

# Snapshot: ABS Causes of Death data release 2023

10 October 2024



# Context

- When exploring suicide data, it is important to remember that behind the numbers are individuals, families and communities impacted by suicide in Australia.
- This snapshot was prepared by Everymind using the Australian Bureau of Statistics (ABS) *Causes of Death* data, released 10 October 2024.
- Resources to support reporting about suicide, including the use of images, are available at [mindframe.org.au](https://mindframe.org.au)
- A full summary of data will be hosted on the *Life in Mind* portal at [lifeinmind.org.au](https://lifeinmind.org.au)

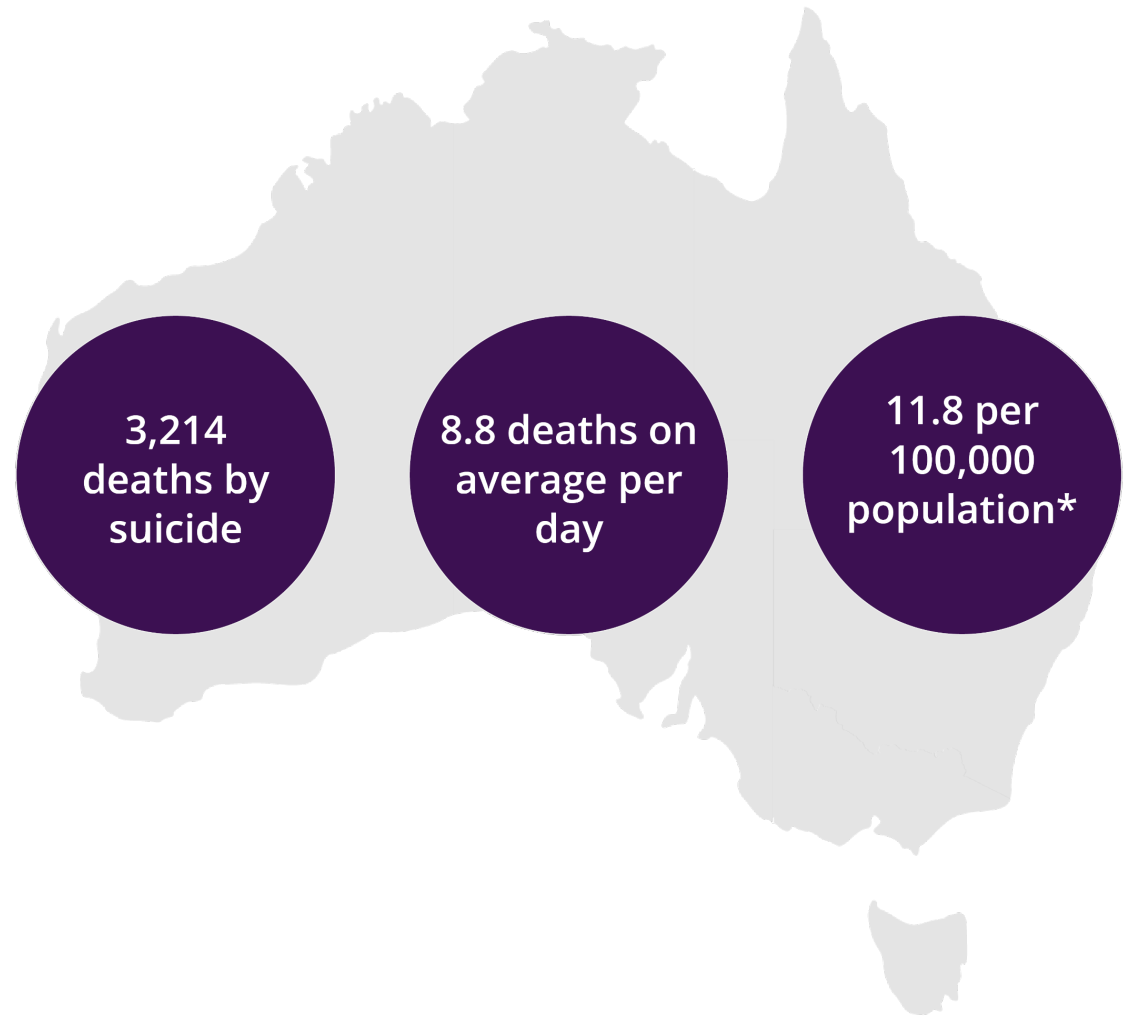
## Notes about the data

- This release includes 2023 preliminary data, 2022 preliminary revised data and 2021 revised data. Data for 2013 to 2020 are considered final.
- For data from 2013 onwards, Causes of Death data is presented by the year the death was registered.
- Care should be taken in comparing 2023 data to:
  - Previous years, as some data has been subject to quality improvement processes.
  - Pre-2006 data, as this data was not subject to the revision process.
- Comparison of NSW data with previous years is not currently recommended, as the State had a high number of open cases at the time of coding. The number of suicide deaths in NSW will likely increase when the first revision is applied to the 2023 data (due early 2025).



# National summary

- In 2023, there were **3,214** deaths by suicide with an age-standardised rate of **11.8** per 100,000.
- There were **2,419** male deaths with an age-standardised rate of **18.0** per 100,000.
- There were **795** female deaths with an age-standardised rate of **5.8** per 100,000.



*Data sourced from the Australian Bureau of Statistics (ABS) Causes of Death data on 10.10.2024.*

*\*Age-standardised rate per 100,000.*



# General summary

## 2023

In 2023, there were **3,214** deaths by suicide with an age-standardised rate of **11.8 per 100,000**.

This equates to an average of **8.8\*** deaths by suicide in Australia each day.

There were **2,419** male deaths at an age-standardised rate of **18.0 per 100,000**.

There were **795** female deaths at an age-standardised rate of **5.8 per 100,000**.

## 2022

In 2022, there were **3,288** deaths by suicide with an age-standardised rate of **12.4 per 100,000**.

This equates to an average of **9.0\*** deaths by suicide in Australia each day.

There were **2,480** male deaths at an age-standardised rate of **18.9 per 100,000**.

There were **808** female deaths at an age-standardised rate of **6.1 per 100,000**.

## 2021

In 2021, there were **3,197** deaths by suicide with an age-standardised rate of **12.2 per 100,000**.

This equates to an average of **8.8\*** deaths by suicide in Australia each day.

There were **2,398** male deaths at an age-standardised rate of **18.5 per 100,000**.

There were **799** female deaths at an age-standardised rate of **6.1 per 100,000**.

