Third-party materials. If you wish to reuse material from this work that is attributed to a third party, such as tables, figures or images, it is your responsibility to determine whether permission is needed for that reuse and to obtain permission from the copyright holder. The risk of claims resulting from infringement of any third-party-owned component in the work rests solely with the user.

General disclaimers. The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by WHO in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters. All reasonable precautions have been taken by WHO to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall WHO be liable for damages arising from its use.

Design and layout by Studio FFFOG

Contents

Acknowledgements	06
Introduction	07
Data sources	08
Global epidemiology of suicide	09
Regional epidemiology of suicide	13
Changes in suicide rates over time	15
Data quality	16
Conclusions	16
References	17
Annex	18

Acknowledgements

Conceptualization and guidance

Dévora Kestel (WHO), Mark van Ommeren (WHO)

Project coordination and editing

Alexandra Fleischmann (WHO), Aiysha Malik (WHO),

Alison Brunier (WHO)

Global Health Estimates and maps

Colin Mathers (WHO), Gretchen A. Stevens (WHO),

Jessica Ho (WHO), Wahyu Retno Mahanani (WHO),

Doris Ma Fat (WHO), Dan Hogan (WHO),

Elise Paul (WHO), Florence Rusciano (WHO),

Zoe Brillantes (WHO)

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 2019-2023¹ and the WHO Mental Health Action Plan 2013-2030.² 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.

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

² See: https://www.who.int/mental_health/publications/action_plan/en (accessed 23 August 2019).

Data sources

This booklet presents the most recent available suicide mortality data from the WHO Global Health Estimates for the year 2016 and trend from 2000.³ To facilitate comparisons across countries, rates are age-standardized according to the WHO World Standard Population⁴ 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 Database⁵ 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.⁶

³ See: https://www.who.int/healthinfo/global_burden_disease/estimates/en/ (accessed 23 August 2019).

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

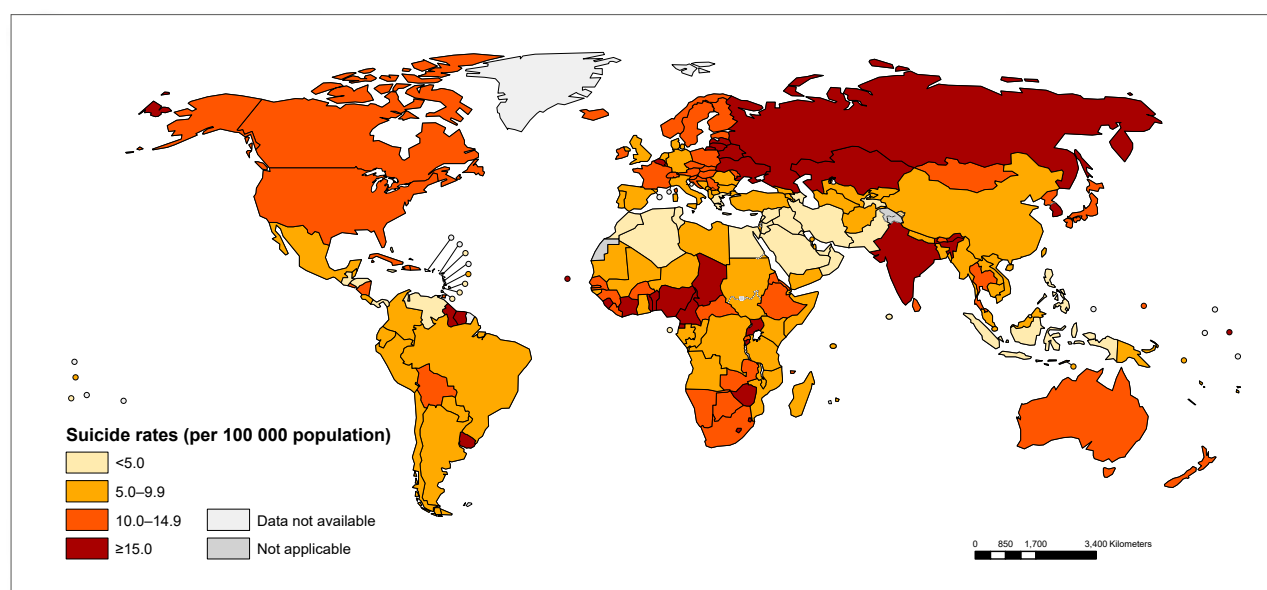
⁵ See: https://www.who.int/healthinfo/mortality_data/en/ (accessed 23 August 2019).

