

Statistical bulletin

Suicides in England and Wales: 2021 registrations

Registered deaths in England and Wales from suicide analysed by sex, age, area of usual residence of the deceased, and suicide method.



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1 . Main points

- In 2021, there were 5,583 suicides registered in England and Wales, equivalent to a rate of 10.7 deaths per 100,000 people; while this was statistically significantly higher than the 2020 rate of 10.0 deaths per 100,000 people, it was consistent with the pre-coronavirus (COVID-19) pandemic rates in 2019 and 2018.
- The fall in the suicide rate in 2020 was likely to have been driven by a [decrease in male suicides at the start of the coronavirus pandemic, and delays in death registrations because of the pandemic](#).
- The latest figures include deaths that occurred in 2020 and were subsequently registered in 2021 owing to disruption to coroners' inquests; this provides evidence that the suicide rate did not increase because of the coronavirus pandemic.
- Around three-quarters of suicides were males (4,129 deaths; 74.0%), consistent with long-term trends, and equivalent to 16.0 deaths per 100,000, the rate for females was 5.5 deaths per 100,000.
- Among females, the age-specific suicide rate was highest in those aged 45 to 49 years (7.8 deaths per 100,000), while among males it was highest in those aged 50 to 54 years (22.7 deaths per 100,000).
- Females aged 24 years or under have seen the largest increase in the suicide rate since our time series began in 1981.
- In 10 out of the 11 previous years, London has had the lowest suicide rate of any region of England (6.6 deaths per 100,000), while the highest rate was in the North East with 14.1 deaths per 100,000 in 2021.

If you are a journalist covering a suicide-related issue, please consider following the [Samaritans' media guidelines on the reporting of suicide](#) because of the potentially damaging consequences of irresponsible reporting. In particular, the guidelines advise on terminology and include links to sources of support for anyone affected by the themes in the article.

If you are struggling to cope, please call Samaritans for free on 116 123 (UK and the Republic of Ireland) or contact other sources of support, such as those listed on the [NHS help for suicidal thoughts](#) webpage. Support is available around the clock, every day of the year, providing a safe place for you, whoever you are and however you are feeling.

Statistician's comment

"We saw a significant increase in the rate of deaths registered as suicide in 2021. This increase was the result of a lower number of suicides registered in 2020, because of the disruption to coroners' inquests caused by the coronavirus pandemic. The 2021 suicide rate was similar to the pre-coronavirus pandemic rates in 2018 and 2019. The latest available evidence shows that suicide rates did not increase because of the coronavirus pandemic, which is contrary to some speculation at the time."

James Tucker, Head of Analysis in the Health and Life Events Division, Office for National Statistics

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Statistics on suicide are based on the year of death registration – because of registration delays, around half of these deaths will have occurred in the previous year.

2 . Suicides in England and Wales

5,583 suicides were registered in 2021 in England and Wales, 6.9% higher than in 2020 (5,224 deaths), and equivalent to an age-standardised mortality rate (ASMR) of 10.7 deaths per 100,000 people. While this was statistically significantly higher than the 2020 ASMR (10.0 deaths per 100,000 people), it was consistent with the pre-coronavirus (COVID-19) pandemic rates in 2019 and 2018.

The latest rate has returned to pre-coronavirus pandemic levels following a decrease in 2020 that was likely to be caused by two factors; [a decrease in male suicides at the start of the coronavirus pandemic](#), and delays in death registrations because of the pandemic.

Males continued to account for three-quarters of suicide deaths registered in 2021 (4,129 male deaths compared with 1,454 female deaths), as seen since the mid-1990s. In 2021, the suicide ASMR for males in England and Wales was 16.0 deaths per 100,000; consistent with rates between 2018 and 2020.

