

# **New Zealand Suicide Trends**

Mortality 1921–2003  
hospitalisations for intentional  
self-harm 1978–2004

**Public Health Intelligence  
Monitoring Report No. 10**

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# Executive Summary

*New Zealand Suicide Trends: Mortality 1921–2003, Hospitalisations for intentional self-harm 1978–2004* summarises trends in suicide deaths in the New Zealand population between 1921 and 2003, and intentional self-harm hospitalisations between 1978 and 2004.

Reliable suicide mortality statistics back to 1921 are now available, and are presented here for the first time. Hospitalisation statistics have been collated in New Zealand since the late 1800s. However, this publication focuses on hospitalisation data from 1978 onwards because changes over time in the way the data have been reported and collected limit the presentation of the information.

In this publication, three-year moving average rates are used that are plotted on the midpoint year. The numbers and rates reported for hospitalisations for intentional self-harm in this report are not directly comparable with the annual publications of suicide data (*Suicide Facts* publications) because of changes in the methods used to count and report the numbers.

## Overall trends

In the period 1921–2003, there are two peaks in the overall suicide rates. The first was 1927–1929 at 18.5 deaths per 100,000 population. This was followed by a steep period of decline to 1942, and relatively stable rates to the mid-1980s, after which the rate rose again to a second peak of 16.7 per 100,000 population in 1996–1998. Since then, the rate of suicide has declined to 14.2 per 100,000 population in the 2001–2003 period.

The rate of hospitalisation for intentional self-harm<sup>1</sup> shows a similar trend to the increases in the suicide death rate since the mid-1970s. In the 1978–1980 period, there were 76.6 hospitalisations per 100,000 population or an average of 2149 hospitalisations per year, however, by 1994–1996 the hospitalisation rate had increased to 104.0 hospitalisations per 100,000 population or an average of 3312 hospitalisations per year, which is 36 percent higher than the 1978–1980 period. After a change in International Classification of Disease (ICD) coding of hospitalisation data in 1999 and 2000, the rate of intentional self-harm hospitalisation increased further. In 1998–2000, there were 113.5 hospitalisations per 100,000 population (3703 hospitalisations on average per year), which increased to 150.5 hospitalisations per 100,000 population (4932 hospitalisations on average per year) for the 2002–2004 period.

However, the overall trends in suicide deaths and intentional self-harm hospitalisations conceal trends within age, sex and ethnic groups. Many of the overall suicide death and hospitalisation trends described in this publication are predominantly driven by changes in the pattern of suicide in younger age groups, and by differences between males and females.

<sup>1</sup> Hospitalisation for intentional self-harm (including those that later die in hospital) is an internationally recognised proxy measure for attempted suicide.

## Trends by sex

The overall trends in suicide mortality are driven by male rates of suicide, however, the trends in hospitalisation are driven by the female rates.

Throughout the period 1921–2003, the male rate of suicide has changed considerably, ranging from a high of 29.2 per 100,000 population in 1927–1929 to a low of 13.5 per 100,000 population in 1962–1964 and 1964–1966. In contrast, the female rate has been a lot more stable, fluctuating in a range from 7.6 per 100,000 population in 1968–1970 to 4.7 per 100,000 population in 1950–1954. These differences mean that, over time, the male rate of suicide has been at least double that of the female rate (the lowest the disparity has been is 1.9:1 in the 1962–1964 period). The disparity was at its greatest in the 1930–1932 period at 4.9 male deaths for every female death, however, a similar level of disparity was reached more recently in 1990–1992 (4.2:1). Since then, this ratio has declined to 3.2 male deaths for every female death in 2001–2003, largely because of a decrease in the male rates.

The disparity between the sexes in the mortality rates is reversed for hospitalisations. Over the 1978–2004 period, the female rate of hospitalisation steadily increased from 98.4 per 100,000 population in 1978–1980 to 202.6 in 2002–2004. Most of the increase occurred since the early 1990s. In contrast, the male rate has been relatively stable, although it, too, has slowly increased throughout the time period from 55.5 per 100,000 population in 1978–1980 to 96.9 per 100,000 population in 2002–2004. Over time, the disparity between the hospitalisation rates has been relatively consistent, varying between 1.4 and 1.7 female hospitalisations for every male hospitalisation, however, this has increased to 2.1 in the most recent (2002–2004) period.

## Trends by ethnic group

Since 2000,<sup>2</sup> the highest suicide rate was for Māori (17.7 and 17.8 per 100,000 population in 2000–2002 and 2001–2003 respectively), followed by European/Other, Pacific then Asian ethnic groups. The disparity between Māori and all other ethnic groups is particularly high for Māori males aged under 35 years. In contrast, this disparity disappears for Māori males over 45 years of age.

Māori females had consistently higher rates of hospitalisation than all other combinations of sex and ethnic group. Māori males had higher rates of hospitalisation than non-Māori males.

<sup>2</sup> Trends in mortality by ethnicity for the total population have only been presented from 2000 onwards. New Zealand Census–Mortality Study (NZCMS) adjusters can be applied to mortality counts from 1996–1999 to address the undercount for Māori and Pacific peoples, but adjusters are not available for Asian peoples. It is not valid to compare adjusted (Māori and Pacific) and unadjusted (Asian) mortality figures. From 2000 onwards, comparisons across all the ethnic groups are possible because adjusters are not necessary. For more information on ethnicity classification, see the ‘Methods and Data Sources’ section.

## **Trends by age group**

Over the long term, there have been major changes in the age group patterns of suicide. In the period 1921–1987, suicide deaths were most common in those aged over 45 years, particularly early in the period. However, in 1987, this changed and suicide deaths became most common in those aged 15–24 years, followed by those aged 25–34 years. These changes in the age group pattern began in the mid-1970s, where suicide in the younger age groups began to increase steadily, and those in the older age groups declined. Overall, the differences in suicide rates between age groups have reduced over time.

## **Trends by socioeconomic status**

Over the last 20 years, there has been a clear and consistent trend of higher rates of suicide in the more deprived areas of New Zealand. In these areas, the suicide rates peaked in the mid-to-late 1990s (at twice that of the least deprived areas), but they have since fallen. This may be attributable to suicide rates in the least deprived areas being higher now than at any other time in the last 20 years.

Rates of hospitalisation have increased since 1983–1985 in all levels of deprivation, with the least deprived areas showing the largest increases.

## **Trends by District Health Board**

There are no consistent trends in suicide and intentional self-harm hospitalisation rates across district health boards (DHBs). However, there is an indication that DHBs with high suicide rates have low rates of hospitalisation for intentional self-harm, while those with high rates of hospitalisation have low rates of suicide. However, given the relatively low numbers of suicide at the DHB level of analysis, any comparisons must be treated with caution.

## **Trends by method**

Over time, the three most consistent and common methods of suicide have been ‘hanging, strangulation and suffocation’, ‘firearms and explosives’, and ‘poisoning by gases and vapours or poisoning by solid or liquid substances’. Suicide by firearms was most prevalent prior to the 1960s, at which time suicide by ‘poisoning by solid or liquid substances’ became most prevalent through to 1979, after which suicide by ‘hanging, strangulation and suffocation’ has been the leading method, with rates far exceeding those for any other method throughout the time period.



# Introduction

Suicide is a serious health and social issue that has an immense impact on individuals, families/whānau and the community. It is an important indicator of mental health and wellbeing. Over the last 20 years, at least 350 New Zealanders have died from suicide every year, and at least 2100 per year have been hospitalised for intentional self-harm.

*Te Rau Hinengaro: The New Zealand Mental Health Survey* (Oakley Browne et al 2006) provides national estimates of rates of mental disorder in New Zealand for the first time. This survey estimated that about one-in-five (20.7 percent) people experienced a mental disorder in the past year, and about half the population (46.6 percent) are predicted to meet the criteria for a mental disorder by the time they reach 75 years. Further findings were that, of the 20.7 percent of people who experience a disorder in a 12-month period, 22.7 percent are serious or severe, 45.6 percent are moderate and 31.7 percent are mild, thus, 14.1 percent of the total population aged 16 and over have moderate–serious mental disorders. For the whole population, 15.7 percent reported having thought seriously about suicide at some time, and 4.5 percent reported having made a suicide attempt.

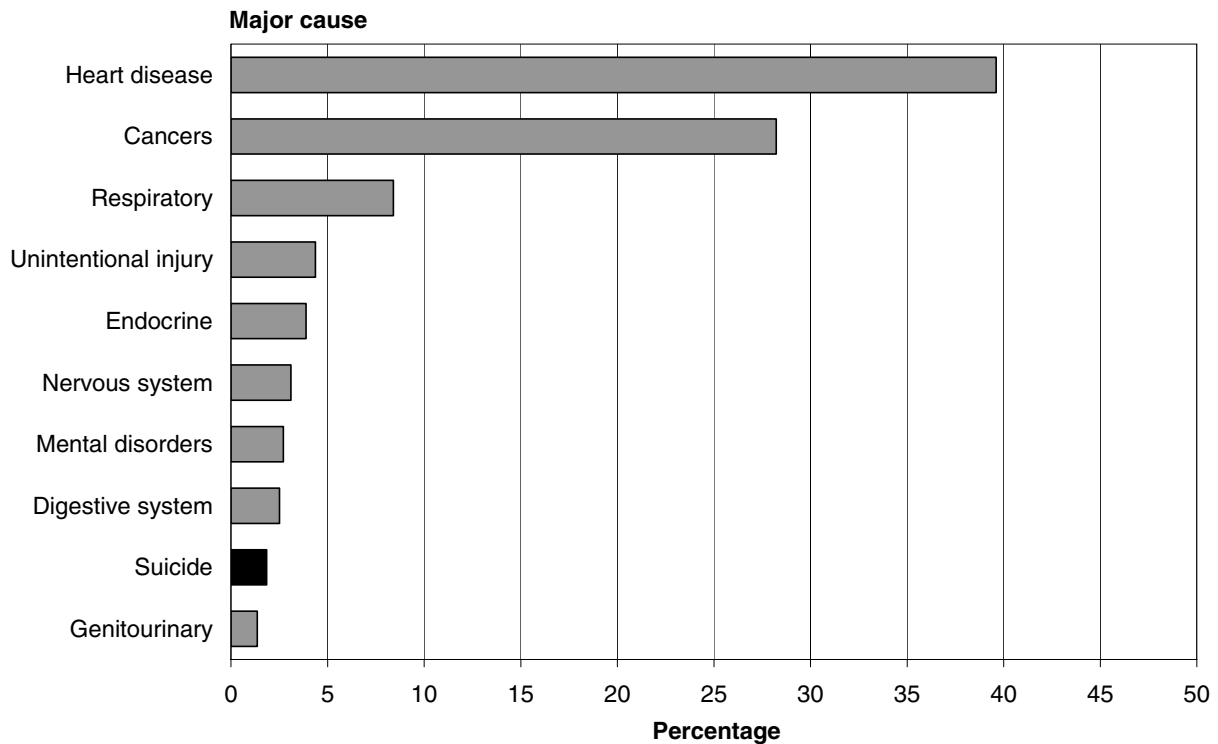
Reducing suicide and suicide attempt is a priority in the *New Zealand Health Strategy* (Minister of Health 2000) and the *New Zealand Injury Prevention Strategy* (Minister for ACC 2003). It is a specific aim of the *New Zealand Suicide Prevention Strategy 2006–2016* (Associate Minister of Health 2006).

*New Zealand Suicide Trends: Mortality 1921–2003, hospitalisations for intentional self-harm 1978–2004* adds to, and extends, the information presented in the *Suicide Trends in New Zealand 1978–1998* publication (Ministry of Health 2001). An important reason for publishing trends in suicide data is to inform prevention efforts and to show whether progress is being made to reduce the rate of suicidal behaviour, both overall and for specific population groups. Consequently, this document aims to contribute to providing baseline data for the evaluation of the *New Zealand Suicide Prevention Strategy 2006–2016* (Associate Minister of Health 2006).

This publication provides a descriptive summary of trends in suicidal behaviour in the New Zealand population from 1921 to 2003. It shows patterns of mortality and morbidity for suicide and intentional self-harm by population subgroups, but does not provide an explanation of the causes of suicidal behaviour. International and New Zealand research has found that the overwhelming majority of those who die by suicide or who make suicide attempts were experiencing mental health problems, which are often accompanied by other sources of life stress and difficulty. For further information on causal models of suicide in New Zealand, see *Suicide Prevention: A review of evidence of risk and protective factors, and points of effective intervention* (Beautrais et al 2005) and *Suicide Prevention in New Zealand: A contemporary perspective* (Collings and Beautrais 2005).

## Major causes of death

**Figure 1:** Leading causes of death for the total population, 2003

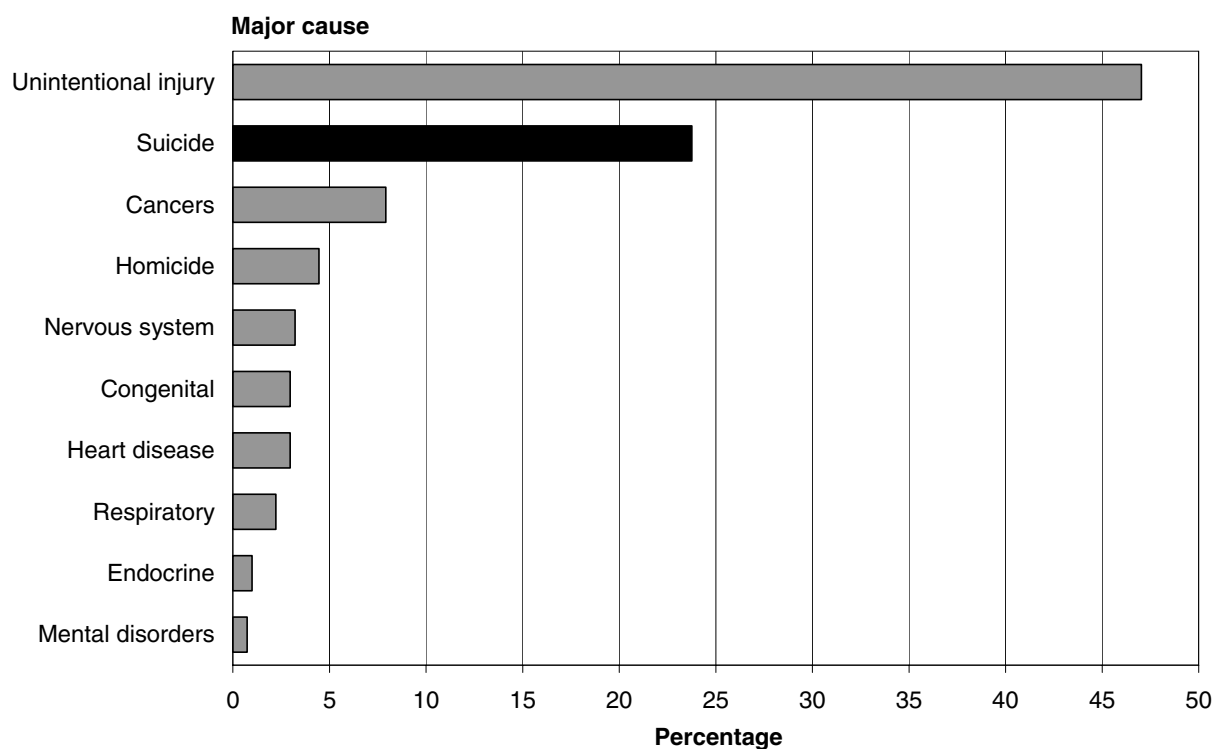


Source: New Zealand Health Information Service

Notes: Classification of death is determined according to the originating cause rather than the terminating condition.

In 2003, suicide was the ninth most common cause of mortality in New Zealand, accounting for 2.0 percent of all deaths (Figure 1).

**Figure 2:** Leading causes of death for youth, 15–24 years, 2003

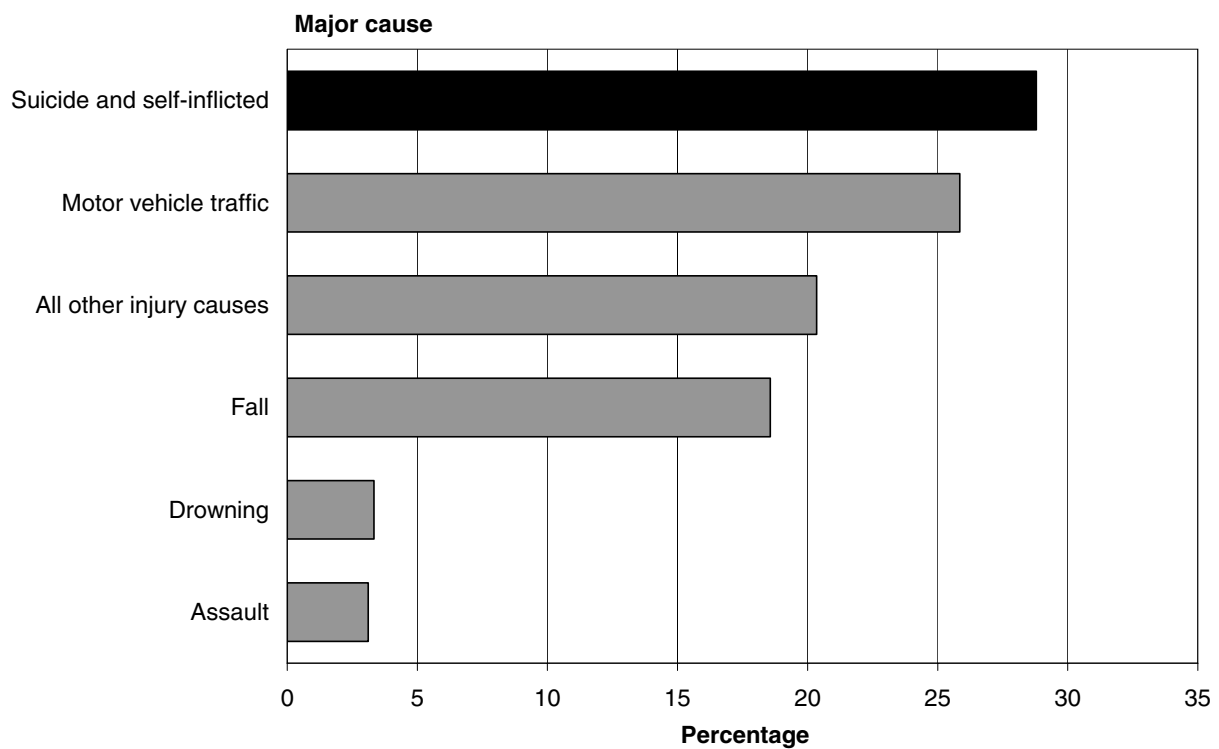


Source: New Zealand Health Information Service

Notes: Classification of death is determined according to the originating cause rather than the terminating condition.

In 2003, 23.8 percent of all deaths among 15–24-year-olds was attributed to suicide, the second-leading cause of death in this age group (Figure 2).

**Figure 3:** Major causes of fatal injuries for the total population, 2003



Source: New Zealand Health Information Service

In 2003, suicide and intentional self-inflicted injury made up the greatest proportion (28.8 percent) of all injury-related fatalities (Figure 3).



# Methods and Data Sources

## Data

Tables containing the number of suicide deaths and intentional self-harm hospitalisations across population subgroups are included in the Appendices.

## Population denominator

### Source

Denominator data were sourced from Statistics New Zealand (SNZ).

### Period of data

For the moving average mortality rates (1921–2003) in the historical context section the populations outlined below were used as denominators. The population figures were interpolated between the SNZ De Facto census populations from 1921–1936 using an optimal polynomial spline (SAS statistical software, procedure TPSPLINE). From 1937–2003, the estimated national population as at 30 June from SNZ was used.

For the remainder of the report for the hospitalisation (1978–2004) and mortality (1983–2003) moving average rates the straight-line Interpolated 30 June Census populations were used as denominators. The linear interpolation is performed between Census Usually Resident (UR) populations for each demographic group. These populations are based on the SNZ Census UR populations from 1981, 1986, 1991, 1996, 2001. For example, if the 1996 UR Census population for Māori, Male, 15–19 years in Census Area Unit 1 (CAU1) is 500 persons and the 2001 UR Census population is 1000 in CAU 1 for this same population subgroup, then the interpolated populations for 1997–2000 are 600, 700, 800 and 900 respectively. This method is continued to extrapolate beyond 2001. If the interpolation or extrapolation is less than zero the population is set to zero. It should be noted that this method does not account for the exponential nature of population increases or decreases, through events such as increased immigration, over particular time periods.

## Suicide deaths

### Source

Suicide data were sourced from the New Zealand Health Information Service (NZHIS).

### Definition

Classification of a death as suicide is subject to a coroner's inquiry, and only on completion of an inquest can a death be officially classified as suicide. In some cases, the inquest will be heard two-to-three years after the death, occasionally even later, particularly if there are other factors surrounding the death that need to be investigated first. Throughout this publication suicide deaths are referred to as suicides, deaths or *n* deaths per 100,000 population.

## Period of data

The period for which there is a more detailed presentation of suicide death data is 1983–2003. However, the data for the most recent year (2003) were provisional at the time of publication because a small number of deaths (18) were still subject to coroners' findings, for which a cause of death had not been assigned. Since the preparation of this report, final 2003 data have been published by NZHIS in the publication *Mortality and Demographic Data*,<sup>3</sup> which reports that total 2003 suicide-related deaths changed by two from 516 to 518. This change has not been incorporated in the mortality graphs and rates presented in this document.

## Ethnicity classification

The ethnic breakdown for the total population was Māori, Pacific peoples, Asian peoples and European/Other. Trends in mortality by ethnicity for the total population have only been presented from 2000 onwards. New Zealand Census–Mortality Study (NZCMS) adjustors can be applied to mortality counts from 1996–1999 to address the undercount for Māori and Pacific peoples, but adjustors are not available for Asian peoples. It is not valid to compare adjusted (Māori and Pacific) and unadjusted (Asian) mortality figures. From 2000 onwards, comparisons across all the ethnic groups are possible because adjustors are not necessary.

The pre-1996 undercounting occurred because ethnicity was recorded differently on death registration forms and in the Census. Ethnicity was based on a biological concept (ie, percentage of blood) on death registration forms, and a sociocultural concept (ie, cultural affiliation) in the Census. From September 1995, the death certificate included a comparable question to the self-identified ethnicity question in the 1996 Census, including allowing for multiple ethnic identities. Completion of the ethnic field on the death certificate also became mandatory at this time.

For further discussion on inconsistencies in ethnicity collection, refer to *Decades of Disparity: Ethnic Mortality Trends in New Zealand 1980–1999*<sup>4</sup> (Ajwani et al 2003).

For breakdowns of ethnic group by sex or age group, the ethnic breakdown used was Māori/non-Māori because small numbers of deaths did not allow the calculation of robust rates for further ethnic groups. Because adjustors are available from 1996–1999, the trends are presented from 1996 onwards (the first three-year moving average being 1996–1998).

<sup>3</sup> <http://www.nzhis.govt.nz/publications/mortality.html>

<sup>4</sup> <http://www.moh.govt.nz>

## Hospitalisation for intentional self-harm

### Source

Hospitalisation for intentional self-harm data were sourced from NZHIS.

### Definition

In New Zealand, hospitalisation for intentional self-harm is a recognised proxy measure for attempted suicide that calculates the number of people who intentionally harmed themselves and were admitted to hospital. The motivation for intentional self-injury varies but for a large proportion of people who present in this way there is a desire to end their life.

In this publication, the hospitalisation rate for self-harm is defined as the rate of first admission (inpatient or day patient) for an intentional self-harm event, using the ICD-9 and ICD-10 classification system, who may or may not later die in hospital (about 30 people per year later die in hospital). This rate is expressed as hospitalisations or *n* hospitalisations per 100,000 population.

The numbers and rates reported in this publication are based upon current best practice methods for injury statistics and are consistent with the method used in the New Zealand Injury Prevention Strategy Outcomes Indicators Project (Cryer et al 2004), which includes suicide measures for death and hospitalisation. The rates of hospitalisation reported in this publication are not comparable with rates reported in the previous *Suicide Facts* and *Suicide Trends* publications because ‘unfiltered’ discharge data were used. This can result in an overcount of intentional self-harm events because any single intentional self-harm event may result in multiple admissions to a hospital (or a transfer between hospitals) to treat the injury. These re-admissions and transfers were previously counted as separate intentional self-harm events. This method is inconsistent with best practice for calculating injury statistics in New Zealand and internationally.

People who intentionally harm themselves but are not admitted to hospital are not included; for example, those people treated by a general practitioner or an emergency department, but not admitted to hospital. People who are hospitalised several times for the same intentional self-harm injury event are only counted once. For example, if a person was admitted to a hospital medical ward and then transferred to a psychiatric unit for one intentional self-harm event, these two admissions would be linked and the event counted once only for this individual. People who are hospitalised for further separate intentional-self-harm events are counted once for each event.

### Period of data

The period for which hospitalisation data is presented is 1978–2004.

Hospitalisation statistics have been collated in New Zealand since the late 1800s, with electronic files available from 1971 onwards, although only easily accessible from 1978. However, data before 1978 cannot be presented because of changes in the way the data have been reported and collected.

## Ethnicity classification

The ethnic breakdown for the total population was Māori, Pacific peoples, Asian peoples and European/Other. The data sets used to classify ethnicity were mortality (all causes), hospitalisation, cancer registration and a recent copy of the National Health Index (NHI) for the whole time period.

To improve the accuracy of ethnicity classification, an ‘ever’ ethnic indicator was used across the time period. Individuals were linked across data sets obtained from NZHIS. Each record in these data sets has three ethnicity fields. If Māori was coded as one of the ethnic groups in any ethnicity field over the time period, individuals were classified as Māori. Using prioritisation of ethnicity, the same rule was applied to Pacific and then Asian ethnic groups. The remaining people were determined to be European/Other.

For breakdowns of ethnic group by sex or age group, the ethnic breakdown used was Māori/non-Māori because small numbers of hospitalisations did not allow the calculation of robust rates for further ethnic groups.

## International Classification of Disease (ICD) codes

Classifications used are those current during the period data are presented for. In this period, the coding system changed from ICD 9 to 10. From 1983 to 1999, ICD-9 codes used for mortality and hospitalisation were E950–E959. Since then, the ICD-10 codes used were X60–X84.

ICD-9 code	ICD-10 code	Description
E950	X60–65, X68–69	Poisoning by solid or liquid substances
E951, E952	X66, X67	Poisoning by gases and vapours, including household gases and motor vehicle exhaust
E953	X70	Hanging, strangulation and suffocation
E954	X71	Drowning
E955	X72–X74	Firearms and explosives
E957	X80	Jumping from a high place
E956, E958, E959	X75–X79, X81–84	Other method – includes cutting and piercing, late effects of self-inflicted injury and other methods such as lying in front of a moving object (eg, train)

Caution should be exercised when comparing data for hospitalisation for intentional self-harm between years because of changes in coding and treatment practices. In 1999 and 2000, New Zealand introduced the ICD-10 classification of disease for morbidity and mortality statistics. This resulted in a modified inclusion criterion for the diagnosis of intentional self-harm. From 2000 to 2001, psychiatric discharges, previously excluded from the data, were included for the first time, contributing to an increase in the number of discharges recorded. In addition, more people now receive treatment for overdoses on an outpatient basis; such cases would previously have been included in the hospitalisation data.

Some of the regional differences in hospitalisation for intentional self-harm rates between District Health Boards (DHBs) may be because of different practices in reporting, coding and patient management. This includes the use of different definitions for a hospital admission at different DHBs.

## **Reporting changes over time**

Caution should be exercised when comparing data for hospitalisation for intentional self-harm between years because of changes in reporting practices across New Zealand and by individual DHBs. To follow is a summary of the major relevant changes.

In 1987, day patients started being reported and, from 1992, all day patients were reported, leading to an increase in hospitalisations for intentional self-harm. From July 1995, more than one cause of hospitalisation could be reported per admission and there was a further increase in hospitalisations. In 1998, the number of causes increased further, but this did not seem to have any practical effect on the data.

In December 1998, some DHBs started considering anyone present in the Emergency Department (ED) for three hours as an admission and began reporting them in their hospitalisation data. This led to a sharp increase in numbers because minor, intentional self-harm cases previously treated and sent home were included as hospital admissions. After a year, this definition was made consistent, with the national definition of an admission being at least three hours of *treatment* not three hours of *waiting*.

From 2000 to 2003, more DHBs began to report patients present at ED as hospital admissions (previously not reported). This led to a further increase in the hospitalisation rate.

## **Statistical methods**

### **Suicide rates and ratios**

The *rate* of suicide refers to the frequency with which suicide occurs relative to the number of people in a defined population and within a defined time period.

*Rate ratios* compare the suicide rate of one population group with the suicide rate of another population group.

### **Age-standardised rates or ratios**

*Age-standardised* rates are rates that have been adjusted to take account of differences in the age distribution of the population over time or between different groups (eg, different ethnic groups).

*Age-standardised* rate ratios are the ratio of two age-standardised rates.

Age-standardisation was undertaken with the direct method, using the World Health Organization (WHO) standard population (Ahmad et al 2000). For a copy of the WHO

standard population, see Appendix 1. The age-standardised rates in this publication are not comparable with those in previous annual publications of suicide data (*Suicide Facts* publications) because the data were standardised to the Segi population.

**Table 1:** Differences in methods between the current publication and *Suicide Facts: Provisional 2003 All-Ages Statistics*

Method	Suicide Facts: Provisional 2003 All-Ages Statistics	Current publication	Reason for different method
Standard population	Segi's	World Health Organization	Public Health Intelligence best practice standard
Age-standardised rates for suicide	Annual	Three-year moving average	More robust for small numbers
Hospitalisation data	Unfiltered discharge data	Rate of first admission	Best practice for injury statistics

### Age-specific rates

An *age-specific* rate is the rate of suicide for a particular age group and refers to the frequency with which suicide occurs relative to the number of people in a defined age group.

### Three-year moving average

*Three-year moving average* age-standardised rates are the average age-standardised rates for three-year periods (ie, 1983–1985, 1984–1986, 1985–1987 and so on). The three-year moving averages are plotted on the midpoint year. For example, the 2001–2003 three-year moving average is plotted on the year 2002. Three-year moving averages are used because rates based on individual years often contain small numbers and therefore tend to exhibit pronounced fluctuation.

Because the three-year moving averages are plotted on the midpoint year, the rate for the last year of the time period analysed is not shown on the figures. For suicide mortality, data are used from 1983 to 2003, so three-year moving averages are presented for 1984 to 2002. For intentional self-harm hospitalisations, data are used from 1983 to 2004, thus, three-year moving averages are presented for 1984 to 2003.

Three-year moving averages allow for underlying trends over time to be more clearly illustrated. Moving averages also provide a more reasonable level of certainty as to the level of change than would a rate for only one year (Ministry of Transport 2005), while being short enough for important differences in rates over time not to be obscured.

## **New Zealand Deprivation Index**

The New Zealand Deprivation Index 2001 (NZDep2001) was used as the key indicator of socioeconomic status (Salmond and Crampton 2002). It is an area-based index of deprivation based on Census 2001 variables (eg, income, house ownership and educational qualifications). NZDep2001 was used for every time period because deprivation was not measured in the 1980s. It is therefore assumed that an area's deprivation in the 1980s is relative to its NZDep score in 2001. NZDep2001 scores were divided into five quintiles, Quintile 1 being the least deprived and Quintile 5 the most deprived. Because of data collecting procedures, data on non-residents of New Zealand are not included in the socioeconomic section.

For further information on the relationship between suicide and social and economic factors, see *Suicide Trends and Social Factors in New Zealand 1981–1999: Analyses from the New Zealand Census–Mortality Study* (Collings et al 2004) and *Suicide Rates in New Zealand: Exploring associations with social and economic factors* (Ferguson et al 2002).