⁶ See: 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

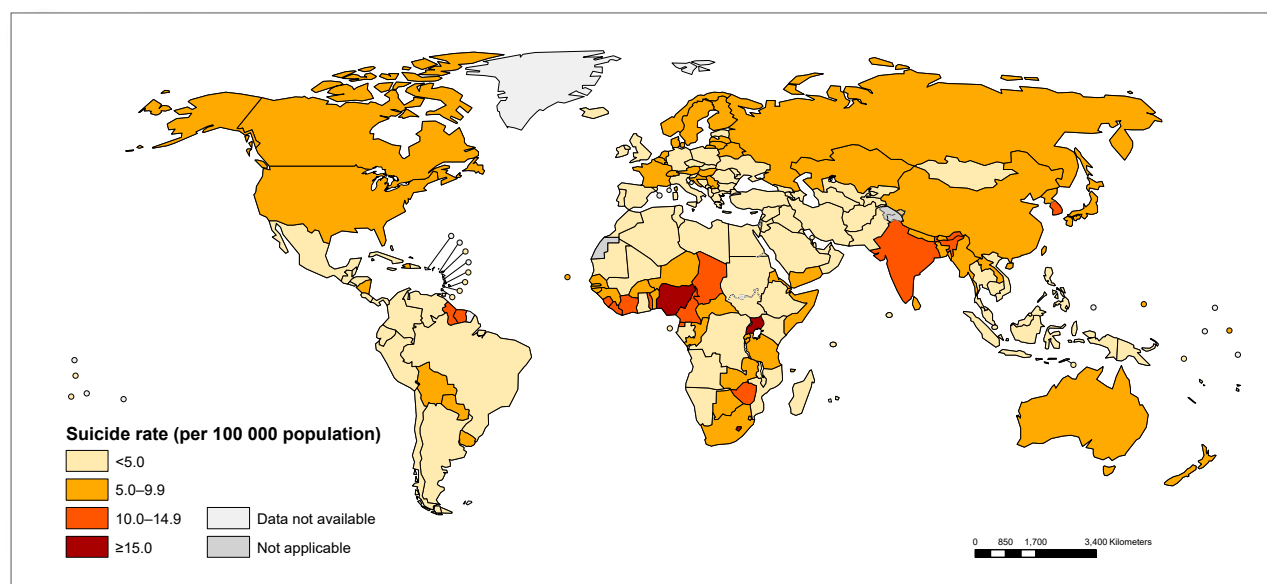
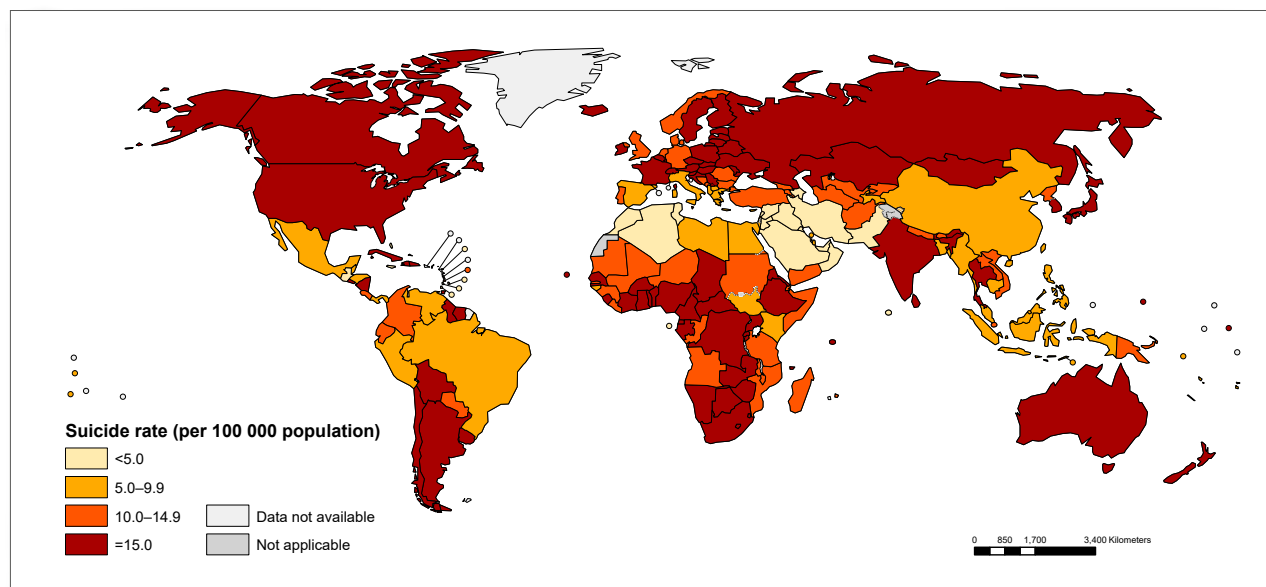
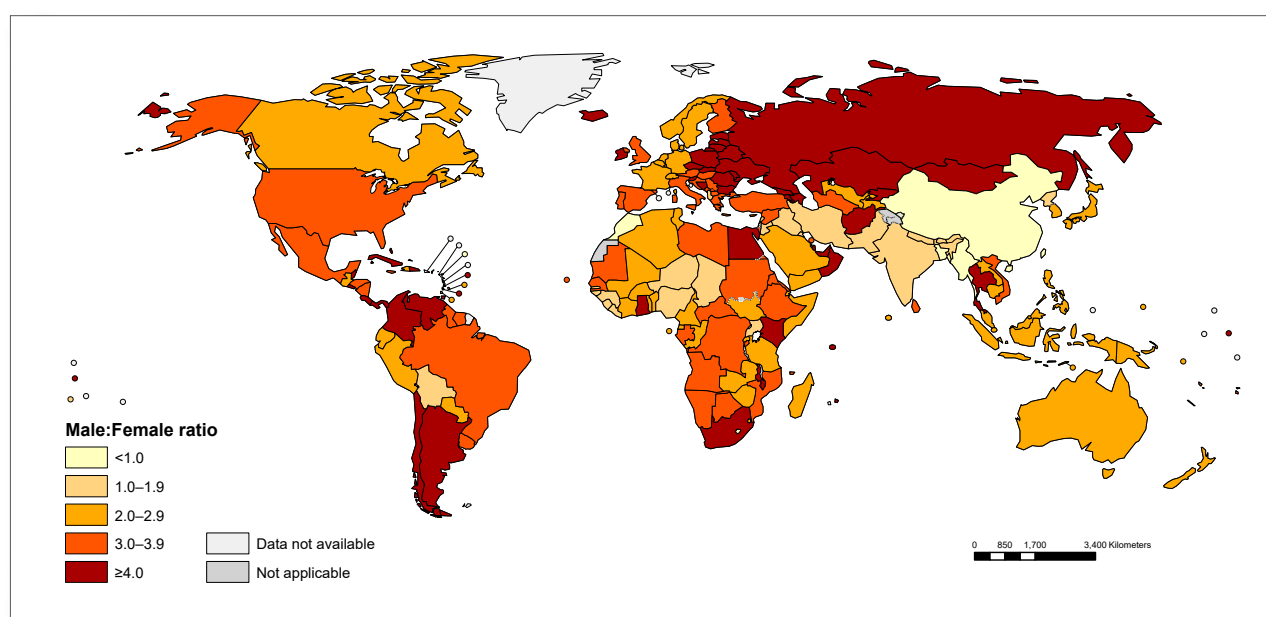


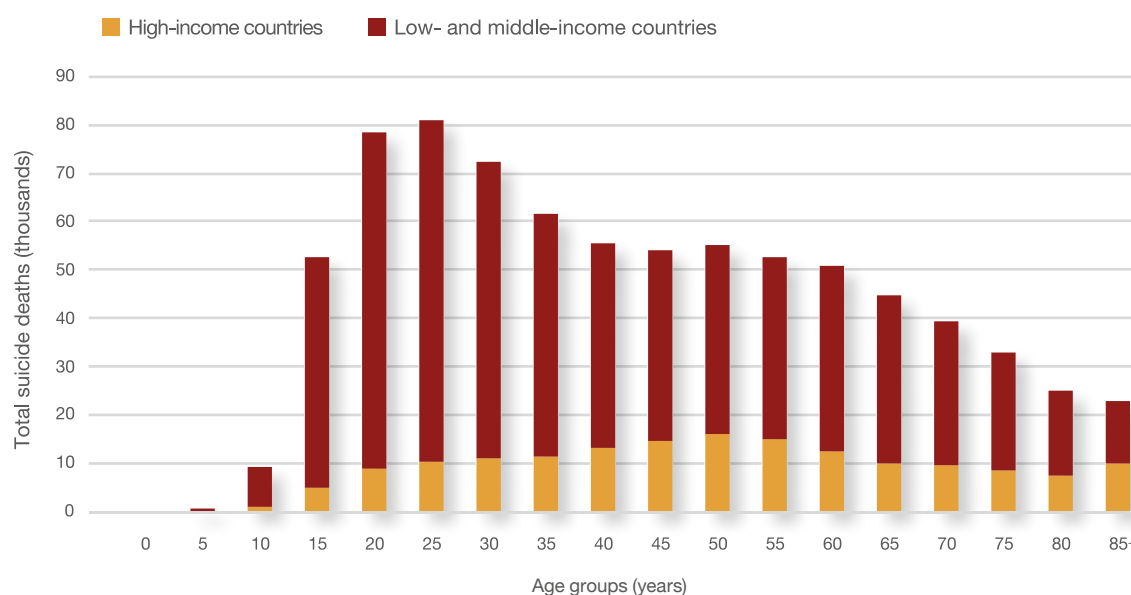
Figure 3. Age-standardized suicide rates (per 100 000 population), males, 2016

Globally, the age-standardized suicide rate was 1.8 times higher in males than in females. Male:female (M:F) suicide ratios greater than 1 indicate that suicide rates are higher in males than in females. While the M:F ratio is close to 3 in high-income countries (i.e. the rates are three times higher in males), the ratio was more equal in low- and middle-income countries. The only countries where the suicide rate was estimated to be higher in females than in males were Bangladesh, China, Lesotho, Morocco, and Myanmar (Figure 4).

Figure 4. Male:female ratio of age-standardized suicide rates, 2016

Globally, the majority of deaths by suicide occurred in low-and-middle-income countries (79%), where most of the world's population lives (84%) (Figure 5). Regarding age, more than half (52.1%) of global suicides occurred before the age of 45 years. Most adolescents who died by suicide (90%) were from low- and middle-income countries where nearly 90% of the world's adolescents live.