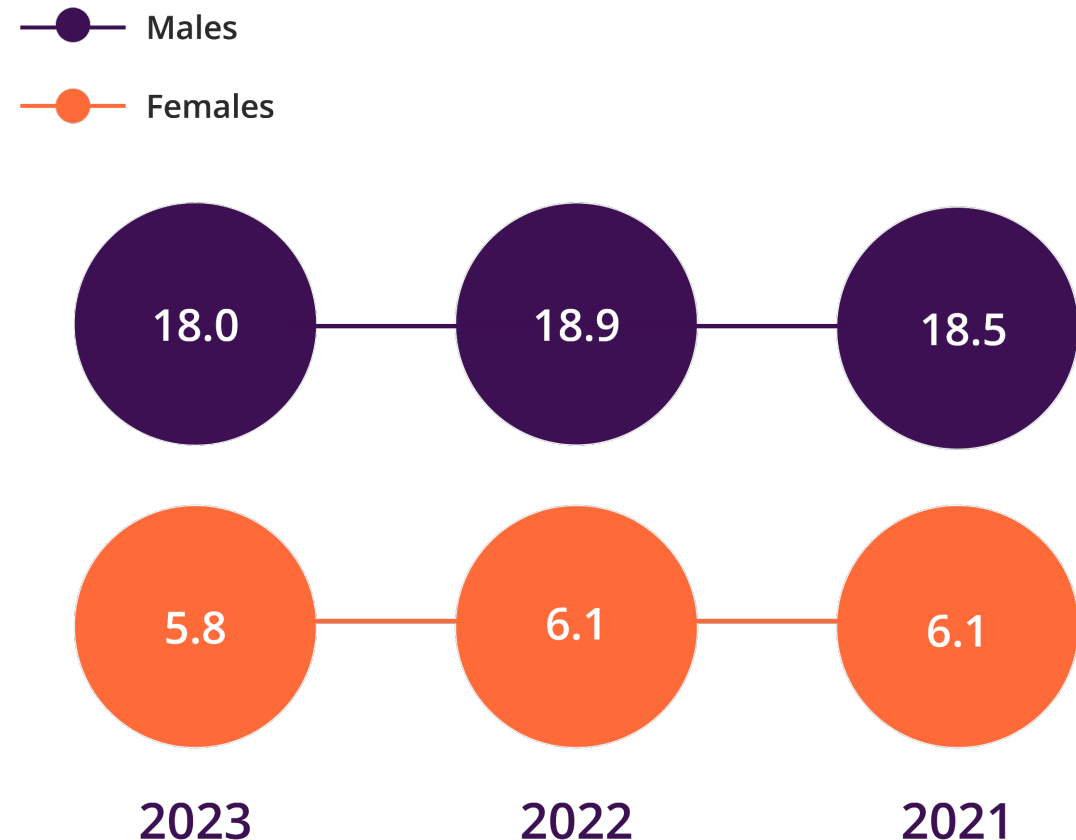
*2021 data have been subject to revision; 2022 data are preliminary revised; and 2023 data are preliminary.*

*\*This figure is calculated by Everymind. We recommend using with caution.*



## General summary

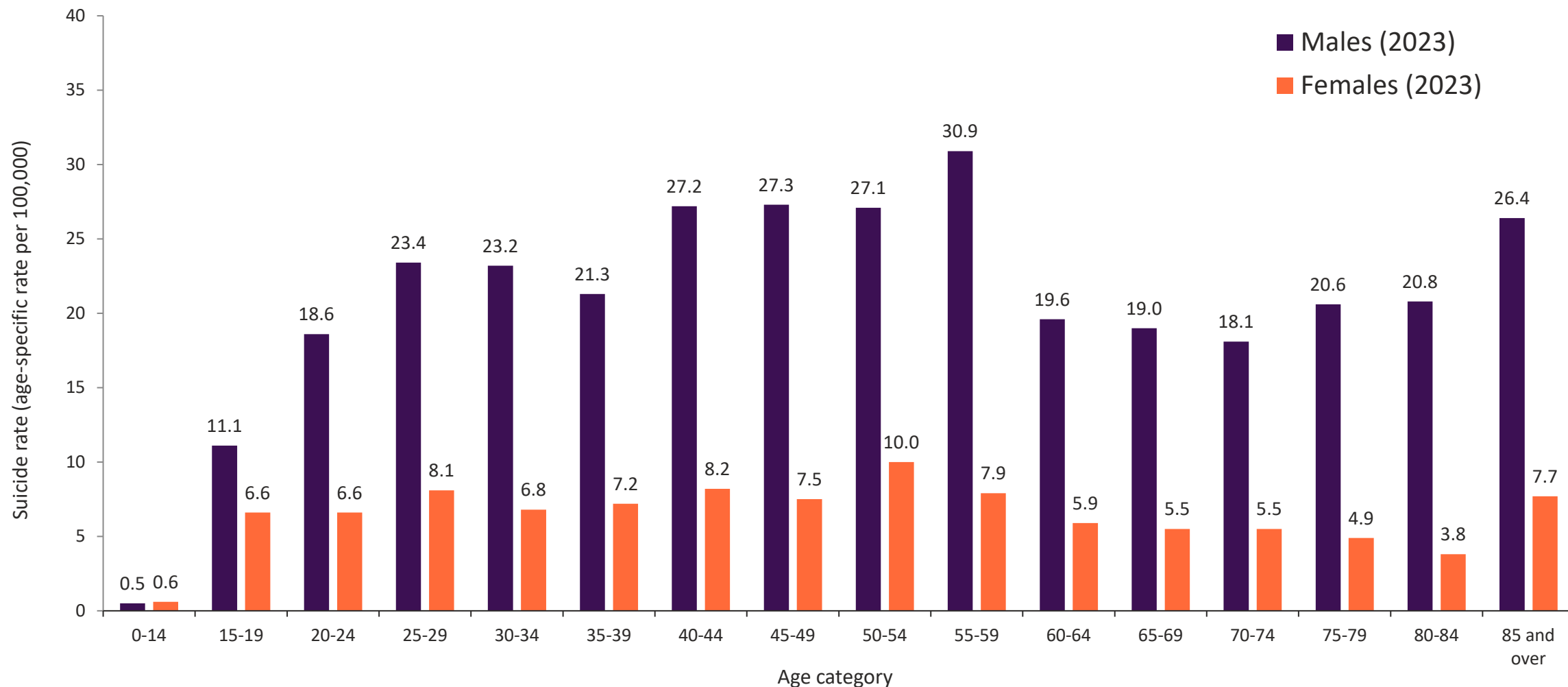
- In 2023, there were 3,214 deaths by suicide. This preliminary number is expected to increase due to the high number of open cases in NSW; care should be taken when comparing to previous years.
- The age standardised rate in 2023 is 11.8 per 100,000.
- More than three-quarters (75.3%) of people who died by suicide were male.
- More than 80% (82.5%) of people who died by suicide in 2023 were aged under 65.