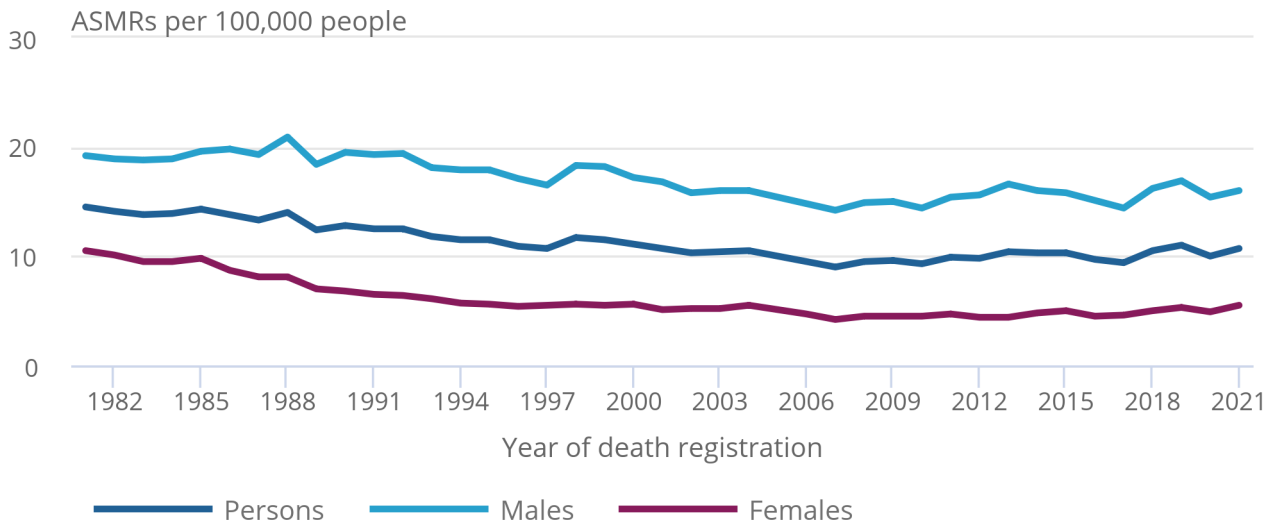
For females, there were 5.5 deaths per 100,000 registered in England and Wales in 2021. This is consistent with rates between 2018 and 2020.

Figure 1: Suicide rates registered in 2021 are similar to pre-pandemic years levels in 2018 and 2019

Age-standardised suicide rates by sex, England and Wales, registered between 1981 and 2021

Figure 1: Suicide rates registered in 2021 are similar to pre-pandemic years levels in 2018 and 2019

Age-standardised suicide rates by sex, England and Wales, registered between 1981 and 2021



Source: Office for National Statistics – Suicides in England and Wales

Notes:

1. The National Statistics definition of suicide is given in [Section 8: Glossary](#).
2. Figures are for persons aged 10 years and over.
3. Includes deaths of non-residents.
4. Figures are for deaths registered, not deaths occurring in each calendar year. Because of the time taken to complete an inquest, it can take months or even years for a suicide to be registered. More details are available in [Section 6](#).

3 . Suicides by country and region

For suicides registered in 2021, the age-standardised mortality rate (ASMR) in England was 10.5 deaths per 100,000 people (5,219 registered deaths), statistically similar compared with the ASMR between 2018 and 2020.

In Wales, there were 12.7 deaths per 100,000 people in 2021 (347 registered deaths). While higher than the ASMR in 2020 (10.3 deaths per 100,000), the difference was not statistically significant because the relatively smaller number of deaths resulted in more statistical uncertainty. There were increased registration delays in Wales compared with previous years, and registration delays in Wales were also higher than in England.

By English region, the highest ASMR was in the North East (14.1 deaths per 100,000 people), which is the case in 6 out of the last 10 preceding years. The North East, North West, Yorkshire and The Humber and the South West regions had statistically significantly higher ASMRs of suicide compared with the overall England ASMR (10.5 per 100,000). The lowest rate in 2021 was in London (6.6 deaths per 100,000 people), which was statistically lower than any English region. The lowest London rate, since records started in 1981, occurred in 2021 and was statistically lower than the London rate in 2018 and 2019.

In 2021, ASMRs in the North West (12.9 per 100,000 people) increased significantly compared with 2020 (10.1 per 100,000, respectively). This was the only statistically significant change in English regions.

ASMRs for males and females tend to follow broadly similar patterns to that of all persons, with further detail in our [accompanying datasets](#).