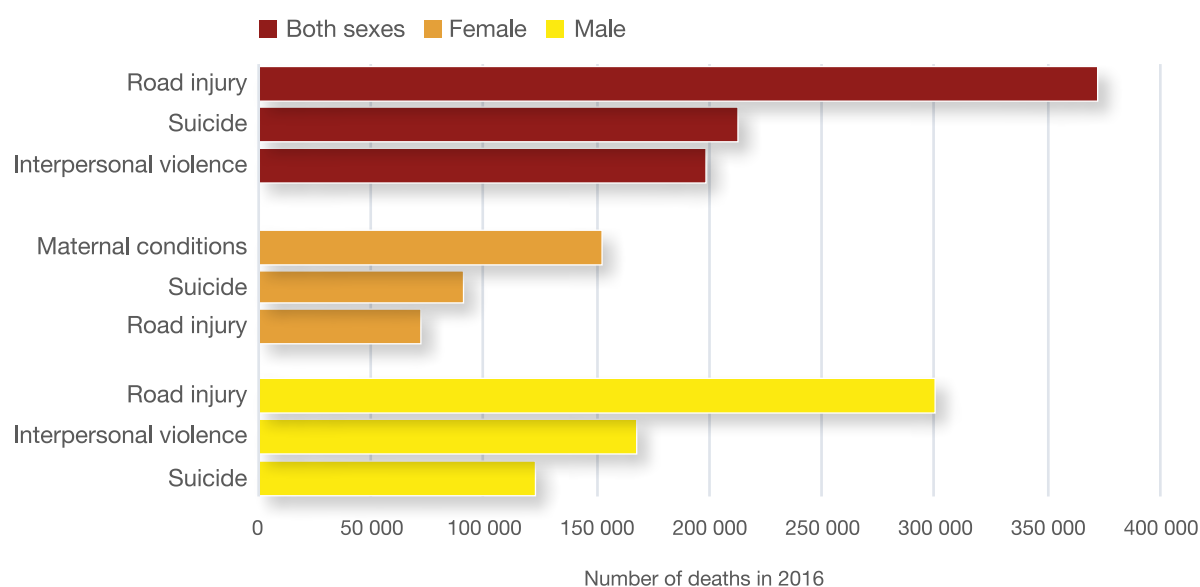
Figure 5. Global suicides, by age and country income level* (thousands), 2016



* World Bank income groups, 2017

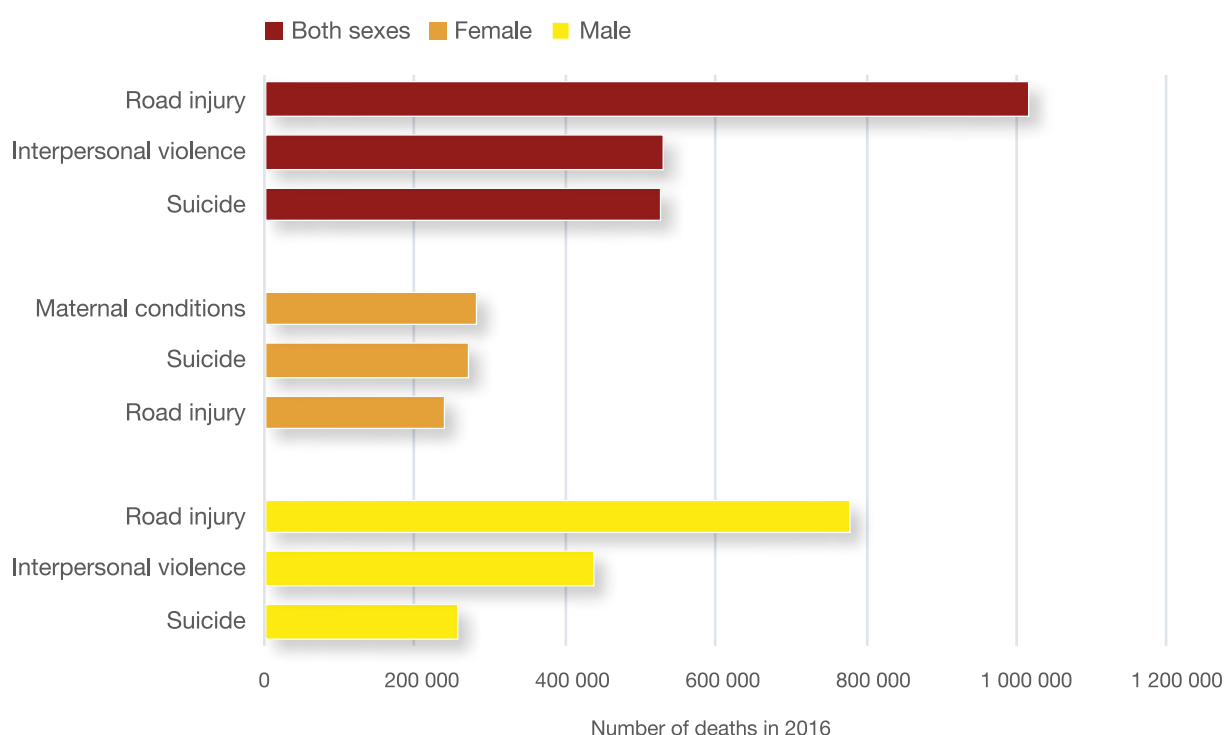
Suicide was the second leading cause of death in young people aged 15-29 years for both sexes, after road injury (Figure 6). More deaths were due to suicide in this age group than to interpersonal violence. For females and males, respectively, suicide was the second and third leading cause of death in this age group.

Figure 6. Top three causes of death, ages 15-29 years, 2016



Suicide was the third leading cause of death in 15-19-year-olds for both sexes, with the number of deaths relatively similar between males and females in this age group. Suicide was the second leading cause of death in 15-19-year-old girls (after maternal conditions) and the third leading cause of death in males (after road injury and interpersonal violence) in this age group (Figure 7).