## **District Health Board boundaries**

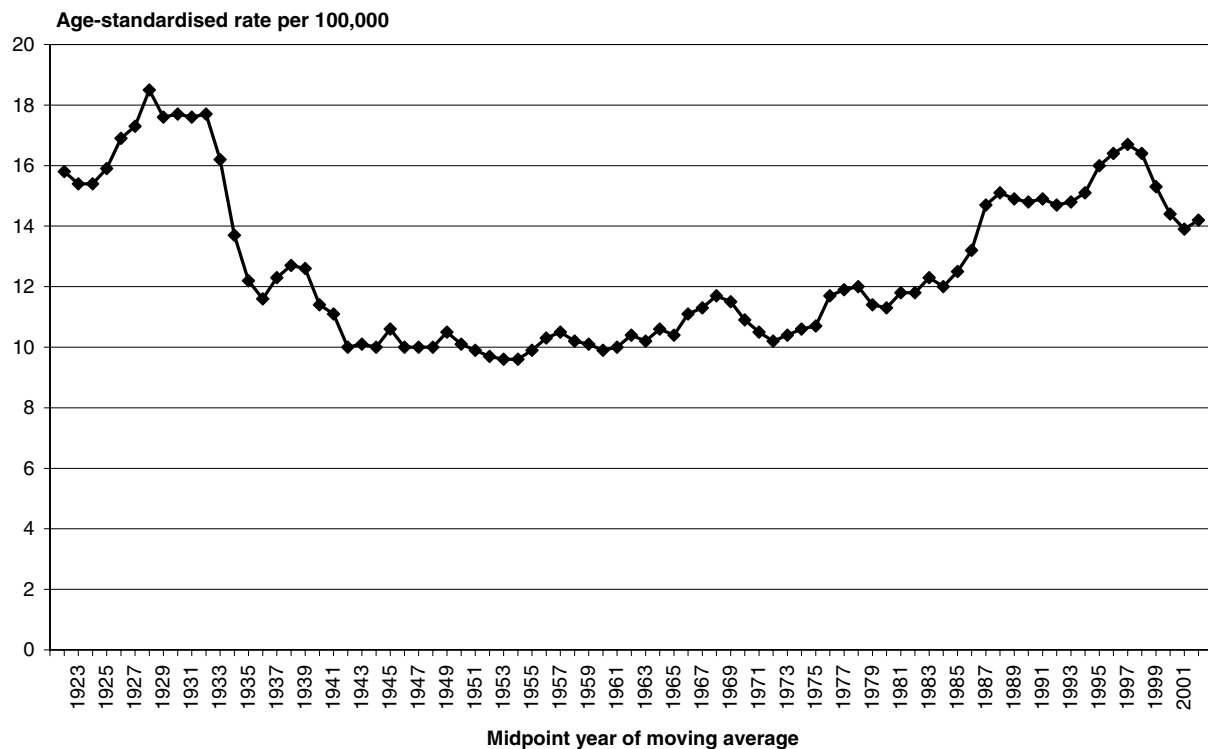
Consistent geographical boundaries, based on the 2001 Census area units (CAUs) were used for mortality and hospitalisation data from 1978 to 2004. These represent the CAU of domicile for each case (death or hospitalisation). For mapping purposes, the constituent CAUs were aggregated to each DHB boundary.

# Historical Context

## Mortality

Suicide statistics have been collected in New Zealand since the early 1900s and have been electronically available from 1948. To give this publication a broader historical perspective, earlier paper records were entered electronically to allow mortality trends back to 1921 to be presented. These statistics can be broken down by sex, age group and method of suicide. The total population three-year moving average age-standardised suicide rate from 1921 to 2003 is presented in Figure 4.

**Figure 4:** Age-standardised suicide rates, three-year moving averages, 1921–2003



Source: New Zealand Health Information Service

Notes:

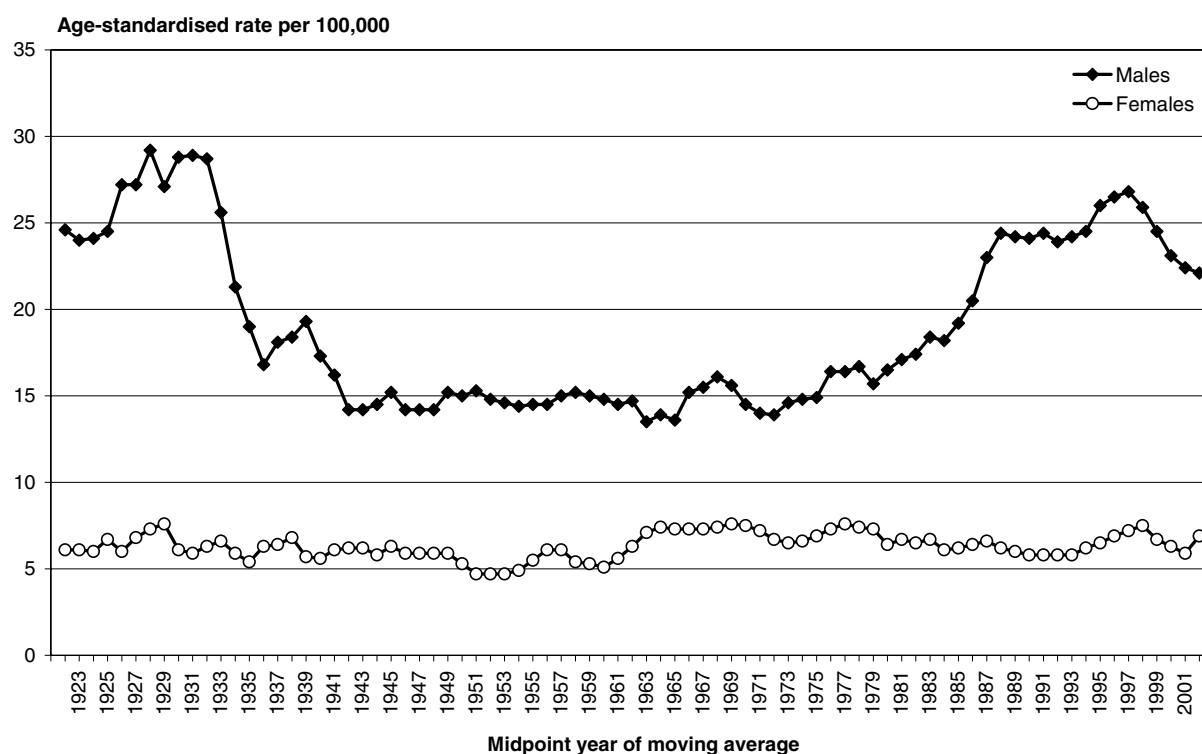
1. Rates per 100,000, age-standardised to the World Health Organization standard population.
2. For more information see 'Methods and Data Sources'.

Overall, the total population three-year moving average suicide rate peaked in 1927–1929 (18.5 deaths per 100,000 population). After that point, the suicide rate dropped and then stabilised, with slight fluctuations, until 1971–1973 (10.2 deaths per 100,000 population). After 1971–1973, the suicide rate increased again, reaching another peak in 1996–1998 (16.7 deaths per 100,000 population). After this point, the suicide rate declined up until the most recent period, 2001–2003 (14.2 deaths per 100,000 population) by 15.0 percent.



The three-year moving average age-standardised suicide rates for males and females from 1921 to 2003 are presented in Figure 5.

**Figure 5:** Suicide rate, by sex, three-year moving average, 1921–2003



Source: New Zealand Health Information Service

Notes:

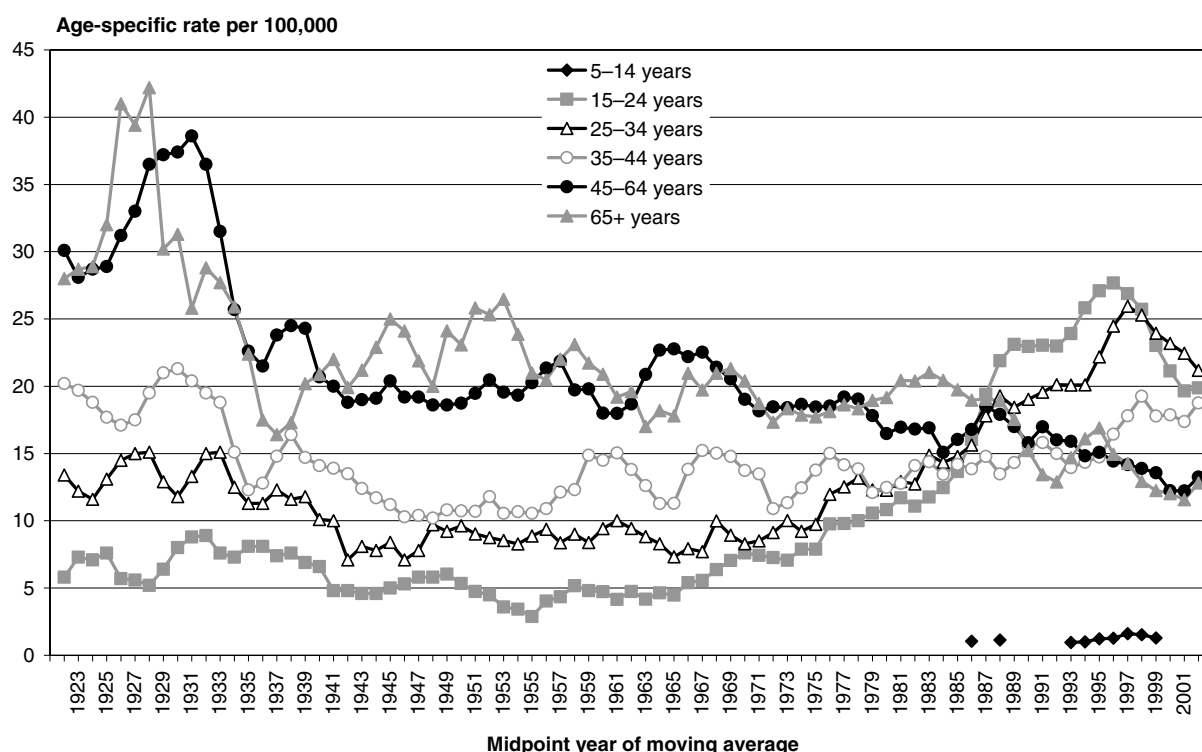
1. Rates per 100,000, age-standardised to the World Health Organization standard population.
2. For more information see 'Methods and Data Sources'.

Throughout the time period, the male three-year moving average suicide rate was at least twice the female rate and this male–female ratio reached a peak in 1930–1932 (4.9 male deaths for every female death). The male three-year moving average rate reached a peak in 1928–1930 (29.2 deaths per 100,000 population). The rate then declined by 46.2 percent and stabilised until 1978–1980 (15.7 deaths per 100,000 population). Following this, the rate increased by 70.7 percent to a second peak in 1996–1998 (26.8 deaths per 100,000 population) and has subsequently declined by 17.5 percent until the most recent period (22.1 deaths per 100,000 in 2001–2003).

For females, the three-year moving average suicide rate has been more stable from 1921 to 2003. The female rate was lowest in the 1950–1954 period (4.7 deaths per 100,000 population) and highest in the 1968–1970 period (7.6 deaths per 100,000 population).

The three-year moving average age-standardised suicide rate for life-cycle age groups from 1921 to 2003 is presented in Figure 6.

**Figure 6:** Age-specific suicide rate, by age group, three-year moving average, 1921–2003



Source: New Zealand Health Information Service

Note: Rate was not included if count was less than 5.

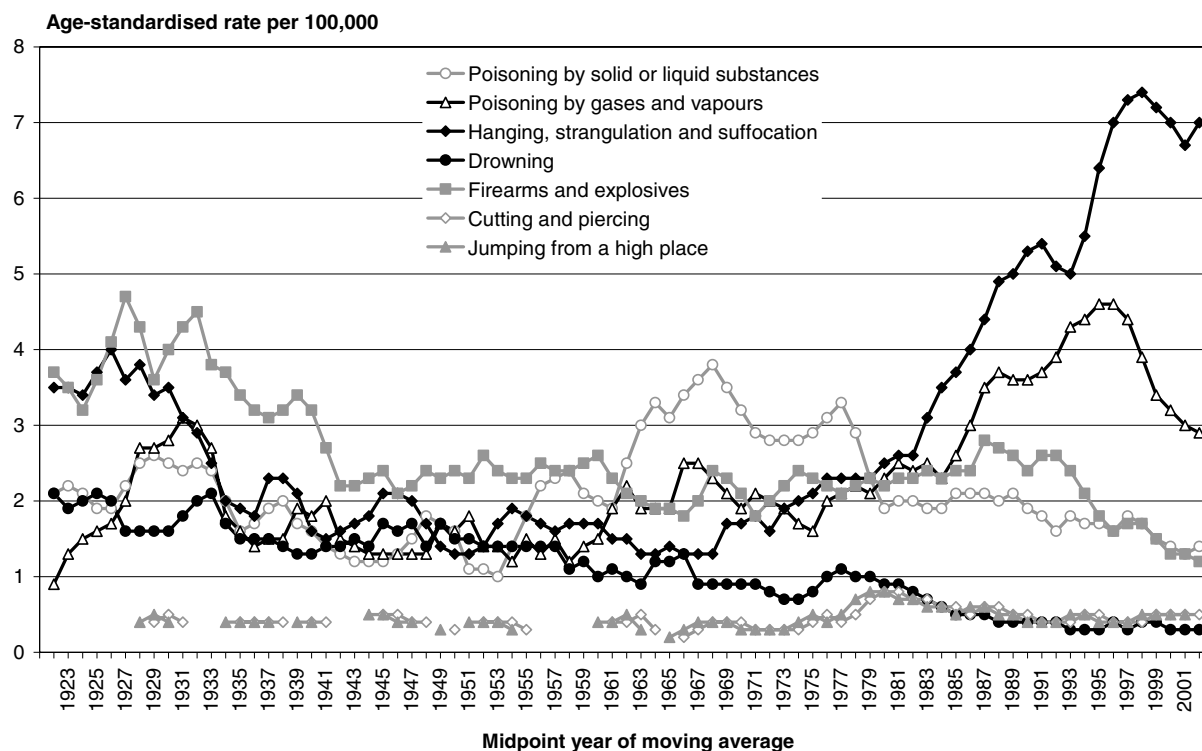
Changes in the age-specific rates of suicide are also evident in Figure 6. In the 1921–2003 period, the incidence of suicide in the age groups has changed considerably, and there has been a reduction in the differences between age groups.

In 1921–1923, 45–64-year-olds and those 65 years and older had the highest age-specific suicide rates (30.1 and 28 deaths per 100,000 population respectively), while youth (15–24 years) had the lowest age-specific suicide rate (5.8 deaths per 100,000 population). However, by 2003 this situation had reversed.

Over the time period, the suicide rates of those aged 45–64 years and over have decreased to 13.3 and 12.8 per 100,000 population respectively in 2001–2003, while those of 15–24-year-olds and 25–34-year-olds have increased, particularly since the mid-1970s, to 19.9 and 21.2 per 100,000 population in the most recent period. In 1986–1988, there was the crossover between the life-cycle age groups that had the highest and lowest suicide rates. In recent years, those aged over 65 years had the lowest age-specific suicide rates, and those aged 15–24 years, 25–34 years and 35–44 years had the highest rates. There were peaks in the three-year moving average rates of 15–24-year-olds and 25–34-year-olds in 1995–1997 (27.7 deaths per 100,000 population) and 1996–1998 (25.9 per 100,000 population) respectively, followed by a decline since then.

The three-year moving average age-standardised suicide rate by method of suicide from 1921 to 2003 is presented in Figure 7.

**Figure 7:** Suicide rate, by method, three-year moving average, 1921–2003



Source: New Zealand Health Information Service

Notes:

1. Rates per 100,000, age-standardised to the World Health Organization standard population.
2. For more information see 'Methods and Data Sources'.

Throughout the period 1921–2003, suicides by hanging, firearms and some form of poisoning have been the most common. However, it is evident in Figure 7 that there have been changes in the preferred method used in this time period.

In 1921–1923, the most common method of suicide was firearms and explosives (3.7 deaths per 100,000 population). The rate of suicide by this method has decreased overall up until the most recent period (1.2 deaths per 100,000 population). From 1961 to 1979, the most common method of suicide was poisoning by solid or liquid substances, which reached a peak in 1967–1969 (3.8 deaths per 100,000 population) and then declined. After an initial decrease then roughly stable rate, the rate of suicide by hanging, strangulation and suffocation has increased steeply since 1980, reaching a peak in 1997–1999 (7.4 deaths per 100,000 population).

## **Hospitalisation for intentional self-harm**

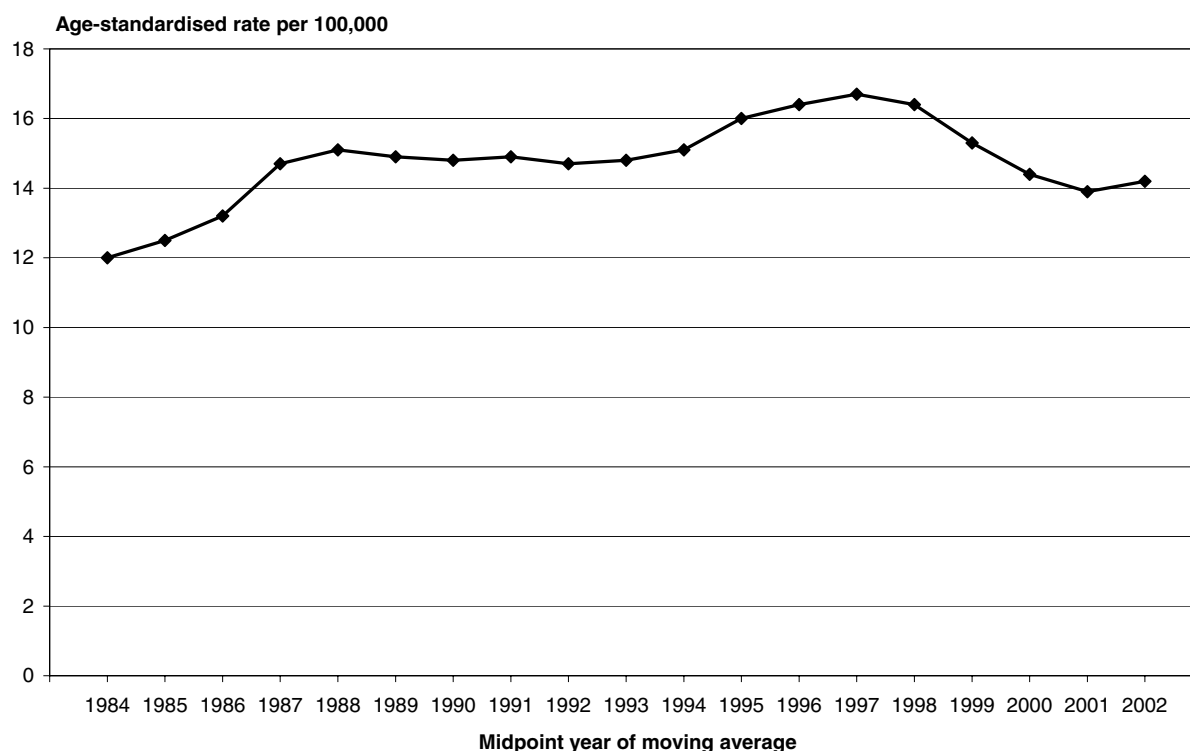
Hospitalisation statistics have been collated in New Zealand since the late 1800s, with electronic files available from 1971 onwards, although only easily accessible from 1978. However, data before 1978 cannot be presented accurately because of changes in the way the data have been reported and collected.

The remainder of this publication focuses on patterns in suicide mortality from 1983 to 2003 and intentional self-harm hospitalisations from 1978 to 2003, for the total population and major population subgroups.

# Overall Trends

## Deaths

**Figure 8:** Age-standardised suicide rates, three-year moving averages, 1983–2003



Source: New Zealand Health Information Service

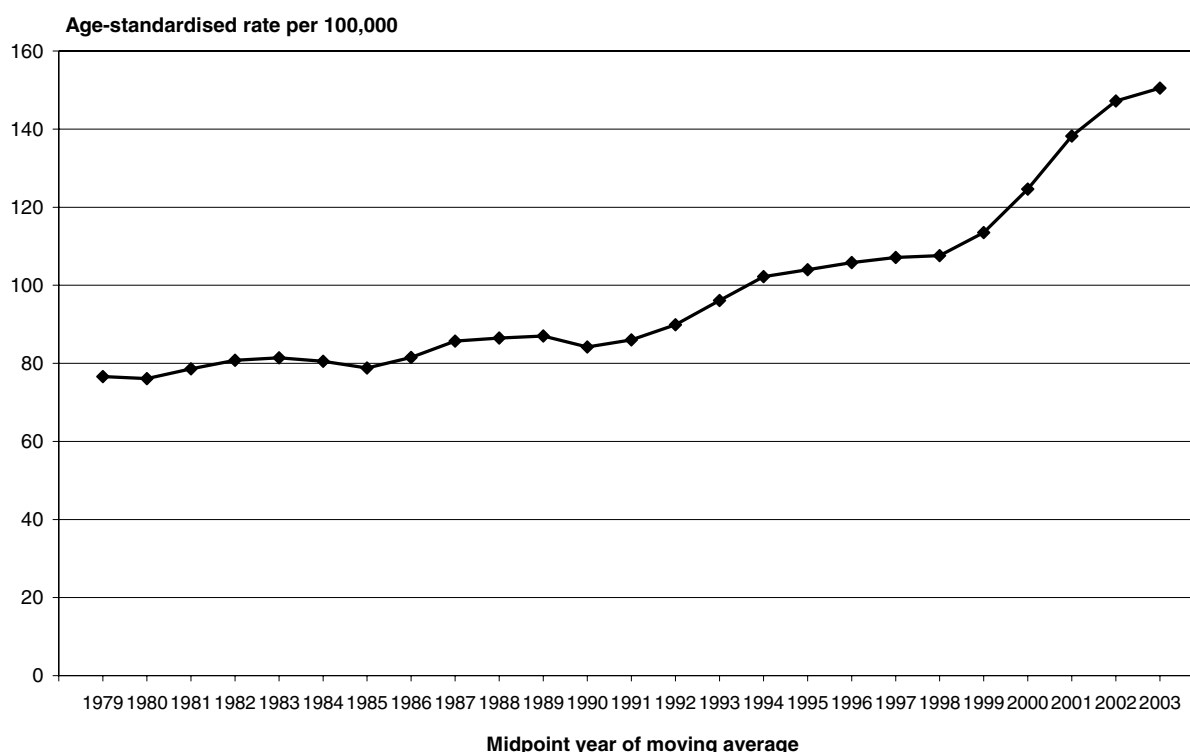
Notes:

1. Rates per 100,000, age-standardised to the World Health Organization standard population.
2. For more information see 'Methods and Data Sources'.

The rate of suicide in New Zealand increased from the mid-1980s to the mid-1990s, but has been generally decreasing since then. In 1996–1998, the suicide rate (16.7 deaths per 100,000 population or an average of 560 deaths per year) was 35 percent higher than the 1983–1985 rate (12.0 deaths per 100,000 population or an average of 360 deaths per year). From 1996–1998 to 2001–2003, the suicide rate decreased by 15 percent to 14.2 deaths per 100,000 population (an average of 494 deaths per year).

## Hospitalisations

**Figure 9:** Age-standardised intentional self-harm hospitalisation rates, three-year moving averages, 1978–2004



Source: New Zealand Health Information Service

Notes:

1. Rates per 100,000, age-standardised to the World Health Organization standard population.
2. For more information see 'Methods and Data Sources'.

The rate of hospitalisation for intentional self-harm<sup>5</sup> shows a similar trend to the death rate, with an increase between the late 1970s and the mid-1990s. In 1994–1996, the hospitalisation rate (104.0 hospitalisations per 100,000 population or an average of 3312 hospitalisations per year) was 36 percent higher than the hospitalisation rate in 1978–1980 (76.6 hospitalisations per 100,000 population or an average of 2149 hospitalisations per year).

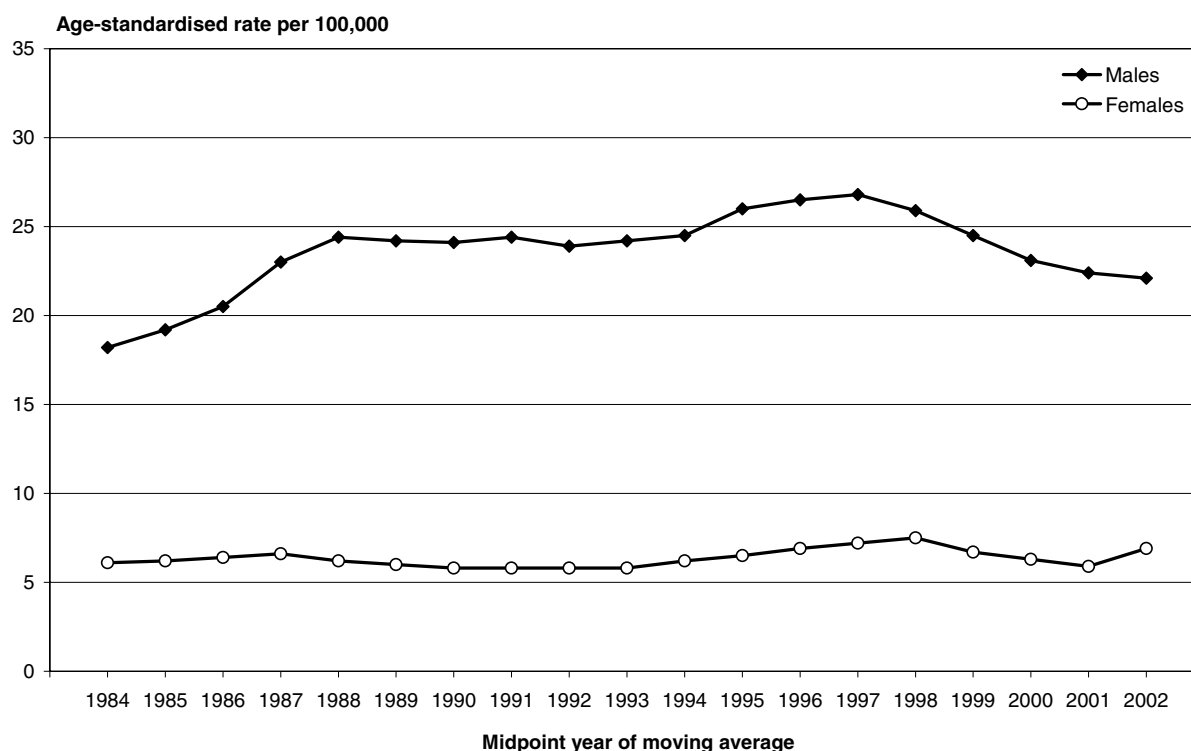
After the change in ICD coding of hospitalisation data in 1999 and 2000, the rate of intentional self-harm hospitalisation has continued to increase. In 1998–2000, there were 113.5 hospitalisations per 100,000 population (3703 hospitalisations on average per year). For 2002–2004 the rate was 150.5 hospitalisations per 100,000 population (4932 hospitalisations on average per year).

<sup>5</sup> In New Zealand, hospitalisation for intentional self-harm is a recognised proxy measure for attempted suicide that measures the number of people who intentionally harmed themselves and were admitted to hospital.

# Trends by Sex

## Deaths

**Figure 10:** Age-standardised suicide rates by sex, three-year moving averages, 1983–2003



Source: New Zealand Health Information Service

Notes:

1. Rates per 100,000, age-standardised to the World Health Organization standard population.
2. For more information see 'Methods and Data Sources'.

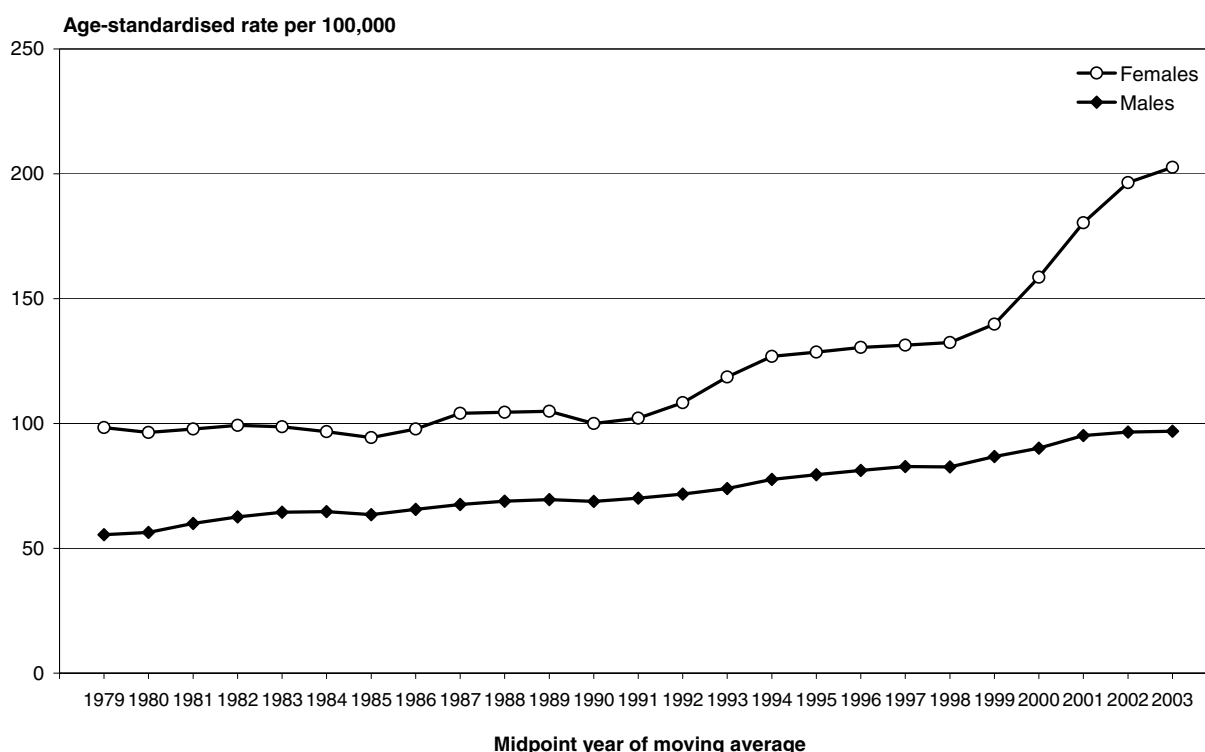
In New Zealand, males have a higher suicide rate than females. At the beginning of the period, the male-to-female suicide ratio was 2.9:1, which increased during the late 1980s, reaching a peak of 4.2 male deaths for every female death in 1990–1992. Subsequently, this ratio decreased to 3.2 male deaths for every female death in the 2001–2003 period.

The male suicide rate increased throughout the 1980s to mid-1990s to reach a peak of 26.8 per 100,000 population in the 1996–1998 period, after which it has declined to 22.1 per 100,000 population in 2001–2003 period. The greatest rate of increase occurred during 1983–1985 to 1987–1989.

The female suicide rate reached a peak in 1997–1999 at 7.5 per 100,000 population, before declining to 6.9 deaths per 100,000 females (or an average of 124 deaths per year) in the 2001–2003 period.

## Hospitalisations

**Figure 11:** Age-standardised intentional self-harm hospitalisation rates, by sex, three-year moving averages, 1978–2004



Source: New Zealand Health Information Service

Notes:

1. Rates per 100,000, age-standardised to the World Health Organization standard population.
2. For more information see 'Methods and Data Sources'.

Unlike the suicide death rate, females had higher hospitalisation rates for intentional self-harm than males. However, the disparity between males and females was not as large for hospitalisations compared with deaths, with 2.1 females hospitalised for every male hospitalisation in 2002–2004.

The female intentional self-harm hospitalisation rate increased during the early 1990s and, after the ICD coding change in 1999 and 2000, there was a marked increase in the female hospitalisation rate, but little change in the male rate. In 2002–2004, the female intentional self-harm hospitalisation rate was 202.6 hospitalisations per 100,000 population (3381 hospitalisations on average per year).