Figure 2: The North East had the highest suicide rate in 2021, as in previous years

Age-standardised suicide rates for English regions and Wales, deaths registered in 2021

Notes:

1. Figures are for persons usually resident in each area, based on postcode boundaries as of February 2022.
2. See Figure 1 for other relevant notes.

Download the data

[.xlsx](#)

4 . Suicide patterns by age

Among women, those aged 45 to 49 years had the highest age-specific suicide rate at 7.8 per 100,000 in 2021 (146 registered deaths). Among men, those aged 50 to 54 years had the highest age-specific suicide rate at 22.7 per 100,000 (456 deaths). Figure 3 shows age-specific suicide rates, for 5-year age groups, for all persons since 1981.

Figure 3: The highest suicide rates were seen among persons aged 45 to 54 years

Age-specific suicide rates by five-year age groups, England and Wales, registered between 1981 and 2021

Notes:

1. Age-specific suicide rate per 100,000 population.
2. Unreliable rates, with fewer than twenty deaths, are excluded.
3. See Figure 1 for other relevant notes.

Download the data

[.xlsx](#)

Since around 2010, males aged 45 to 64 years have had the highest suicide rate

Looking at trends over time in broad age groups, males aged 10 to 24 years have had the lowest rates since 1981. In 2021, the rate in this group was 8.0 deaths per 100,000.

Since 2010, men aged 45 to 64 years have had the highest age-specific suicide rates. In 2021, the rate in this group was 20.1 deaths per 100,000. Males aged 25 to 44 years had the highest suicide rates between 1995 and 2009, whereas males aged 75 years and above had the highest rates at the beginning of our series between 1981 and 1991.

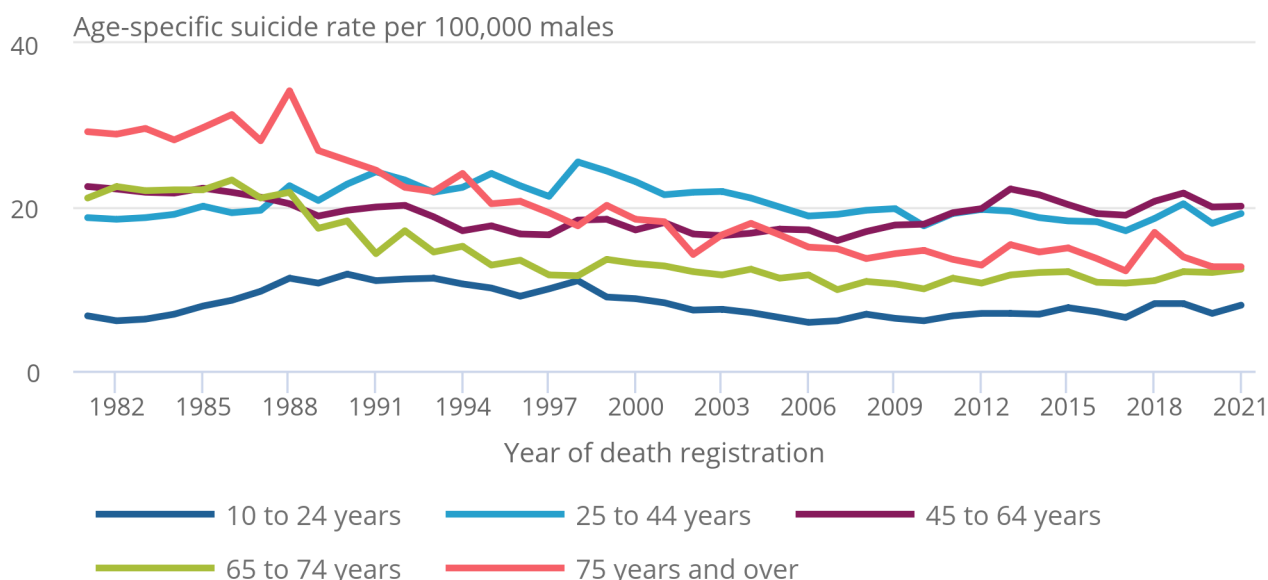
Male rates for all age groups were higher in 2021 than in 2020, except for those aged 75 years and over where the rate remained unchanged. However, none of these increases were statistically significant.