Figure 7. Top three causes of death, ages 15-19 years, 2016

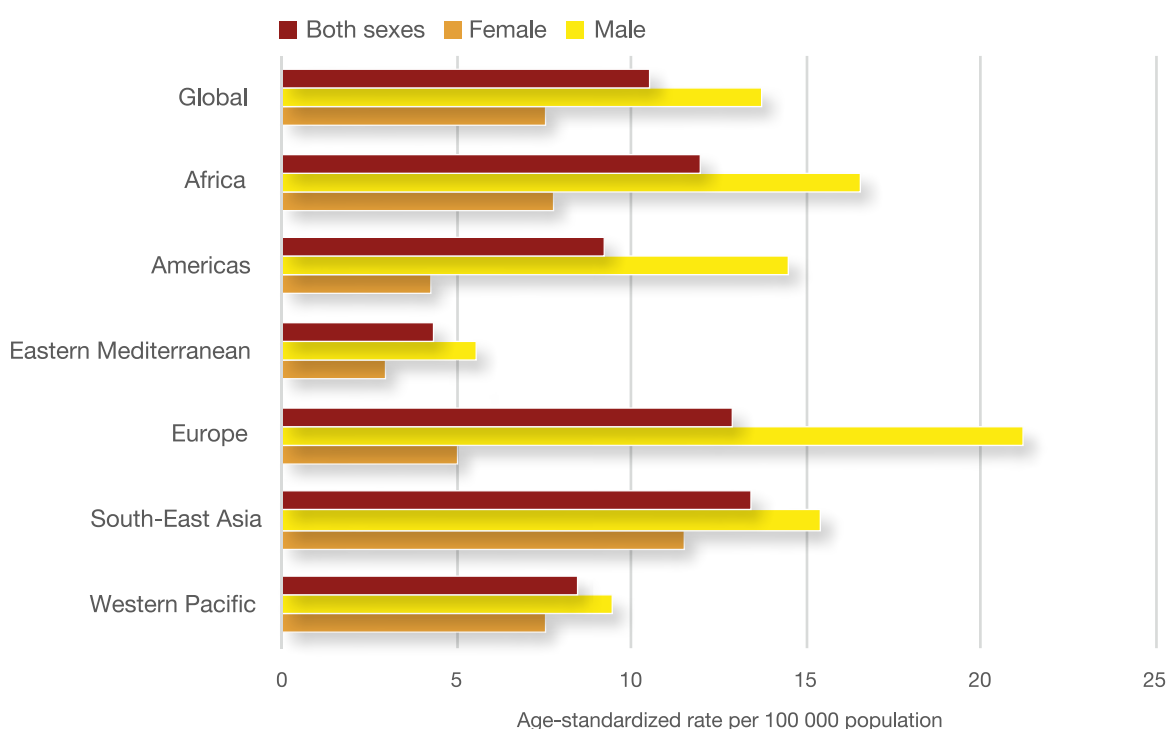


Regional epidemiology of suicide

Differences in age-standardized suicide rates can be seen across WHO regions (Figure 8). Suicide rates in the African (12.0 per 100 000), European (12.9 per 100 000), and South-East Asia (13.4 per 100 000) regions were higher than the global average (10.5 per 100 000) in 2016. The lowest suicide rate was in the Eastern Mediterranean region (4.3 per 100 000).

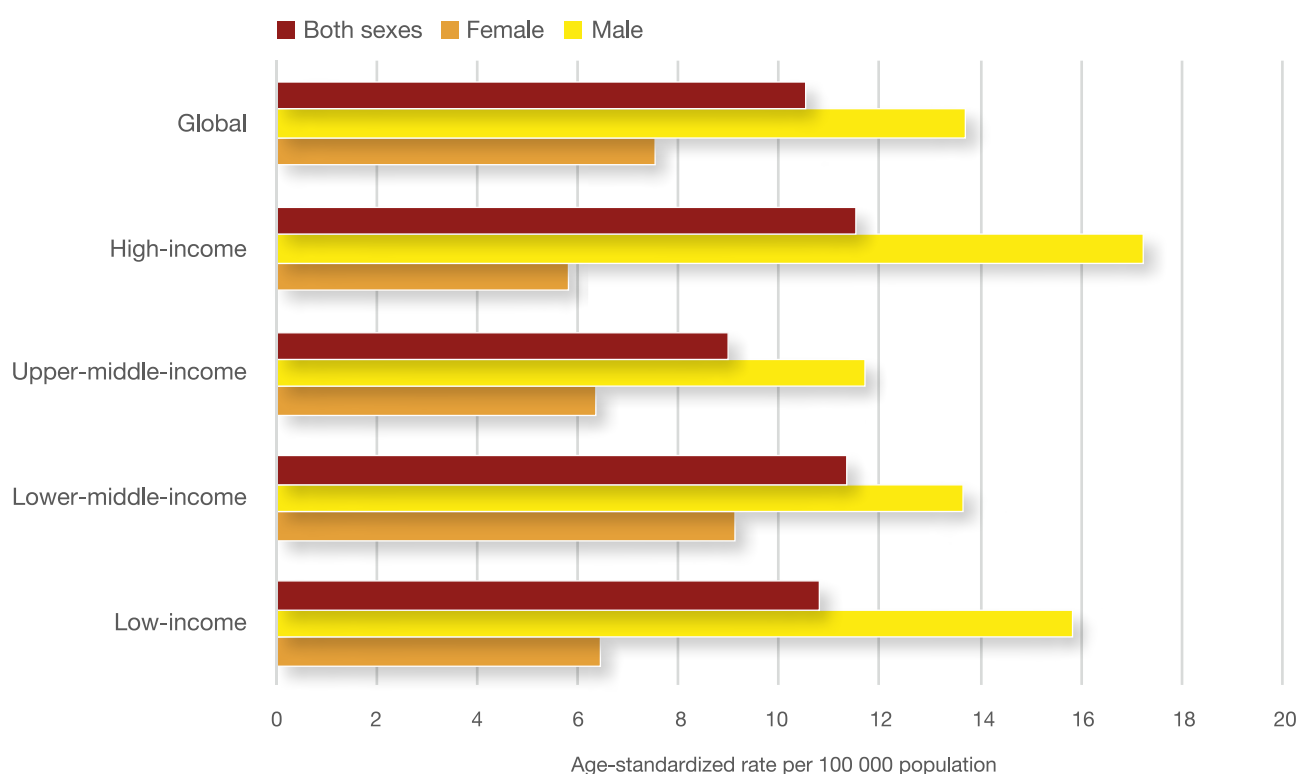
The South-East Asia Region had a much higher female age-standardized suicide rate (11.5 per 100 000) compared to the global female average (7.5 per 100 000). In males, the regions of Africa (16.6 per 100 000), the Americas (14.5 per 100 000), South-East Asia (15.4 per 100,000), and especially Europe (21.2 per 100,000), all had suicide rates which were higher than the global male average (13.7 per 100 000).

Figure 8. Age-standardized suicide rates (per 100 000 population) by WHO region, 2016



While most of the world's suicides occurred in low-and-middle-income countries (79%), high-income countries had the highest age-standardized suicide rate (11.5 per 100 000). Lower-middle-income countries had a slightly lower rate (11.4 per 100 000), and low-income and upper-middle-income countries had lower rates (10.8 per 100 000 and 9.0 per 100 000 respectively). Females in lower-middle-income countries had the highest suicide rate (9.1 per 100 000) compared to females in other income level groupings. Males in high-income countries had the highest rate (17.2 per 100 000) as compared to males in other income level groupings (Figure 9).

Figure 9. Age-standardized suicide rates (per 100 000 population) by income level*, 2016

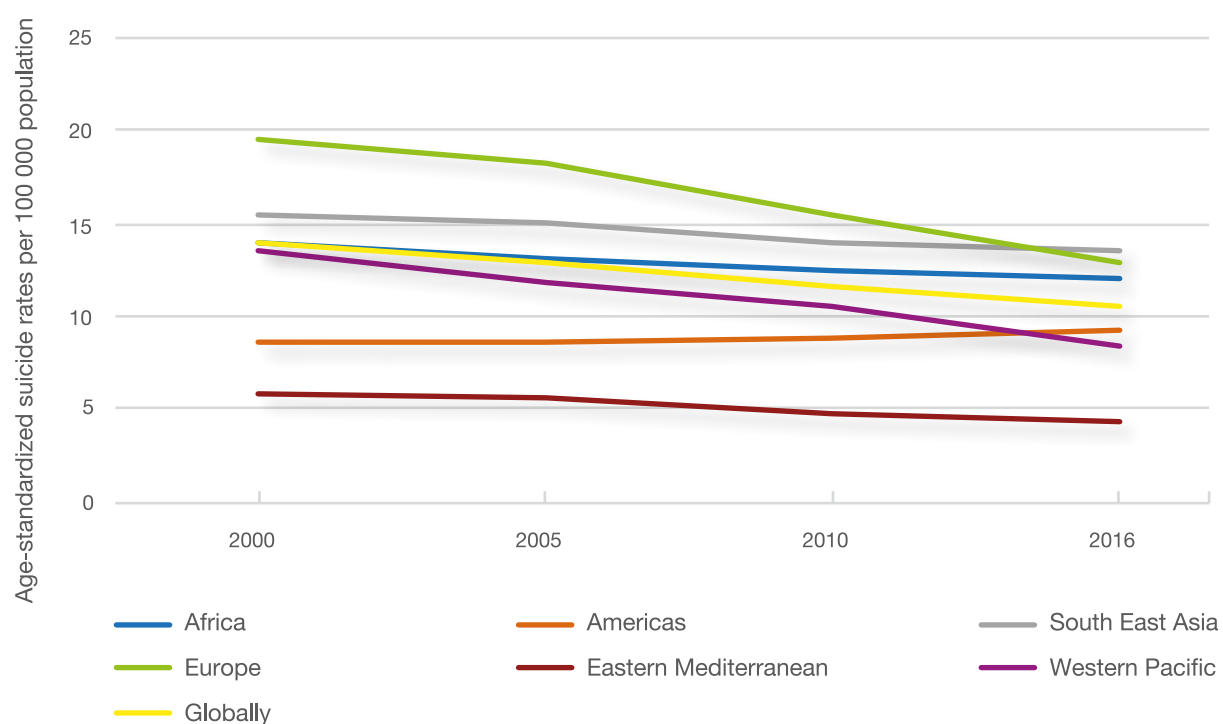


* World Bank income groups, 2017

Changes in suicide rates over time

In the six years between 2010 and 2016, the global age-standardized suicide rate decreased by 9.8%, with decreases ranging from 19.6% in the Western Pacific Region to 4.2% in the South-East Asia Region. The only increase in age-standardized suicide rates was in the Region of the Americas with an increase of 6.0% in the same time-period (Figure 10).