*2021 data have been subject to revision; 2022 data are preliminary revised; and 2023 data are preliminary. Rates listed above are age-standardised per 100,000 people.*

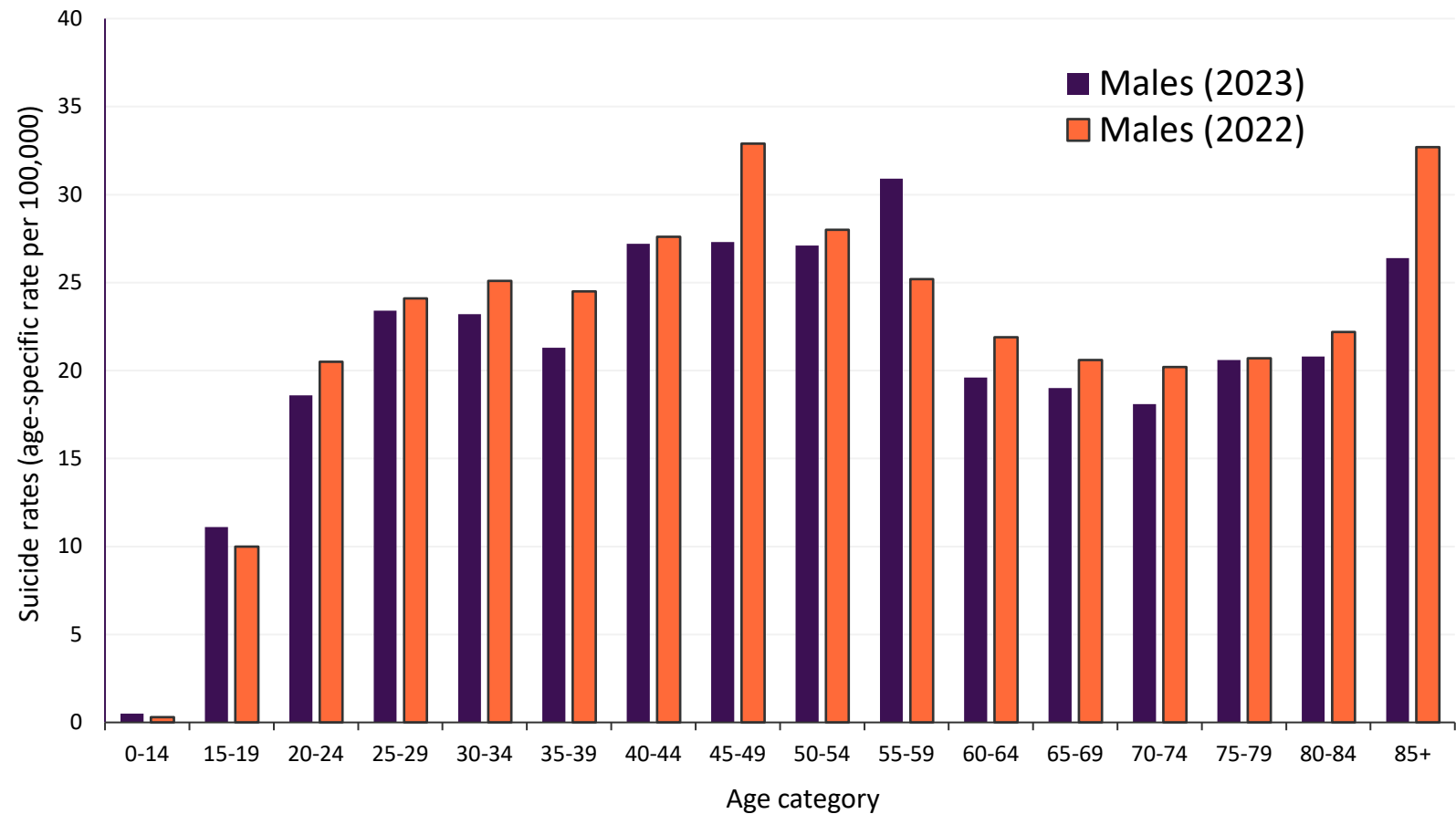


# General summary: Age-specific suicide rates, 2023



## General summary: males

- Males aged 55-59 years had the highest age-specific suicide rate and accounted for 9.5% of suicides of males.
- Males aged 45-49 years accounted for the largest proportion of deaths due to suicide (9.9%).
- Suicide was the 11th leading cause of death for males in 2023.
- While some suicide rates for males appear to have decreased since 2022, comparisons are not currently recommended due to the high number of open cases in NSW.