Figure 4: Men aged 45 to 64 years have had the highest rates of suicide since 2010

Age-specific suicide rates by broad age groups, males, England and Wales, registered between 1981 and 2021

Figure 4: Men aged 45 to 64 years have had the highest rates of suicide since 2010

Age-specific suicide rates by broad age groups, males, England and Wales, registered between 1981 and 2021



Source: Office for National Statistics – Suicides in England and Wales

Notes:

1. Age-specific suicide rate per 100,000 males. 2. See Figure 1 for other relevant notes.

From 1981, there has been a substantial fall over time in suicide rates among females aged 45 years and over.

In 2021, females aged 10 to 24 and 75 years and over had the lowest age-specific suicide rate (3.6 deaths per 100,000 females), while those aged 45 to 64 years had the highest (6.7 deaths per 100,000 females).

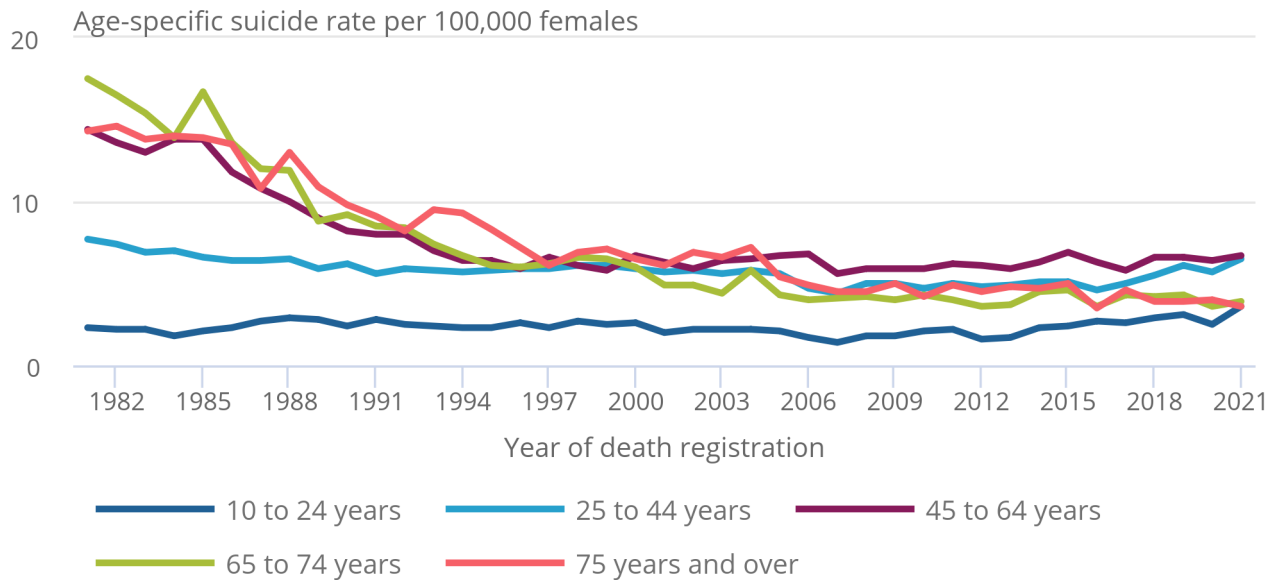
Suicide rates among young females have been steadily increasing over several years. While year-on-year changes might not be statistically significant, comparison between 2015 and 2021 shows a statistically significant increase for those aged 10 to 24 and 25 to 44 years.

Figure 5: Suicide rates among females aged 45 years and over have fallen since 1981

Age-specific suicide rates by broad age groups, females, England and Wales, registered between 1981 and 2021

Figure 5: Suicide rates among females aged 45 years and over have fallen since 1981

Age-specific suicide rates by broad age groups, females, England and Wales, registered between 1981 and 2021



Source: Office for National Statistics – Suicides in England and Wales

Notes:

1. Age-specific suicide rate per 100,000 females.
2. See Figure 1 for other relevant notes.

5 . Suicide methods

The percentage of suicides caused by hanging, strangulation and suffocation has increased in recent years

The most common method of suicide in England and Wales for both males and females continued to be hanging, strangulation and suffocation (all grouped together). This method accounted for 58.4% of all suicides in 2021 (3,258 out of 5,583 registered deaths). The second most common method continued to be poisoning and accounted for 20.5% of all suicides in 2021 (1,147 out of 5,583 deaths).