Figure 10. Age-standardized suicide rates (per 100 000 population) over time by WHO region, both sexes



Data quality

Of the 183 WHO Member States for which estimates were made for the year 2016, close to 80 had good-quality vital registration data. Modelling methods were required to generate estimates for the majority of remaining countries, which were mostly low-and middle-income.

As the majority of suicides are estimated to occur in low- and middle-income countries, good quality vital registration data are urgently needed in these settings. Improving the surveillance of suicide is important in order to inform planning and evaluation in countries, and to accurately assess progress towards global suicide mortality targets.

Conclusions

The suicide mortality data presented in this booklet underscore the imperative that urgent action is needed to prevent suicide. Suicide is a global public health issue. All ages, sexes, and regions of the world are affected. Each item of data here represents a life that has been lost to suicide; each loss is one too many.

Overall, the global age-standardized suicide rate is somewhat in decline, but this is not observed in all countries around the world. Should the decline continue at its current rate, global targets to reduce suicide mortality will not be met. Lives will be lost, while suicides are preventable. Further action and strengthening of ongoing efforts in the implementation of key effective suicide prevention interventions (i.e. restricting access to means of suicide, interaction with the media for responsible reporting, training young people in their life skills, and early identification, management and follow-up) as described in the LIVE LIFE strategy (WHO, 2018) are crucially needed, to save lives lost to this serious public health issue.

References

World Health Organization (2018). Global Health Estimates 2016: Deaths by cause, age, sex, by country and by region, 2000-2016. World Health Organization, Geneva.

World Health Organization (2018). National suicide prevention strategies: progress, examples and indicators. World Health Organization, Geneva.

World Health Organization (2014). Preventing suicide: a global imperative. World Health Organization, Geneva.

Annex

WHO African Region							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
Algeria	4	AFR	UMI	both sexes	1299	3.2	3.3
				females	339	1.7	1.8
				males	960	4.7	4.9
Angola	4	AFR	LMI	both sexes	1347	4.7	8.9
				females	362	2.5	4.6
				males	984	7.0	14.0
Benin	4	AFR	LI	both sexes	1077	9.9	15.7
				females	324	5.9	9.6
				males	754	13.9	22.6
Botswana	4	AFR	UMI	both sexes	209	9.3	11.5
				females	51	4.5	5.7
				males	158	14.2	18.3
Burkina Faso	4	AFR	LI	both sexes	1442	7.7	14.8
				females	498	5.3	9.1
				males	944	10.2	22.4
Burundi	4	AFR	LI	both sexes	956	9.1	15.0
				females	262	4.9	7.7
				males	694	13.4	23.1
Cabo Verde	3	AFR	LMI	both sexes	61	11.3	15.1
				females	16	6.1	7.7
				males	44	16.5	24.1
Cameroon	4	AFR	LMI	both sexes	2867	12.2	19.5
				females	864	7.4	12.5
				males	2003	17.1	26.9

¹ 1 = Multiple years of national death registration data with high completeness and quality of cause-of-death assignment are available. Estimates for these countries may be compared and time series may be used for priority setting and policy evaluation. 2 or 3 = Multiple years of death registration data are available. Data have low completeness and/or issues with cause-of-death assignment which likely affect estimated deaths by cause and time trends. Estimates may be used for priority setting. Use estimates for programme evaluation with caution, as improvements in the vital registration system may affect the estimated trends in cause-specific mortality. Comparisons among countries should be interpreted with caution. 2 denotes moderate quality issues and 3 denotes severe quality issues. 4 = Death registration data are unavailable or unusable due to quality issues. Estimates of mortality by cause should be interpreted with caution. Estimates may be used for priority setting, however, they are not likely to be informative for policy evaluation or comparisons among countries. Data quality 5 (countries with high HIV prevalence) was merged into data quality 4 here.
(See: https://www.who.int/healthinfo/global_burden_disease/GlobalCOD_method_2000-2016.pdf; accessed 30 August 2019).

² World Bank income groups, 2017. HI = high-income, LI = low-income, LMI = lower-middle-income, UMI = upper-middle-income

WHO African Region							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
Central African Republic	4	AFR	LI	both sexes	354	7.7	11.6
				females	94	4.0	6.0
				males	260	11.5	18.0
Chad	4	AFR	LI	both sexes	1278	8.8	15.5
				females	535	7.4	13.8
				males	743	10.3	17.1
Comoros	4	AFR	LI	both sexes	54	6.8	11.1
				females	14	3.6	5.4
				males	40	9.9	17.6
Congo	4	AFR	LMI	both sexes	301	5.9	9.3
				females	85	3.3	5.0
				males	216	8.4	13.9
Côte d'Ivoire	4	AFR	LMI	both sexes	3446	14.5	23.0
				females	971	8.3	13.0
				males	2475	20.6	32.0
Democratic Republic of the Congo	4	AFR	LI	both sexes	4453	5.7	9.7
				females	1156	2.9	4.9
				males	3297	8.4	15.0
Equatorial Guinea	4	AFR	UMI	both sexes	201	16.4	22.0
				females	42	7.7	10.8
				males	159	23.5	31.3
Eritrea	4	AFR	LI	both sexes	393	7.9	13.8
				females	89	3.6	6.1
				males	304	12.3	22.4
Eswatini	4	AFR	LMI	both sexes	179	13.3	16.7
				females	52	7.5	9.6
				males	127	19.5	25.4
Ethiopia	4	AFR	LI	both sexes	7323	7.2	11.4
				females	1604	3.1	4.7
				males	5719	11.2	18.7
Gabon	4	AFR	UMI	both sexes	140	7.1	9.6
				females	31	3.2	4.3
				males	109	10.7	15.0
Gambia	4	AFR	LI	both sexes	105	5.1	10.0
				females	38	3.7	7.3
				males	66	6.6	12.8
Ghana	4	AFR	LMI	both sexes	1515	5.4	8.7
				females	297	2.1	2.9
				males	1218	8.7	15.8