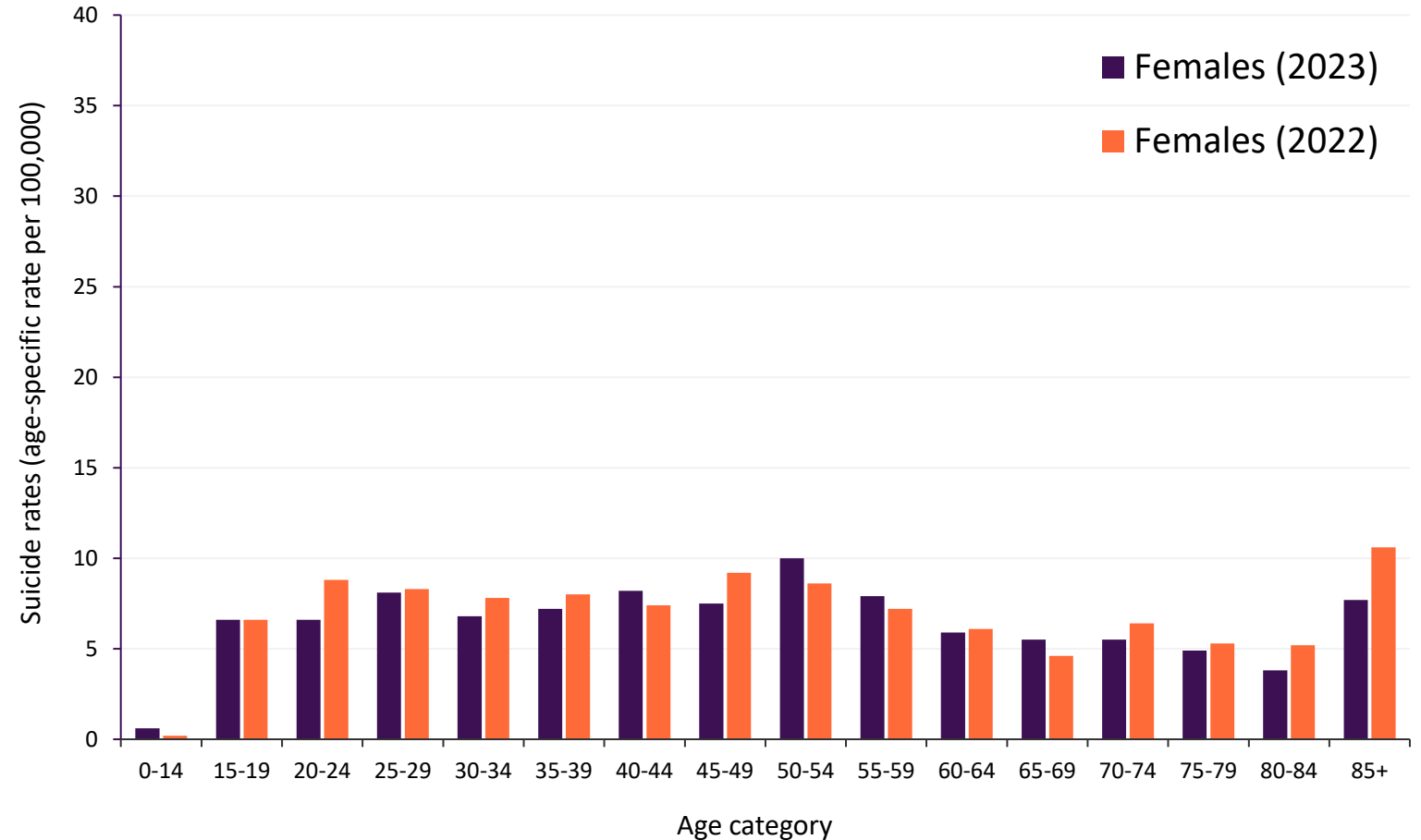


*2022 data are preliminary revised; 2023 data are preliminary.*



## General summary: females

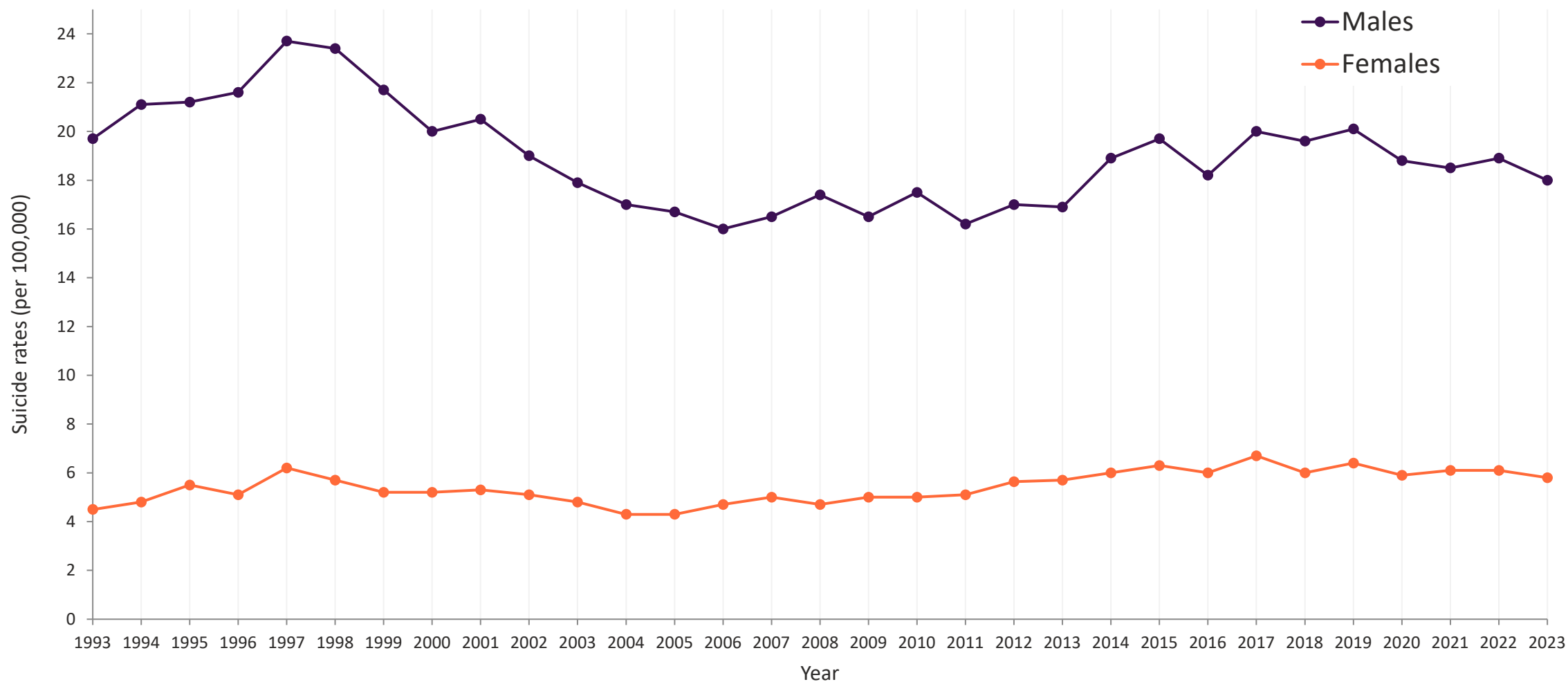
- Females aged 50-54 years had the highest age-specific suicide rate (10.0 deaths per 100,000) and accounted for the largest proportion of female suicide deaths (10.7%).
- Between 2022 and 2023, females aged 50-54 years also had the largest increase in their age-specific suicide rate (up 1.4 deaths per 100,000).
- Suicide was the 26th leading cause of death for females in 2023.



*2022 data are preliminary revised; 2023 data are preliminary.*



# Age-standardised suicide rates, 1993-2023



2013 – 2020 data are final. 2021 data have been subject to revision; 2022 data are preliminary revised; and 2023 data are preliminary.