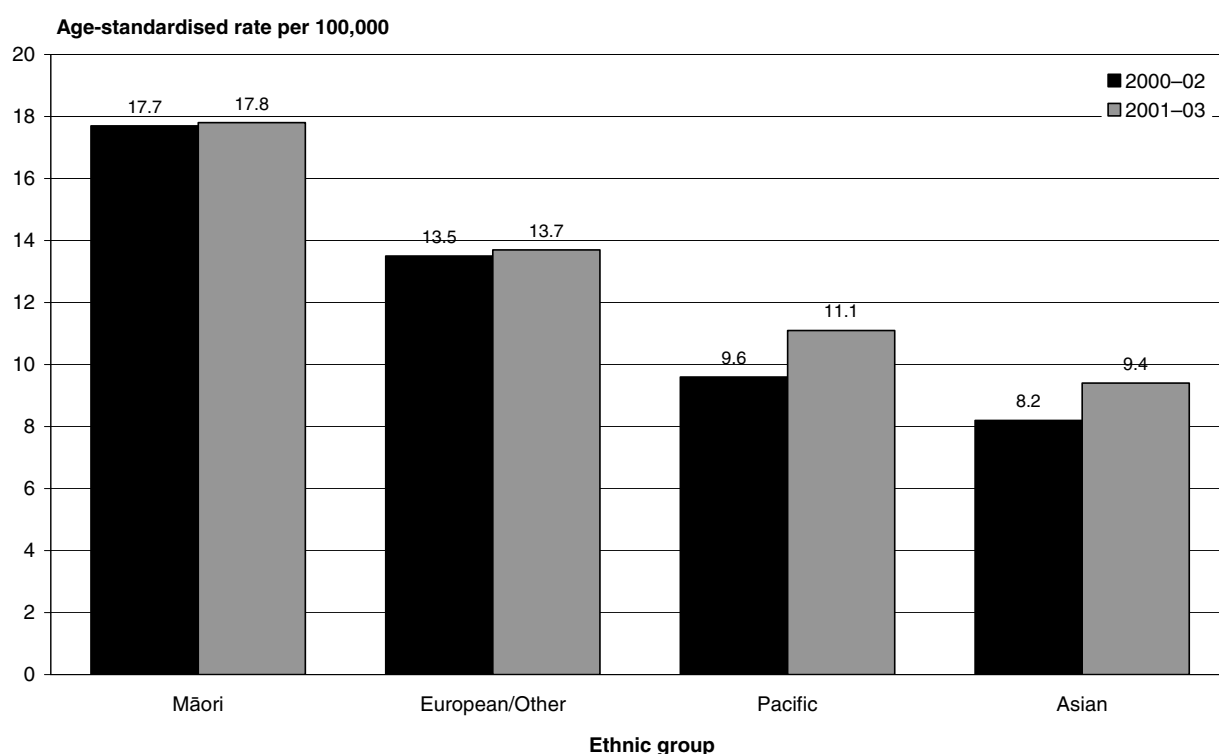
### **Summary of trends by sex**

- Between 1983 and 2003, males had a higher suicide rate than females.
- The sex disparity for suicide deaths reached a peak in 1990–1992 (4.2 male deaths for every female death), and has since decreased to a ratio of 3.2 male deaths to every female death.
- Conversely, the female rate of hospitalisation for intentional self-harm was markedly higher than the male rate throughout the time period. For example in 2002–2004 there were 2.1 females hospitalised for every male hospitalised for intentional self-harm.

# Trends by Ethnic Group

## Deaths

**Figure 12:** Age-standardised suicide rates, by ethnicity, three-year moving averages, 2000–2003



Source: New Zealand Health Information Service

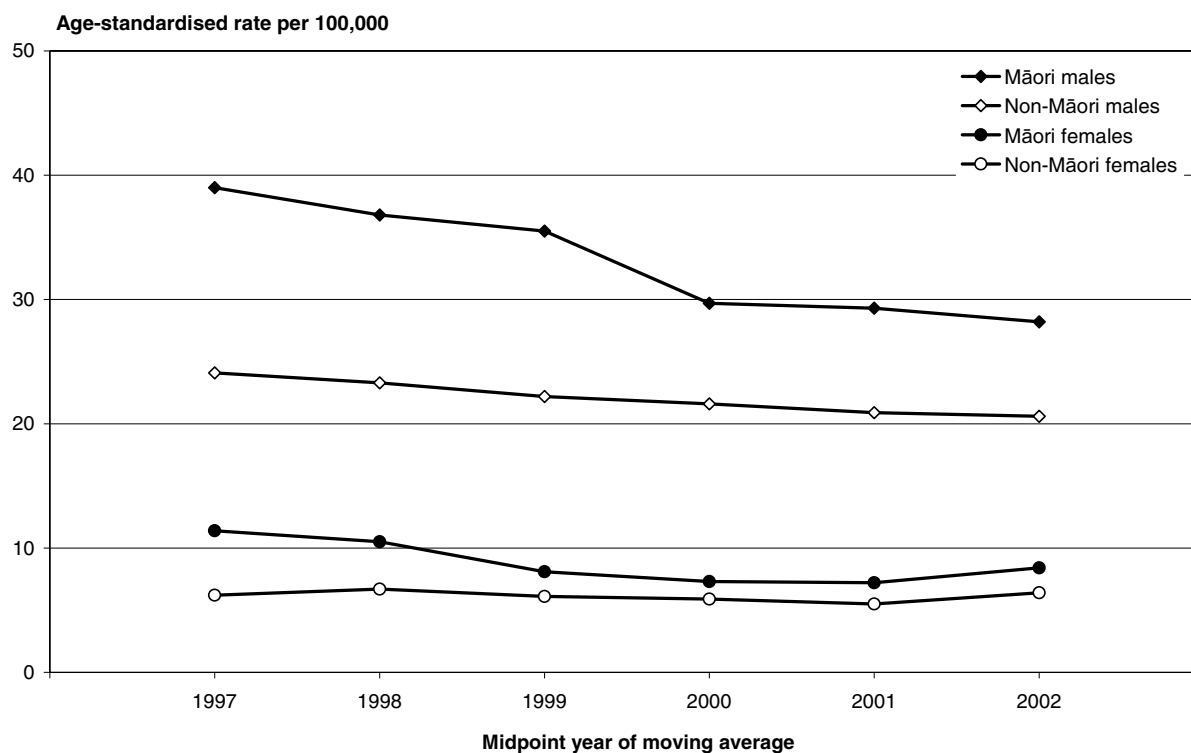
Notes:

1. Rates per 100,000, age-standardised to the World Health Organization standard population.
2. For more information see 'Methods and Data Sources'.

Between 2000 and 2003,<sup>6</sup> Māori experienced the highest three-year moving averages of suicide rates, followed by European/Other, Pacific then Asian ethnic groups.

<sup>6</sup> The ethnic breakdown for the total population was Māori, Pacific peoples, Asian peoples and European/Other. Trends in mortality by ethnicity for the total population have only been presented from 2000 onwards (the first, three-year average being for 2000–2002). This is because, during the 1980s and early 1990s, Māori and Pacific peoples mortality were seriously undercounted. New Zealand Census–Mortality Study (NZCMS) adjustors can be applied to mortality counts from 1996–1999 to address the undercount for Māori and Pacific peoples. However, it is not valid to compare adjusted and unadjusted mortality figures. From 2000, comparisons across all the ethnic groups are possible as adjustors are not necessary. For more information on ethnicity classification, see the 'Methods and Data Sources' section.

**Figure 13:** Age-standardised suicide rates, by ethnicity and sex, three-year moving averages, 1996–2003



Source: New Zealand Health Information Service

Notes:

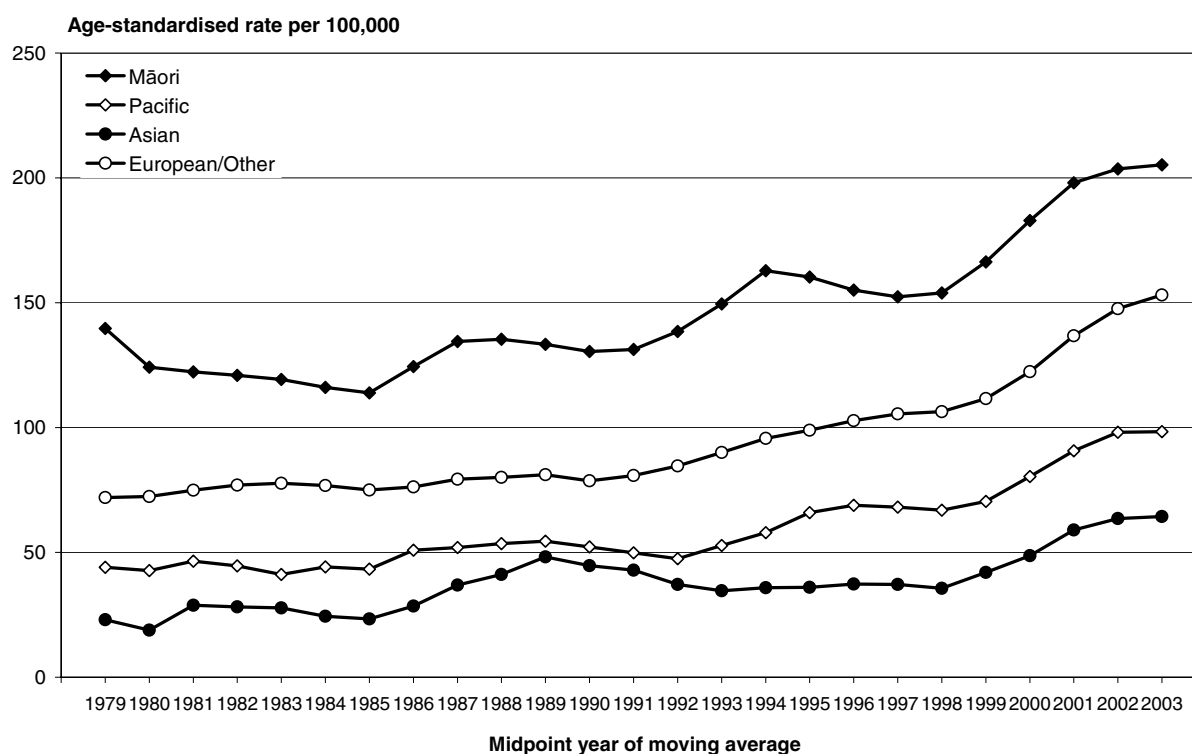
1. Rates per 100,000, age-standardised to the World Health Organization standard population.
2. For more information see 'Methods and Data Sources'.
3. New Zealand Census–Mortality Study adjusters were applied to mortality counts from 1996–1999 to address the undercount.

Between 1996 and 2003, males had consistently higher three-year moving averages of suicide rates. Māori males had higher suicide rates than non-Māori males.<sup>7</sup>

<sup>7</sup> The ethnic breakdown used was Māori/non-Māori because small numbers did not allow robust rates for further breakdowns of ethnic group by sex and age to be calculated.

## Hospitalisations

**Figure 14:** Age-standardised intentional self-harm hospitalisation rates, by ethnicity, three-year moving averages, 1978–2004



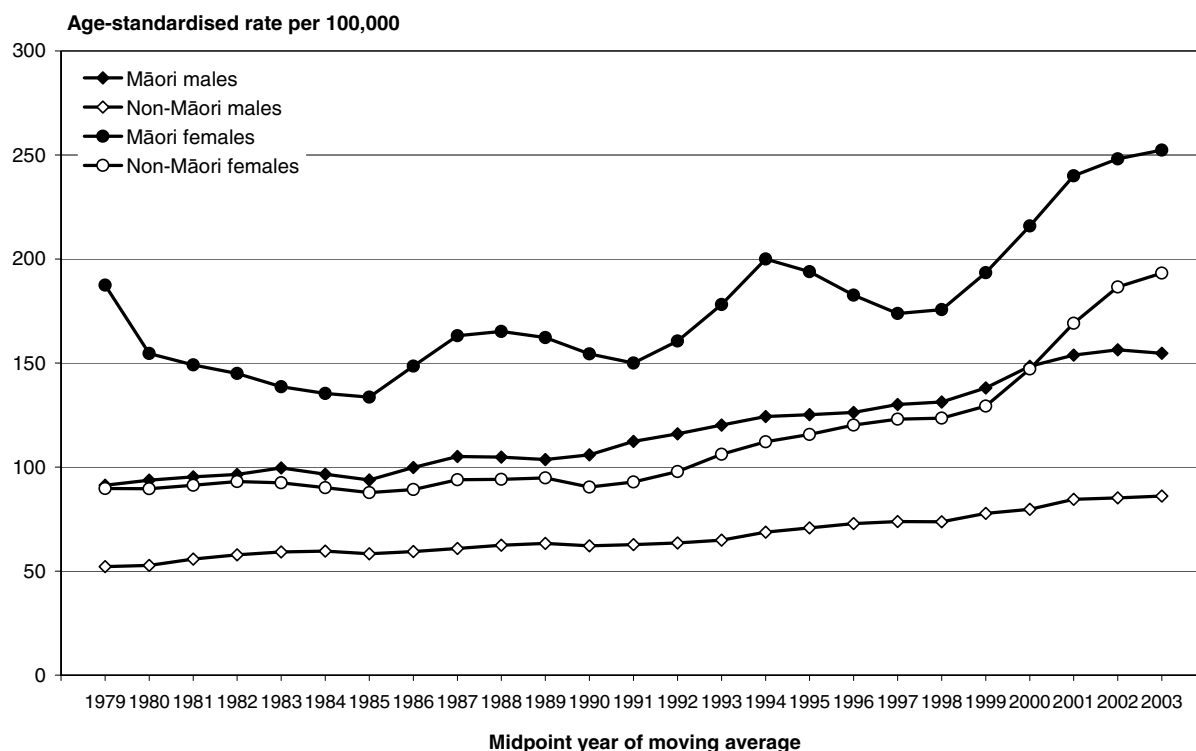
Source: New Zealand Health Information Service

Notes:

1. Rates per 100,000, age-standardised to the World Health Organization standard population.
2. For more information see 'Methods and Data Sources'.

Between 1978 and 2004, three-year moving averages of intentional self-harm hospitalisation rates increased for all ethnic groups, but were highest for Māori, followed by European/Others, Pacific and Asian ethnic groups.

**Figure 15:** Age-standardised intentional self-harm hospitalisation rates, by ethnicity and sex, three-year moving averages, 1978–2004



Source: New Zealand Health Information Service

Notes:

1. Rates per 100,000, age-standardised to the World Health Organization standard population.
2. For more information see 'Methods and Data Sources'.

Between 1978 and 2004, Māori females had higher intentional self-harm hospitalisation rates than all other combinations of sex and ethnic group. The hospitalisation rate for Māori males was higher than for non-Māori males, but similar to the rate for non-Māori females until 1999–2001. After this point, the rate increased for non-Māori females, but remained stable for Māori males.

### **Summary of trends by ethnic group**

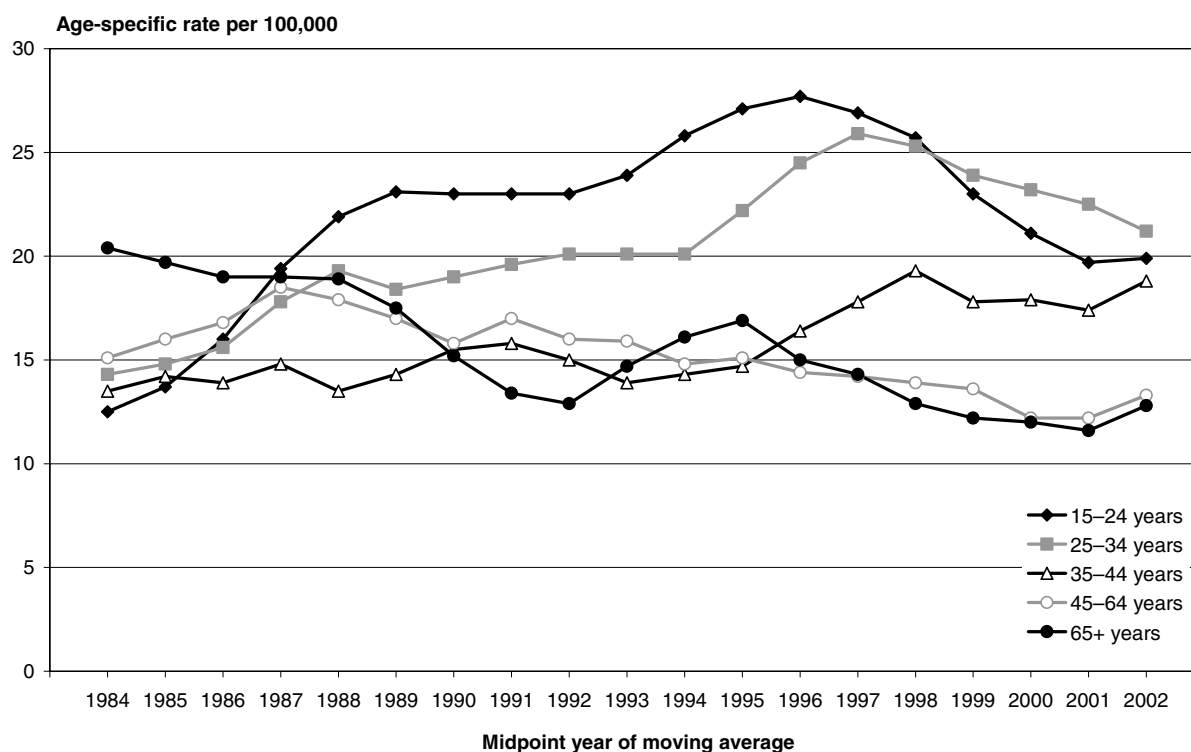
- Trends in mortality by ethnicity for the total population have only been presented from 2000 onwards. New Zealand Census–Mortality Study adjustors can be applied to mortality counts from 1996–1999 to address the undercount for Māori and Pacific peoples. However, it is not valid to compare adjusted and unadjusted mortality figures. From 2000, comparisons across all the ethnic groups are possible as adjustors are not necessary.
- Between 2000 and 2003, three-year moving averages of suicide rates were higher in Māori (followed by European/Others) than in other ethnic groups.
- Generally, Māori males had considerably higher suicide rates than non-Māori males, but there were less marked differences between the rates for Māori and non-Māori females.
- From 1978 to 2004, Māori had consistently higher rates of hospitalisation for intentional self-harm than European/Others, Pacific and Asian ethnic groups.
- Between 1978 and 2004, Māori females had higher rates of hospitalisation for intentional self-harm than all other combinations of sex and ethnic group.
- Māori males had higher rates of hospitalisation for intentional self-harm than non-Māori males, with rates that were similar to those for non-Māori females until 1999–2001.

# Trends by Age Group

## Deaths

### Total population

**Figure 16:** Age-specific suicide rates, three-year moving averages, 1983–2003



Source: New Zealand Health Information Service

During the 1990s, the suicide rate for 15–34-year-olds rose, while rates for the middle and older age groups (45 years and over) declined. However, the suicide rate for adults aged 35 to 44 years increased towards the end of the 1990s.

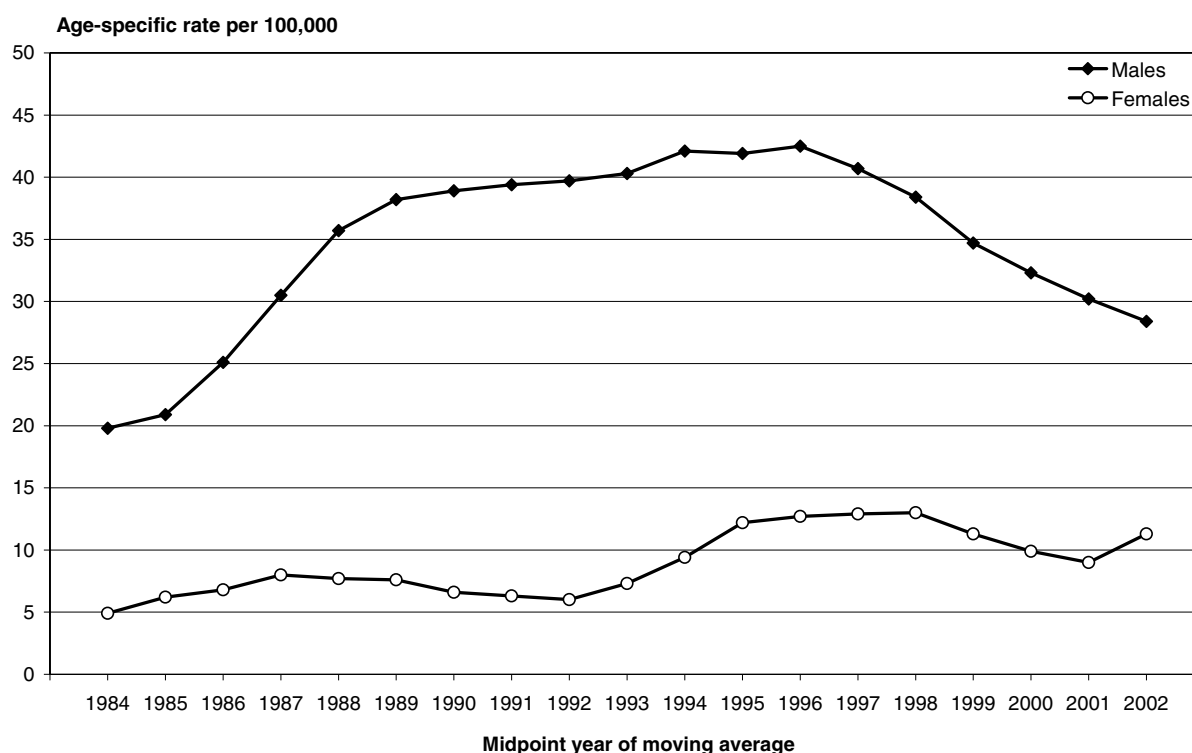
In 1983–1985, older people (65 years and over) had the highest suicide rate, and youth (15–24 years) had the lowest rate. By the late 1990s this situation had reversed.

In the most recent period, 2001–2003, adults aged 25–34 years had the highest suicide rate.

The overall suicide rates are driven largely by male suicides. Trends by sex for each age group are examined next.

## Age groups, by sex

**Figure 17:** Age-specific suicide rates, by sex, 15–24 years, three-year moving averages, 1983–2003



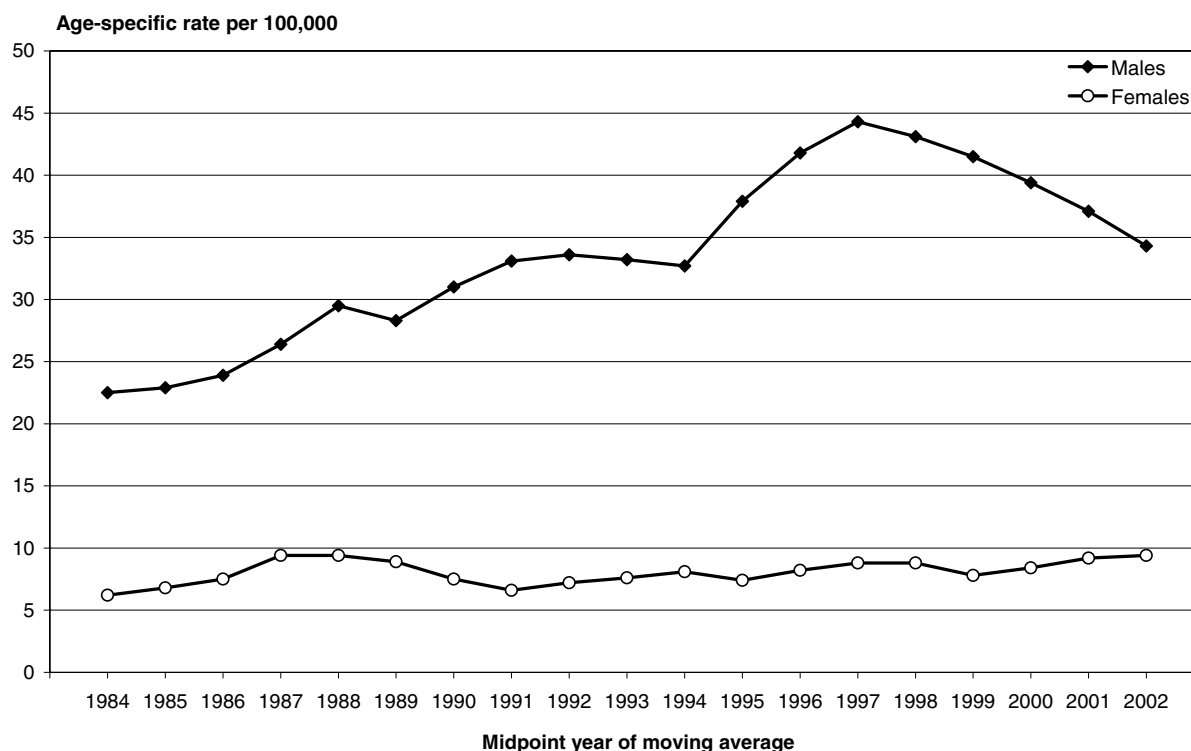
Source: New Zealand Health Information Service

The male youth (15–24 years) suicide rate increased from 1983–1985 through to the early to mid-1990s, but has decreased since 1995–1997. For female youth, the suicide rate has increased since 1983–1985.

The youth (15–24 years) sex ratio of suicide deaths increased throughout the late 1980s to a peak in 1991–1993 of 6.6 male deaths for every female death. Since then, the ratio has decreased by 62.0 percent to 2.5 male deaths for every female death in 2001–2003. The decrease in rate ratio is largely being driven by a downward trend in the male rate.



**Figure 18:** Age-specific suicide rates, by sex, 25–34 years, three-year moving averages, 1983–2003



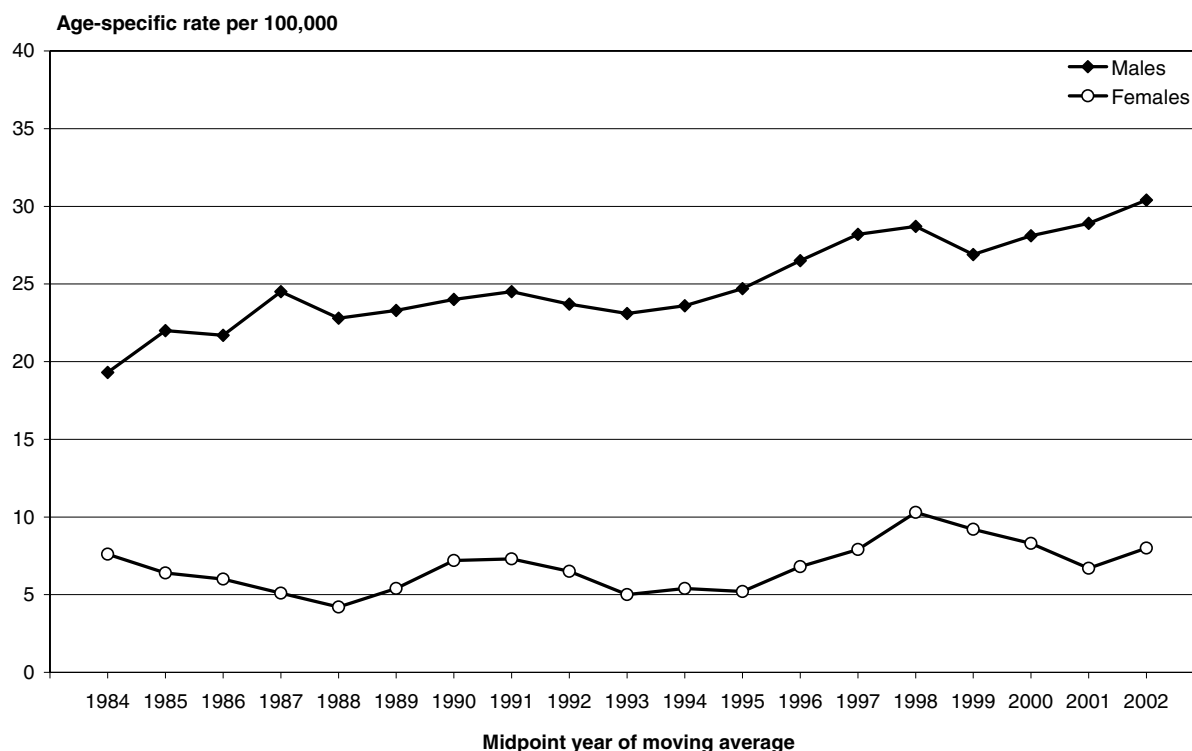
Source: New Zealand Health Information Service

For adults aged 25 to 34 years, the male suicide rate increased from 1983–1985 (22.5 per 100,000 population) to a peak in 1996–1998 (44.3 per 100,000 population). The rate has been decreasing since 1996–1998, although the 2001–2003 rate at 34.3 deaths per 100,000 population is 50.4 percent higher than the 1983–1985 rate at 22.5 deaths per 100,000 population.

The female suicide rate has fluctuated over the period, with the 2001–2003 rate being 9.4 deaths per 100,000 population compared with 6.2 in 1983–1985, however, rates of 9.4 also occurred in the 1986–1990 period.

The male-to-female sex ratio was highest during the 1990s. The ratio has decreased in recent years to 3.7 male deaths for every female death in 2001–2003.

**Figure 19:** Age-specific suicide rates, by sex, 35–44 years, three-year moving averages, 1983–2003



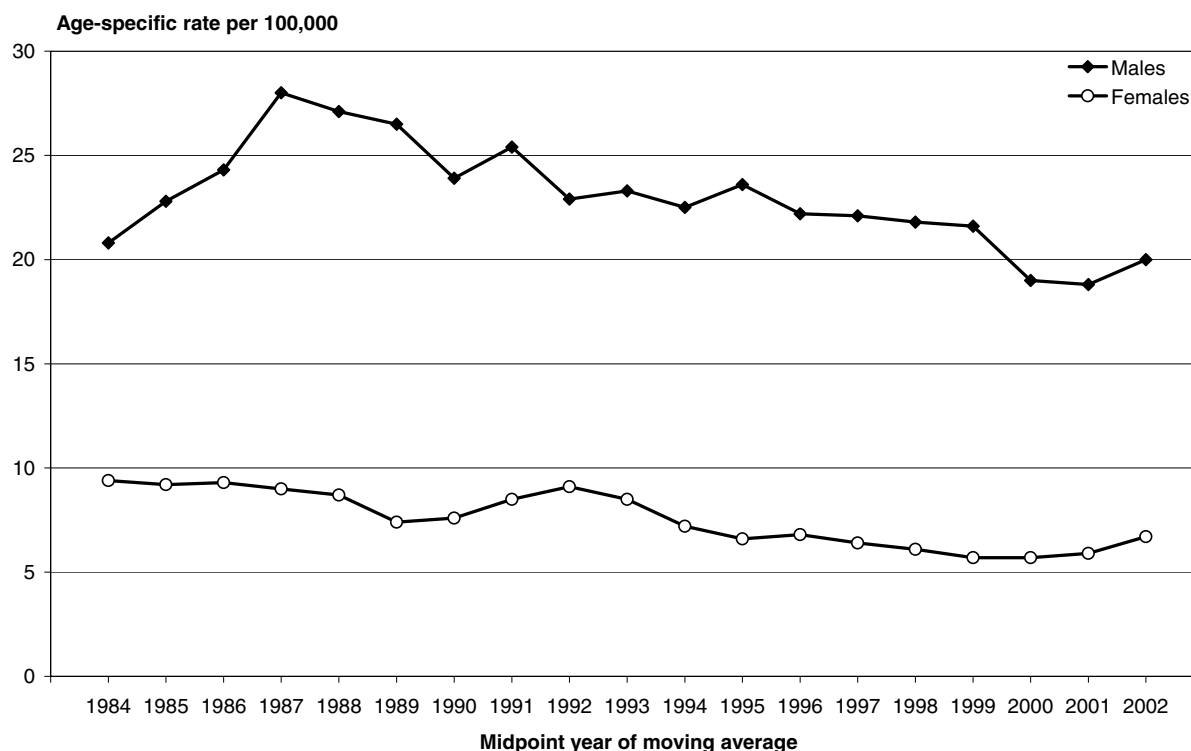
Source: New Zealand Health Information Service

The suicide rate for males aged 35 to 44 years has steadily increased from 1983–1985 to 2001–2003. The 2001–2003 rate was 30.4 deaths per 100,000 population, which is 57.5 percent higher compared with the 1983–1985 rate of 19.3 deaths per 100,000 population.

The female suicide rate has fluctuated since 1983, reaching a peak of 10.3 deaths per 100,000 in 1997–1999, and declining since then to 8.0 deaths per 100,000 population in 2001–2003.

The male-to-female sex ratio has fluctuated over these years, with peaks in the late 1980s (5.4 male deaths for every female death) and mid-1990s (4.8 male deaths for every female death). The disparity has increased again in recent years (3.8 male deaths for every female death in 2001–2003).