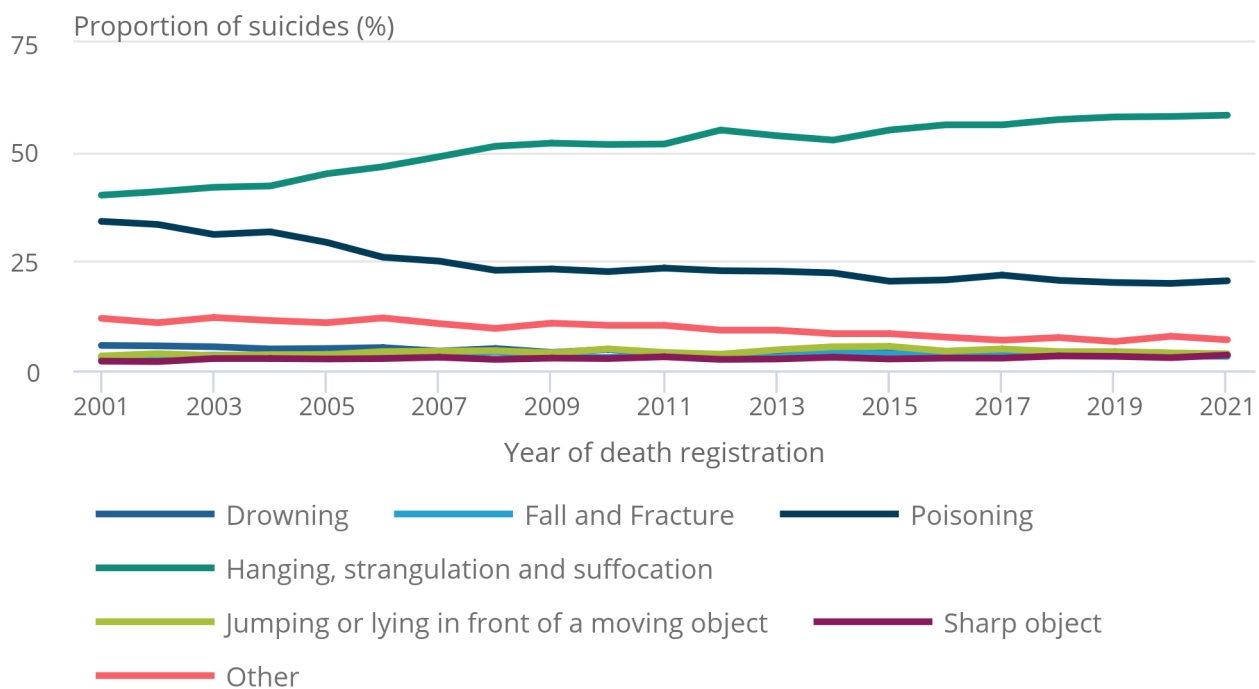
Our [bulletin based on 2019 suicide registrations](#) describes male and female trends in suicide methods over time. Our [bulletin based on 2020 suicide registrations](#) describes how suicide method varies by age group.

Figure 6: The proportion of suicides caused by hanging has been increasing over time

Proportion of suicides by method, England and Wales, registered between 2001 and 2021

Figure 6: The proportion of suicides caused by hanging has been increasing over time

Proportion of suicides by method, England and Wales, registered between 2001 and 2021



Source: Office for National Statistics – Suicides in England and Wales

Notes:

1. “Other” category includes methods of suicide such as firearm, smoke, fire and flames, and unspecified events.
2. The Notes worksheet in the [Suicides in England and Wales dataset](#) has more information regarding definitions.
3. See Figure 1 for other relevant notes.

6 . Registration delays

In England and Wales, all deaths by suicide are certified by a coroner and cannot be registered until an inquest is completed. This results in a delay between the date the death occurred and the date of registration. Around half of the deaths reported in this bulletin will have occurred in the previous year.