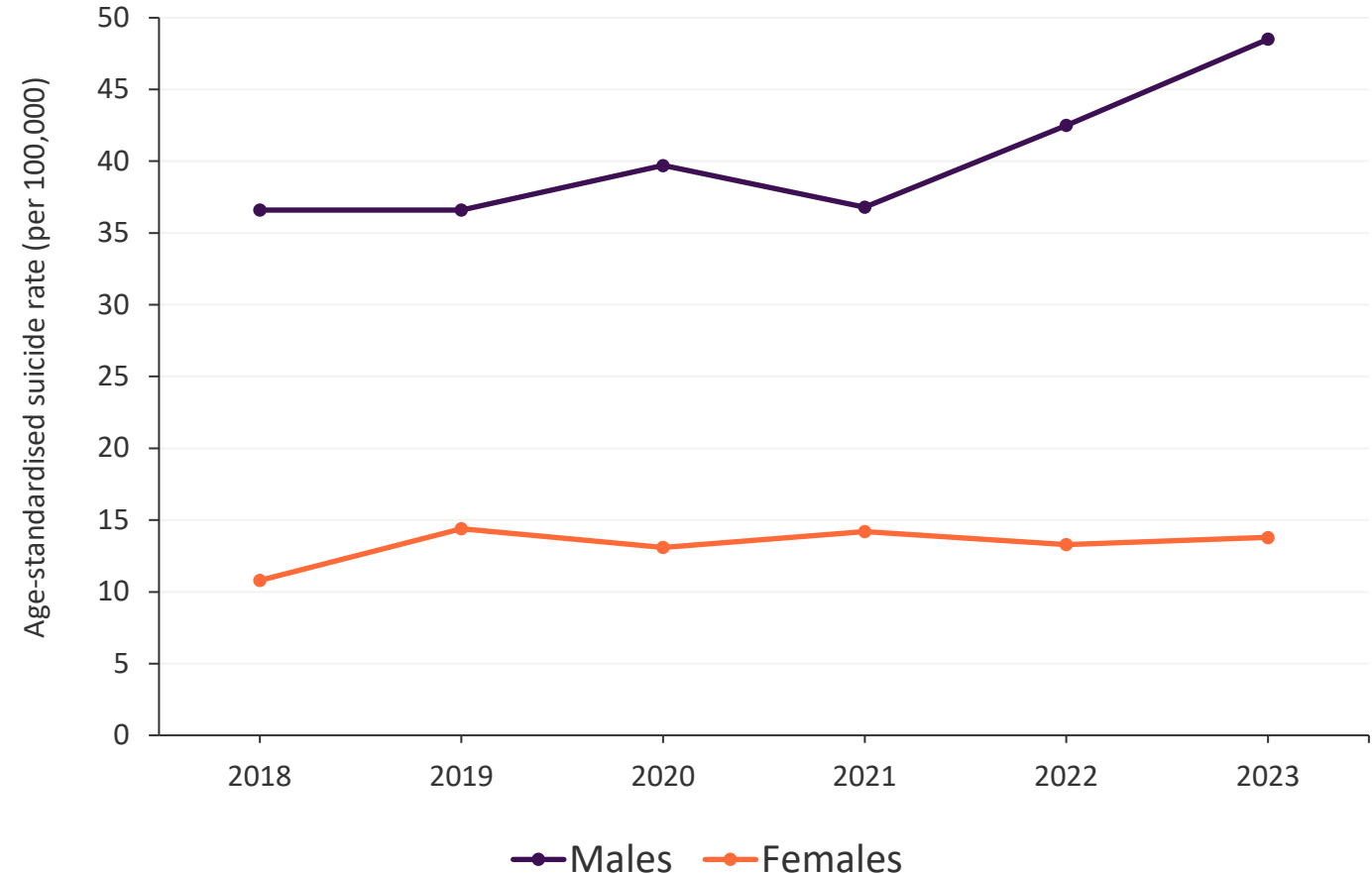


# Aboriginal and Torres Strait Islander people



The Centre of Best Practice in  
**Aboriginal & Torres Strait Islander**  
**Suicide Prevention**

- In 2023, **275** Aboriginal and Torres Strait Islander people died by suicide.
- The median age of death was **33 years**.
- In 2023, using data from New South Wales, Victoria, Queensland, Western Australia, South Australia and Northern Territory, Aboriginal and Torres Strait Islander men (**48.5 per 100,000**) had a higher age-standardised suicide rate compared to women (**11.3 per 100,000**).



*\*Age-standardised suicide rates are compiled from the jurisdictions of NSW, Qld, WA, SA, Vic and NT. Due to changes in Indigenous death identification in NSW in 2022, use caution when comparing to previous years.*

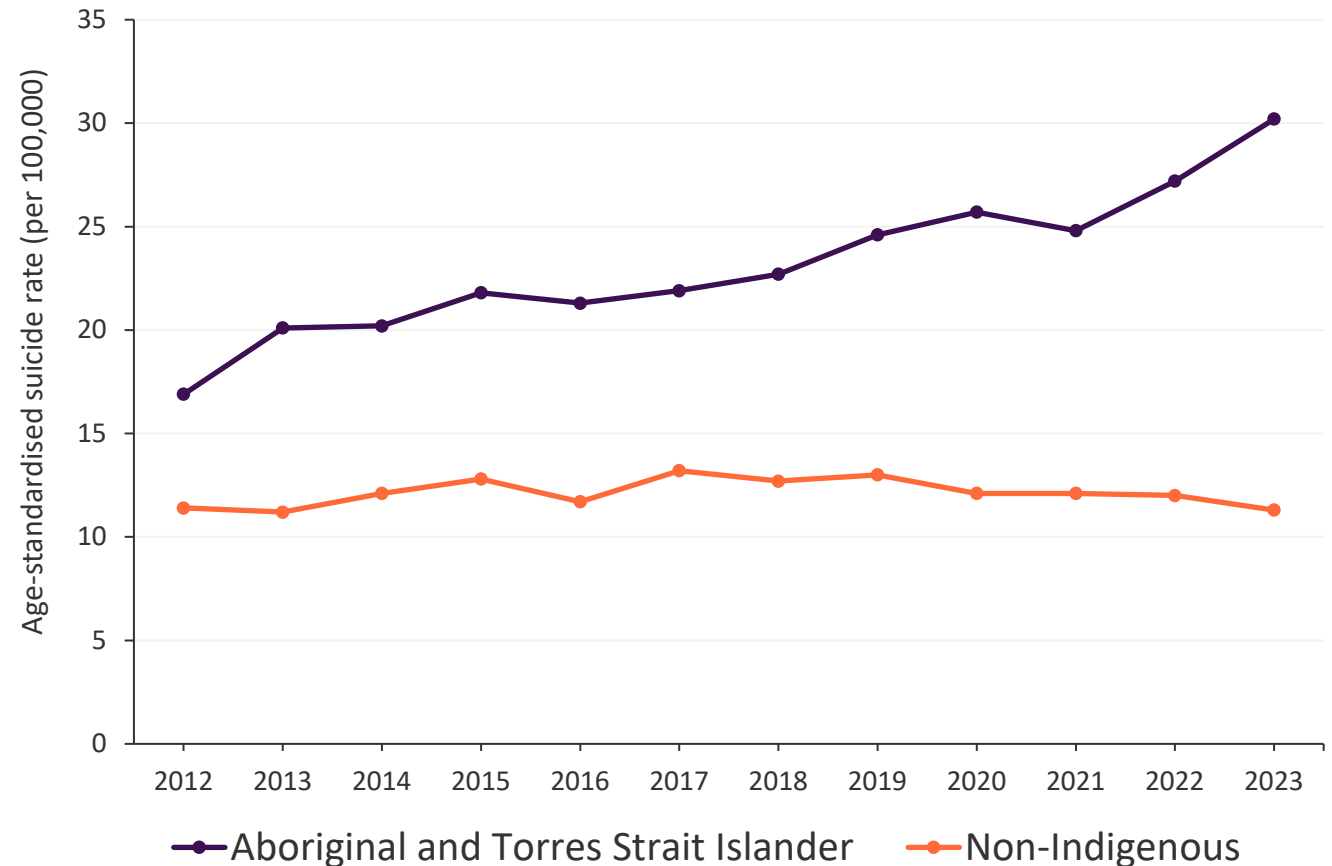


# Aboriginal and Torres Strait Islander people compared to non-Indigenous people



The Centre of Best Practice in  
**Aboriginal & Torres Strait Islander**  
**Suicide Prevention**

- Since 2020, Aboriginal and Torres Strait Islander people had a suicide rate **more than double** that of non-Indigenous people.
- Using data from New South Wales, Queensland, Western Australia, South Australia and Northern Territory, the age-standardised suicide rate for Aboriginal and Torres Strait Islander people was **30.2 per 100,000** in 2023.