**Figure 20:** Age-specific suicide rates, by sex, 45–64 years, three-year moving averages, 1983–2003



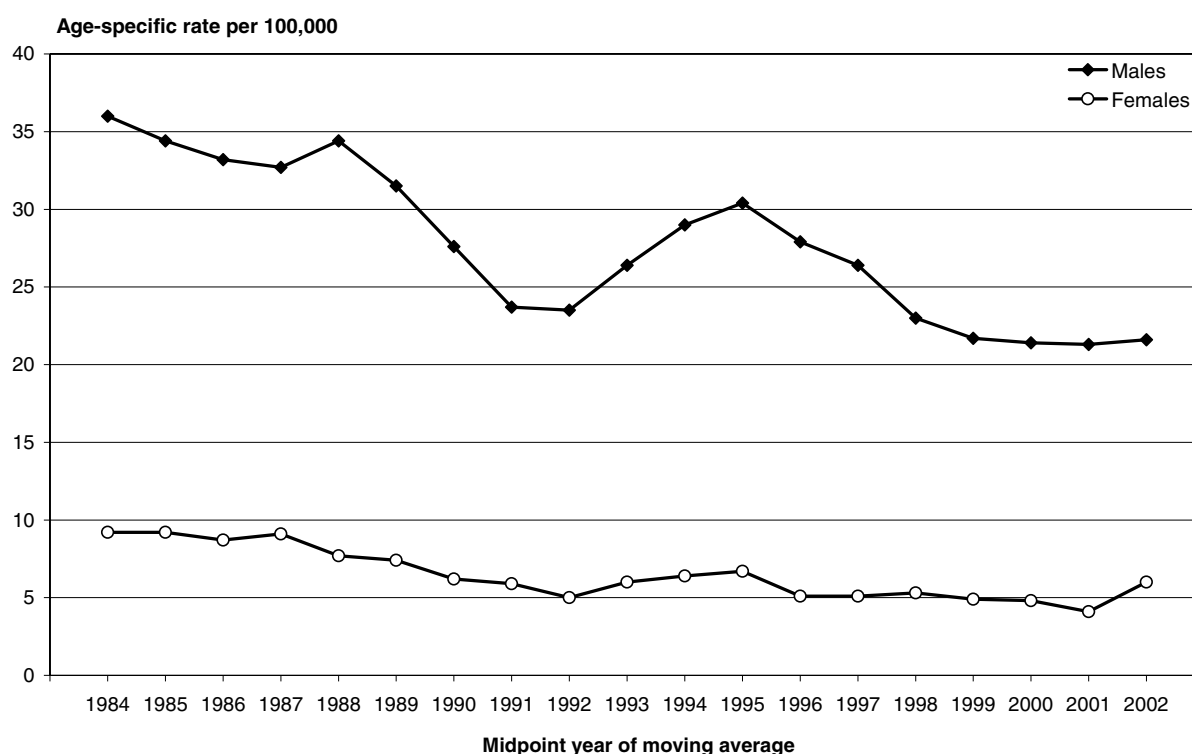
Source: New Zealand Health Information Service

After an increase in the late 1980s to 28.0 deaths per 100,000 population for 1986–1988 from 20.8 in 1983–1985, the male suicide rate for 45–64-year-olds has decreased steadily to 20.0 deaths per 100,000 population in 2001–2003, which is similar to that in 1983–1985.

The female rate has decreased from the levels of the mid-1980s (9.4 deaths per 100,000 population for 1983–1985) to 6.7 deaths per 100,000 population in 2001–2003.

Throughout the period, the male-to-female sex ratio has fluctuated between a ratio of 2.2:1 to 3.5, with the higher peaks in the late 1980s and mid-1990s.

**Figure 21:** Age-specific suicide rates, by sex, 65 years and over, three-year moving averages, 1983–2003



Source: New Zealand Health Information Service

Suicide rates for males aged 65 years and over decreased in the late 1980s and late 1990s and have remained stable since then. The 2001–2003 rate was 21.6 deaths per 100,000 population compared with the 1983–1985 rate of 36.0 deaths per 100,000 population, a 40.0 percent decrease.

The female rate decreased from 9.2 deaths per 100,000 population in 1983–1985 to 6.0 deaths per 100,000 population in 2001–2003, a 35 percent decrease.

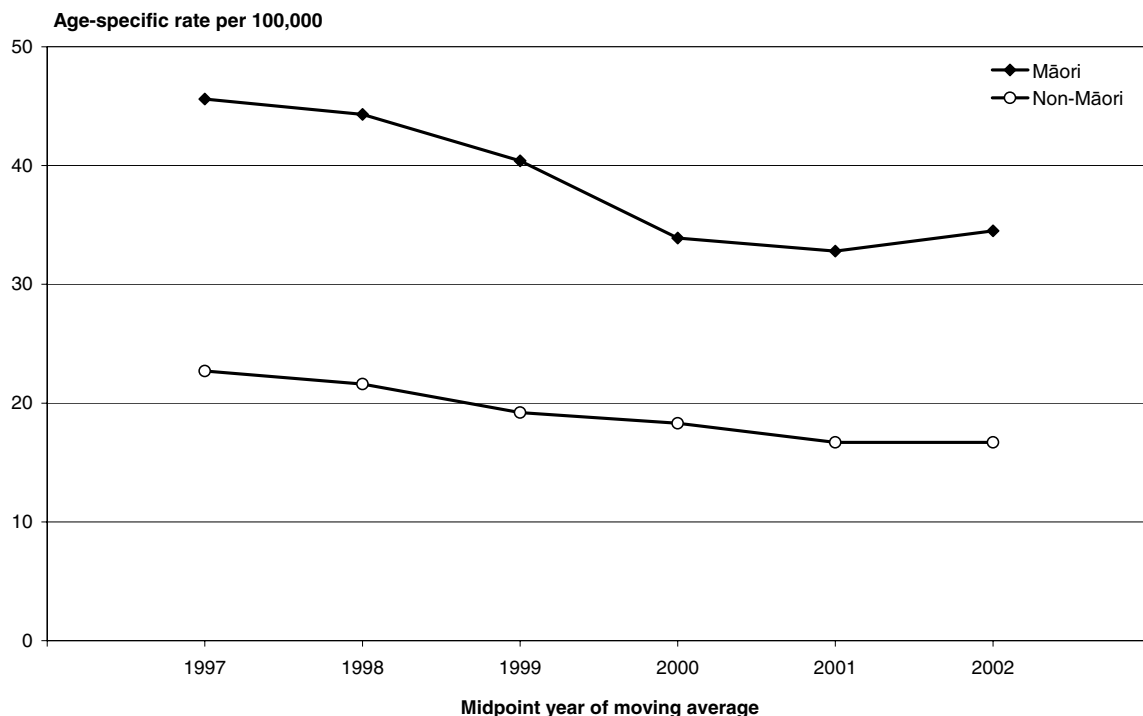
The male-to-female sex ratio has fluctuated between 3.6 and 4.5 deaths for every female death throughout the period, with the peaks occurring in late 1980s and 1990s. In 2001–2003, the ratio was 3.6 male deaths for every female death.

### Summary of suicide trends: age groups, by sex

- In general, the suicide rates for those under 45 years of age have increased by over 50 percent from 1983 to 2003. In contrast, the rates for those aged 65 years and over have decreased by over 35 percent, while the rates for the 45–64 year age group have both increased and decreased throughout the period.
- The sex disparity between male and female suicide rates is now lowest for youth (15–24 years). The sex ratio was much greater in the early 1990s, however, the male youth suicide rate has declined in recent years and the female rate has increased, which has brought the ratio closer.
- The sex disparity is greatest for adults aged 25–44 years. Within this age group, the male suicide rate for 35–44 year olds has steadily increased, while the rate for males aged 25–34 years has declined in recent years.
- Older people aged 65 years and over also have a large disparity between male and female suicide rates. However, suicide rates in this age group have steadily decreased for both males and females.
- Changes in the disparity between sexes are largely driven by changes in the male rates of suicide.

### Age groups, by ethnicity

**Figure 22:** Age-specific suicide rates, by ethnicity, 15–24 years, three-year moving averages, 1996–2003



Source: New Zealand Health Information Service

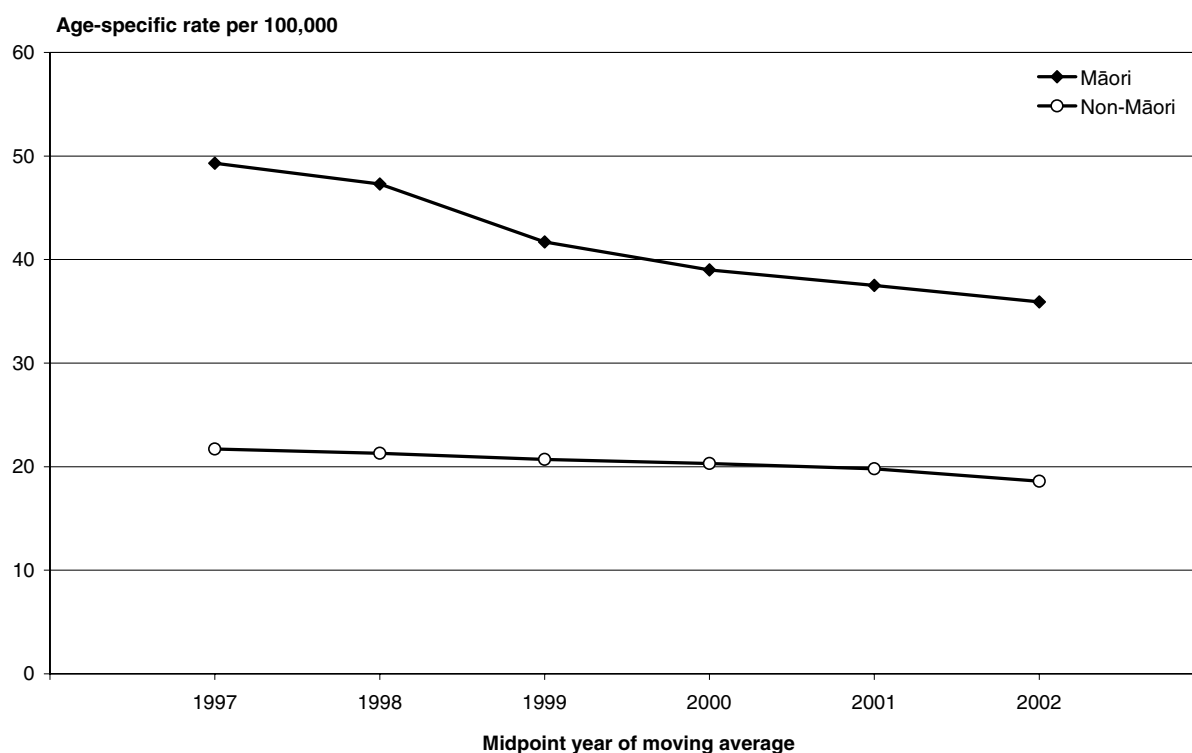
Note: New Zealand Census–Mortality Study adjusters were applied to mortality counts from 1996–1999 to address the undercount.

Māori youth suicide rates were higher than non-Māori rates throughout all periods.

The Māori youth (15–24 years) suicide rate has decreased overall 24.3 percent from 45.6 deaths per 100,000 population in 1996–1998 to 34.5 deaths per 100,000 population in 2001–2003.

Similarly, the non-Māori rate has decreased 26.4 percent from 22.7 deaths per 100,000 population in 1996–1998 to 16.7 deaths per 100,000 population in 2001–2003.

**Figure 23:** Age-specific suicide rates, by ethnicity, 25–34 years, three-year moving averages, 1996–2003



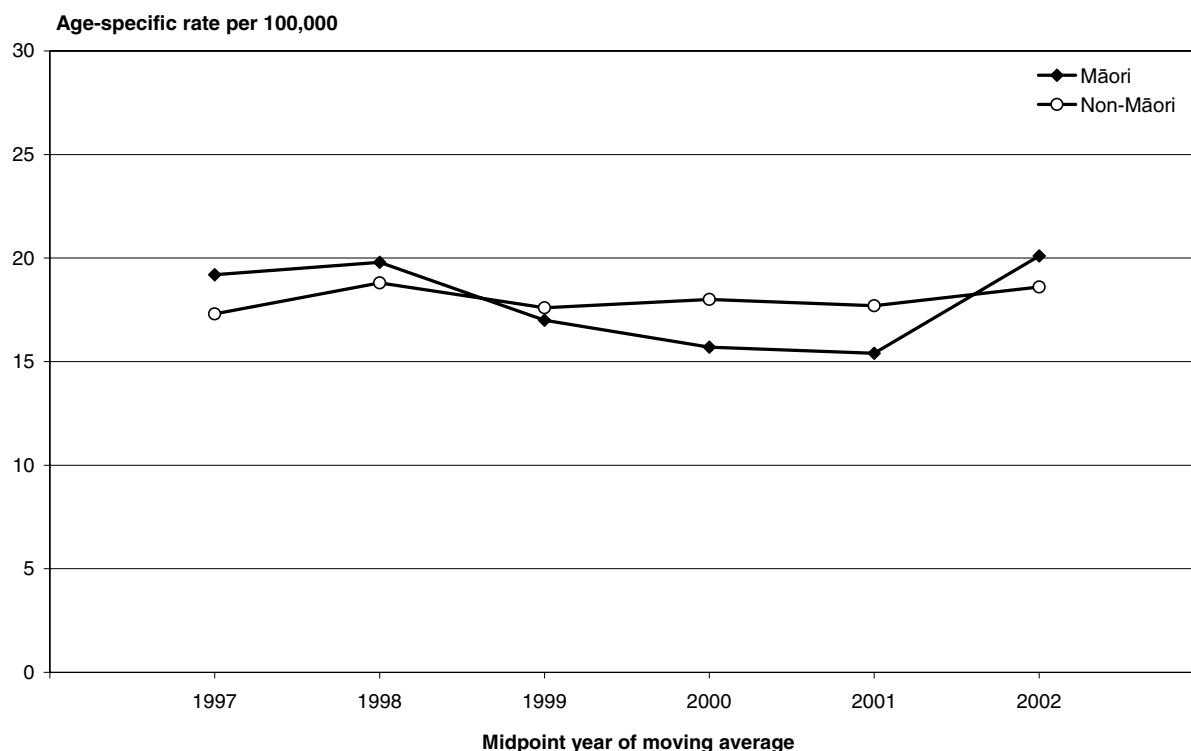
Source: New Zealand Health Information Service

Note: New Zealand Census–Mortality Study adjustors were applied to mortality counts from 1996–1999 to address the undercount.

Māori suicide rates were consistently higher than non-Māori rates.

For 25–34-year-olds, the Māori rate has decreased 27.1 percent from 49.3 deaths per 100,000 population to 35.9 per 100,000 population, while the non-Māori rate has decreased 8.6 percent from 21.7 deaths per 100,000 population to 18.6 per 100,000 population.

**Figure 24:** Age-specific suicide rates, by ethnicity, 35–44 years, three-year moving averages, 1996–2003



Source: New Zealand Health Information Service

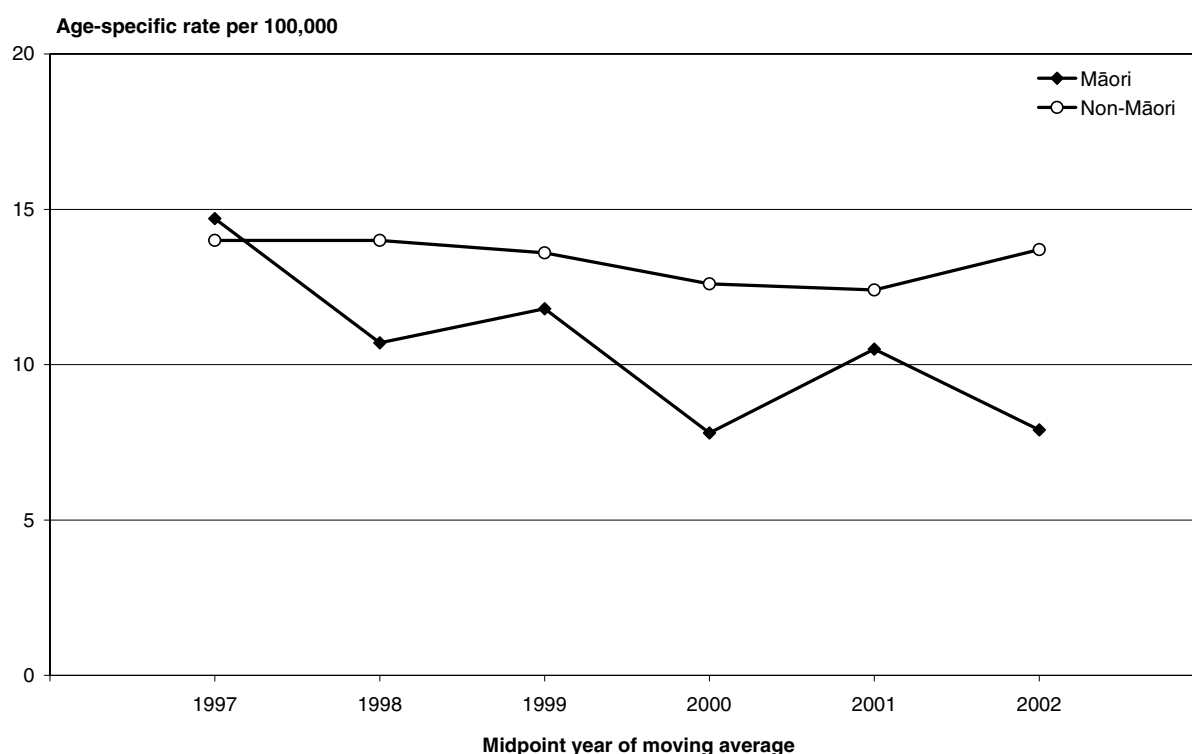
Note: New Zealand Census–Mortality Study adjustors were applied to mortality counts from 1996–1999 to address the undercount.

The suicide rates of Māori and non-Māori in this age group are very similar over the time period, which is a pattern quite different compared with the younger age groups. The similarity becomes even more marked in the next age group (45–64 years).

The suicide rate for Māori aged 35–44 years decreased from 19.8 deaths per 100,000 population in 1997–1999 to 15.4 deaths per 100,000 population in 2000–2002, however, it has increased in the most recent three-year period to 20.1 deaths per 100,000 population.

The non-Māori rate has remained relatively stable over the time period. In 1996–1998, the suicide rate was 17.3 deaths per 100,000 population compared with the 2001–2003 rate of 18.6 deaths per 100,000 population.

**Figure 25:** Age-specific suicide rates, by ethnicity, 45–64 years, three-year moving averages, 1996–2003



Source: New Zealand Health Information Service

Note: New Zealand Census–Mortality Study adjustors were applied to mortality counts from 1996–1999 to address the undercount.

In contrast to all the younger age groups, since 1997–1999 the 45–64 year age group is the only one for which non-Māori have consistently higher rates than Māori.

Overall, the Māori suicide rate for 45–64-year-olds has declined 46.2 percent over the time period, from 14.7 deaths per 100,000 population in 1996–1998 to 7.9 per 100,000 population in 2001–2003.

The non-Māori suicide rate in 1996–1998 was 14.0 deaths per 100,000 population compared with the 2001–2003 suicide rate of 13.7 deaths per 100,000 population.

A comparison of Māori and non-Māori older people aged 65 years and over has not been presented because the number of Māori deaths and the small Māori population in this age group would yield unstable rates (see Appendices 3 and 4 for numbers).



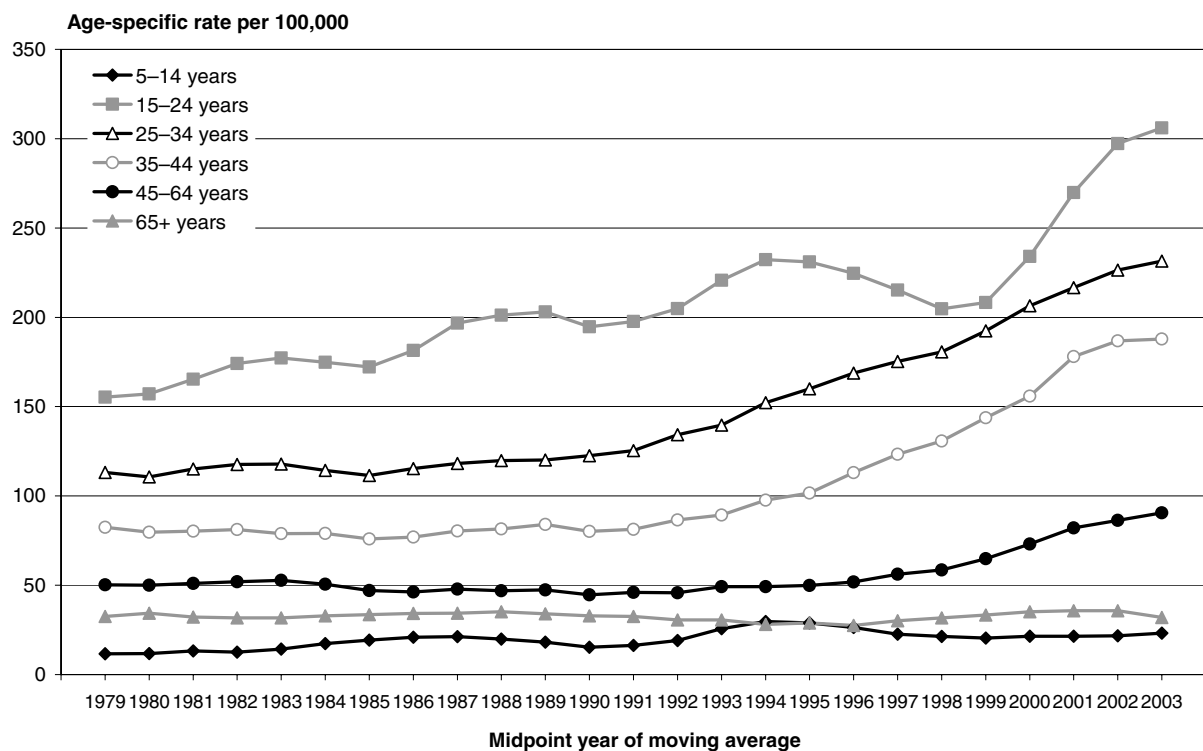
### Summary of suicide trends: age groups, by ethnicity

- Among Māori, suicide was largely confined to those aged under 35 years.
- Among youth and young adults (15–34 years), Māori suicide rates were generally higher than non-Māori rates.
- Both Māori and non-Māori suicide rates have declined for the 15–34 year age group in recent years.
- The suicide rate for Māori aged 45–64 years has decreased overall, in contrast, the non-Māori suicide rate has been relatively stable.

## Hospitalisations

### Total population

**Figure 26:** Age-specific intentional self-harm hospitalisation rates, by age group, three-year moving averages, 1978–2004



Source: New Zealand Health Information Service

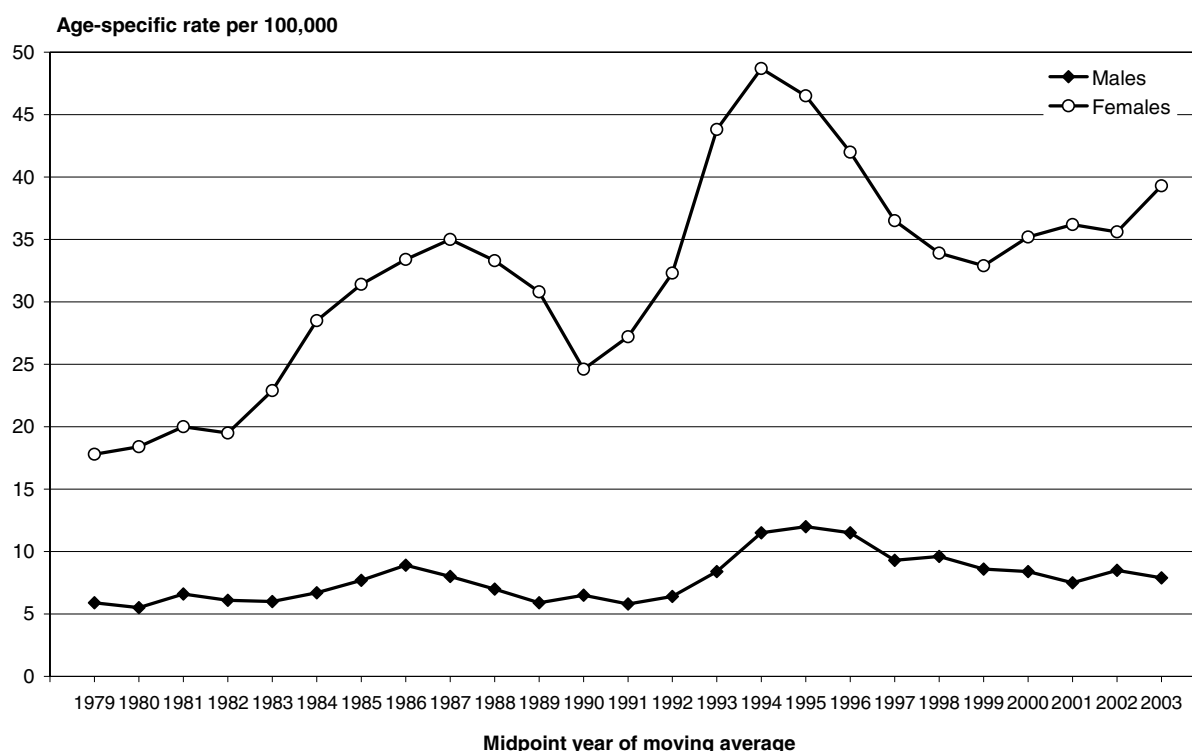
Throughout the time period, youth (15–24 years) had the highest hospitalisation rate for intentional self-harm, followed by 25–34-year-olds, and then 35–44-year-olds.

The youth rate increased from the mid-1980s to the mid-1990s, decreased prior to the ICD coding change, and has subsequently increased since then.

There was minimal change in the intentional self-harm hospitalisation rates for people in the middle and older age groups (45 years and over) between 1978 and 2004, apart from a slight increase in the 45–64-year-old rate after the ICD coding change.

## Age groups, by sex

**Figure 27:** Age-specific intentional self-harm hospitalisation rates, by sex, 5–14 years, three-year moving averages, 1978–2004



Source: New Zealand Health Information Service

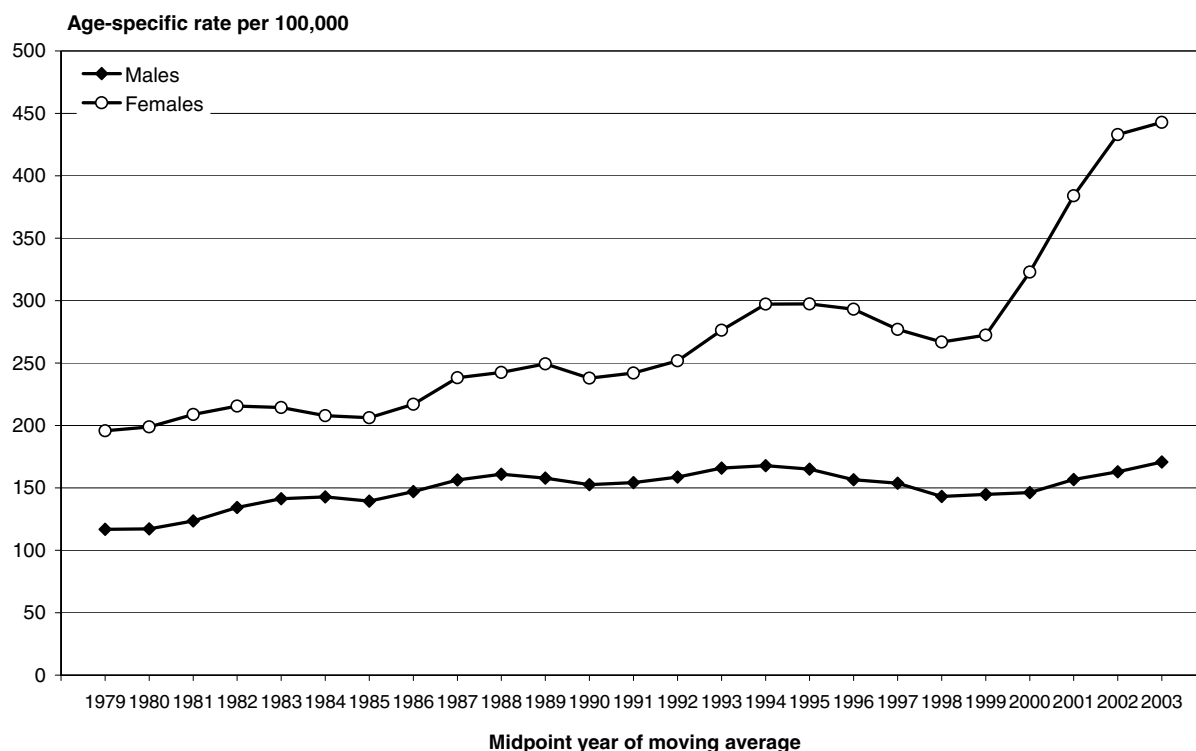
For children (aged 5–14 years), the female intentional self-harm hospitalisation rate was consistently higher than the male rate between 1978 and 2004.

The female-to-male hospitalisation ratio for children (5–14 years) increased from 1978 to 2004, from 3.0 to 5.0 females hospitalised for every male hospitalised in 1978–1979 and 2002–2004 respectively.

For females, the rate peaked at 48.7 per 100,000 population, decreased through to 1998–2000 and then increased after the ICD coding change.

The intentional self-harm hospitalisation rate among males also peaked at 12.0 per 100,000 population in the mid-1990s, however, it has been relatively stable throughout the period from 1978 to 2004.

**Figure 28:** Age-specific intentional self-harm hospitalisation rates by sex, 15–24 years, three-year moving averages, 1978–2004



Source: New Zealand Health Information Service

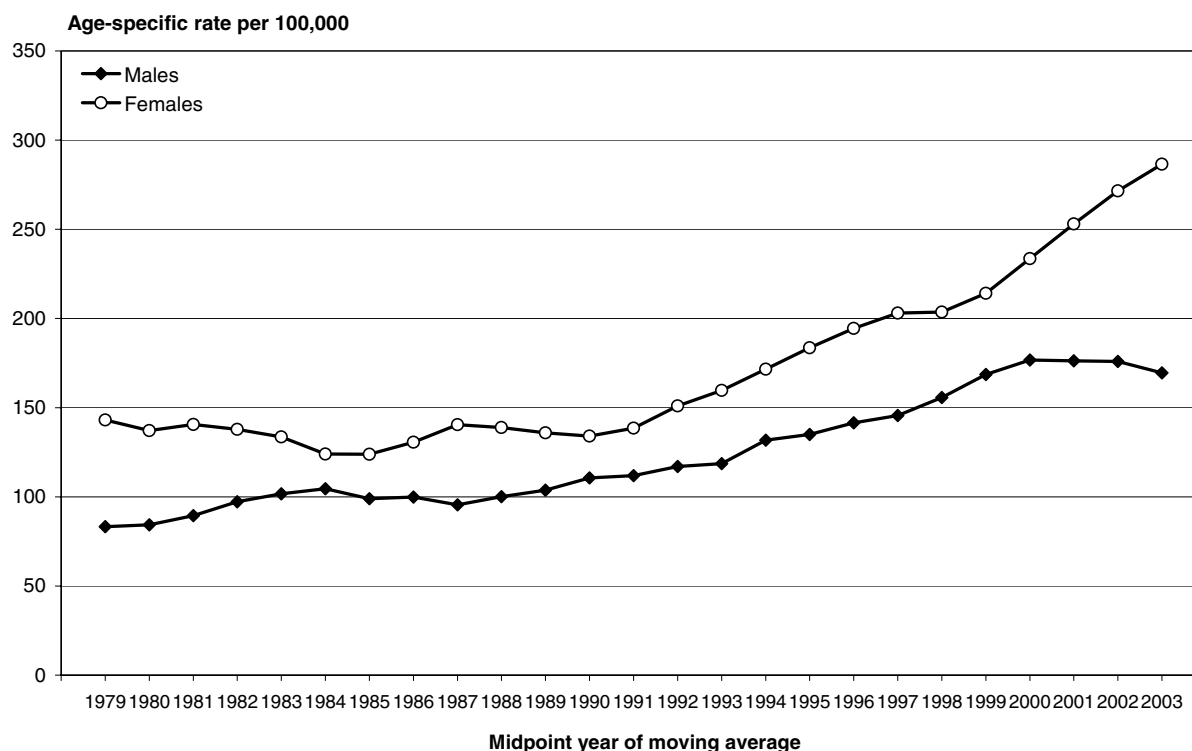
The female youth (15–24 years) hospitalisation rate was higher than the male rate throughout the time period.