WHO African Region							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
Guinea	4	AFR	LI	both sexes	775	6.3	10.5
				females	312	5.0	8.4
				males	463	7.5	12.7
Guinea-Bissau	4	AFR	LI	both sexes	72	4.0	7.4
				females	31	3.3	6.1
				males	42	4.7	8.9
Kenya	4	AFR	LMI	both sexes	1532	3.2	5.6
				females	297	1.2	2.1
				males	1235	5.1	9.7
Lesotho	4	AFR	LMI	both sexes	467	21.2	28.9
				females	277	24.4	32.6
				males	190	17.8	22.7
Liberia	4	AFR	LI	both sexes	315	6.8	13.4
				females	150	6.6	13.0
				males	165	7.1	13.8
Madagascar	4	AFR	LI	both sexes	973	3.9	6.9
				females	273	2.2	3.6
				males	700	5.6	10.5
Malawi	4	AFR	LI	both sexes	669	3.7	7.8
				females	149	1.6	3.2
				males	520	5.8	13.7
Mali	4	AFR	LI	both sexes	858	4.8	8.9
				females	239	2.7	4.7
				males	619	6.9	13.5
Mauritania	4	AFR	LMI	both sexes	189	4.4	7.5
				females	47	2.2	3.6
				males	142	6.6	12.1
Mauritius	1	AFR	UMI	both sexes	98	7.8	7.3
				females	15	2.4	2.2
				males	83	13.3	12.5
Mozambique	4	AFR	LI	both sexes	1412	4.9	8.4
				females	376	2.5	4.1
				males	1036	7.4	14.0
Namibia	4	AFR	UMI	both sexes	216	8.7	11.5
				females	46	3.6	4.9
				males	170	14.1	19.4
Niger	4	AFR	LI	both sexes	947	4.6	9.0
				females	339	3.3	6.7
				males	608	5.9	11.5

WHO African Region							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
Nigeria	4	AFR	LMI	both sexes	17710	9.5	17.3
				females	8410	9.2	17.1
				males	9300	9.9	17.5
Rwanda	4	AFR	LI	both sexes	794	6.7	11.0
				females	230	3.8	6.0
				males	564	9.7	16.9
Sao Tome and Principe	4	AFR	LMI	both sexes	5	2.3	3.1
				females	2	1.6	2.1
				males	3	3.0	4.2
Senegal	4	AFR	LI	both sexes	932	6.0	11.8
				females	230	2.9	5.2
				males	702	9.3	20.3
Seychelles	2	AFR	HI	both sexes	9	9.3	8.3
				females	1	2.4	2.1
				males	8	16.4	15.0
Sierra Leone	4	AFR	LI	both sexes	715	9.7	16.1
				females	302	8.1	14.2
				males	414	11.3	18.2
South Africa	2	AFR	UMI	both sexes	6476	11.6	12.8
				females	1338	4.7	5.1
				males	5138	18.7	21.7
South Sudan	4	AFR	LI	both sexes	458	3.7	6.1
				females	160	2.6	4.1
				males	298	4.9	8.3
Togo	4	AFR	LI	both sexes	730	9.6	16.6
				females	243	6.4	10.9
				males	486	12.8	22.7
Uganda	4	AFR	LI	both sexes	4105	9.9	20.0
				females	1897	9.1	18.7
				males	2208	10.7	21.2
United Republic of Tanzania	4	AFR	LI	both sexes	3001	5.4	9.6
				females	898	3.2	5.4
				males	2103	7.7	14.3
Zambia	4	AFR	LMI	both sexes	1015	6.1	11.3
				females	291	3.5	6.2
				males	724	8.8	17.5
Zimbabwe	4	AFR	LI	both sexes	1728	10.7	19.1
				females	498	6.0	11.1
				males	1231	15.7	29.1

WHO Region of the Americas							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
Argentina	2	AMR	UMI	both sexes	4030	9.2	9.1
				females	793	3.5	3.5
				males	3237	15.1	15.0
Bahamas	1	AMR	HI	both sexes	7	1.7	1.6
				females	1	0.5	0.5
				males	6	3.0	2.8
Barbados	2	AMR	HI	both sexes	2	0.8	0.4
				females	1	0.5	0.3
				males	1	1.0	0.8
Belize	2	AMR	UMI	both sexes	17	4.7	5.9
				females	3	1.6	2.0
				males	14	7.9	9.9
Bolivia (Plurinational State of)	4	AMR	LMI	both sexes	1326	12.2	12.9
				females	467	8.6	8.9
				males	860	15.8	16.9
Brazil	1	AMR	UMI	both sexes	13467	6.5	6.1
				females	3263	3.1	2.8
				males	10203	10.0	9.7
Canada	1	AMR	HI	both sexes	4525	12.5	10.4
				females	1274	7.0	5.8
				males	3252	18.1	15.1
Chile	1	AMR	HI	both sexes	1893	10.6	9.7
				females	363	4.0	3.8
				males	1530	17.2	16.0
Colombia	2	AMR	UMI	both sexes	3486	7.2	7.0
				females	700	2.8	2.8
				males	2785	11.6	11.5
Costa Rica	2	AMR	UMI	both sexes	385	7.9	7.5
				females	58	2.4	2.3
				males	327	13.5	12.8
Cuba	1	AMR	UMI	both sexes	1596	13.9	10.1
				females	330	5.8	4.1
				males	1267	22.1	16.4
Dominican Republic	3	AMR	UMI	both sexes	1057	9.9	10.5
				females	168	3.1	3.2
				males	888	16.8	17.9

WHO Region of the Americas							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
Ecuador	2	AMR	UMI	both sexes	1162	7.1	7.2
				females	319	3.9	3.8
				males	843	10.3	10.7
El Salvador	3	AMR	LMI	both sexes	872	13.7	13.5
				females	152	4.5	4.3
				males	721	24.2	24.8
Grenada	1	AMR	UMI	both sexes	2	1.7	1.7
				females	1	1.9	1.0
				males	1	1.5	2.1
Guatemala	1	AMR	LMI	both sexes	448	2.7	2.9
				females	150	1.8	1.7
				males	298	3.7	4.4
Guyana	2	AMR	UMI	both sexes	226	29.2	30.2
				females	55	14.4	14.2
				males	171	43.7	46.6
Haiti	4	AMR	LI	both sexes	1265	11.7	12.2
				females	354	6.5	6.4
				males	911	17.0	18.3
Honduras	4	AMR	LMI	both sexes	268	2.9	3.4
				females	69	1.5	1.7
				males	199	4.4	5.3
Jamaica	3	AMR	UMI	both sexes	62	2.2	2.0
				females	15	1.0	0.9
				males	47	3.3	3.2
Mexico	1	AMR	UMI	both sexes	6537	5.1	5.2
				females	1476	2.3	2.3
				males	5061	8.0	8.2
Nicaragua	2	AMR	LMI	both sexes	750	12.2	11.9
				females	165	5.3	5.0
				males	585	19.3	19.2
Panama	2	AMR	UMI	both sexes	174	4.3	4.4
				females	24	1.2	1.2
				males	150	7.4	7.6
Paraguay	2	AMR	UMI	both sexes	639	9.5	9.3
				females	215	6.5	6.2
				males	423	12.4	12.3
Peru	3	AMR	UMI	both sexes	1567	4.9	5.1
				females	427	2.7	2.7
				males	1140	7.2	7.6

WHO Region of the Americas							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
Saint Lucia	2	AMR	UMI	both sexes	14	7.8	7.3
				females	2	2.2	2.1
				males	12	13.5	12.7
Saint Vincent and the Grenadines	1	AMR	UMI	both sexes	3	2.4	2.4
				females	0	0.9	0.9
				males	2	3.9	3.9
Suriname	2	AMR	UMI	both sexes	128	22.8	23.2
				females	30	10.9	10.9
				males	97	34.7	36.1
Trinidad and Tobago	1	AMR	HI	both sexes	186	13.6	12.9
				females	31	4.5	4.3
				males	155	23.0	21.9
United States of America	1	AMR	HI	both sexes	49394	15.3	13.7
				females	11746	7.2	6.4
				males	37648	23.6	21.1
Uruguay	2	AMR	HI	both sexes	633	18.4	16.5
				females	147	8.3	7.1
				males	486	29.2	26.8
Venezuela (Bolivarian Republic of)	2	AMR	UMI	both sexes	1168	3.7	3.8
				females	180	1.1	1.2
				males	988	6.3	6.6