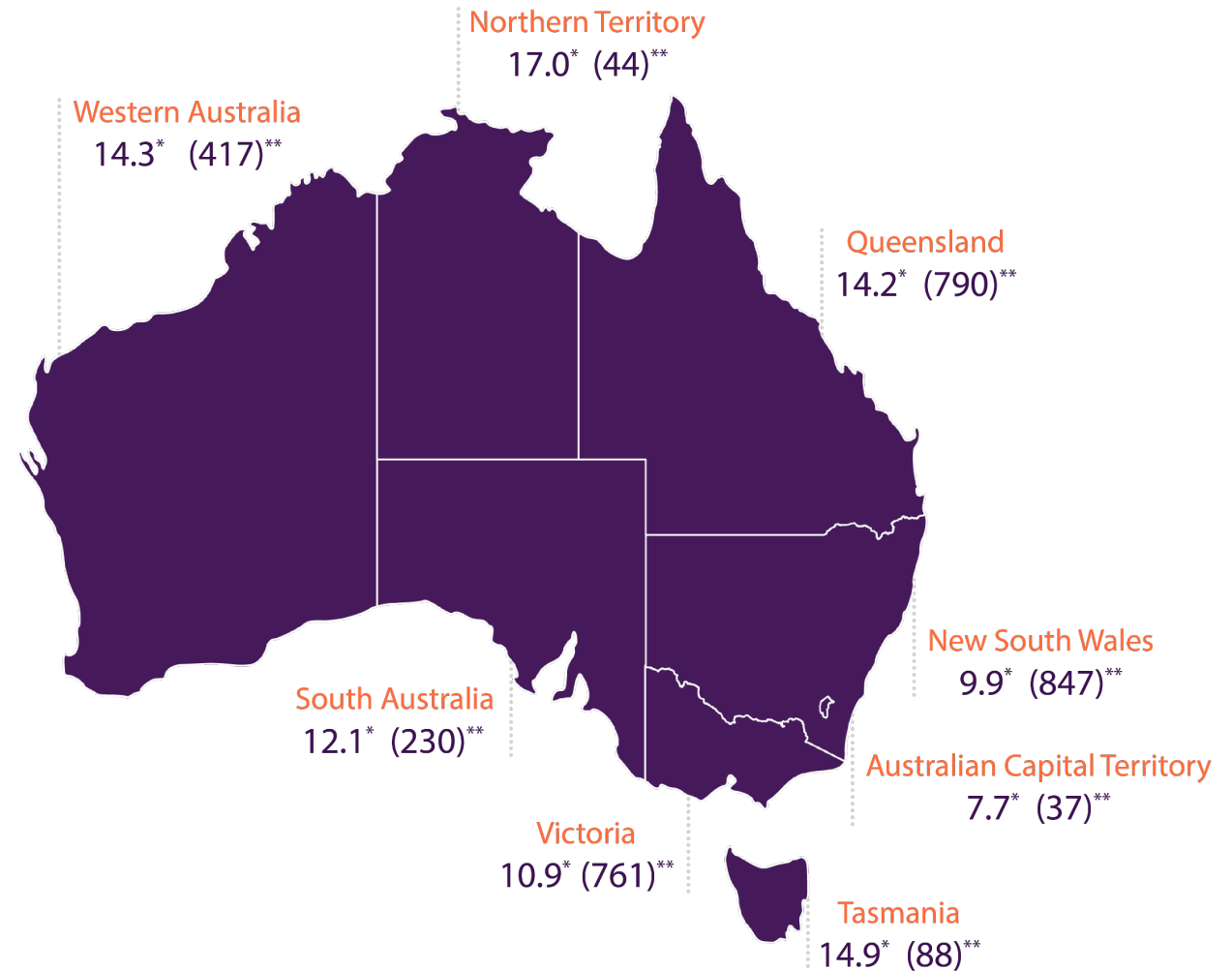


*Age-standardised suicide rates are compiled from the jurisdictions of NSW, Qld, WA, SA, and NT. Due to changes in Indigenous death identification in NSW in 2022, use caution when comparing to previous years.*



## State and territory summary

- Between 2022 and 2023, the suicide rate increased in Western Australia and Tasmania. The rate in Victoria and Queensland was similar to the 2022 rate. Rates appeared to decrease for South Australia and the Northern Territory, but the number of suicides remained similar to 2022. Comparison with previous years is not recommended for NSW due to the high number of open cases.
- Three-quarters of people who died by suicide had a usual residence in either New South Wales (846), Queensland (790) or Victoria (761).
- Australian territories recorded the highest rate of suicide (Northern Territory, 17.0 per 100,000 people) and the lowest (Australian Capital Territory, 7.7 per 100,000).

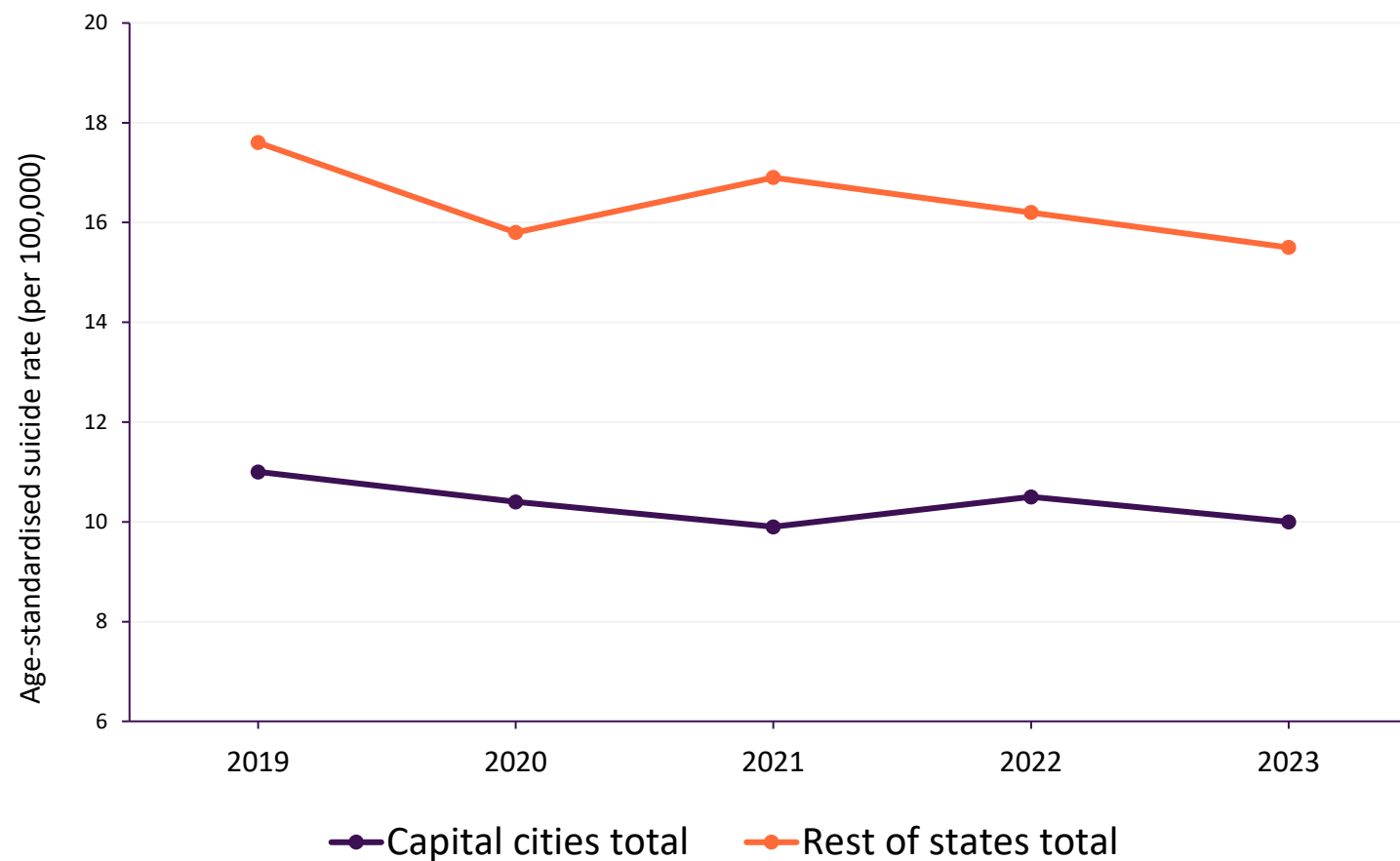


2021 data are revised; 2022 data are preliminary revised; 2023 is preliminary data.  
\*Age-standardised rate per 100,000. \*\*Number of deaths.