For suicides, the median registration delay for England was 180 days in 2021 (up from 165 days in 2020) and 291 days for Wales (up from 214 days in 2020). The median registration delay in both countries increased to its highest level since 2001, and was likely explained by the continuing disruption to inquests caused by the coronavirus (COVID-19) pandemic.

7 . Suicides in England and Wales data

[Suicides in England and Wales](#)

Dataset | Released 6 September 2022

Number of suicides and suicide rates, by sex and age, in England and Wales, registered from 1981 to 2021. Information on conclusion type is provided, along with the proportion of suicides by method and the median registration delay.

[Suicides in England and Wales by local authority](#)

Dataset | Released 6 September 2022

Number of suicides, suicide rates and median registration delays, by local authority in England and Wales, registered from 2001 to 2021.

[Suicide occurrences, England and Wales](#)

Dataset | Released 6 September 2022

Number of suicides and suicide rates, by sex and age, for England and Wales occurring from 1981 to 2020.

8 . Glossary

Suicide

This release is based on the National Statistics definition of suicide. This includes all deaths from intentional self-harm for persons aged 10 years and over, and deaths caused by injury or poisoning where the intent was undetermined for those aged 15 years and over. Further information on the definition can be found in our [Suicide rates in the UK QMI](#).

Registration delay

Figures are based on deaths registered in each calendar year, rather than the date on which the death occurs. The difference between these dates is known as the registration delay.

Age-specific mortality rate

Age-specific mortality rate is the total number of deaths per 100,000 people of an age group, used to allow comparisons between specified age groups.

Age-standardised mortality rate

Age-standardised mortality rate (ASMR) in this bulletin refers to a weighted average of the age-specific mortality rates per 100,000 people and standardised to the 2013 European Standard Population. Age-standardised mortality rates allow for differences in the age structure of populations and therefore allow valid comparisons to be made between geographic areas, between the sexes, and over time.

Statistical significance

The term "significant" refers to statistically significant changes or differences based on unrounded figures. Significance has been determined using the 95% [confidence intervals](#), where instances of non-overlapping confidence intervals between figures indicate the difference is unlikely to have arisen from random fluctuation.

9 . Measuring the data

Mortality statistics are derived from information provided when deaths are certified and registered. These statistics are compliant with the [Code of Practice for Statistics](#) and are designated as National Statistics.

More quality and methodology information on strengths, limitations, uses, and how the data were created is available in our [Mortality statistics in England and Wales QMI](#), our [Suicide rates in the UK QMI](#) and our [User guide to mortality statistics](#).

Populations

For 2021, mortality rates are calculated using the number of deaths and [national](#) and [sub-national](#) population projections (2018-based) provided by the Office for National Statistics (ONS) Population Projections Unit. 2021 mid-year population estimates were unavailable at time of publication, because of census-related delays.

For all previous years, mortality rates are calculated using the number of deaths and [mid-year population estimates](#) provided by the ONS Population Estimates Unit. Population estimates are based on the decennial England and Wales census estimates and use information on births, deaths, and migration to estimate the mid-year population in non-census years.

Comparing with other statistics

Scotland and Northern Ireland each produce their own suicide statistics. These statistics are compiled [by National Records of Scotland \(NRS\)](#) and the [Northern Ireland Statistics and Research Agency \(NISRA\)](#), and are comparable with those in this bulletin. The Office for Health Improvement and Disparities (OHID) provide data, via their [Suicide Prevention Profiles](#), on a wide range of indicators related to suicide, including mortality and years of life lost due to suicide.

Monitoring suicide rates is a requirement under the Sustainable Development Goals (SDGs). The statistics in this bulletin will be used to monitor progress towards these goals. UK data on the SDG indicators can be explored on our [SDGs reporting platform](#).

User-requested data

Special extracts and tabulations of suicide (and other causes of mortality) data for England and Wales are available to order for a charge (subject to legal frameworks, disclosure control, resources, and agreement of costs, where appropriate). Email health.data@ons.gov.uk to make an enquiry. Our [charging policy](#) is also available.