WHO Eastern Mediterranean Region							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
Afghanistan	4	EMR	LI	both sexes	1618	4.7	6.4
				females	260	1.5	2.1
				males	1358	7.6	10.6
Bahrain	3	EMR	HI	both sexes	85	5.9	5.7
				females	10	1.9	2.1
				males	74	8.4	7.9
Djibouti	4	EMR	LMI	both sexes	63	6.7	8.5
				females	20	4.3	5.3
				males	43	9.0	11.9
Egypt	3	EMR	LMI	both sexes	3799	4.0	4.4
				females	704	1.5	1.7
				males	3095	6.4	7.2

WHO Eastern Mediterranean Region							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
Iran (Islamic Republic of)	3	EMR	UMI	both sexes	3259	4.1	4.0
				females	1230	3.1	3.1
				males	2029	5.0	4.9
Iraq	3	EMR	UMI	both sexes	1128	3.0	4.1
				females	479	2.6	3.4
				males	648	3.4	4.7
Jordan	3	EMR	LMI	both sexes	273	2.9	3.7
				females	102	2.2	2.7
				males	171	3.6	4.7
Kuwait	3	EMR	HI	both sexes	94	2.3	2.2
				females	30	1.7	1.7
				males	65	2.8	2.5
Lebanon	4	EMR	UMI	both sexes	199	3.3	3.2
				females	71	2.4	2.2
				males	128	4.2	4.2
Libya	4	EMR	UMI	both sexes	327	5.2	5.5
				females	69	2.2	2.3
				males	258	8.1	8.7
Morocco	4	EMR	LMI	both sexes	1014	2.9	3.1
				females	613	3.4	3.6
				males	400	2.3	2.5
Oman	4	EMR	HI	both sexes	174	3.9	3.5
				females	12	0.8	0.9
				males	162	5.6	4.8
Pakistan	4	EMR	LMI	both sexes	5552	2.9	3.1
				females	2841	3.0	3.1
				males	2711	2.7	3.0
Qatar	3	EMR	HI	both sexes	170	6.6	5.8
				females	5	0.9	1.1
				males	165	8.5	7.3
Saudi Arabia	4	EMR	HI	both sexes	1035	3.2	3.4
				females	213	1.5	1.7
				males	822	4.5	4.6
Somalia	4	EMR	LI	both sexes	675	4.7	8.3
				females	223	3.1	5.4
				males	452	6.3	11.5
Sudan	4	EMR	LMI	both sexes	3205	8.1	9.5
				females	801	4.0	4.6
				males	2404	12.2	14.5

WHO Eastern Mediterranean Region							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
Syrian Arab Republic	3	EMR	LMI	both sexes	357	1.9	2.4
				females	82	0.9	1.1
				males	275	2.9	3.8
Tunisia	4	EMR	LMI	both sexes	383	3.4	3.2
				females	132	2.3	2.2
				males	250	4.4	4.4
United Arab Emirates	3	EMR	HI	both sexes	258	2.8	2.7
				females	17	0.7	0.8
				males	241	3.6	3.5
Yemen	4	EMR	LMI	both sexes	2335	8.5	9.8
				females	762	5.6	6.2
				males	1573	11.3	13.4

WHO European Region							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
Albania	3	EUR	UMI	both sexes	184	6.3	5.6
				females	68	4.7	4.3
				males	116	7.9	7.0
Armenia	1	EUR	LMI	both sexes	192	6.6	5.7
				females	43	2.8	2.0
				males	149	10.8	10.1
Austria	1	EUR	HI	both sexes	1363	15.6	11.4
				females	344	7.7	5.7
				males	1019	23.9	17.5
Azerbaijan	3	EUR	UMI	both sexes	253	2.6	2.6
				females	52	1.1	1.0
				males	201	4.2	4.3
Belarus	2	EUR	UMI	both sexes	2488	26.2	21.4
				females	418	8.2	6.2
				males	2070	46.9	39.3
Belgium	1	EUR	HI	both sexes	2351	20.7	15.7
				females	798	13.8	9.4
				males	1554	27.8	22.2
Bosnia and Herzegovina	3	EUR	UMI	both sexes	308	8.8	6.4
				females	65	3.6	2.5
				males	243	14.1	10.6

WHO European Region							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
Bulgaria	2	EUR	UMI	both sexes	818	11.5	7.9
				females	187	5.1	3.2
				males	631	18.2	13.1
Croatia	1	EUR	UMI	both sexes	693	16.5	11.5
				females	173	7.9	5.1
				males	521	25.6	18.8
Cyprus	3	EUR	HI	both sexes	62	5.3	4.5
				females	14	2.3	1.9
				males	48	8.2	7.2
Czechia	1	EUR	HI	both sexes	1393	13.1	10.5
				females	276	5.1	4.2
				males	1118	21.4	17.2
Denmark	1	EUR	HI	both sexes	729	12.8	9.2
				females	236	8.2	5.2
				males	492	17.3	13.2
Estonia	1	EUR	HI	both sexes	234	17.8	14.4
				females	46	6.6	4.4
				males	188	30.6	25.6
Finland	1	EUR	HI	both sexes	874	15.9	13.8
				females	226	8.1	6.8
				males	648	23.9	20.8
France	1	EUR	HI	both sexes	11455	17.7	12.1
				females	3854	11.7	6.5
				males	7600	23.9	17.9
Georgia	3	EUR	LMI	both sexes	323	8.2	6.7
				females	56	2.7	1.9
				males	267	14.2	12.3
Germany	1	EUR	HI HI HI	both sexes	11145	13.6	9.1
				females	3199	7.7	4.8
				males	7946	19.7	13.6
Greece	2	EUR	HI	both sexes	557	5.0	3.8
				females	113	2.0	1.5
				males	444	8.1	6.1
Hungary	1	EUR	HI	both sexes	1866	19.1	13.6
				females	490	9.6	6.2
				males	1376	29.7	22.2
Iceland	1	EUR	HI	both sexes	47	14.0	13.3
				females	9	5.6	4.7
				males	37	22.3	21.7

WHO European Region							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
Ireland	1	EUR	HI	both sexes	543	11.5	10.9
				females	109	4.6	4.2
				males	434	18.5	17.6
Israel	1	EUR	HI	both sexes	440	5.4	5.2
				females	111	2.7	2.4
				males	329	8.1	8.2
Italy	1	EUR	HI	both sexes	4886	8.2	5.5
				females	1381	4.5	2.6
				males	3505	12.1	8.4
Kazakhstan	2	EUR	UMI	both sexes	4048	22.5	22.8
				females	709	7.6	7.7
				males	3339	38.3	40.1
Kyrgyzstan	1	EUR	LMI	both sexes	494	8.3	9.1
				females	104	3.5	3.7
				males	390	13.2	14.8
Latvia	1	EUR	HI	both sexes	418	21.2	17.2
				females	78	7.3	5.1
				males	340	37.6	31.0
Lithuania	1	EUR	HI	both sexes	927	31.9	25.7
				females	148	9.5	6.7
				males	778	58.1	47.5
Luxembourg	1	EUR	HI	both sexes	78	13.5	10.4
				females	24	8.3	5.8
				males	54	18.6	15.0
Malta	1	EUR	HI	both sexes	32	7.5	6.5
				females	6	2.8	2.8
				males	26	12.1	10.3
Montenegro	3	EUR	UMI	both sexes	65	10.3	7.9
				females	17	5.3	3.6
				males	48	15.4	12.6
Netherlands	1	EUR	HI	both sexes	2140	12.6	9.6
				females	771	9.0	6.4
				males	1369	16.2	12.9
North Macedonia	1	EUR	UMI	both sexes	164	7.9	6.2
				females	41	3.9	3.0
				males	123	11.9	9.7
Norway	1	EUR	HI	both sexes	639	12.2	10.1
				females	219	8.4	6.5
				males	420	15.9	13.6
Poland	2	EUR	HI	both sexes	6174	16.2	13.4
				females	845	4.3	3.4
				males	5330	28.9	23.9