# Greater capital cities total and rest of states total

In all states and territories, with the exception of Tasmania, suicide rates were lower in greater capital cities than the rest of states or territories.



2019 and 2020 data are final and no longer revised. 2021 data have been subject to revision.  
2022 data are preliminary revised and 2023 data are preliminary.



# Suicide by remoteness

- More than 28% of Australia's population live in regional and remote areas where suicide rates are consistently higher than rates in Australia's major cities.
- Major cities had the lowest suicide rate across all years (2019-2023).
- In 2023, the suicide rate for males living in remote and very remote Australia (32.9 per 100,000 people) was more than double the rate for males living in major cities (14.9 per 100,000 people).

## Remote and Very Remote Australia



## Outer Regional Australia



## Inner Regional Australia



## Major Cities of Australia



■ Male  
■ Female

*Age-standardised rates based on fewer than 20 deaths not available for publication.  
Age-standardised death rates; 'Major cities in Australia' excludes Darwin and Hobart.*



## Risk factors

- In 2023, 83.3% of people who died by suicide had at least one risk factor reported, with an average of four factors mentioned.
- The types of risk factors experienced by a person can vary across their life. Mood disorders (including depression) were the most common risk factor overall, and in those aged between 25 and 84 years. Limitations of activities due to illness and disability continues to be the most common risk factor for those aged 85 years and over.

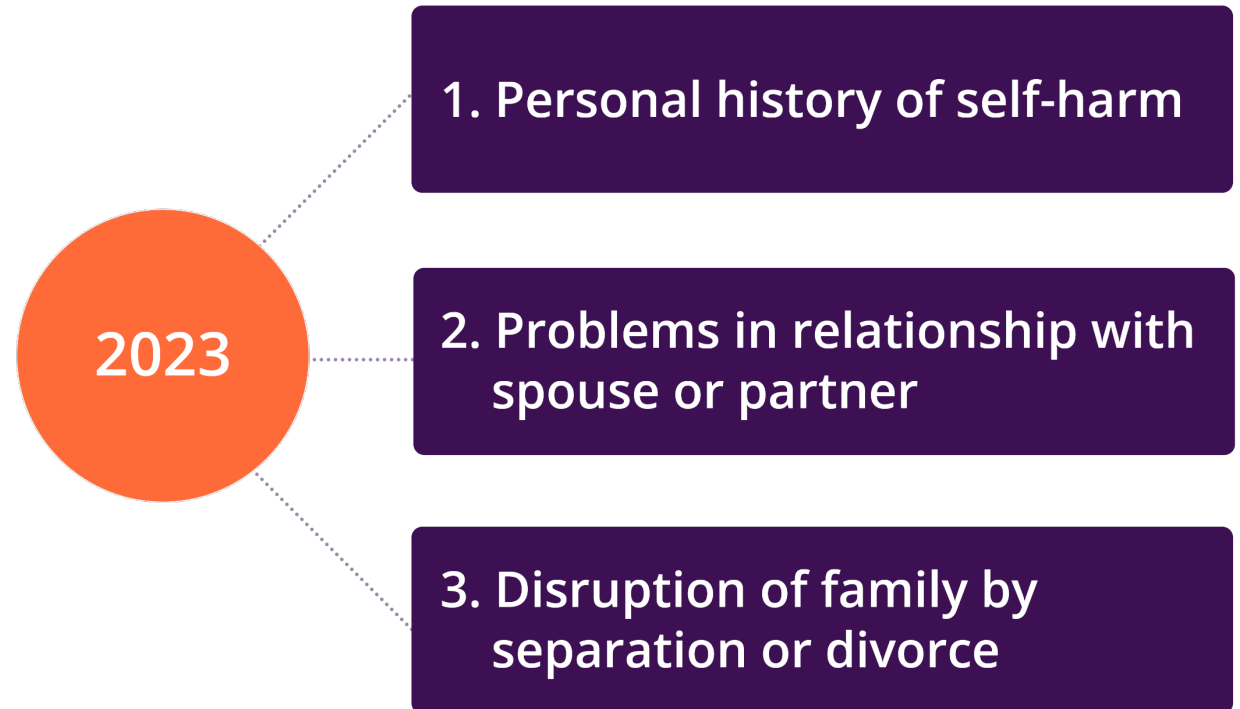
### **Most commonly reported risk factors across all ages in 2023:**

- Mood disorders (including depression) (**37.5%**)
- Suicide ideation (shared thoughts with others) (**29.5%**)
- Problems in spousal relationship circumstances (**23.7%**).
- Personal history of self-harm (**21.3%**)
- Anxiety and stress-related disorders (**19.3%**)



# Psychosocial risk factors

- Psychosocial risk factors are social processes and social structures that can interact with a person's thoughts, behaviour or health.
- In 2023, 67.4% of suicide deaths (66.5% for males and 70.1% for females) in Australia have at least one psychosocial risk factor reported.
- Psychosocial risk factors associated with suicide were largely age dependent and differed throughout the lifespan.



# Suicide risk factors by remoteness

Factors contributing to elevated suicide rates in regional and remote Australia are multifaceted and may be influenced by social, economic, health and environmental conditions specific to these regions.

## **For those who died by suicide in the five-year period 2019-2023:**

- People living in major cities were more likely to have a specific mental health condition recorded (45.2%) compared to those in remote and very remote Australia (30.8%).
- Alcohol and other drug use was most commonly mentioned as a risk factor for those living in remote and very remote Australia. For example, acute alcohol use and intoxication was mentioned in 36.3% of these suicides; acute psychoactive substance use and intoxication was mentioned in 28.9% of these suicides.
- Problems related to employment or housing were more common in major cities and inner regional areas.



# Suicide during the COVID-19 pandemic

- Since the beginning of the COVID-19 pandemic (2020-2023), there have been **504** people who died by suicide, who had the COVID-19 pandemic mentioned in either a police, pathology or coronial finding report. This represents **3.9%** of all suicides during the 2020-2023 period.
- In 2023, **29** people who died by suicide had the COVID-19 pandemic identified as a risk factor.
- For most people with issues relating to the COVID-19 pandemic, it did not appear as an isolated risk factor. They had an average of **7.4 risk factors** mentioned including **3.7 psychosocial risk factors**.