For female youth, the intentional self-harm hospitalisation rate increased between 1983 and 2004. After the change in coding practice there was a steep increase in the hospitalisation rate to 442.8 per 100,000 population in the 2002–2004 period.

The male youth (15–24 years) intentional self-harm hospitalisation rate remained stable from 1978 to 2004 and is currently 170.8 per 100,000 population.

The female-to-male hospitalisation ratio increased from 1978 to 2004, from 1.7 to 2.6 females hospitalised for every male hospitalised in 1978–1979 and 2002–2004 respectively.

**Figure 29:** Age-specific intentional self-harm hospitalisation rates, by sex, 25–34 years, three-year moving averages, 1978–2004

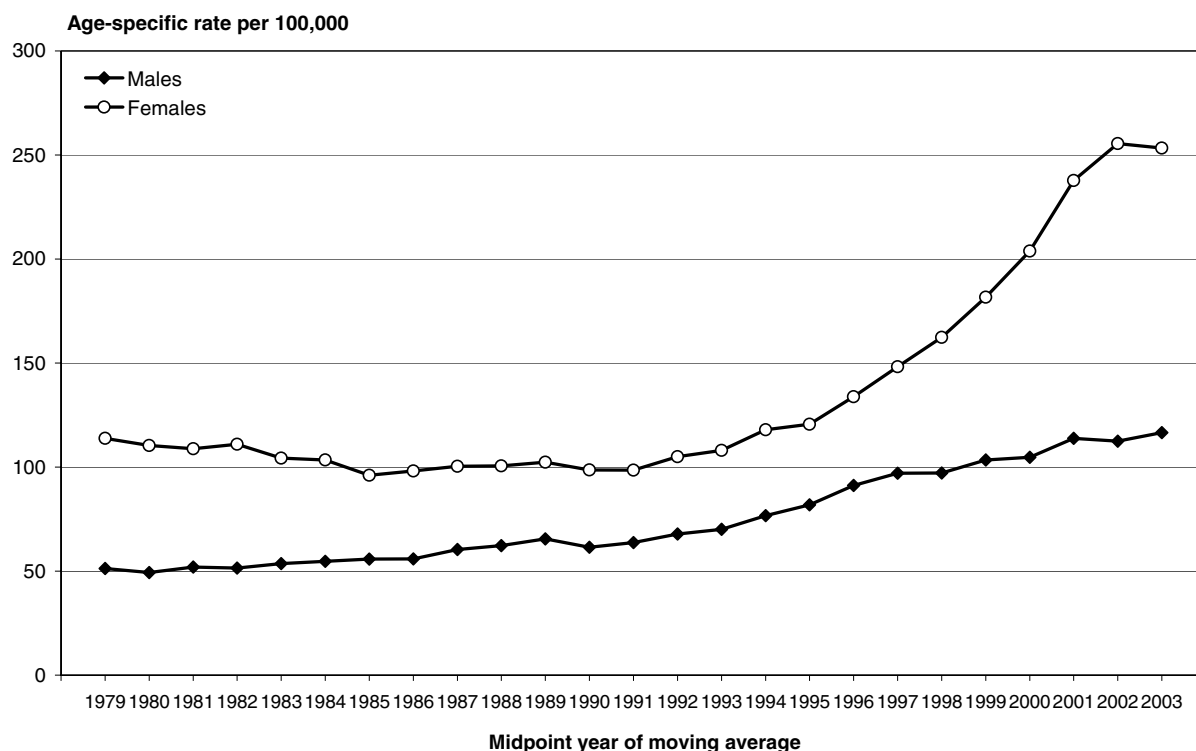


Source: New Zealand Health Information Service

From 1978–1999 there was an increase in the hospitalisation rates of males and females aged 25–34 years. Since 1997–1999, there has been an increase in hospitalisation rates for females and a levelling off in the male rate. In the 2002–2004 period, the female and male rates were 286.5 and 169.5 per 100,000 population respectively.

The ratio of female-to-male hospitalisations for 25–34-year-olds was 1.7 in 1978–1980, decreased to a low of 1.2 in 1989–1992, then increased back to 1.7 in 2002–2004.

**Figure 30:** Age-specific intentional self-harm hospitalisation rates, by sex, 35–44 years, three-year moving averages, 1978–2004



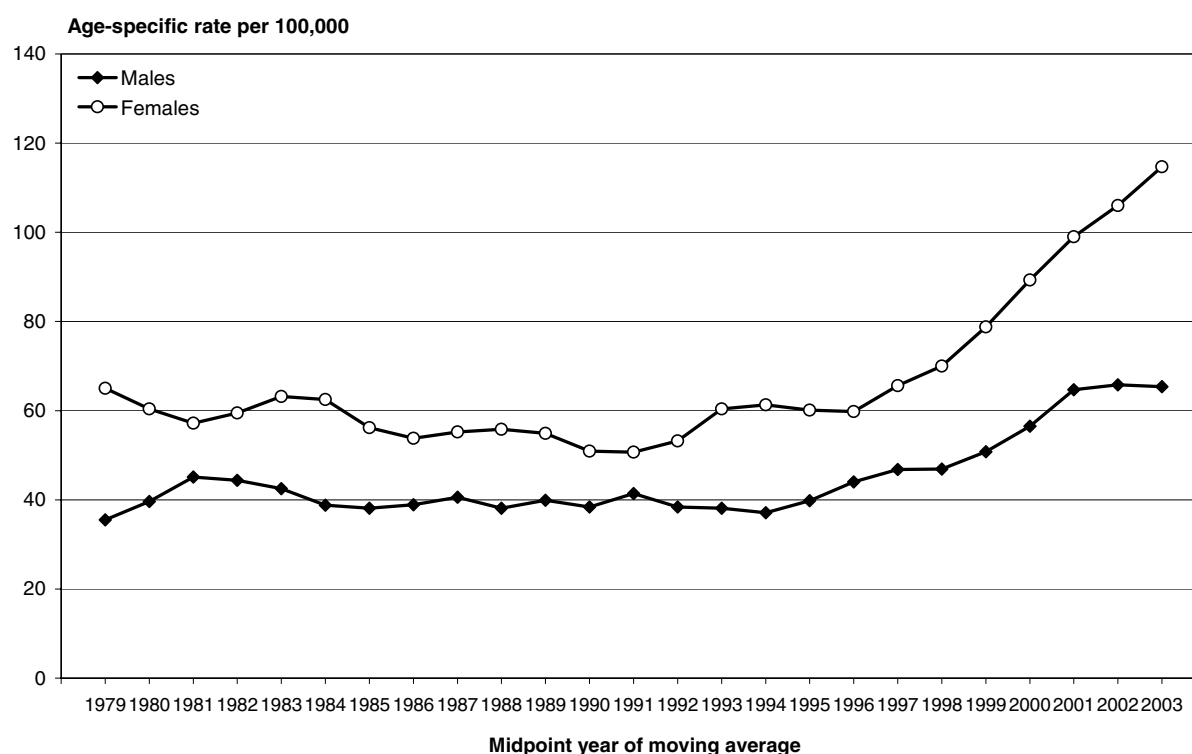
Source: New Zealand Health Information Service

The 35–44-year-old male hospitalisation rate increased slightly from 1978 to 2004. The 35–44-year-old female hospitalisation rate was stable from 1978 until 1994, then increased steeply until the end of the period.

The female-to-male sex ratio for 35–44-year-olds for intentional self-harm hospitalisations was equivalent at the beginning and end of the period (2.2 females to every male hospitalised), and was lowest from 1990 to 1998 (1.5 females to every male hospitalised).

The respective rates of hospitalisation for the period 2002–2004 for females and males were 253.3 and 116.6 per 100,000 population.

**Figure 31:** Age-specific intentional self-harm hospitalisation rates, by sex, 45–64 years, three-year moving averages, 1983–2004



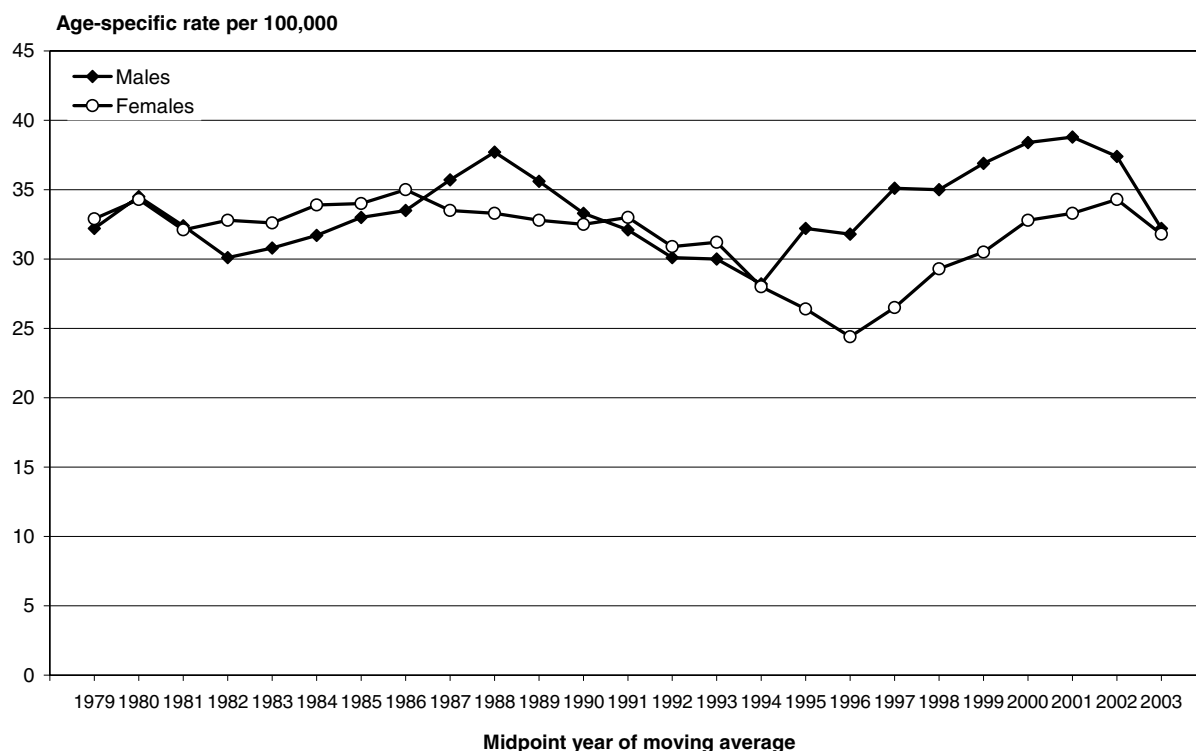
Source: New Zealand Health Information Service

The 45–64-year-old male hospitalisation rate fluctuated but stayed roughly stable from 1978 to 1994. Between 1994 and 2004, the male rate increased then stabilised. The 45–64-year-old female hospitalisation rate fluctuated from 1978 until 1995, then increased steeply until the end of the period.

The female-to-male sex ratio for 45–64-year-olds for intentional self-harm hospitalisations was equivalent at the beginning and end of the period (1.8 females to every male hospitalised), and was lowest from 1990 to 1992 (1.2 females to every male hospitalised).

In the 2002–2004 period, the female and male rates were 114.7 and 65.4 per 100,000 population respectively.

**Figure 32:** Age-specific intentional self-harm hospitalisation rates, by sex, 65+ years, three-year moving averages, 1983–2004



Source: New Zealand Health Information Service

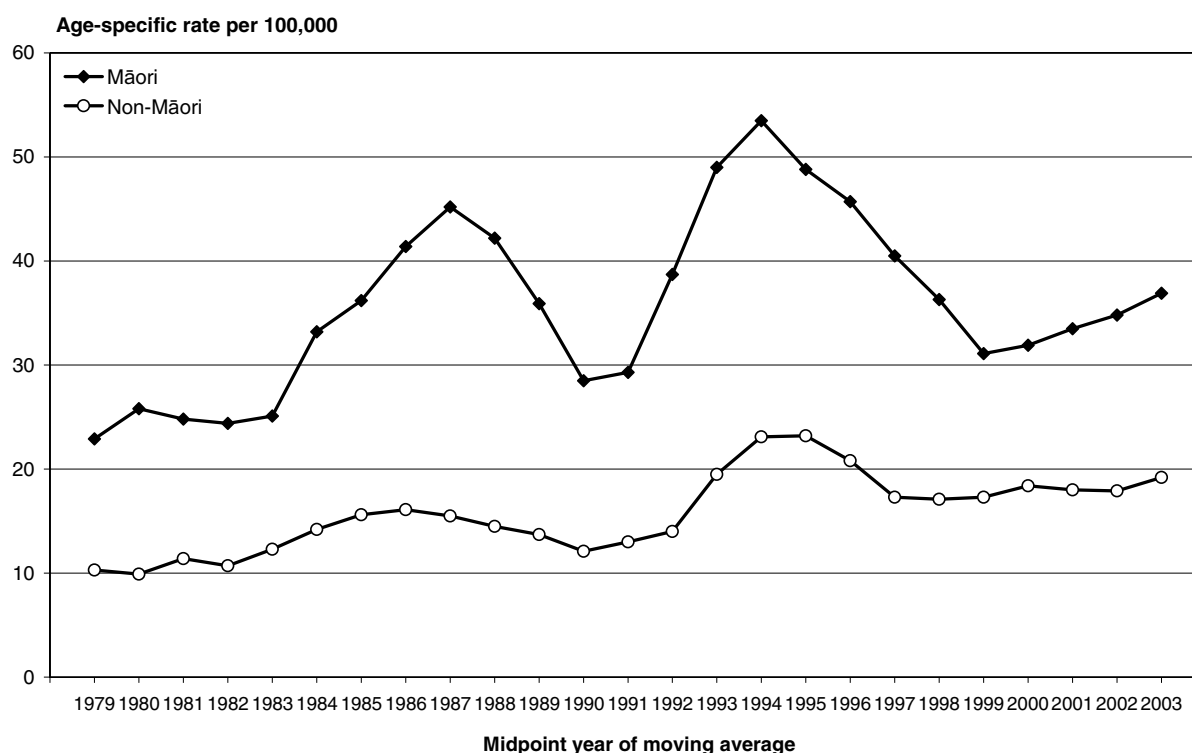
Male and females rates were similar up to 1993–1995, apart from a peak in the male rate in 1987–1989. The male rate was higher in the remainder of the period, but the male and female rates have been converging in the recent periods.

### Summary of hospitalisation trends: age groups, by sex

- Between 1978 and 2004, youth (15–24 years) had a markedly higher rate of hospitalisation than other age groups.
- The sex disparity for hospitalisation is highest for children (aged 5–14 years) followed by youth (15–24 years), and the female rate was higher than the male rate throughout the time period for both these age groups.
- The sex disparity in hospitalisation for intentional self-harm is largely driven by the disparity in those aged under 25 years.

## Age groups, by ethnicity

**Figure 33:** Age-specific intentional self-harm hospitalisation rates, by ethnicity, 5–14 years, three-year moving averages, 1978–2004



Source: New Zealand Health Information Service

Intentional self-harm hospitalisation rates for Māori children (5–14 years) were higher than those for non-Māori children.

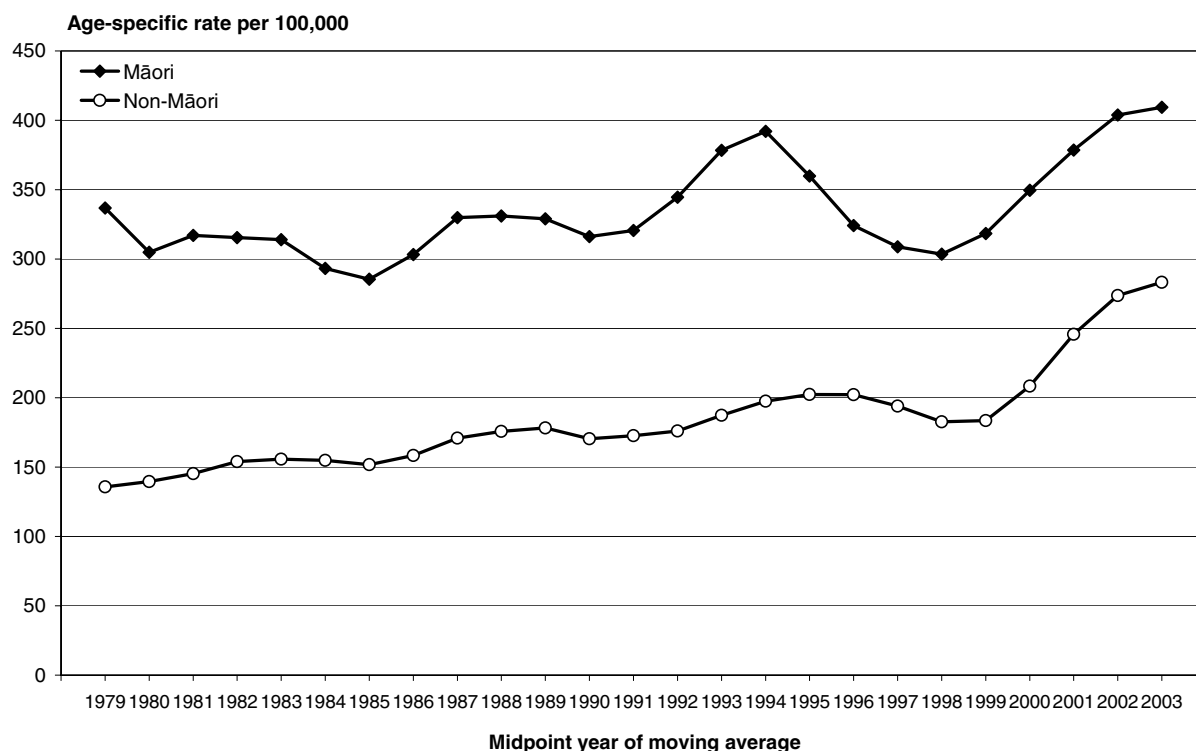
Rates for both Māori and non-Māori peaked in the mid-1990s. For Māori, the rate peaked in 1993–1995 at 53.5 per 100,000 population and for non-Māori in 1994–1996 at 23.2 per 100,000 population.

For children (5–14 years), the ratio of Māori to non-Māori hospitalisations was greatest in 1986–1989 (2.9 Māori hospitalised for every non-Māori hospitalised) and from 2000 onwards was 1.9 Māori hospitalised for every non-Māori hospitalised.

In the 2002–2004 period, the Māori and non-Māori rates were 36.9 and 19.2 per 100,000 population respectively.



**Figure 34:** Age-specific intentional self-harm hospitalisation rates, by ethnicity, 15–24 years, three-year moving averages, 1978–2004



Source: New Zealand Health Information Service

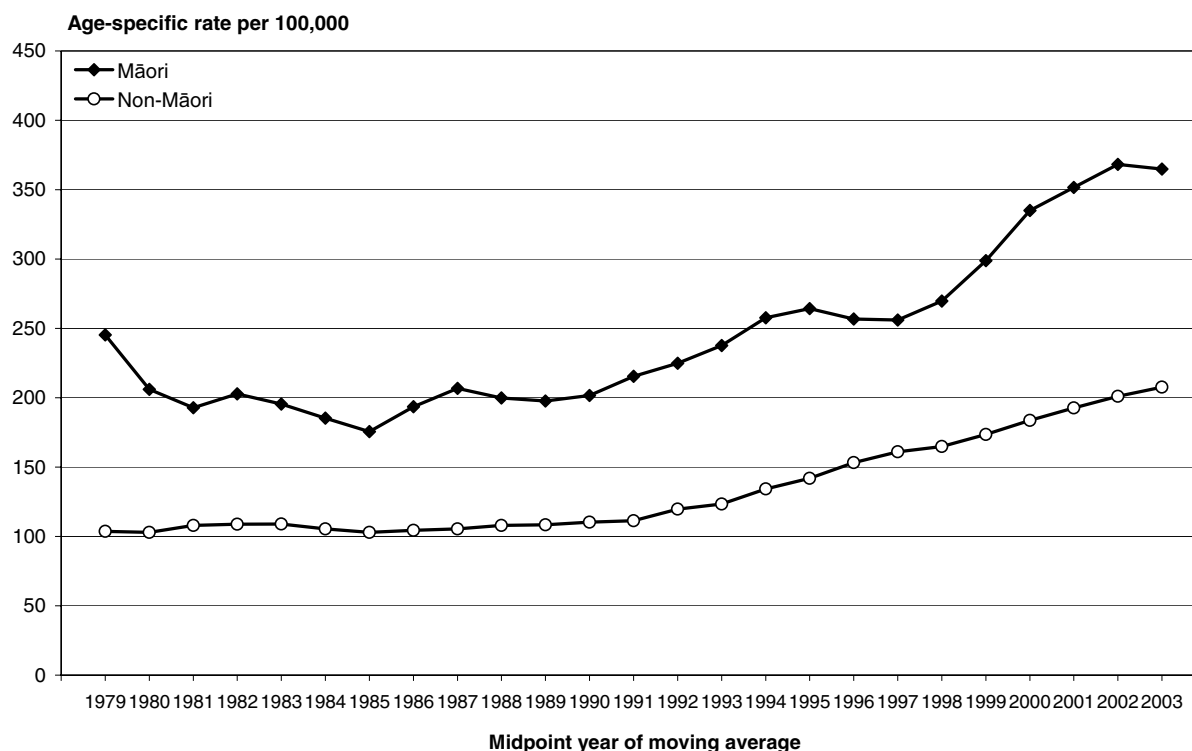
Between 1978 and 2004, Māori youth (15–24 years) had higher hospitalisation rates for intentional self-harm than non-Māori youth. The Māori rate increased to a peak of 392 hospitalisations per 100,000 population in 1993–1995.

There was an increase in the hospitalisation rates of non-Māori youth between 1978 and 2004, particularly after 1998, from 135.8 to 283.3 hospitalisations per 100,000 population.

For youth (15–24 years), the ratio of Māori to non-Māori hospitalisations was greatest in 1978–1980 (2.5 Māori hospitalised for every non-Māori hospitalised) and in 2002–2004 was 1.4 Māori hospitalised for every non-Māori hospitalised.

In the 2002–2004 period, the Māori and non-Māori rates were at their highest, at 409.4 and 283.3 per 100,000 population respectively.

**Figure 35:** Age-specific intentional self-harm hospitalisation rates, by ethnicity, 25–34 years, three-year moving averages, 1978–2004



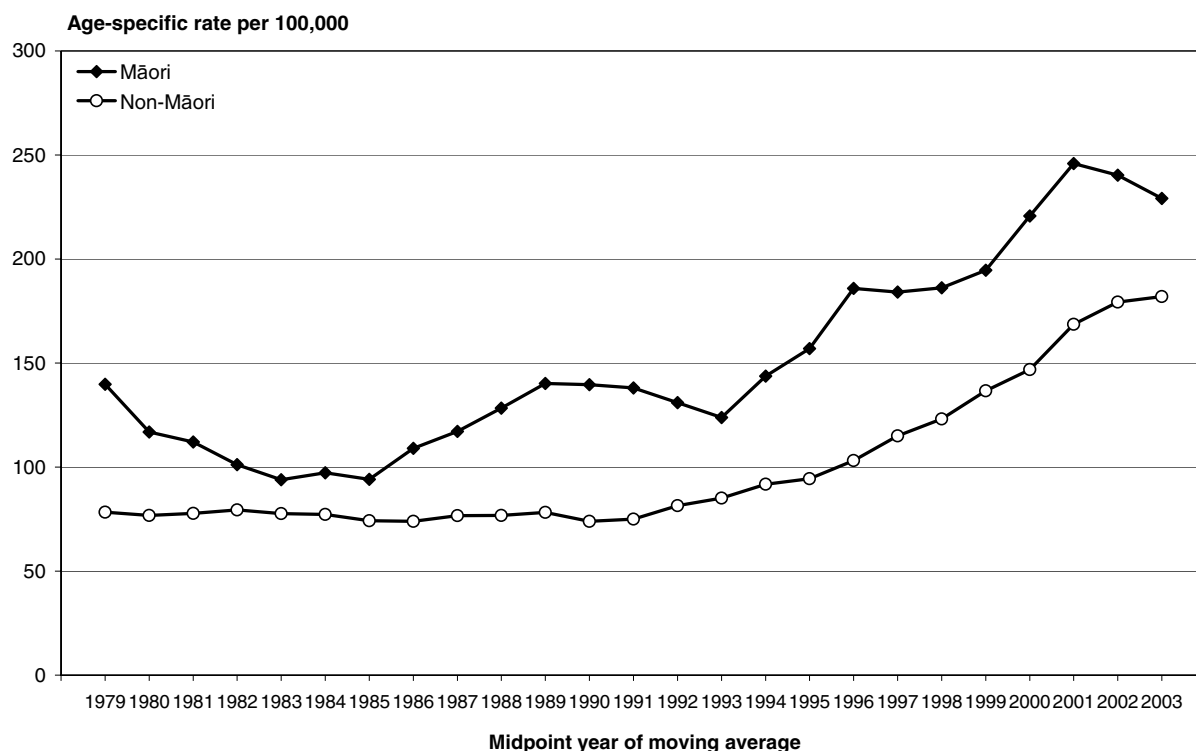
Source: New Zealand Health Information Service

Māori aged 25–34 years had higher hospitalisation rates for intentional self-harm between 1978 to 2004, compared with non-Māori. The Māori rate reached a peak in 2001–2003 (368.2 hospitalisations per 100,000 population). In this time period, there was a gradual increase in the rate for non-Māori from 103.7 hospitalisations per 100,000 population in 1978–1980, to 207.7 hospitalisations per 100,000 population in 2002–2004.

For people aged 25–34 years, the ratio of Māori to non-Māori hospitalisations was greatest in 1978–1980 (2.4 Māori hospitalised for every non-Māori hospitalised) and in 2002–2004 was 1.8 Māori hospitalised for every non-Māori hospitalised.

In the 2002–2004 period, the Māori and non-Māori rates were at their highest, at 364.9 and 207.7 per 100,000 population respectively.

**Figure 36:** Age-specific intentional self-harm hospitalisation rates, by ethnicity, 35–44 years, three-year moving averages, 1978–2004



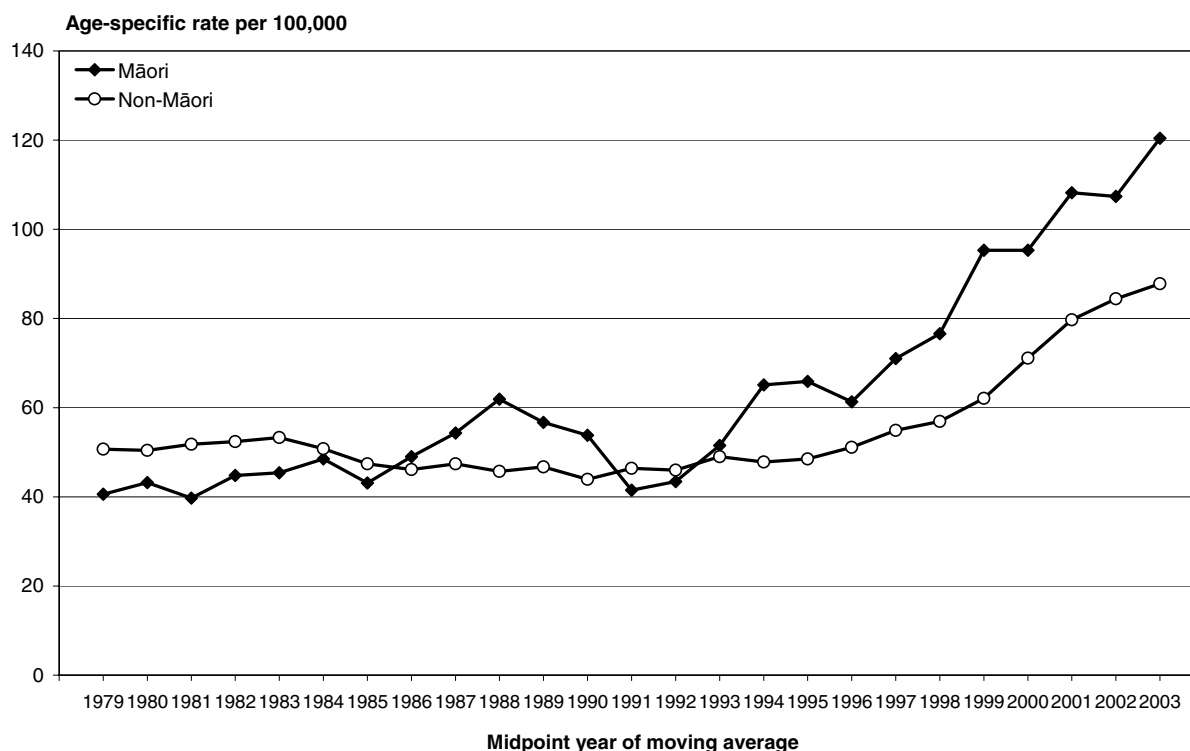
Source: New Zealand Health Information Service

The intentional self-harm hospitalisation rates of Māori were consistently higher than for non-Māori, reaching a peak in 2000–2002 (245.9 hospitalisations per 100,000 population). In this time period, the rate for non-Māori was stable for the first half until 1992 (75.0 hospitalisations per 100,000 population in 1990–1992), then increased to 182.0 hospitalisations per 100,000 population in 2000–2004.

For people aged 35–44 years, the ratio of Māori to non-Māori hospitalisations was greatest in 1989–1991 (1.9 Māori hospitalised for every non-Māori hospitalised) and in 2002–2004 was 1.3 Māori hospitalised for every non-Māori hospitalised.

In the 2002–2004 period, the Māori and non-Māori rates were at their highest, at 229.1 and 182.0 per 100,000 population respectively.

**Figure 37:** Age-specific intentional self-harm hospitalisation rates, by ethnicity, 45–64 years, three-year moving averages, 1978–2004



Source: New Zealand Health Information Service

For 45–64-year-olds, the Māori and non-Māori rates have increased since 1996 from previous levels, with Māori generally experiencing higher rates from 1986 onwards.

The ratio of Māori to non-Māori hospitalisations has reversed from the beginning to the end of the period. In the beginning of the period, more non-Māori were hospitalised than Māori, however, this had reversed by the end of the period. In 1978–1980, there were 0.8 Māori hospitalised for every non-Māori hospitalised, by 2002–2004, 1.4 Māori were hospitalised for every non-Māori hospitalised.

In the 2002–2004 period, the Māori and non-Māori rates were at their highest, at 120.4 and 87.8 per 100,000 population respectively.

A comparison of Māori and non-Māori older people (aged 65 years and over) has not been presented because the number of Māori hospitalisations and small Māori population in this age group would yield unstable rates (see Appendices 9 and 10 for numbers).

### **Summary of hospitalisation trends: age groups, by ethnicity**

- Amongst children, youth and young adults (5–34 years), Māori rates of hospitalisations were generally higher than non-Māori rates.
- For non-Māori between 1978 and 2004 there was a marked increase for youth (15–24 years) from 135.8 per 100,000 to 283.3 per 100,000.
- In 2001–2003, the disparity between Māori and non-Māori in hospitalisations was greatest for those aged 5–14 years (1.9 Māori children hospitalised for every non-Māori child).