WHO European Region							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
Portugal	2	EUR	HI	both sexes	1450	14.0	8.6
				females	358	6.5	3.8
				males	1092	22.2	14.3
Republic of Moldova	1	EUR	LMI	both sexes	644	15.9	13.4
				females	99	4.7	3.8
				males	544	27.9	24.1
Romania	1	EUR	UMI	both sexes	2059	10.4	8.0
				females	340	3.3	2.4
				males	1720	17.9	13.9
Russian Federation	2	EUR	UMI	both sexes	44673	31.0	26.5
				females	7275	9.4	7.5
				males	37398	55.9	48.3
Serbia	2	EUR	UMI	both sexes	1380	15.6	10.9
				females	368	8.1	5.2
				males	1012	23.5	17.3
Slovakia	1	EUR	HI	both sexes	698	12.8	10.1
				females	98	3.5	2.6
				males	600	22.7	18.4
Slovenia	1	EUR	HI	both sexes	386	18.6	13.3
				females	73	6.9	4.5
				males	314	30.4	22.4
Spain	1	EUR	HI	both sexes	4028	8.7	6.1
				females	1057	4.5	3.1
				males	2971	13.1	9.3
Sweden	1	EUR	HI	both sexes	1455	14.8	11.7
				females	517	10.5	7.4
				males	938	19.1	15.8
Switzerland	1	EUR	HI	both sexes	1443	17.2	11.3
				females	525	12.4	6.9
				males	917	22.0	15.8
Tajikistan	3	EUR	LMI	both sexes	218	2.5	3.3
				females	57	1.3	1.7
				males	162	3.7	5.0
Turkey	2	EUR	UMI	both sexes	5795	7.3	7.2
				females	1319	3.3	3.2
				males	4476	11.4	11.3
Turkmenistan	3	EUR	UMI	both sexes	380	6.7	7.2
				females	99	3.5	3.7
				males	281	10.1	11.0
Ukraine	2	EUR	LMI	both sexes	9952	22.4	18.5
				females	1510	6.3	4.7
				males	8443	41.1	34.5

WHO European Region							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
United Kingdom	1	EUR	HI	both sexes	5829	8.9	7.6
				females	1465	4.4	3.5
				males	4364	13.5	11.9
Uzbekistan	1	EUR	LMI	both sexes	2316	7.4	7.4
				females	758	4.8	4.6
				males	1558	9.9	10.3

WHO South-East Asia Region							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
Bangladesh	4	SEAR	LMI	both sexes	9544	5.9	6.1
				females	5666	7.0	6.7
				males	3878	4.7	5.5
Bhutan	4	SEAR	LMI	both sexes	91	11.4	11.6
				females	32	8.5	8.9
				males	59	14.0	13.8
India	4	SEAR	LMI	both sexes	215872	16.3	16.5
				females	93878	14.7	14.5
				males	121994	17.8	18.5
Indonesia	4	SEAR	LMI	both sexes	8978	3.4	3.7
				females	2609	2.0	2.2
				males	6370	4.8	5.2
Maldives	3	SEAR	UMI	both sexes	10	2.3	2.7
				females	2	1.3	1.6
				males	7	3.0	3.6
Myanmar	4	SEAR	LMI	both sexes	4114	7.8	8.1
				females	2581	9.5	9.8
				males	1533	5.9	6.3
Nepal	4	SEAR	LI	both sexes	2544	8.8	9.6
				females	1176	7.9	8.0
				males	1368	9.7	11.4
Sri Lanka	4	SEAR	LMI	both sexes	3035	14.6	14.2
				females	687	6.4	6.2
				males	2347	23.5	23.3

WHO South-East Asia Region							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
Thailand	3	SEAR	UMI	both sexes	9945	14.4	12.9
				females	2083	5.9	4.8
				males	7862	23.4	21.4
Timor-Leste	4	SEAR		both sexes	58	4.6	6.4
				females	18	2.9	3.7
				males	40	6.2	9.0

WHO Western Pacific Region							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
Australia	1	WPR		both sexes	3187	13.2	11.7
				females	844	7.0	6.0
				males	2343	19.5	17.4
Brunei Darussalam	1	WPR	HI	both sexes	19	4.6	4.5
				females	6	2.7	2.8
				males	14	6.4	6.2
Cambodia	4	WPR	LMI	both sexes	836	5.3	5.9
				females	233	2.9	3.2
				males	603	7.8	9.0
China	3	WPR	UMI	both sexes	136267	9.7	8.0
				females	70330	10.3	8.3
				males	65936	9.1	7.9
Fiji	2	WPR	UMI	both sexes	45	5.0	5.5
				females	11	2.4	2.5
				males	34	7.5	8.8
Japan	1	WPR	HI	both sexes	23684	18.5	14.3
				females	7434	11.4	8.1
				males	16250	26.0	20.5
Kiribati	3	WPR	LMI	both sexes	16	14.4	15.2
				females	3	5.0	5.4
				males	14	24.1	25.9
Lao People's Democratic Republic	4	WPR	LMI	both sexes	579	8.6	9.3
				females	194	5.7	6.1
				males	385	11.4	12.9
Malaysia	4	WPR	UMI	both sexes	1726	5.5	6.2
				females	477	3.2	3.6
				males	1249	7.8	8.7

WHO Western Pacific Region							
Country	Data quality ¹	WHO Region	Income Group ²	Sex	Number of suicides, all ages, 2016	Crude suicide rates, all ages (per 100 000), 2016	Age-standardized suicide rates, all ages (per 100 000), 2016
Micronesia (Federated States of)	4	WPR	LMI	both sexes	12	11.1	11.3
				females	3	6.3	6.2
				males	8	15.8	16.2
Mongolia	3	WPR	LMI	both sexes	392	13.0	13.3
				females	54	3.5	3.8
				males	338	22.6	23.3
New Zealand	1	WPR	HI	both sexes	566	12.1	11.6
				females	157	6.6	6.2
				males	409	17.9	17.3
Papua New Guinea	4	WPR	LMI	both sexes	484	6.0	7.0
				females	132	3.3	3.8
				males	352	8.6	10.2
Philippines	2	WPR	LMI	both sexes	3263	3.2	3.7
				females	1008	2.0	2.3
				males	2255	4.3	5.2
Republic of Korea	2	WPR	LMI	both sexes	13677	26.9	20.2
				females	3907	15.4	11.6
				males	9770	38.4	29.6
Samoa	4	WPR	UMI	both sexes	9	4.4	5.4
				females	2	1.9	2.2
				males	7	6.7	8.7
Singapore	2	WPR	HI	both sexes	556	9.9	7.9
				females	173	6.1	4.9
				males	383	13.8	11.1
Solomon Islands	4	WPR	LMI	both sexes	28	4.7	5.9
				females	8	2.6	3.2
				males	21	6.8	8.5
Tonga	4	WPR	UMI	both sexes	4	3.5	4.0
				females	1	2.7	2.9
				males	2	4.3	5.2
Vanuatu	4	WPR	LMI	both sexes	12	4.5	5.4
				females	3	2.2	2.7
				males	9	6.6	8.1
Viet Nam	4	WPR	LMI	both sexes	6868	7.3	7.0
				females	1787	3.7	3.4
				males	5081	10.9	10.8