10 . Strengths and limitations

Strengths

Age-standardised rates allow for differences in age structure of populations and therefore allow valid comparisons to be made between the sexes and geographies.

Reliable age-standardised rates can be calculated for groups that have at least 20 deaths, reducing the likelihood of the findings being a result of chance. In our [accompanying suicide rate datasets](#), rates have been marked as unreliable where there are fewer than 20 deaths, and we have not produced age-specific rates for age groups with fewer than three deaths.

Suicide deaths are compiled using information supplied when a death is registered, which gives complete population coverage. The release uses the National Statistics definition of suicide, which is consistently used by UK government departments, agencies, and the devolved administrations.

Quality assurance procedures have been undertaken throughout the analysis to minimise the risk of error.

Limitations

Registration delays

In England and Wales, when someone dies unexpectedly, a coroner investigates to establish the cause of death. This "inquest" is a process that can take years in some cases. The length of time it takes to hold an inquest creates a gap between the date of death and the registration, referred to as a registration delay. For deaths caused by suicide, this generally means that around half of the deaths registered each year will have occurred in the previous year or earlier.

Change in the standard of proof used by coroners

In England and Wales, when someone dies unexpectedly, a coroner investigates to establish the cause of death. In July 2018, [the standard of proof used to determine whether a death was caused by suicide was lowered](#) to the "civil standard"; balance of probabilities. Previously a "criminal standard" was applied; beyond all reasonable doubt.

[Since the change in the standard of proof, suicide rates have not seen unprecedented increases](#). Recent increases have been seen among English males and females, but these increases started before this change. Whenever a change in suicide rates occurs, the reasons are complex and will rarely be because of one factor alone.

See our [Suicide rates in the UK QMI](#) for more information on strengths and limitations.

11 . Related links

[Deaths related to drug poisoning in England and Wales: 2021 registrations](#)

Bulletin | Released 3 August 2022

Deaths related to drug poisoning in England and Wales from 1993 to 2020, by cause of death, sex, age and substances involved in the death.

[Suicide in Wales since 1981](#)

Article | Released 27 June 2019

A compendium of analysis, including suicide over time by age, sex and method and new analysis of suicide risk by occupation in Wales.

[Drug-related deaths and suicide in prison custody in England and Wales: 2008 to 2016](#)

Article | Released 25 July 2019

The risk of suicide and drug-related deaths among prisoners, based on confidential matching of data from HM Prison and Probation Service and Office for National Statistics (ONS) mortality records.

[Middle-aged generation most likely to die by suicide and drug poisoning](#)

Article | Released 13 August 2019

How age links to suicide and drug-related deaths.

[Who is most at risk of suicide?](#)

Article | Released 7 September 2017

Created in collaboration with the Samaritans, this article discusses factors such as marital status and levels of deprivation in relation to suicide.

[Estimating suicide among higher education students, England and Wales](#)

Article | Released 31 May 2022

An article created using mortality data linked to Higher Education Statistics Agency (HESA) data to estimate suicides among higher education students by sex, age and ethnicity.

[Suicide by occupation, England: 2011 to 2015](#)

Article | Released 17 March 2017

Analysis of deaths from suicide in different occupational groups for people aged 20 to 64 years, based on deaths registered in England between 2011 and 2015.

[Official suicide statistics for Scotland](#)

Web page | Updated as new data become available

Official suicide statistics for Scotland, provided by National Records of Scotland (NRS).

[Official suicide statistics for Northern Ireland](#)

Web page | Updated as new data become available

Official suicide statistics for Northern Ireland, provided by Northern Ireland Statistics and Research Agency (NISRA).

[Samaritans latest suicide data](#)

Web page | Updated as new data become available

Pulls together data on deaths by suicide for the UK and Republic of Ireland.

[Coroners statistics: 2020](#)

Report | Released 13 May 2021

Annual data on deaths reported to coroners, including inquests and post-mortems held, inquest conclusions recorded and finds reported to coroners under treasure legislation.

12 . Cite this statistical bulletin

Office for National Statistics (ONS), released 06 September 2022, ONS website, statistical bulletin, [Suicides in England and Wales: 2021 registrations](#).