# Trends by Socioeconomic Status

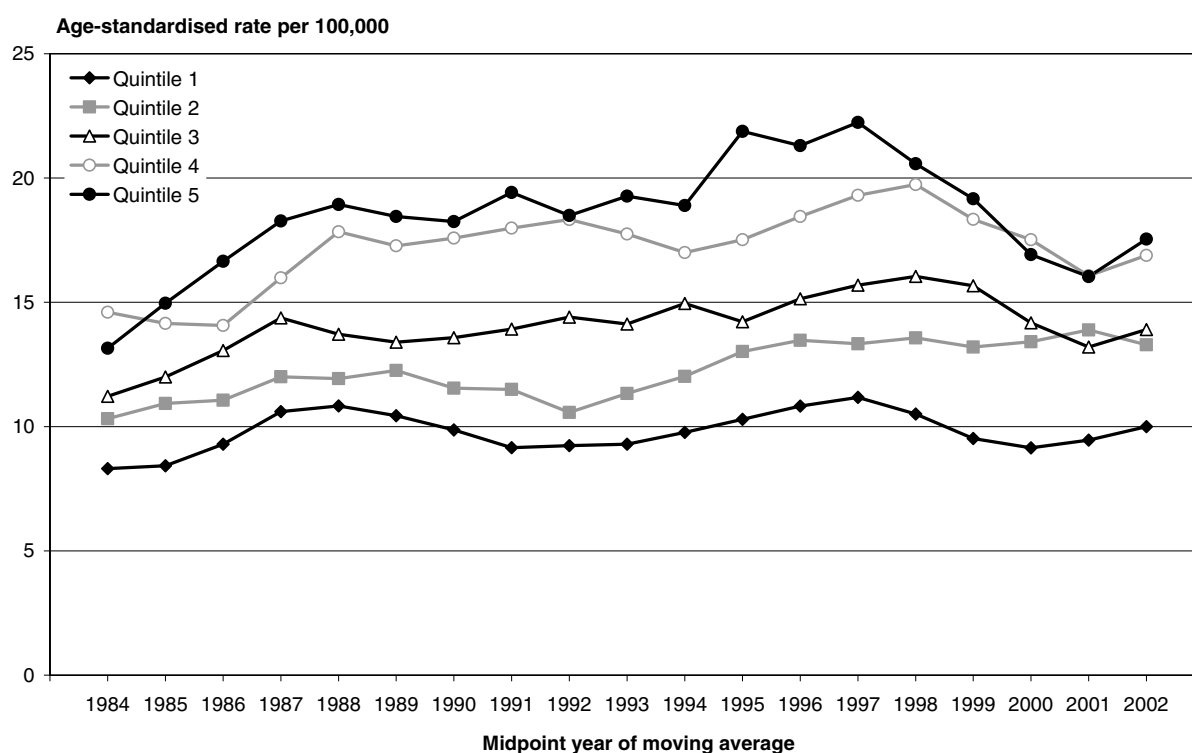
## Deaths

The following figures present three-year moving average suicide rates by socioeconomic status from 1983–2003. The 2001 New Zealand Deprivation Index (NZDep01) was used as the measure of socioeconomic status (Salmond and Crampton 2002). NZDep01 Quintile 1 is the least deprived quintile and NZDep01 Quintile 5 is the most deprived quintile. For more information, see the ‘Methods and Data Sources’ section.

Figure 38 presents suicide rates in each of the five NZDep01 quintiles from 1983 to 2003. The graph shows that consistently higher suicide rates exist in more deprived areas and that this pattern has held throughout most of the 20-year period. It also shows that rates of suicide by deprivation have increased in all quintiles, with rates in 2003 higher than those in 1983.

Rates in the least deprived areas have not varied as much as rates in the most deprived areas. Rates in the least deprived areas (NZDep01 Quintile 1) varied from 8.3 to 11.2 suicides per 100,000 population. In the most deprived quintile (NZDep01 Quintile 5), suicide rates varied from a minimum of 13.1 per 100,000 population in 1983–1985 to a maximum of 22.2 suicides per 100,000 population in 1996–1998, a difference of 9.1 suicides per 100,000 population.

**Figure 38:** Age-standardised suicide rates, by quintile of deprivation (NZDep01), three-year moving averages, 1983–2003



Source: New Zealand Health Information Service

Each quintile shows a trend of rising suicide rates during the mid to late 1980s and the mid-1990s. This results in two peaks – the first at around 1987–1988 and the second around 1997–1998.

Suicide rates in the most deprived areas (NZDep01 Quintile 5) are now down to a level last recorded around the mid to late 1980s. Relatively little change has been recorded in rates in the least deprived areas, with the current rates last being recorded around the late 1990s.

Table 2 presents rate ratios of suicide by deprivation quintile. Higher rates of suicide with increasing deprivation are evident. In the 1992–1994 period, the most deprived areas recorded a ratio of twice the rate of suicide of the least deprived areas.

**Table 2:** Age-standardised rate ratios of suicide, by deprivation quintile (NZDep01) for three three-year time periods, 1983–2003

Period	Quintile 1 (least deprived small areas)	Quintile 2	Quintile 3	Quintile 4	Quintile 5 (most deprived small areas)
1983–1985	1.0	1.2	1.4	1.8	1.6
1992–1994	1.0	1.2	1.5	1.9	2.1
2001–2003	1.0	1.3	1.4	1.7	1.8

Source: New Zealand Health Information Service

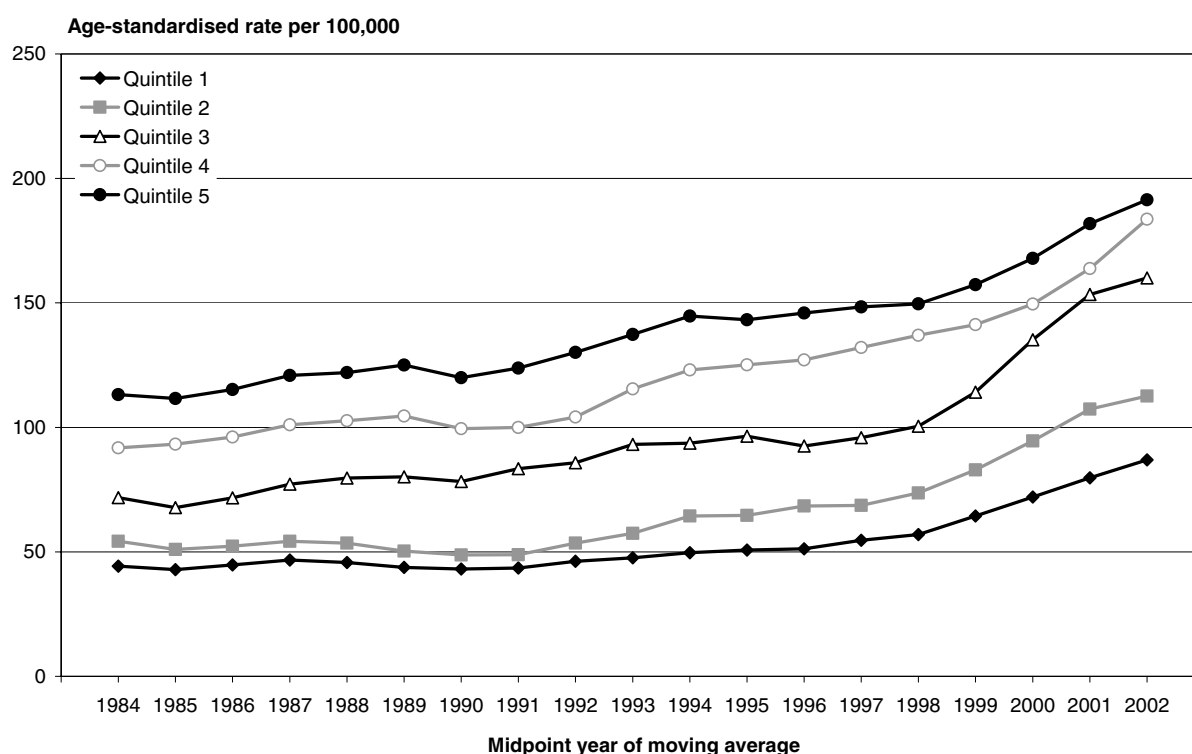
Table 2 and Figures 38 and 39 suggest not only that the most deprived areas of New Zealand (NZDep01 Quintiles 4 and 5) bear the greatest suicide burden, but also that the increasing suicide rates of the late 1980s and 1990s were a feature largely limited to those in the more deprived areas.

## Hospitalisations

Figure 39 presents hospitalisation for intentional self-harm by deprivation quintile over the last 20 years. Areas with higher deprivation record a progressively higher hospitalisation rate. This feature has existed throughout the 20-year study period.

Between 1983–1985 and 2001–2003, hospitalisation rates nearly doubled in every quintile of deprivation. Most of this can be attributable to rises in the hospitalisation rate from the late 1990s onward.

**Figure 39:** Age-standardised intentional self-harm hospitalisation rate, by quintile of deprivation (NZDep01), three-year moving averages, 1983–2003



Source: New Zealand Health Information Service

**Table 3:** Age-standardised rate ratios of hospitalisation rates for intentional self-harm, by deprivation quintile (NZDep01) for three three-year time periods, 1983–2003

Period	Quintile 1 (least deprived areas)	Quintile 2	Quintile 3	Quintile 4	Quintile 5 (most deprived areas)
1983–1985	1.0	1.2	1.6	2.1	2.6
1992–1994	1.0	1.2	2.0	2.4	2.9
2001–2003	1.0	1.3	1.8	2.1	2.2

Source: New Zealand Health Information Service

Age-standardised rate ratios of hospitalised intentional self-harm by deprivation are presented in Table 3. They show greater inequality than the suicide death figures with the most deprived quintiles (NZDep01 Quintiles 4 and 5) recording rate ratios greater than two.

For further information on the relationship between suicide and social and economic factors, see *Suicide Trends and Social Factors in New Zealand 1981–1999: Analyses from the New Zealand Census-Mortality Study* (Collings et al 2004) and *Suicide Rates in New Zealand: Exploring associations with social and economic factors* (Ferguson et al 2002).



### **Summary of trends by socioeconomic status**

- Over the last 20 years, suicide rates have been consistently higher in the more deprived areas of New Zealand.
- The least deprived areas of New Zealand have shown relatively little variation in rates over the last 20 years. The most deprived areas have shown relatively larger rises and, more recently, falls.
- Higher hospitalisation rates for intentional self-harm in the more deprived areas of New Zealand have been a consistent feature over the last 20 years.
- Rates of hospitalisation for intentional self-harm have increased since 1983–1985 in all deprivation quintiles, but especially from the late 1990s onward.
- The most deprived areas of New Zealand record more than twice the number of hospitalisation for intentional self-harm than the least deprived areas.

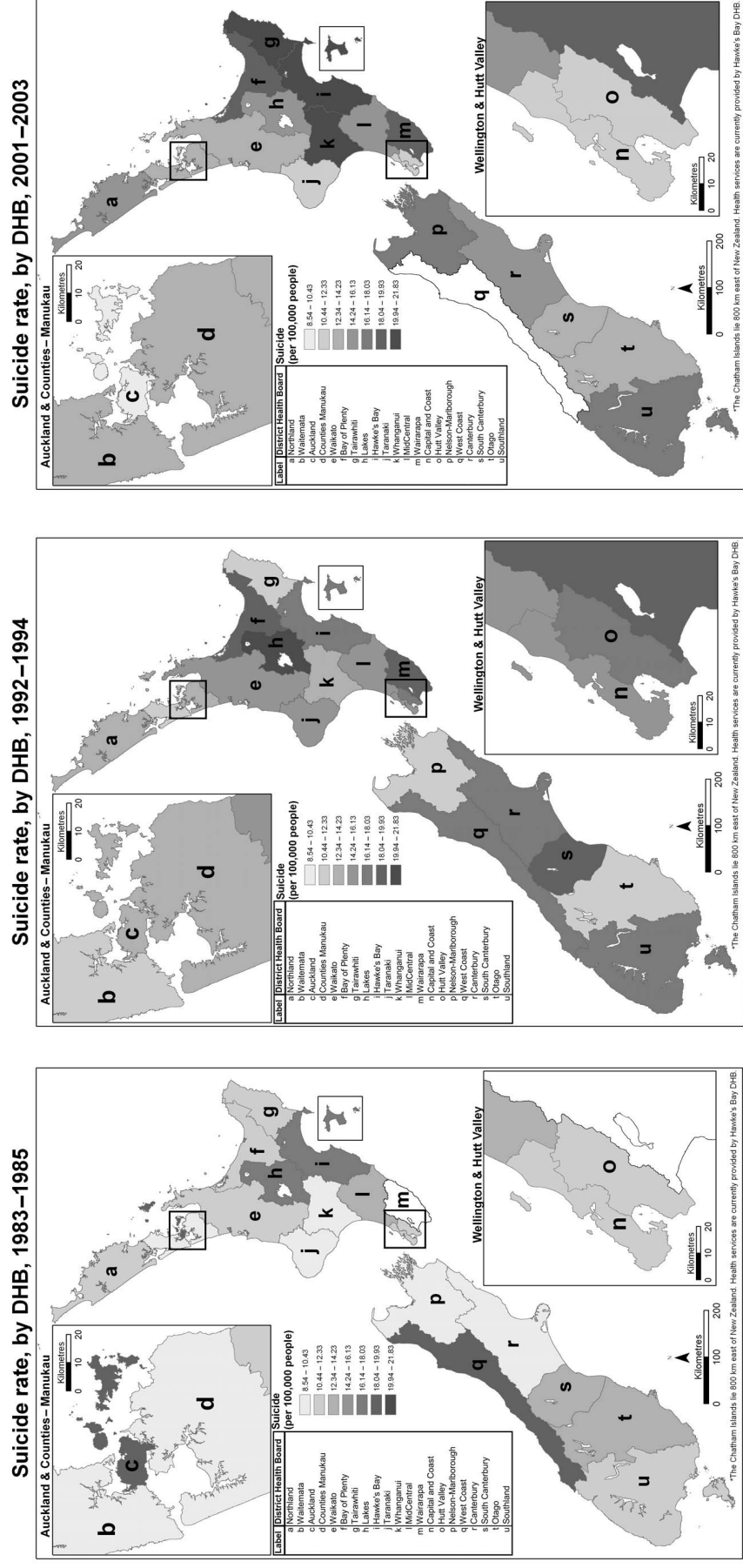
# Trends by District Health Board

## Deaths

Figure 40 displays age-standardised suicide rates for each District Health Board (DHB) in 1983–1985, 1992–1994 and 2001–2003. Suicide rates have been divided into seven equal interval categories, which are consistent over time. Increasing suicide rates can be seen by the increasing prevalence of dark shades over time and decreasing prevalence of light shades over time.

Table 4 presents the three-year moving average age-standardised suicide rates for each midpoint year of the period 1983–2003 for each DHB.

**Figure 40:** Maps of age-standardised suicide rates, by District Health Board (DHB), three-year moving averages, 1983–1985, 1992–1994 and 2001–2003



Source: New Zealand Health Information Service

**Table 4:** Age-standardised suicide rates, by District Health Board (DHB), three-year moving averages, 1983–2003

DHB	Midpoint year of moving average																		
	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002
Auckland	18.2	17.7	16.8	16.8	18.0	18.2	17.3	15.0	13.6	13.1	13.9	12.9	13.4	14.0	15.6	14.8	12.4	9.9	9.6
Bay of Plenty	11.2	10.8	10.5	12.1	12.9	12.9	14.1	16.5	16.1	18.5	17.2	18.3	19.8	20.5	22.0	17.9	17.3	15.9	18.4
Canterbury	9.8	12.4	13.7	16.9	16.6	18.3	17.7	17.8	16.8	17.2	17.8	18.6	19.7	19.2	17.2	14.2	14.0	14.6	14.7
Capital and Coast	10.8	11.6	11.5	12.5	15.0	14.8	15.7	15.2	15.8	15.9	16.7	18.3	17.7	15.3	11.8	10.9	11.3	12.5	12.2
Counties Manukau	8.5	9.4	12.0	13.9	15.7	15.7	17.1	16.3	15.0	13.7	14.3	15.7	14.7	14.1	13.5	13.4	13.6	13.4	14.2
Hawke's Bay	16.7	16.4	17.9	18.4	19.5	17.6	13.2	14.5	15.6	17.9	16.4	16.9	15.9	16.9	16.5	19.3	21.0	23.1	21.8
Hutt Valley	11.8	10.6	9.7	9.9	10.7	11.5	13.4	14.2	15.4	16.8	18.0	19.0	18.2	16.9	16.0	15.5	13.7	11.3	12.2
Lakes	17.1	15.9	13.0	14.4	14.2	13.7	12.5	15.9	16.2	20.8	19.7	19.8	18.2	19.8	21.5	20.3	18.1	16.3	15.4
MidCentral	13.3	11.3	13.5	14.0	15.6	14.1	14.7	14.0	14.2	14.5	12.8	15.5	15.6	18.8	17.9	15.8	14.3	13.1	15.9
Nelson-Marlborough	9.1	8.0	7.6	9.2	10.6	11.6	12.5	14.6	12.3	11.3	12.0	13.0	14.4	14.5	16.7	20.1	21.8	21.1	16.7
Northland	12.0	12.5	13.0	16.3	17.2	16.5	13.9	13.0	12.6	13.9	13.3	17.5	16.4	20.8	20.9	20.0	16.6	13.3	15.8
Otago	13.1	14.9	14.8	17.0	15.1	13.0	11.6	10.8	12.5	12.2	13.2	13.3	13.9	14.1	13.6	14.6	14.2	13.5	14.1
South Canterbury	12.7	13.2	14.2	15.2	14.3	9.3	11.5	12.1	20.3	18.4	22.6	16.0	19.0	17.8	20.7	17.8	16.7	13.9	12.7
Southland	12.1	13.6	14.0	15.3	15.5	14.8	12.4	10.7	11.4	16.2	20.3	19.7	16.7	17.6	21.6	19.3	15.0	13.5	16.7
Tairāwhiti	10.7	12.9	–	14.0	13.5	13.7	–	11.4	–	11.4	15.4	18.7	20.3	23.3	21.3	17.9	–	–	20.1
Taranaki	9.7	11.9	14.1	15.3	12.9	10.8	8.4	12.9	13.3	15.3	13.1	13.9	13.4	14.5	15.3	16.0	14.3	11.4	10.7
Waikato	11.7	12.2	13.4	13.9	13.1	12.0	13.0	14.2	14.9	14.3	13.6	13.2	14.2	15.0	15.4	14.8	14.3	14.4	13.3
Wairarapa	–	–	–	–	–	–	16.0	21.0	26.5	19.7	13.8	–	–	12.7	–	–	–	–	18.6
Waitemata	10.2	11.2	13.9	15.1	15.3	15.0	15.1	15.1	13.3	12.0	13.6	14.9	16.7	15.3	14.6	13.2	13.1	13.7	13.8
West Coast	18.7	21.4	17.8	21.4	20.5	22.3	20.0	18.1	17.3	16.7	14.6	24.7	29.0	36.5	28.9	28.0	20.9	17.4	–
Whanganui	9.1	–	7.4	7.7	10.7	12.6	13.6	15.9	12.8	13.1	11.1	16.2	20.3	22.4	22.1	17.2	16.0	17.8	20.6
New Zealand	11.9	12.4	13.1	14.6	15.0	14.8	14.6	14.6	14.3	14.4	14.8	15.6	16.0	16.2	15.9	14.8	14.0	13.3	13.5

Source: New Zealand Health Information Service

Note: A – (dash) indicates that the rate was not included because the count was less than 5.

## Hospitalisations

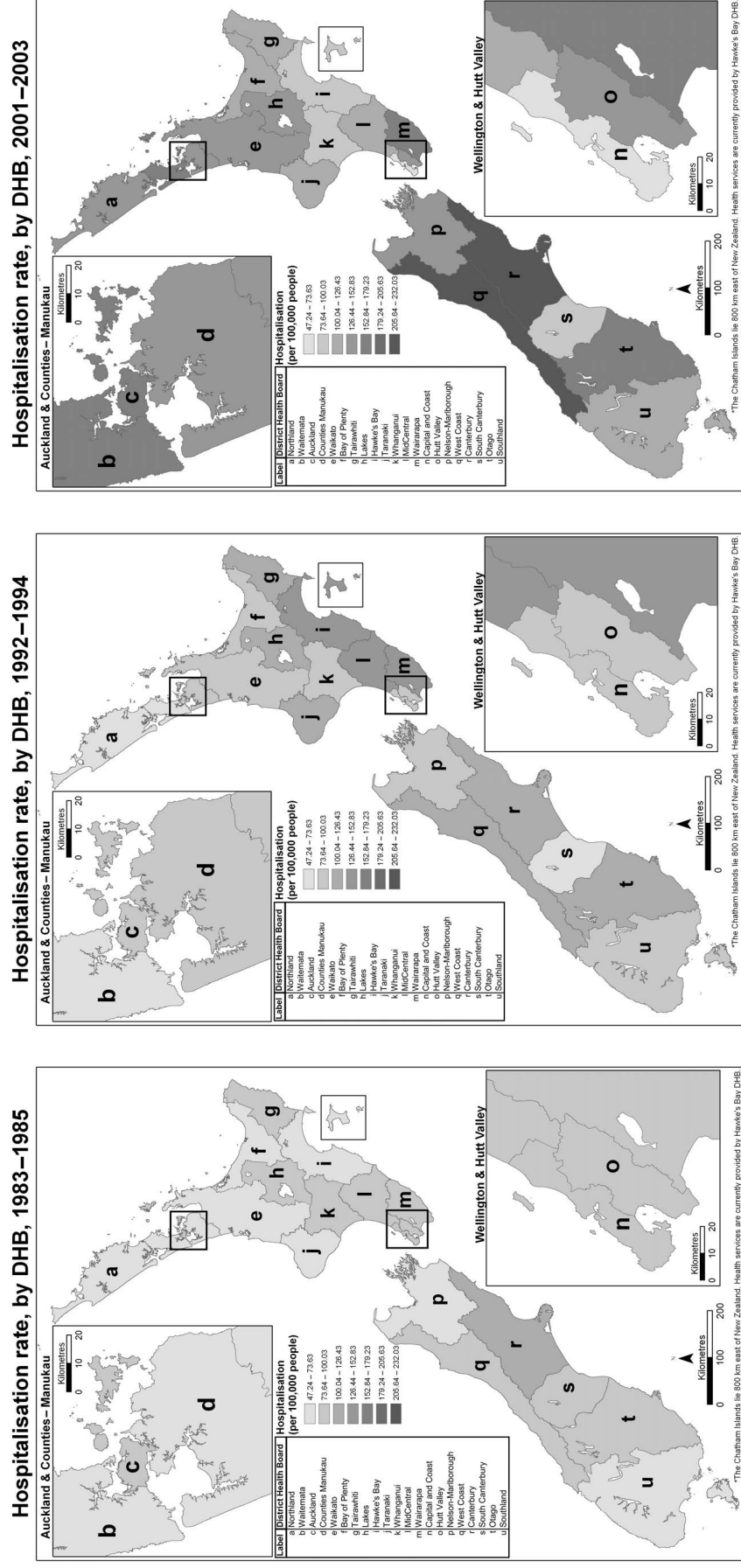
Figure 41 presents age-standardised hospitalisation rates for intentional self-harm for each DHB in 1983–1985, 1992–1994 and 2001–2003. Hospitalisation rates have been divided into seven equal interval categories, which are consistent over time. Increasing hospitalisation rates can be seen by the increasing prevalence of darker shades over time and decreasing prevalence by lighter shades over time.

Table 5 presents the three-year moving average age-standardised hospitalisation for intentional self-harm rates for each midpoint year of the period 1983–2003 for each DHB.

It should be noted that some of the regional differences in hospitalisation for intentional self-harm rates between DHBs may be because of different practices in reporting and patient management.

Comparison of Figures 40 and 41 indicates that there may be a relationship between high suicide rates and low hospitalisation rates and vice versa. Where suicide rates have clearly declined over time, hospitalisation rates have increased. Figure 41 also graphically highlights the increasing rates of hospitalisation for intentional self-harm over time that have been described in more detail earlier in this publication.

**Figure 41:** Maps of age-standardised intentional self-harm hospitalisation rates, by District Health Board (DHB), three-year moving averages, 1983–1985, 1992–1994, 2001–2003



Source: New Zealand Health Information Service

**Table 5:** Age-standardised intentional self-harm hospitalisation rates, by District Health Board (DHB), three-year moving averages, 1983–2003

DHB	Midpoint year of moving average																		
	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002
Auckland	95.8	93.6	99.0	98.4	99.7	98.1	98.5	93.0	90.5	86.4	83.6	82.2	84.0	88.3	86.0	96.5	118.1	143.6	154.3
Bay of Plenty	70.1	65.9	72.0	73.5	74.6	72.5	74.1	74.7	90.4	99.8	110.2	101.8	108.1	110.1	115.3	131.6	140.9	135.0	119.0
Canterbury	116.1	122.2	119.3	117.6	107.2	104.4	99.6	101.2	107.5	117.0	130.4	132.4	137.2	149.0	161.0	170.6	184.2	200.4	221.5
Capital and Coast	92.0	88.9	91.5	95.3	88.0	90.8	85.3	90.0	88.8	89.9	90.9	97.4	104.4	105.7	95.5	86.8	80.2	76.4	71.6
Counties Manukau	58.3	57.2	58.8	64.8	70.2	71.8	67.2	62.2	69.6	86.5	95.0	95.6	88.3	90.6	98.2	111.6	127.0	141.7	148.6
Hawke's Bay	69.7	75.1	86.5	95.9	96.4	96.0	88.2	104.5	114.5	131.1	129.5	125.3	113.8	90.6	76.4	68.6	79.2	83.5	92.2
Hutt Valley	86.6	84.6	82.4	91.7	90.4	93.8	77.9	85.7	94.3	98.5	102.0	82.8	82.4	89.0	116.5	126.2	122.8	129.7	145.8
Lakes	85.9	86.6	92.2	104.6	108.2	105.9	98.6	97.4	114.7	124.5	138.3	121.8	109.8	104.3	104.2	107.8	112.8	129.9	141.0
MidCentral	94.9	83.5	90.3	105.5	118.0	128.1	119.3	123.7	118.5	131.5	133.4	127.9	132.0	138.7	147.4	131.5	121.3	116.0	116.3
Nelson-Marlborough	54.0	53.9	59.7	69.8	68.0	73.2	70.1	70.3	68.1	73.9	81.0	91.0	98.5	97.1	101.9	101.7	110.0	115.7	143.2
Northland	58.3	61.7	53.6	50.6	46.8	53.3	58.9	69.3	72.0	65.6	62.7	68.4	90.1	106.5	114.1	118.1	125.6	135.8	148.5
Otago	96.5	82.8	76.4	80.4	77.6	83.8	83.7	89.2	92.2	103.9	119.7	139.1	146.8	146.2	135.6	149.4	161.3	169.5	163.2
South Canterbury	81.8	81.8	83.4	89.6	89.1	90.7	90.6	83.4	77.2	68.9	97.3	130.6	139.2	149.0	128.9	132.1	94.9	92.2	84.4
Southland	68.9	63.8	63.6	65.2	67.4	71.5	75.9	77.9	87.4	85.0	94.3	85.3	88.3	79.7	83.4	87.4	95.3	96.5	100.4
Tairāwhiti	86.5	82.8	84.5	88.0	105.1	111.3	112.7	105.7	109.2	100.3	115.3	125.9	152.6	154.4	132.5	109.8	93.8	109.2	107.4
Taranaki	47.2	60.9	76.7	85.3	90.9	92.7	97.6	112.7	115.5	108.1	104.5	108.7	117.0	113.2	103.5	108.7	109.3	118.0	123.1
Waikato	73.1	70.8	71.1	80.7	80.8	77.0	67.8	69.4	79.8	99.4	107.7	104.8	97.2	98.2	97.2	97.7	107.2	126.9	142.1
Wairarapa	79.5	66.4	74.4	97.7	109.3	104.8	112.7	125.2	134.5	140.9	157.5	169.2	161.8	146.2	124.4	127.6	136.3	163.3	175.2
Waitemata	57.1	53.9	59.8	60.5	71.6	69.5	74.6	69.3	66.9	62.7	60.3	64.0	64.7	62.3	64.1	84.5	121.0	154.3	170.0
West Coast	77.3	70.5	85.4	96.2	103.4	97.7	76.3	80.8	86.7	123.3	137.4	162.3	149.1	142.7	112.2	105.7	130.6	183.2	232.0
Whanganui	92.9	88.3	99.7	86.2	82.8	79.4	80.2	91.0	88.2	99.5	116.2	119.1	119.6	107.6	117.1	107.0	99.7	96.1	97.7
New Zealand	80.5	78.8	81.5	85.7	86.5	87.0	84.2	86.0	89.9	96.1	102.2	104.0	105.8	107.1	107.6	113.5	124.6	138.2	147.2

Source: New Zealand Health Information Service

Note: A – (dash) indicates that the rate was not included because the count was less than 5.

### **Summary of trends by District Health Board**

- Many DHBs displayed individual trends in their suicide and hospitalisation rates.
- Some of the regional differences in hospitalisation for intentional self-harm rates between DHBs may be because of different practices in reporting, coding and patient management. This includes the use of different definitions for a hospital admission at different DHBs.
- Comparison of Figures 40 and 41 indicates that there may be a relationship between high suicide rates and low hospitalisation rates and vice versa. Where suicide rates have clearly declined over time, hospitalisation rates have increased.
- Figure 41 also graphically highlights the increasing rates of hospitalisation for intentional self-harm over time that have been described in more detail earlier in this publication.

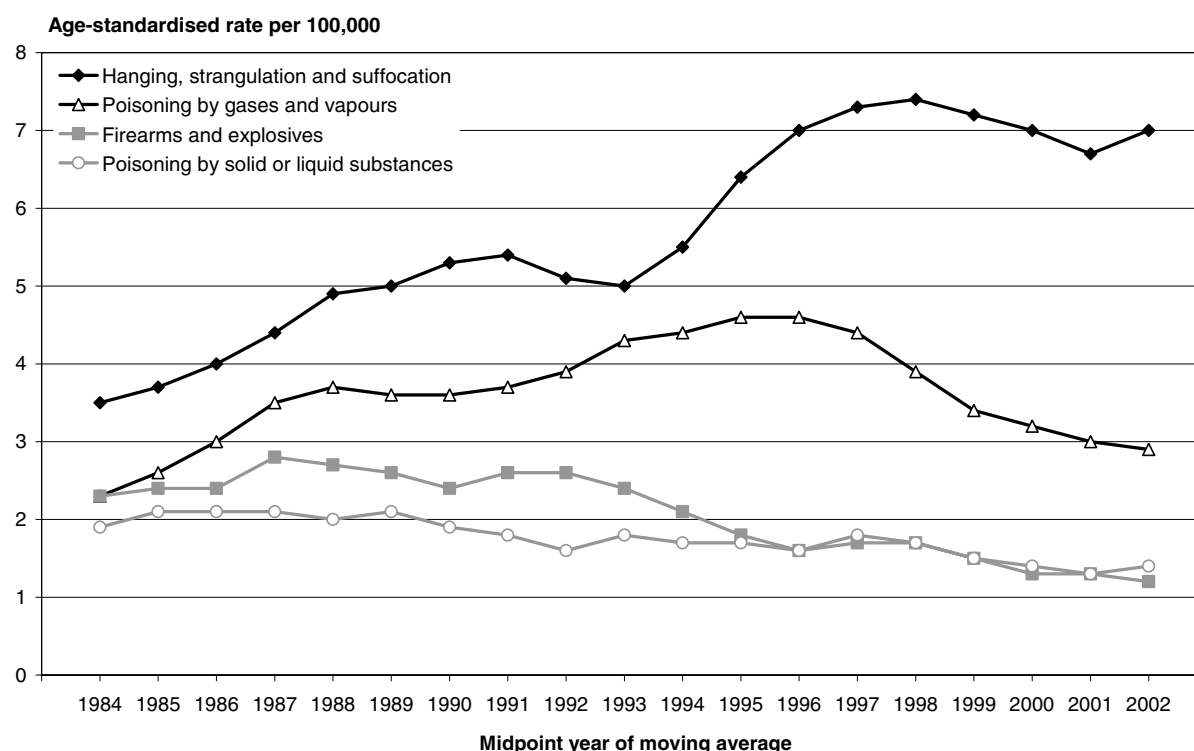


# Trends by Method

Trends over the past 20 years in methods of suicide death are presented for the total population and by sex, ethnic group and age group.

