## 4. Suicides

#### Definitions and measurement

Data on suicide rates are based on official registers on causes of death. They are standardised using the OECD population structure of 1980, accounting for changes in the age structure across countries and over time. Suicide rates are expressed in deaths per 100 000 individuals.

Countries have different procedures for recording suicide as the underlying cause of death, despite the development of the International Statistical Classification of Diseases and Related Health Problems (ICD), and procedures may have changed over time. In addition suicide may be under-reported because of a societal stigma attached to suicide. This socio-cultural norm may vary across countries and over time.

Studies assessing the reliability of suicide statistics suggest that sources of error are random. Thus there is little impact on comparing rates between countries, between demographic groups or over time (Sainsbury and Jenkins, 1982).

Suicide rates increased in the 1970s and peaked at the beginning of the 1980s (CO4.1). While most countries' suicide rates follow this broad pattern, Japan, Korea and Ireland do not share it. In Japan, suicide rates are lower than in 1960, but have remained at relatively high levels (around 20 deaths per 100 000 persons) since 1997. Suicides in Korea show a sharp increase from the late 1990s. Korea now has the highest suicide rates among OECD countries (around 22 deaths per 100 000 individuals). Ireland shows a marked regular increase of suicide rates with a peak in 2000, followed by a small but continuous decline.

Suicide rates have fallen for men and women and the gender gap has been fairly stable. Because both male and female rates have fallen similarly, gender gaps remain at similar levels and suicide continues to be a predominantly male phenomenon. On average, for each female suicide there are about three male deaths. Yet there are marked variations across countries in gender gaps (CO4.2). Larger differences prevail in Mexico, Poland and the Slovak Republic, where for each female death there are at least five male deaths. By contrast, in Korea, the Netherlands and Norway gender gaps are smaller, with around two male suicides for each female death.

Older people are more likely to take their own lives, but this pattern is not general across the OECD. Greece, Italy, Portugal and Korea are examples of countries where older people take their own lives more often than young people (CO4.3). The largest increasing age gradient is found in Korea. Korean suicide rates by age show a steep increase from the ages of 45-54. Furthermore, rates amongst the eldest group (75 years or more) are more than ten times higher than those of young people aged 15-24. The upward Korean suicide trend of recent years is partly explained by a strong rise in suicide by older people. By contrast, in a minority of OECD countries – for example New Zealand and Norway – young people are more likely to take their own lives than older people.

**Differences in suicide rates between males and females usually rise with age.** For example, on average across the OECD the age 15-19 male suicide rate is 2.7 times that of females of the same age, but that of males over 75 years of age is 5.3 times higher than for females (CO4.4). This pattern may reflect the higher social isolation, possibly following ending of a long term partnership by dissolution or death, of older males compared to older females.

### **Further reading**

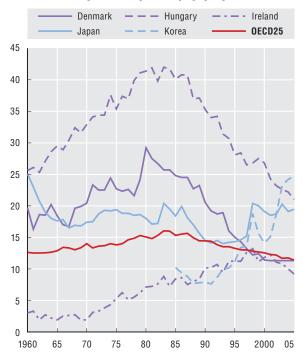
Sainsbury, P. and J.S. Jenkins (1982), "The Accuracy of Officially Reported Suicide Statistics for Purposes of Epidemiological Research", Journal of Epidemiology and Community Health, Vol. 36, pp. 43-48.

#### Figure note

Figures CO4.1 to CO4.4: 2004 for Canada, Germany, Netherlands and Sweden; 2003 for Australia, Italy and Portugal; 2001 for Denmark; 1997 for Belgium.

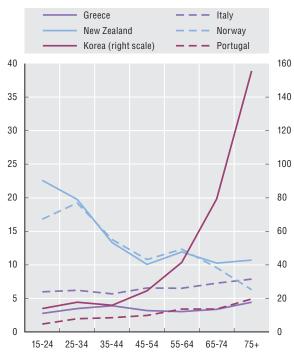
CO4.1. Falling suicide rates in most OECD countries

Suicides per 100 000 persons by age group, 2005



#### CO4.3. Suicide by age patterns vary by country

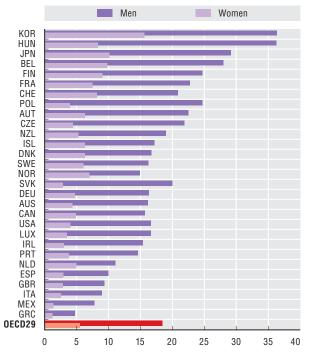
Suicides per 100 000 persons by age group, 2005



Source: Suicides from WHO Mortality database (www.who.int/ healthinfo/morttables/en/index.html).

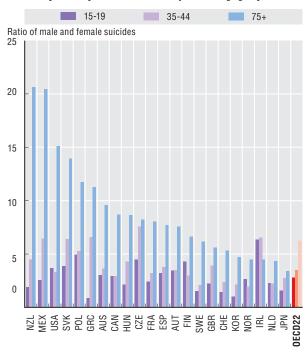
CO4.2. Higher suicides among men than women

Suicides per 100 000 persons across countries and gender, 2005



CO4.4. Gender difference in suicide higher amongst the elderly

Ratio of male to female suicide rates by selected age group, 2005



StatLink and http://dx.doi.org/10.1787/550724182187



# From: Society at a Glance 2009 OECD Social Indicators

Access the complete publication at: https://doi.org/10.1787/soc\_glance-2008-en

## Please cite this chapter as:

OECD (2009), "Suicides", in Society at a Glance 2009: OECD Social Indicators, OECD Publishing, Paris.

DOI: https://doi.org/10.1787/soc\_glance-2008-33-en

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