## **For the 29 people who died by suicide in 2023 with issues relating to COVID-19 as a risk factor:**

- 44.8% also had problems related to employment or unemployment
- 41.4% also had a mood disorder (including depression)
- 37.9% also had anxiety and stress related disorders
- 34.5% also had problems related to social environment
- 31.0% also experienced suicidal ideation (thoughts).



## Suicide by country of birth

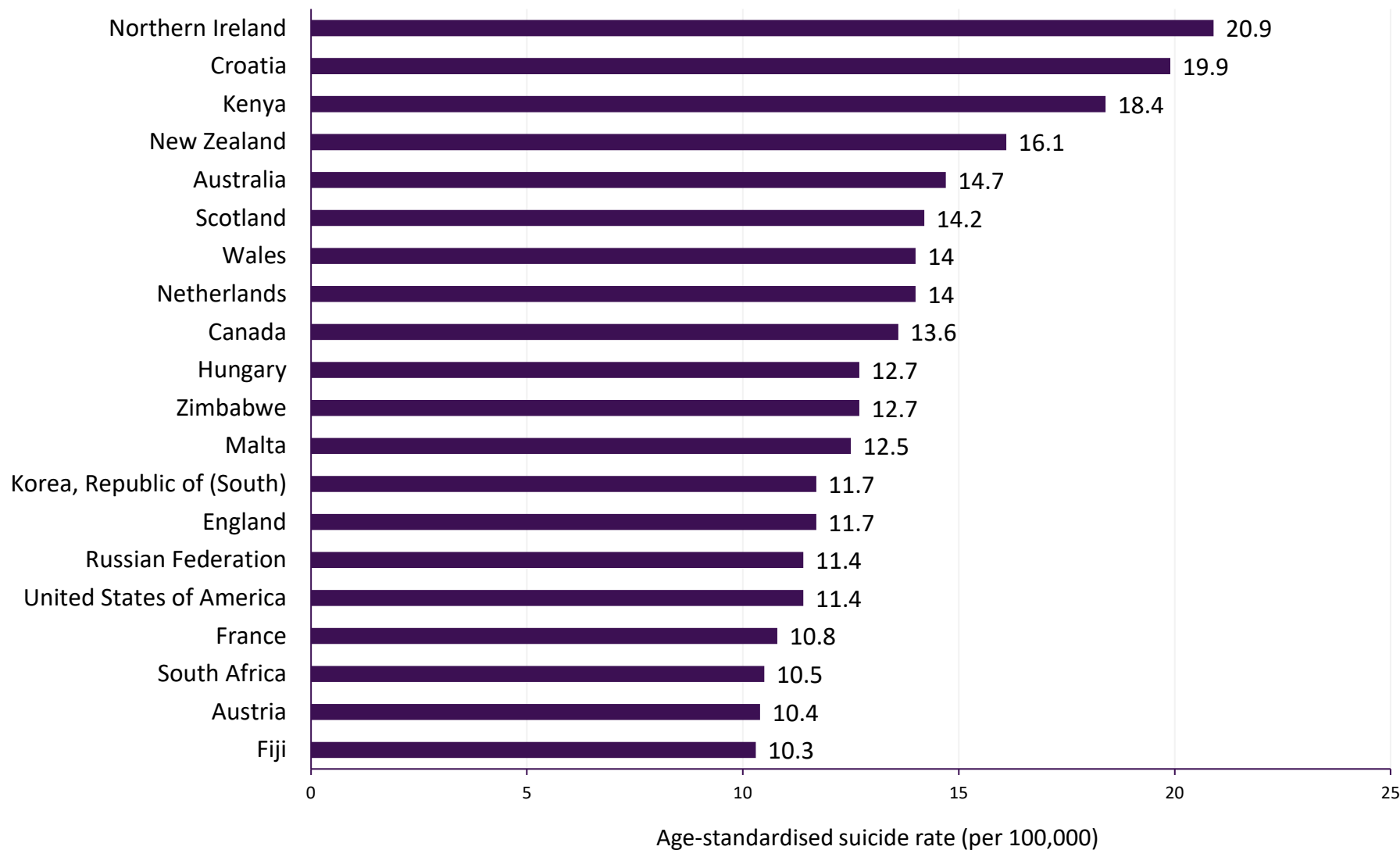
- People from culturally and linguistically diverse backgrounds may have unique experiences in relation to mental health concerns and suicide, including cultural and family views and how health services are accessed.
- Death registrations do not directly collect information on whether a person was part of a multicultural community. Data items from the death registration which can provide some indication of cultural and linguistic diversity are country of birth and years of residence in Australia.
- While these two variables do not provide complete information on suicide for people of culturally and linguistically diverse backgrounds, they do provide some additional insights into suicide in Australia.

### **For the five-year period 2019 to 2023:**

- Those who were born in Australia had an age-standardised rate of **14.7 deaths per 100,000** people.
- Those who were born overseas had an age-standardised rate of **8.4 deaths per 100,000** people.
- Those born in Northern Ireland, Croatia, Kenya and New Zealand had a higher suicide rate than those born in Australia.



# Age-standardised suicide rate by country of birth, 2019-2023



*Country of birth uses the Standard Australian Classification of Countries (SACC).*



# Help-seeking

## Adult

---

**Lifeline** 13 11 14 | Text 0477 13 11 14 (24/7) | [lifeline.org.au](https://lifeline.org.au)

**13 YARN** 13 92 76 | [13yarn.org.au](https://13yarn.org.au)

Aboriginal and Torres Strait Islander service available 24/7

### **Suicide Call Back Service**

1300 659 467 | [suicidecallbackservice.org.au](https://suicidecallbackservice.org.au)

**Beyond Blue** 1300 224 636 | [beyondblue.org.au/forums](https://beyondblue.org.au/forums)

**StandBy Support After Suicide** 1300 727 247

**QLife** 1800 184 527 | [qlife.org.au](https://qlife.org.au)

LGBTIQ+ service available 3pm - midnight

**Mensline** 1300 78 99 78 | [mensline.org.au](https://mensline.org.au)

## Youth

---

**Kids Helpline** 1800 551 800 | [kidshelpline.com.au](https://kidshelpline.com.au)

**headspace** 1800 650 890 | [headspace.org.au](https://headspace.org.au)

**ReachOut** [reachout.com.au](https://reachout.com.au)

## Other resources

---

**Head to Health Mental Health Portal** [headtohealth.gov.au](https://headtohealth.gov.au)

**SANE online forums** [saneforums.org](https://saneforums.org) | 1800 187 236 (10am-10pm)

**Embrace Multicultural Mental Health** [embracementalhealth.org.au](https://embracementalhealth.org.au)

**National Alcohol and other Drug Hotline** 1800 250 185

### **National Gambling Helpline**

1800 858 858 | [gamblinghelponline.org.au](https://gamblinghelponline.org.au)





[mindframe@health.nsw.gov.au](mailto:mindframe@health.nsw.gov.au)

[mindframe.org.au](http://mindframe.org.au)

[X @MindframeMedia](https://twitter.com/MindframeMedia)

An  **EVERYMIND** program