## Overall trends

**Figure 42:** Trends in major methods of suicide, total population, three-year moving averages, 1983–2003



Source: New Zealand Health Information Service

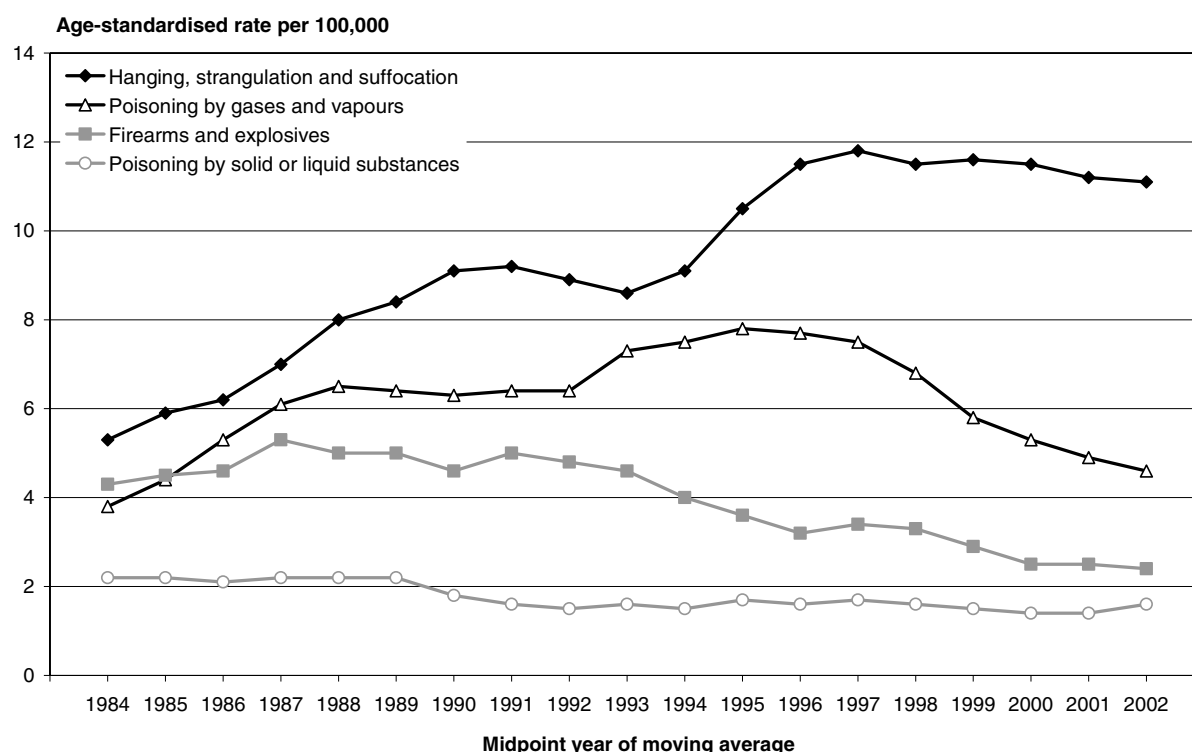
Note: Only methods of suicide with sufficient numbers to produce robust rates of at least 1 per 100,000 population across the time period are presented. For ICD codes see the 'Methods and Data Sources' section.

For the total population, the most common method of suicide was 'hanging, strangulation and suffocation', followed by 'poisoning by gases and vapours'. The rate of suicide by 'hanging, strangulation and suffocation' over the 1983–2003 period has doubled. At the beginning of the period, hanging accounted for 29 percent of all suicide deaths in 1983–1985 (3.5 deaths per 100,000 population) compared with 47 percent of all suicide deaths in 2001–2003 (7.0 deaths per 100,000 population).

The rate of suicide by 'poisoning by gases and vapours' increased to a peak in 1994–1997, then subsequently decreased. In 1994–1996, this method of suicide accounted for 29 percent of all suicide deaths (4.6 deaths per 100,000 population), compared with 21 percent in 2001–2003 (2.9 deaths per 100,000 population).

## Sex

**Figure 43:** Trends in major methods of suicide, males, three-year moving averages, 1983–2003



Source: New Zealand Health Information Service

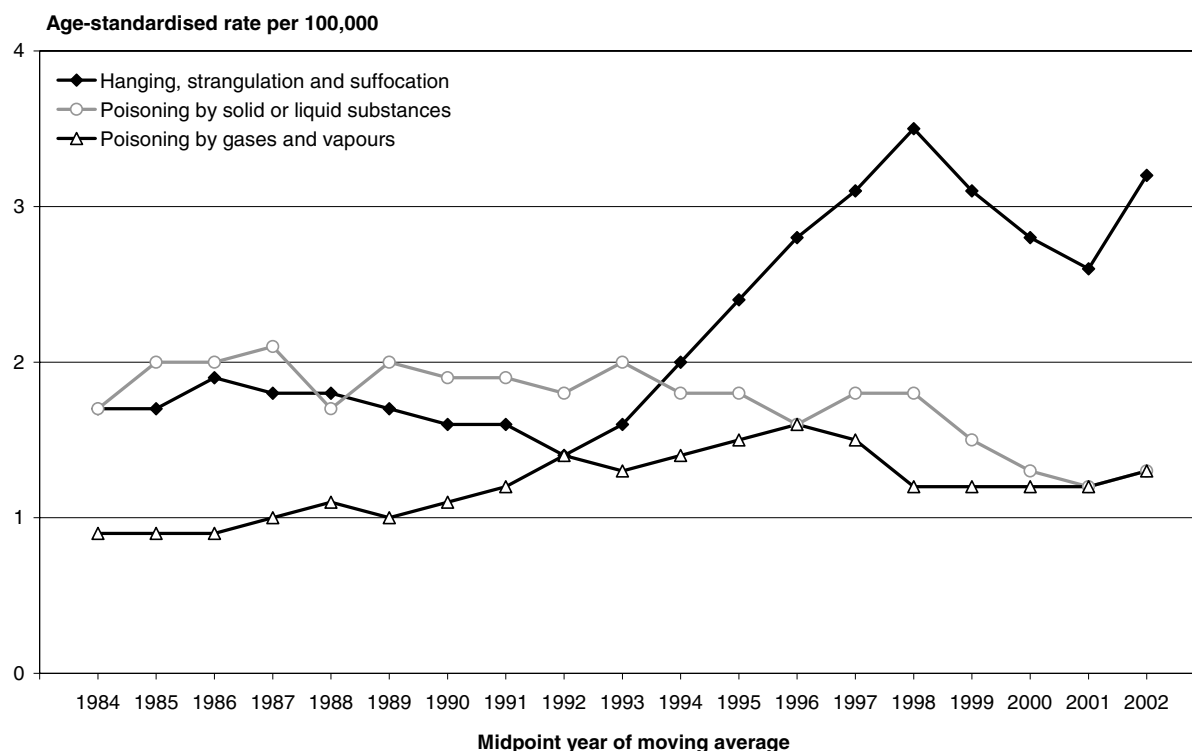
Note: Only methods of suicide with sufficient numbers to produce robust rates of at least 1 per 100,000 population across the time period are presented. For ICD codes see the 'Methods and Data Sources' section.

For males, the most common method of suicide between 1983 and 2003 was 'hanging, strangulation and suffocation' (11.1 deaths per 100,000 population in 2001–2003). This accounted for 30 percent of all male suicide deaths in 1983–1985, increasing to 48 percent of all male suicide deaths in 2001–2003. Suicide by this method was markedly higher than any other method from 1995–1997 onwards. The male rate of suicide by 'hanging, strangulation and suffocation' increased until 1997, and has since stabilised.

For most of the time period presented, 'poisoning by gases and vapours' was the second most common method of male suicide. While the male rate of suicide from this method increased from 1983–1996, since the peak in the 1995–1997 rate (7.7 deaths per 100,000 population), it has declined to 4.6 deaths per 100,000 population in the 2001–2003 period.

The male rates of suicide by 'firearms and explosives' and 'poisoning by solid or liquid substances' decreased between 1983 and 2003.

**Figure 44:** Trends in major methods of suicide, females, three-year moving averages, 1983–2003



Source: New Zealand Health Information Service

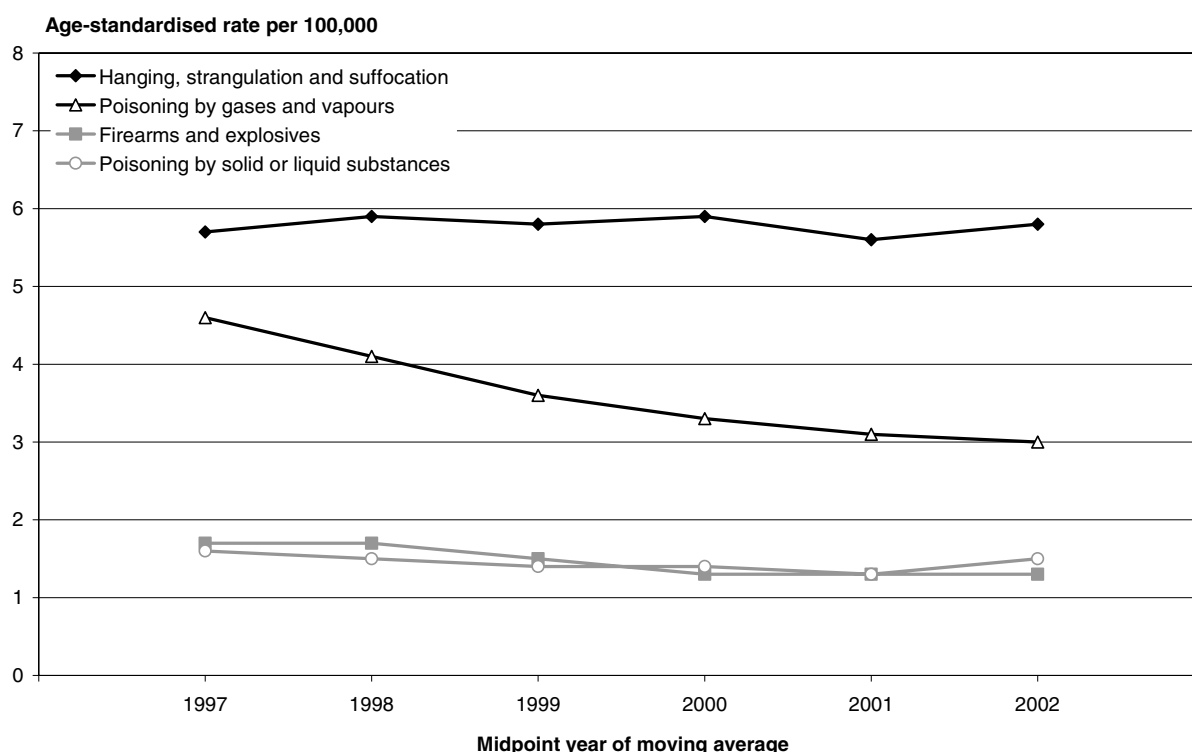
Note: Only methods of suicide with sufficient numbers to produce robust rates of at least 1 per 100,000 population across the time period are presented. For ICD codes see the 'Methods and Data Sources' section.

In contrast to the males, the most common female method of suicide has changed considerably over time. For females, the most common method of suicide between 1983 and 1994 was 'poisoning by solid or liquid substances' (1.8 deaths per 100,000 population in 1992–1994). This accounted for between 28.0 percent and 35.0 percent of all female suicide deaths between 1983 and 1994.

From 1993–1995 onwards, the most common method was 'hanging, strangulation and suffocation' reaching a peak in 1997–1999, accounting for 44.0 percent of all female suicide deaths (3.5 deaths per 100,000 population). In 2001–2003, hanging still accounted for 44.0 percent of all female suicides.

## Ethnic group

**Figure 45:** Trends in major methods of suicide, non-Māori, three-year moving averages, 1996–2003



Source: New Zealand Health Information Service

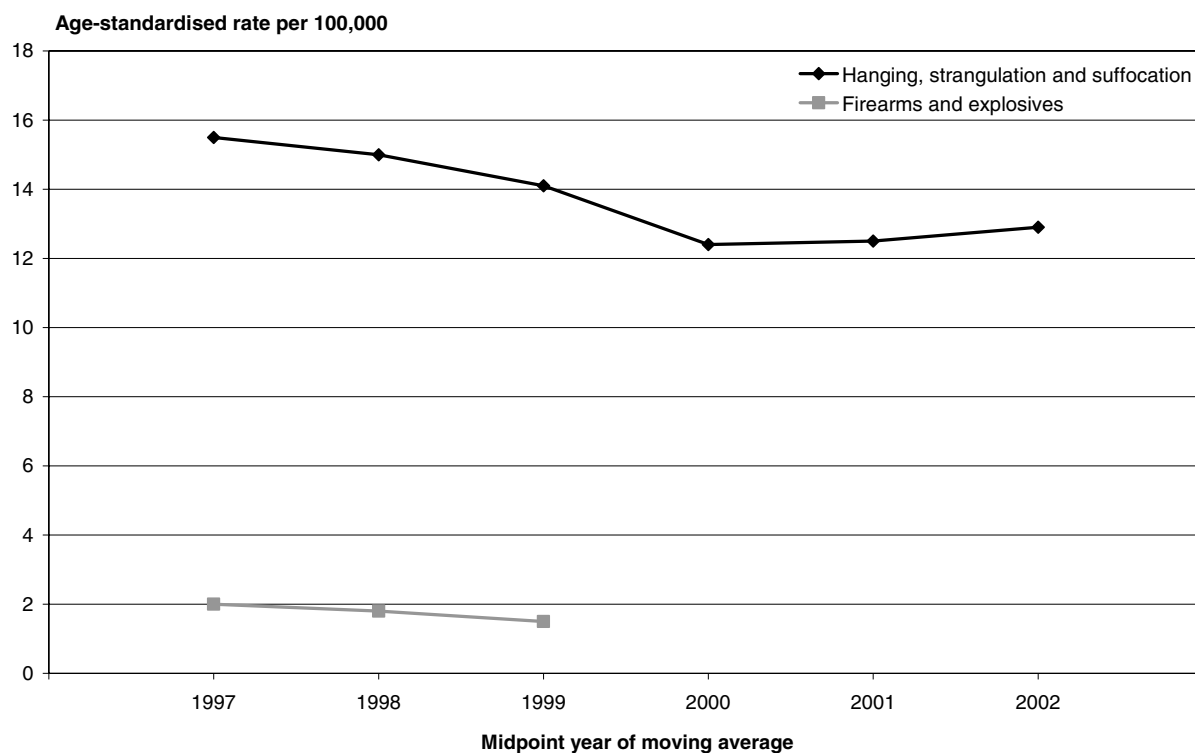
Note: Only methods of suicide with sufficient numbers to produce robust rates of at least 1 per 100,000 population across the time period are presented. For ICD codes see the 'Methods and Data Sources' section.

From 1996 to 2003, the most common method of suicide for non-Māori was 'hanging, strangulation and suffocation'. The rate remained stable between 1996<sup>8</sup> and 2003, accounting for 42.0 percent of all non-Māori suicide deaths in 2001–2003 (5.8 deaths per 100,000 population).

The second most common method of non-Māori suicide was 'poisoning by gases and vapours'. The rate for this method of suicide decreased from 1996 to 2003. Suicide by 'poisoning by gases and vapours' accounted for 30.0 percent of all non-Māori suicide deaths in 1996–1998 (4.6 deaths per 100,000 population), which then declined to 23.0 percent of all non-Māori suicide deaths in 2001–2003 (3.0 deaths per 100,000 population).

<sup>8</sup> Because adjusters to address the undercount of Māori deaths are available from 1996–1999, the trends are presented from 1996 onwards (the first three-year moving average being 1996–1998).

**Figure 46:** Trends in major methods of suicide, Māori, three-year moving averages, 1996–2003



Source: New Zealand Health Information Service

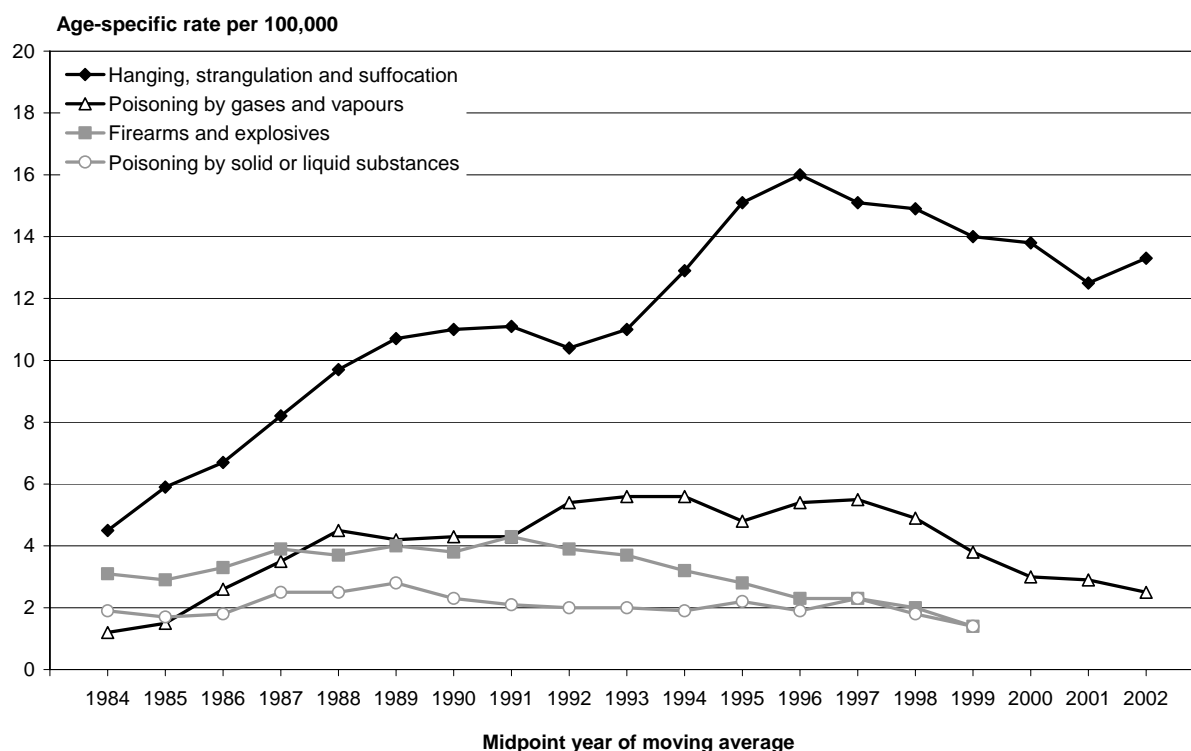
Note: Only methods of suicide with sufficient numbers to produce robust rates of at least 1 per 100,000 population across the time period are presented. For ICD codes see the 'Methods and Data Sources' section. Rates are not presented on the graph if the count was less than 5.

For Māori, the main method of suicide was 'hanging, strangulation and suffocation' from 1996 to 2003, accounting for 74.0 percent of all Māori suicide deaths in 2001–2003. The rate of suicide by this method decreased from 15.5 deaths per 100,000 population between 1996–1998 to 12.9 deaths per 100,000 population in 2001–2003.

## Age group

### Total population

**Figure 47:** Trends in major methods of suicide, 15–24 years, three-year moving averages, 1983–2003



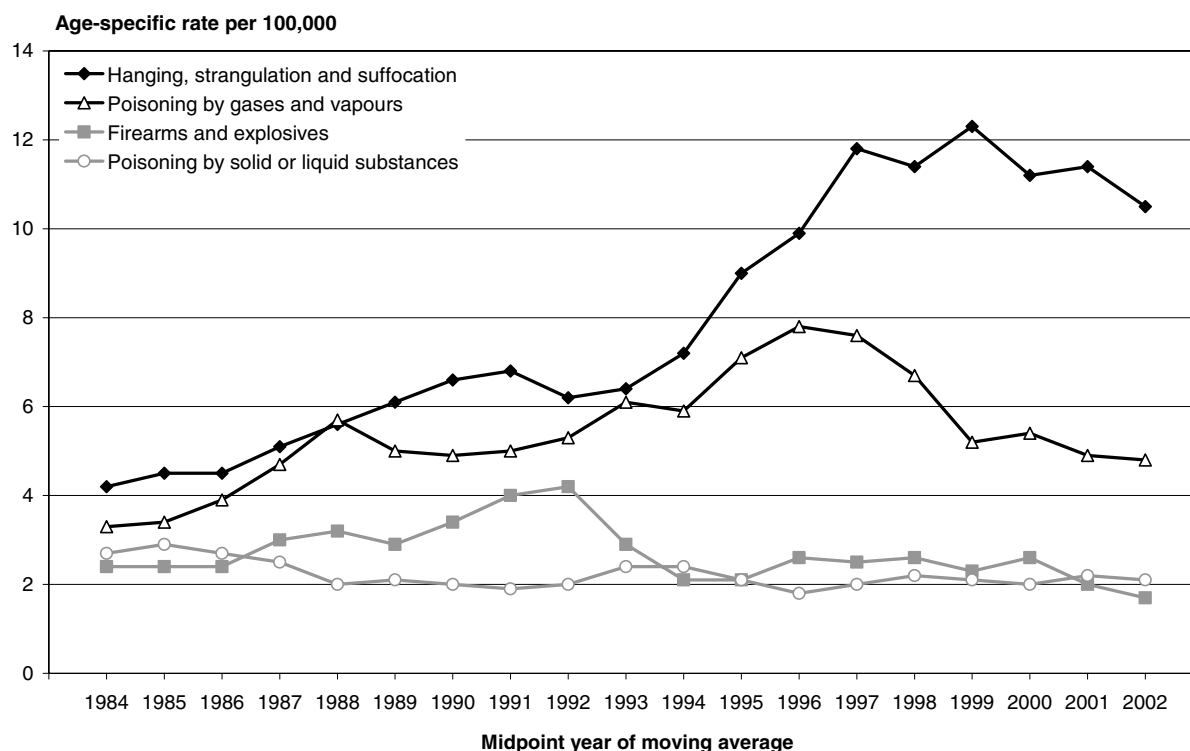
Source: New Zealand Health Information Service

Note: Only methods of suicide with sufficient numbers to produce robust rates of at least 1 per 100,000 population across the time period are presented. For ICD codes see the 'Methods and Data Sources' section. Rates are not presented on the graph if the count was less than 5.

The main method of suicide for youth (15–24 years) was 'hanging, strangulation and suffocation', with the rate increasing from 4.5 deaths per 100,000 population in 1983–1985 (36.0 percent of all 15–24-year-old suicide deaths) to 13.3 deaths per 100,000 population in 2001–2003 (66.7 percent of all 15–24-year-old suicide deaths).

The rate of suicide by 'poisoning by gases and vapours', the second most common method, increased from 1983 to 1993 and has subsequently decreased.

**Figure 48:** Trends in major methods of suicide, 25–34 years, three-year moving averages, 1983–2003



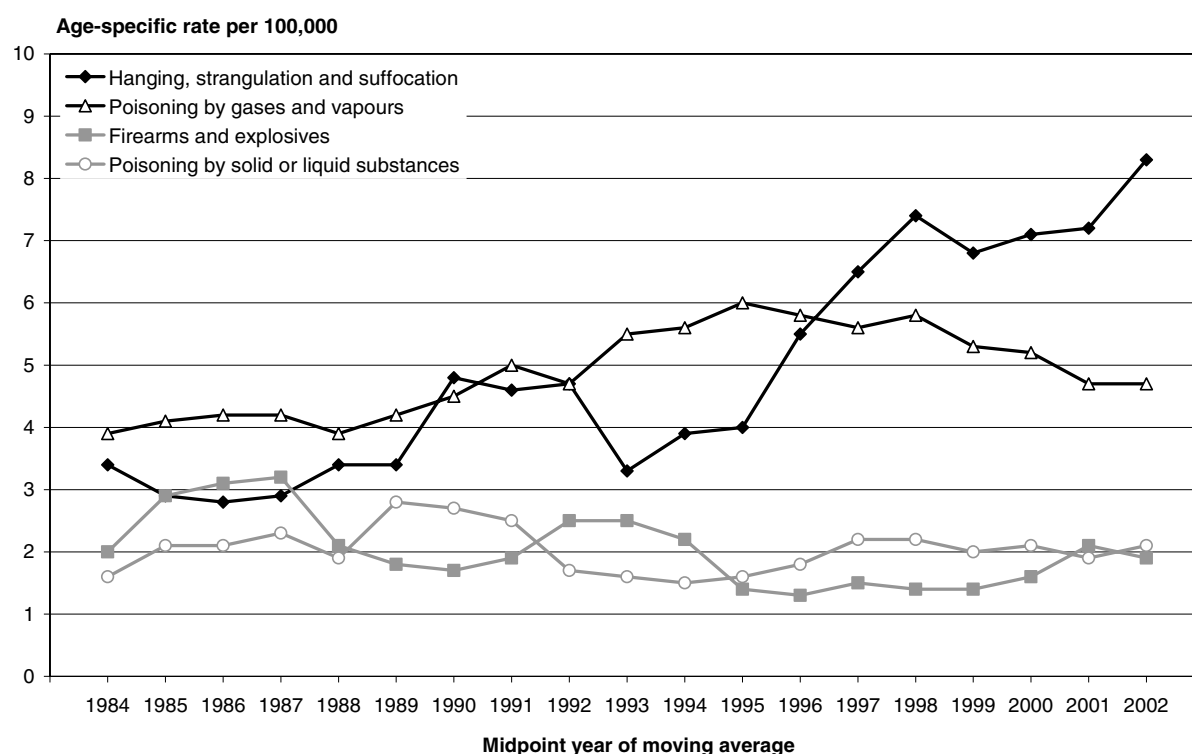
Source: New Zealand Health Information Service

Note: Only methods of suicide with sufficient numbers to produce robust rates of at least 1 per 100,000 population across the time period are presented. For ICD codes see the 'Methods and Data Sources' section.

Throughout the time period, 'hanging, strangulation and suffocation' was the most common method of suicide for people aged 25–34 years. There was an increase in the rate of suicide by this method between 1983–1985 (4.2 deaths per 100,000 population or 29.0 percent of all suicide deaths in this age group) and 2001–2003 (10.5 deaths per 100,000 population or 49.0 percent of all suicide deaths in this age group).

The second most common method of suicide for those aged 25–34 years was 'poisoning by gases and vapours' (4.8 deaths per 100,000 population in 2001–2003 or 23.0 percent of all suicide deaths in this age group). The rate of suicide by this method increased from 1983–1996 and decreased thereafter.

**Figure 49:** Trends in major methods of suicide, 35–44 years, three-year moving averages, 1983–2003



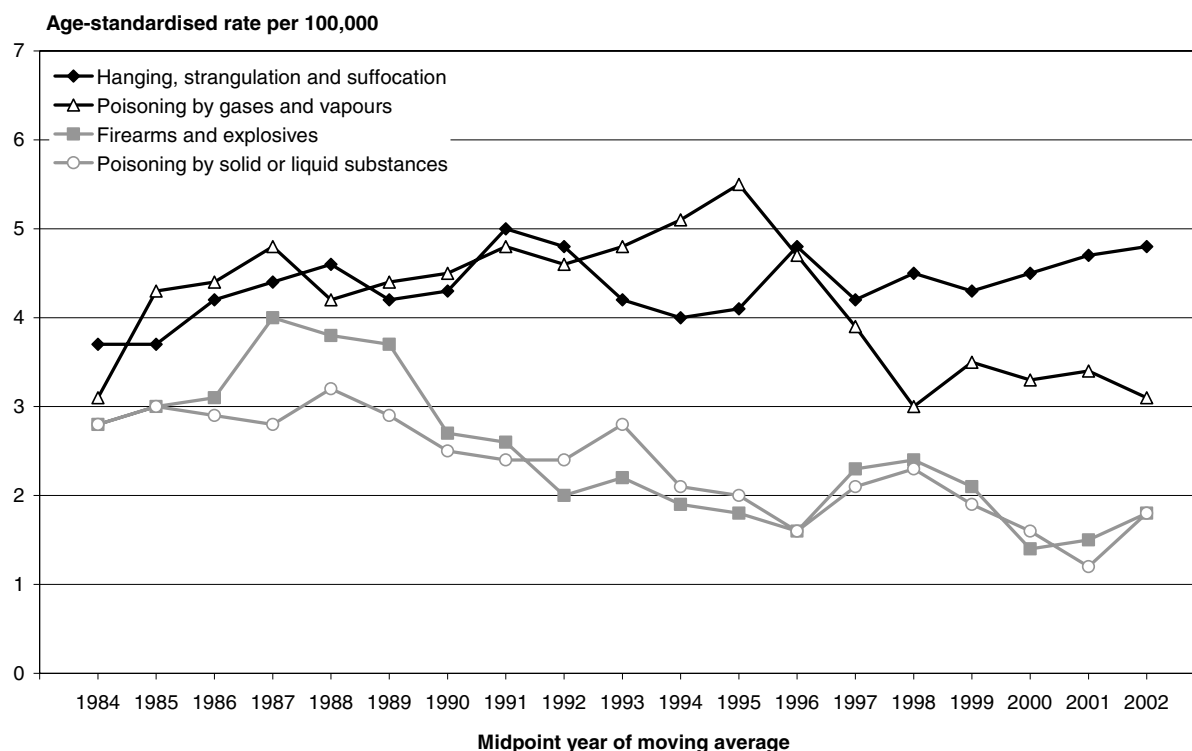
Source: New Zealand Health Information Service

Note: Only methods of suicide with sufficient numbers to produce robust rates of at least 1 per 100,000 population across the time period are presented. For ICD codes see the 'Methods and Data Sources' section.

The two most common methods of suicide for those aged 35–44 years were 'hanging, strangulation and suffocation' (44.0 percent of all suicide deaths in this age group in 2001–2003) and 'poisoning by gases and vapours' (25 percent of all suicide deaths in this age group in 2001–2003). The rate of suicide in people aged 35–44 years by 'hanging, strangulation and suffocation' increased between 1983–1985 (3.4 deaths per 100,000 population) and 2001–2003 (8.3 deaths per 100,000 population).



**Figure 50:** Trends in major methods of suicide, 45–64 years, three-year moving averages, 1983–2003

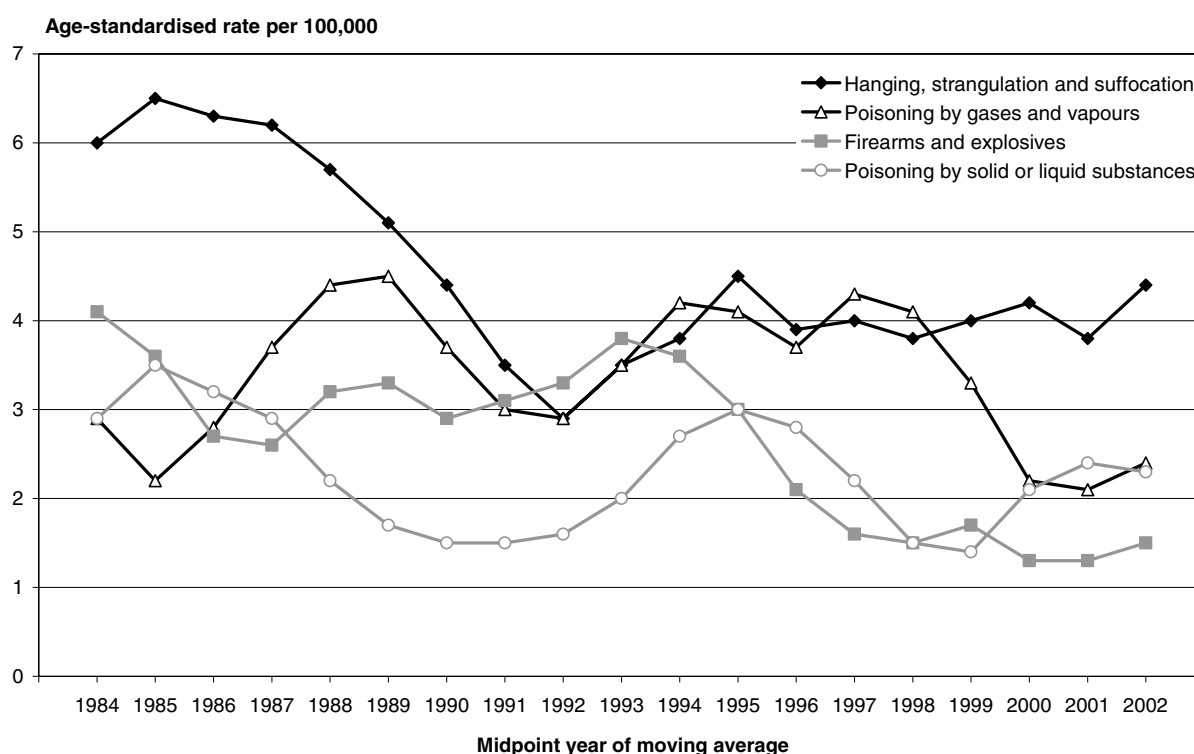


Source: New Zealand Health Information Service

Note: Only methods of suicide with sufficient numbers to produce robust rates of at least 1 per 100,000 population across the time period are presented. For ICD codes see the 'Methods and Data Sources' section.

The two most common methods of suicide for 45–64-year-olds between 1983 and 2003 were 'hanging, strangulation and suffocation' (4.8 deaths per 100,000 population or 36.0 percent of all suicide deaths in this age group in 2001–2003) and 'poisoning by gases and vapours' (3.1 deaths per 100,000 population or 23.0 percent of all suicide deaths in this age group in 2001–2003).

**Figure 51:** Trends in major methods of suicide, 65+ years, three-year moving averages, 1983–2003



Source: New Zealand Health Information Service

Note: Only methods of suicide with sufficient numbers to produce robust rates of at least 1 per 100,000 population across the time period are presented. For ICD codes see the 'Methods and Data Sources' section. Rates are not presented on the graph if the count was less than 5.

For people aged 65 years and over, the most common method of suicide for most of the period from 1983 to 2003 was 'hanging, strangulation and suffocation' (4.4 deaths per 100,000 population or 34.0 percent of all deaths in this age group in 2001–2003).

### **Summary of trends by method**

- Across population subgroups, the most common method of suicide was ‘hanging, strangulation and suffocation’.
- For males from 1983–2003, ‘hanging, suffocation and strangulation’ was the most common method of suicide.
- For females from 1983–1992, the most common method of suicide was ‘poisoning by solid or liquid substances’, and from 1993 onwards was ‘hanging, strangulation and suffocation’.
- The most common method of suicide for non-Māori was ‘hanging, strangulation and suffocation’ from 1983–2003.
- For non-Māori and males, the rate of suicide by ‘poisoning by gases and vapours’ decreased between 1995–1997 and 2001–2003.
- For Māori, ‘hanging, strangulation and suffocation’ was considerably more common than any other method of suicide.

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## Appendix 1: World Health Organization Standard Population

Age group (years)	Weighting
5–9	0.095
10–14	0.094
15–19	0.093
20–24	0.090
25–29	0.087
30–34	0.083
35–39	0.079
40–44	0.072
45–49	0.066
50–54	0.059
55–59	0.050
60–64	0.041
65–69	0.033
70–74	0.024
75–79	0.016
80–84	0.010
85+	0.007

Denominator data were sourced from Statistics New Zealand: <http://www.stats.govt.nz>. For further information, see the 'Methods and Data Sources' section.

For further information on calculating age-standardised rates see *Standardising Rates of Disease* (Borman 1995).

## Appendix 2: Suicide Deaths, by Five-year Age Group and Sex, Total Population, 1983–2003

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1983	Total	352	0	4	24	46	37	27	34	29	18	21	27	19	30	15	14	5	2
	Male	250	0	3	20	38	26	22	25	15	12	12	20	11	24	8	9	4	1
	Female	102	0	1	4	8	11	5	9	14	6	9	7	8	6	7	5	1	1
1984	Total	389	0	4	25	47	49	38	30	29	23	22	27	25	18	18	16	14	4
	Male	297	0	2	21	36	41	28	26	22	17	16	18	18	13	14	12	11	2
	Female	92	0	2	4	11	8	10	4	7	6	6	9	7	5	4	4	3	2
1985	Total	338	0	5	30	45	36	28	21	21	23	21	25	16	25	20	14	6	2
	Male	255	0	2	25	35	26	25	15	15	17	17	14	12	20	14	11	5	2
	Female	83	0	3	5	10	10	3	6	6	6	4	11	4	5	6	3	1	0
1986	Total	414	0	4	38	53	43	31	41	37	23	30	23	28	22	14	15	9	3
	Male	301	0	2	29	39	34	19	32	29	19	20	14	22	14	10	9	7	2
	Female	113	0	2	9	14	9	12	9	8	4	10	9	6	8	4	6	2	1
1987	Total	463	0	8	36	77	64	39	30	30	33	27	35	18	18	11	17	16	4
	Male	363	0	7	29	64	51	28	24	26	24	18	26	16	14	8	14	11	3
	Female	100	0	1	7	13	13	11	6	4	9	9	9	2	4	3	3	5	1
1988	Total	484	0	2	54	77	53	48	28	31	34	23	30	32	17	25	19	10	1
	Male	381	0	2	47	59	40	32	24	28	32	18	27	19	12	21	14	6	0
	Female	103	0	0	7	18	13	16	4	3	2	5	3	13	5	4	5	4	1
1989	Total	467	1	7	58	73	66	35	30	35	31	26	15	24	26	17	7	11	5
	Male	373	1	7	50	61	50	29	26	27	23	20	10	16	22	10	7	10	4
	Female	94	0	0	8	12	16	6	4	8	8	6	5	8	4	7	0	1	1
1990	Total	454	1	0	44	86	53	40	42	34	27	25	25	22	14	14	13	10	4
	Male	362	1	0	37	74	43	29	35	22	23	19	20	19	9	10	8	9	4
	Female	92	0	0	7	12	10	11	7	12	4	6	5	3	5	4	5	1	0
1991	Total	474	0	4	45	80	65	49	42	39	41	28	13	18	18	14	10	7	1
	Male	380	0	4	41	68	53	42	33	27	31	19	11	13	15	6	9	7	1
	Female	94	0	0	4	12	12	7	9	12	10	9	2	5	3	8	1	0	0
1992	Total	494	0	5	44	85	71	42	39	35	33	30	27	34	13	15	8	7	6
	Male	398	0	4	39	73	60	38	34	26	24	18	18	27	9	13	5	6	4
	Female	96	0	1	5	12	11	4	5	9	9	12	9	7	4	2	3	1	2
1993	Total	443	0	3	40	86	50	55	36	33	35	19	17	17	20	13	12	5	2
	Male	349	0	2	34	76	38	40	33	22	29	11	13	9	18	9	10	4	1
	Female	94	0	1	6	10	12	15	3	11	6	8	4	8	2	4	2	1	1
1994	Total	512	0	7	56	81	53	63	32	38	34	25	23	25	20	24	10	14	7
	Male	409	0	5	44	67	44	49	27	32	26	17	19	23	17	17	6	10	6
	Female	103	0	2	12	14	9	14	5	6	8	8	4	2	3	7	4	4	1
1995	Total	545	0	6	59	98	66	50	47	38	44	30	23	14	26	16	15	10	3
	Male	429	0	4	45	78	58	38	38	29	35	21	20	9	21	14	9	8	2
	Female	116	0	2	14	20	8	12	9	9	9	9	3	5	5	2	6	2	1
1996	Total	540	0	7	59	84	73	69	49	31	38	25	24	15	20	22	8	10	6
	Male	429	0	3	38	67	64	57	42	25	27	19	21	13	18	16	5	8	6
	Female	111	0	4	21	17	9	12	7	6	11	6	3	2	2	6	3	2	0
1997	Total	562	0	8	72	70	83	71	51	51	31	29	24	18	13	17	10	9	5
	Male	441	0	5	53	60	70	54	40	37	22	21	17	16	12	15	7	9	3
	Female	121	0	3	19	10	13	17	11	14	9	8	7	2	1	2	3	0	2
1998	Total	579	0	12	66	74	80	57	56	56	40	23	29	22	16	22	14	8	4
	Male	446	0	8	40	65	66	46	46	37	30	17	24	19	14	14	14	4	2
	Female	133	0	4	26	9	14	11	10	19	10	6	5	3	2	8	0	4	2

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1999	Total	515	0	6	48	72	67	58	61	48	33	33	23	15	9	18	13	8	3
	Male	384	0	3	29	54	56	49	45	29	25	26	19	13	4	14	10	6	2
	Female	131	0	3	19	18	11	9	16	19	8	7	4	2	5	4	3	2	1
2000	Total	458	0	4	42	54	71	55	51	31	30	31	26	16	14	13	5	9	6
	Male	375	0	3	31	50	58	47	40	25	23	25	21	11	12	13	5	6	5
	Female	83	0	1	11	4	13	8	11	6	7	6	5	5	2	0	0	3	1
2001	Total	500	0	3	42	65	57	62	58	60	27	22	20	21	16	13	17	13	4
	Male	383	0	1	29	55	40	50	46	50	18	15	16	15	13	10	14	7	4
	Female	117	0	2	13	10	17	12	12	10	9	7	4	6	3	3	3	6	0
2002	Total	465	0	0	39	55	52	56	57	48	35	30	28	18	14	12	6	6	9
	Male	352	0	0	24	40	43	39	43	40	27	21	25	13	11	10	5	4	7
	Female	113	0	0	15	15	9	17	14	8	8	9	3	5	3	2	1	2	2
2003	Total	516	0	5	51	45	46	55	60	51	47	41	25	24	12	17	17	14	6
	Male	375	0	4	35	30	35	44	37	44	34	28	21	18	8	11	14	9	3
	Female	141	0	1	16	15	11	11	23	7	13	13	4	6	4	6	3	5	3

## Appendix 3: Suicide Deaths, by Five-year Age Group and Sex, Māori, 1996–2003

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1996	Total	96	0	4	17	21	19	16	6	4	2	4	1	1	1	0	0	0	0
	Male	72	0	1	12	17	17	14	3	2	1	2	1	1	1	0	0	0	0
	Female	24	0	3	5	4	2	2	3	2	1	2	0	0	0	0	0	0	0
1997	Total	103	0	4	22	14	24	18	8	5	2	2	1	2	0	0	1	0	0
	Male	77	0	3	15	12	20	15	4	1	2	2	1	2	0	0	0	0	0
	Female	26	0	1	7	2	4	3	4	4	0	0	0	0	0	0	1	0	0
1998	Total	113	0	9	21	22	21	14	7	5	6	3	2	1	0	2	0	0	0
	Male	88	0	6	12	18	17	13	7	3	5	2	2	1	0	2	0	0	0
	Female	25	0	3	9	4	4	1	0	2	1	1	0	0	0	0	0	0	0
1999	Total	79	0	4	11	22	15	14	5	7	0	1	0	0	0	0	0	0	0
	Male	59	0	1	8	15	13	11	5	5	0	1	0	0	0	0	0	0	0
	Female	20	0	3	3	7	2	3	0	2	0	0	0	0	0	0	0	0	0
2000	Total	80	0	1	14	14	17	14	6	3	3	4	3	0	0	0	0	1	0
	Male	69	0	1	11	13	14	12	6	3	3	2	3	0	0	0	0	1	0
	Female	11	0	0	3	1	3	2	0	0	0	2	0	0	0	0	0	0	0
2001	Total	79	0	1	15	14	17	14	6	5	2	0	1	2	2	0	0	0	0
	Male	57	0	0	8	12	12	10	4	4	2	0	1	2	2	0	0	0	0
	Female	22	0	1	7	2	5	4	2	1	0	0	0	0	0	0	0	0	0
2002	Total	80	0	0	15	18	10	17	8	5	2	3	2	0	0	0	0	0	0
	Male	59	0	0	9	14	8	12	6	4	2	2	2	0	0	0	0	0	0
	Female	21	0	0	6	4	2	5	2	1	0	1	0	0	0	0	0	0	0
2003	Total	87	0	5	17	14	12	14	10	10	2	2	0	1	0	0	0	0	0
	Male	67	0	4	10	10	9	13	9	8	2	2	0	0	0	0	0	0	0
	Female	20	0	1	7	4	3	1	1	2	0	0	0	1	0	0	0	0	0



## Appendix 4: Suicide Deaths, by Five-year Age Group and Sex, Non-Māori, 1996–2003

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1996	Total	444	0	3	42	63	54	53	43	27	36	21	23	14	19	22	8	10	6
	Male	357	0	2	26	50	47	43	39	23	26	17	20	12	17	16	5	8	6
	Female	87	0	1	16	13	7	10	4	4	10	4	3	2	2	6	3	2	0
1997	Total	459	0	4	50	56	59	53	43	46	29	27	23	16	13	17	9	9	5
	Male	364	0	2	38	48	50	39	36	36	20	19	16	14	12	15	7	9	3
	Female	95	0	2	12	8	9	14	7	10	9	8	7	2	1	2	2	0	2
1998	Total	466	0	3	45	52	59	43	49	51	34	20	27	21	16	20	14	8	4
	Male	358	0	2	28	47	49	33	39	34	25	15	22	18	14	12	14	4	2
	Female	108	0	1	17	5	10	10	10	17	9	5	5	3	2	8	0	4	2
1999	Total	436	0	2	37	50	52	44	56	41	33	32	23	15	9	18	13	8	3
	Male	325	0	2	21	39	43	38	40	24	25	25	19	13	4	14	10	6	2
	Female	111	0	0	16	11	9	6	16	17	8	7	4	2	5	4	3	2	1
2000	Total	378	0	3	28	40	54	41	45	28	27	27	23	16	14	13	5	8	6
	Male	306	0	2	20	37	44	35	34	22	20	23	18	11	12	13	5	5	5
	Female	72	0	1	8	3	10	6	11	6	7	4	5	5	2	0	0	3	1
2001	Total	421	0	2	27	51	40	48	52	55	25	22	19	19	14	13	17	13	4
	Male	326	0	1	21	43	28	40	42	46	16	15	15	13	11	10	14	7	4
	Female	95	0	1	6	8	12	8	10	9	9	7	4	6	3	3	3	6	0
2002	Total	385	0	0	24	37	42	39	49	43	33	27	26	18	14	12	6	6	9
	Male	293	0	0	15	26	35	27	37	36	25	19	23	13	11	10	5	4	7
	Female	92	0	0	9	11	7	12	12	7	8	8	3	5	3	2	1	2	2
2003	Total	429	0	0	34	31	34	41	50	41	45	39	25	23	12	17	17	14	6
	Male	308	0	0	25	20	26	31	28	36	32	26	21	18	8	11	14	9	3
	Female	121	0	0	9	11	8	10	22	5	13	13	4	5	4	6	3	5	3

## Appendix 5: Suicide Deaths, by Life-cycle Age Group and Sex, Pacific, 2000–2003

Year		Total	Age group (years)					
			5–14	15–24	25–34	35–44	45–64	65+
2000	Total	12	0	7	4	0	1	0
	Male	10	0	6	3	0	1	0
	Female	2	0	1	1	0	0	0
2001	Total	22	1	8	7	4	2	0
	Male	20	0	8	6	4	2	0
	Female	2	1	0	1	0	0	0
2002	Total	18	0	8	6	1	2	1
	Male	14	0	5	5	1	2	1
	Female	4	0	3	1	0	0	0
2003	Total	22	0	7	7	6	2	0
	Male	15	0	4	6	4	1	0
	Female	7	0	3	1	2	1	0

## Appendix 6: Suicide Deaths, by Life-cycle Age Group and Sex, Asian, 2000–2003

Year		Total	Age group (years)					
			5–14	15–24	25–34	35–44	45–64	65+
2000	Total	21	0	5	7	4	4	1
	Male	16	0	3	6	3	3	1
	Female	5	0	2	1	1	1	0
2001	Total	20	0	8	4	4	1	3
	Male	15	0	7	3	4	0	1
	Female	5	0	1	1	0	1	2
2002	Total	12	0	7	4	1	0	0
	Male	10	0	5	4	1	0	0
	Female	2	0	2	0	0	0	0
2003	Total	28	0	5	5	7	6	5
	Male	16	0	2	3	3	5	3
	Female	12	0	3	2	4	1	2

## Appendix 7: Suicide Deaths, by Life-cycle Age Group and Sex, European/Other, 2000–2003

Year		Total	Age group (years)					
			5–14	15–24	25–34	35–44	45–64	65+
2000	Total	345	3	56	84	69	88	45
	Male	280	2	48	70	53	68	39
	Female	65	1	8	14	16	20	6
2001	Total	379	1	62	77	99	82	58
	Male	291	1	49	59	80	57	45
	Female	88	0	13	18	19	25	13
2002	Total	355	0	46	71	90	102	46
	Male	269	0	31	53	71	78	36
	Female	86	0	15	18	19	24	10
2003	Total	379	0	53	63	78	124	61
	Male	277	0	39	48	57	91	42
	Female	102	0	14	15	21	33	19

## Appendix 8: Intentional Self-harm Hospitalisations, by Five-year Age Group and Sex, Total Population, 1978–2004

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1978	Total	2113	1	70	448	438	312	216	160	120	94	80	49	45	23	25	22	5	5
	Male	751	1	20	150	195	108	71	46	41	24	28	19	14	9	13	9	1	2
	Female	1361	0	50	298	243	204	145	113	79	70	52	30	31	14	12	13	4	3
1979	Total	2084	0	49	454	420	292	209	158	104	81	92	75	35	46	32	22	10	5
	Male	759	0	9	161	179	122	68	48	35	22	28	25	16	16	15	9	4	2
	Female	1325	0	40	293	241	170	141	110	69	59	64	50	19	30	17	13	6	3
1980	Total	2250	3	92	469	448	312	235	166	123	95	89	64	56	26	35	21	11	5
	Male	838	0	25	157	188	126	84	56	34	43	32	22	28	7	15	14	4	3
	Female	1412	3	67	312	260	186	151	110	89	52	57	42	28	19	20	7	7	2
1981	Total	2164	1	69	453	468	285	231	158	127	87	73	60	50	32	28	21	11	10
	Male	815	1	16	144	205	116	78	51	36	39	37	25	22	15	12	8	4	6
	Female	1349	0	53	309	263	169	153	107	91	48	36	35	28	17	16	13	7	4
1982	Total	2390	2	67	515	506	334	254	173	129	92	88	84	45	41	28	22	9	1
	Male	940	1	17	174	223	143	93	56	52	40	50	31	20	20	10	7	3	0
	Female	1450	1	50	341	283	191	161	117	77	52	38	53	25	21	18	15	6	1
1983	Total	2525	3	79	559	518	350	258	208	125	106	84	74	62	44	25	17	10	3
	Male	992	3	16	220	221	162	113	67	31	39	28	30	26	20	8	4	2	2
	Female	1533	0	63	339	297	188	145	141	94	67	56	44	36	24	17	13	8	1
1984	Total	2314	1	94	498	482	293	251	175	118	91	66	77	58	37	32	21	10	10
	Male	935	1	15	206	207	130	107	68	42	34	24	33	18	16	10	13	4	7
	Female	1379	0	79	292	275	163	144	107	76	57	42	44	40	21	22	8	6	3
1985	Total	2398	6	111	537	449	303	259	198	139	94	86	57	41	30	37	30	18	3
	Male	984	3	20	218	192	141	126	78	48	39	38	19	16	12	14	10	8	2
	Female	1414	3	91	319	257	162	133	120	91	55	48	38	25	18	23	20	10	1
1986	Total	2444	2	106	566	470	340	250	196	131	102	81	53	35	40	27	22	12	11
	Male	959	0	26	205	205	144	99	68	48	40	38	28	14	18	7	8	8	3
	Female	1485	2	80	361	265	196	151	128	83	62	43	25	21	22	20	14	4	8
1987	Total	2621	2	114	637	497	350	276	198	138	106	76	64	38	32	39	25	22	7
	Male	1050	1	24	243	234	139	114	68	53	41	31	28	19	14	13	15	11	2
	Female	1571	1	90	394	263	211	162	130	85	65	45	36	19	18	26	10	11	5
1988	Total	2827	3	114	709	521	379	252	235	174	117	70	63	64	44	30	27	17	8
	Male	1095	1	14	257	226	139	103	94	71	54	25	26	26	19	14	12	8	6
	Female	1732	2	100	452	295	240	149	141	103	63	45	37	38	25	16	15	9	2
1989	Total	2558	1	81	612	470	373	264	222	146	104	71	41	45	39	37	29	12	11
	Male	1035	1	16	223	214	175	111	96	42	33	30	17	20	19	14	13	6	5
	Female	1523	0	65	389	256	198	153	126	104	71	41	24	25	20	23	16	6	6
1990	Total	2688	1	82	602	531	377	277	230	167	111	87	58	45	40	31	23	15	11
	Male	1080	0	15	197	239	176	113	94	58	45	39	33	22	19	11	9	9	1
	Female	1608	1	67	405	292	201	164	136	109	66	48	25	23	21	20	14	6	10

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1991	Total	2596	0	71	568	491	422	271	220	160	104	74	46	48	45	28	23	15	10
	Male	1067	0	19	201	224	184	120	78	68	42	33	26	20	14	15	10	7	6
	Female	1529	0	52	367	267	238	151	142	92	62	41	20	28	31	13	13	8	4
1992	Total	2748	1	95	538	564	409	296	236	174	123	87	57	35	48	28	31	20	6
	Male	1105	0	12	179	259	182	121	99	64	56	38	23	17	20	12	14	6	3
	Female	1643	1	83	359	305	227	175	137	110	67	49	34	18	28	16	17	14	3
1993	Total	3101	0	130	669	556	426	393	290	214	136	85	60	38	26	27	21	20	10
	Male	1171	0	20	213	247	171	165	113	79	44	34	28	14	13	12	8	6	4
	Female	1928	0	109	455	309	255	228	177	135	92	51	32	24	13	15	13	14	6
1994	Total	3219	7	174	644	648	428	371	242	208	154	102	68	43	46	30	26	15	13
	Male	1187	4	32	177	295	175	148	103	70	48	35	30	15	19	12	7	8	9
	Female	2032	3	142	467	353	253	223	139	138	106	67	38	28	27	18	19	7	4
1995	Total	3370	5	162	615	645	510	423	319	251	144	101	45	40	31	37	16	19	7
	Male	1303	5	34	197	243	228	188	121	103	53	41	24	16	13	19	7	9	2
	Female	2067	0	128	418	402	282	235	198	148	91	60	21	24	18	18	9	10	5
1996	Total	3347	0	124	609	564	520	446	358	242	166	113	56	28	38	25	23	12	23
	Male	1289	0	26	200	225	197	170	140	104	66	47	26	20	21	17	13	6	11
	Female	2058	0	98	409	339	323	276	218	138	100	66	30	8	17	8	10	6	12
1997	Total	3468	2	144	616	539	496	447	371	294	199	113	85	43	39	20	28	17	15
	Male	1291	1	32	184	205	205	166	144	113	77	46	35	27	19	11	12	6	8
	Female	2177	1	112	432	334	291	281	227	181	122	67	50	16	20	9	16	11	7
1998	Total	3578	2	106	576	498	527	489	438	334	228	121	60	49	48	34	30	25	13
	Male	1393	1	20	198	208	236	199	143	139	84	49	26	18	21	20	13	11	7
	Female	2185	1	86	378	290	291	290	295	195	144	72	34	31	27	14	17	14	6
1999	Total	3445	2	106	525	448	513	498	454	302	214	141	62	34	38	33	30	23	22
	Male	1281	1	28	151	178	212	213	149	105	75	58	27	14	17	19	13	14	7
	Female	2163	1	78	374	270	300	285	305	197	139	83	35	20	21	14	17	9	15
2000	Total	4087	1	131	622	551	535	555	520	401	302	171	107	47	41	35	27	22	19
	Male	1492	0	25	179	209	219	229	164	154	117	60	48	18	17	22	11	7	13
	Female	2595	1	106	443	342	316	326	356	247	185	111	59	29	24	13	16	15	6
2001	Total	4655	2	127	773	660	581	615	565	454	320	213	114	49	61	45	43	27	6
	Male	1545	0	20	176	230	239	233	177	126	114	78	44	24	23	21	24	11	5
	Female	3110	2	107	597	430	342	382	388	328	206	135	70	25	38	24	19	16	1
2002	Total	4765	3	109	740	731	529	591	644	540	356	213	102	49	41	35	34	31	17
	Male	1521	1	21	171	225	216	180	203	138	133	91	42	24	16	16	20	14	10
	Female	3244	2	88	569	506	313	411	441	402	223	122	60	25	25	19	14	17	7
2003	Total	4921	2	136	815	721	547	642	587	536	338	263	116	68	43	34	30	21	22
	Male	1533	2	32	205	217	211	208	198	120	125	85	41	24	21	16	10	12	6
	Female	3387	0	104	610	504	336	434	389	416	213	177	75	44	22	18	20	9	16
2004	Total	4974	1	158	838	674	551	669	520	566	368	281	133	78	39	30	34	24	10
	Male	1546	0	16	216	235	173	227	193	157	109	94	45	25	14	14	15	9	4
	Female	3428	1	142	622	439	378	442	327	409	259	187	88	53	25	16	19	15	6

## Appendix 9: Intentional Self-harm Hospitalisations by Five-year Age Group and Sex, Māori, 1978–2004

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1978	Total	318	0	14	102	83	59	17	19	16	4	2	0	1	0	1	0	0	0
	Male	81	0	3	29	28	12	5	0	3	0	1	0	0	0	0	0	0	0
	Female	237	0	11	73	55	47	12	19	13	4	1	0	1	0	1	0	0	0
1979	Total	300	0	10	98	75	62	17	17	8	5	6	0	1	0	1	0	0	0
	Male	107	0	1	34	29	28	4	2	3	2	3	0	1	0	0	0	0	0
	Female	193	0	9	64	46	34	13	15	5	3	3	0	0	0	1	0	0	0
1980	Total	353	1	21	99	107	40	35	24	12	4	2	4	2	0	2	0	0	0
	Male	124	0	6	27	45	13	12	7	3	3	1	3	2	0	2	0	0	0
	Female	229	1	15	72	62	27	23	17	9	1	1	1	0	0	0	0	0	0
1981	Total	314	0	24	97	85	45	23	20	7	7	2	3	0	1	0	0	0	0
	Male	119	0	6	35	37	23	3	6	2	3	0	3	0	1	0	0	0	0
	Female	195	0	18	62	48	22	20	14	5	4	2	0	0	0	0	0	0	0
1982	Total	394	0	12	133	116	53	39	21	8	5	2	3	2	0	0	0	0	0
	Male	163	0	2	61	52	26	12	5	3	1	0	1	0	0	0	0	0	0
	Female	231	0	10	72	64	27	27	16	5	4	2	2	2	0	0	0	0	0
1983	Total	451	0	25	142	114	78	38	28	6	10	6	4	0	0	0	0	0	0
	Male	186	0	6	62	53	31	18	7	3	2	3	1	0	0	0	0	0	0
	Female	265	0	19	80	61	47	20	21	3	8	3	3	0	0	0	0	0	0
1984	Total	394	0	30	119	113	48	38	16	11	12	4	0	0	2	0	1	0	0
	Male	171	0	6	56	47	22	22	4	6	5	1	0	0	1	0	1	0	0
	Female	223	0	24	63	66	26	16	12	5	7	3	0	0	1	0	0	0	0
1985	Total	450	4	35	141	109	57	46	23	16	11	5	3	0	0	0	0	0	0
	Male	179	1	6	59	49	23	24	10	2	3	2	0	0	0	0	0	0	0
	Female	271	3	29	82	60	34	22	13	14	8	3	3	0	0	0	0	0	0
1986	Total	502	2	37	155	126	81	43	28	9	8	6	2	1	0	0	3	0	1
	Male	204	0	10	69	53	41	12	8	3	4	2	1	0	0	0	1	0	0
	Female	298	2	27	86	73	40	31	20	6	4	4	1	1	0	0	2	0	1
1987	Total	576	2	47	174	135	83	56	34	16	12	8	5	1	1	2	0	0	0
	Male	232	1	12	73	70	27	21	8	7	7	3	0	0	1	2	0	0	0
	Female	344	1	35	101	65	56	35	26	9	5	5	5	1	0	0	0	0	0
1988	Total	617	1	51	199	137	85	60	44	11	14	8	2	4	1	0	0	0	0
	Male	224	0	3	81	58	30	28	12	3	3	4	0	2	0	0	0	0	0
	Female	393	1	48	118	79	55	32	32	8	11	4	2	2	1	0	0	0	0
1989	Total	523	0	29	159	124	79	44	43	14	15	8	1	5	1	0	1	0	0
	Male	204	0	5	62	59	32	18	17	4	2	3	0	2	0	0	0	0	0
	Female	319	0	24	97	65	47	26	26	10	13	5	1	3	1	0	1	0	0
1990	Total	570	1	28	172	129	90	57	52	20	10	7	3	1	0	0	0	0	0
	Male	228	0	2	57	64	48	23	18	7	5	1	2	1	0	0	0	0	0
	Female	342	1	26	115	65	42	34	34	13	5	6	1	0	0	0	0	0	0

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1991	Total	587	0	29	161	139	118	48	45	17	13	3	5	5	2	2	0	0	0
	Male	238	0	7	62	61	50	23	19	9	3	0	0	2	1	1	0	0	0
	Female	349	0	22	99	78	68	25	26	8	10	3	5	3	1	1	0	0	0
1992	Total	581	0	33	170	129	108	59	44	21	5	7	2	0	2	0	0	1	0
	Male	249	0	5	67	64	47	23	28	6	2	4	1	0	1	0	0	1	0
	Female	332	0	28	103	65	61	36	16	15	3	3	1	0	1	0	0	0	0
1993	Total	723	0	62	217	160	115	68	50	24	11	11	4	1	0	0	0	0	0
	Male	275	0	10	72	79	50	27	18	13	2	2	2	0	0	0	0	0	0
	Female	447	0	52	144	81	65	41	32	11	9	9	2	1	0	0	0	0	0
1994	Total	800	2	67	229	180	119	93	34	30	21	12	5	5	3	0	0	0	0
	Male	290	1	15	66	86	47	39	11	11	6	5	3	0	0	0	0	0	0
	Female	510	1	52	163	94	72	54	23	19	15	7	2	5	3	0	0	0	0
1995	Total	800	3	53	185	167	128	104	62	51	22	9	8	3	4	0	1	0	0
	Male	288	3	8	52	63	62	35	24	24	5	3	7	1	1	0	0	0	0
	Female	512	0	45	133	104	66	69	38	27	17	6	1	2	3	0	1	0	0
1996	Total	712	0	52	157	137	115	100	60	53	18	9	4	3	3	0	1	0	0
	Male	289	0	13	57	66	54	39	18	28	7	3	2	2	0	0	0	0	0
	Female	423	0	39	100	71	61	61	42	25	11	6	2	1	3	0	1	0	0
1997	Total	740	1	61	162	143	109	91	74	58	18	7	9	5	1	0	1	0	0
	Male	297	0	18	59	58	42	42	32	26	7	3	8	2	0	0	0	0	0
	Female	443	1	43	103	85	67	49	42	32	11	4	1	3	1	0	1	0	0
1998	Total	755	0	39	153	147	127	101	75	45	38	16	5	5	2	2	0	0	0
	Male	313	0	8	59	66	69	45	23	15	16	7	1	2	0	2	0	0	0
	Female	442	0	31	94	81	58	56	52	30	22	9	4	3	2	0	0	0	0
1999	Total	719	1	36	133	133	127	113	82	43	31	10	3	4	0	2	1	0	0
	Male	282	1	7	39	62	50	56	25	21	11	5	0	2	0	2	1	0	0
	Female	437	0	29	94	71	77	57	57	22	20	5	3	2	0	0	0	0	0
2000	Total	885	0	43	169	165	153	109	97	60	58	13	7	2	4	2	3	0	0
	Male	324	0	8	57	62	63	42	32	24	24	4	3	1	0	1	3	0	0
	Female	561	0	35	112	103	90	67	65	36	34	9	4	1	4	1	0	0	0
2001	Total	981	2	41	189	184	164	141	99	84	44	16	7	1	8	0	0	1	0
	Male	371	0	7	51	81	81	61	36	26	14	6	2	1	4	0	0	1	0
	Female	610	2	34	138	103	83	80	63	58	30	10	5	0	4	0	0	0	0
2002	Total	914	2	42	161	170	122	146	129	59	46	22	7	4	0	1	2	0	1
	Male	311	0	10	45	68	55	54	42	14	12	8	0	2	0	0	0	0	1
	Female	603	2	32	116	102	67	92	87	45	34	14	7	2	0	1	2	0	0
2003	Total	963	1	48	215	171	146	143	84	71	45	22	11	5	1	0	0	0	0
	Male	344	1	16	66	68	64	52	27	21	18	5	4	1	1	0	0	0	0
	Female	619	0	32	149	103	82	91	57	50	27	17	7	4	0	0	0	0	0
2004	Total	984	0	52	222	149	126	159	92	76	49	34	12	6	2	1	2	2	0
	Male	352	0	7	66	65	51	65	35	27	10	19	4	1	0	0	1	1	0
	Female	632	0	45	156	84	75	94	57	49	39	15	8	5	2	1	1	1	0



## Appendix 10: Intentional Self-harm Hospitalisations by Five-year Age Group and Sex, Non-Māori, 1978–2004

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1978	Total	1795	1	56	346	355	253	199	141	104	90	78	49	44	23	24	22	5	5
	Male	670	1	17	121	167	96	66	46	38	24	27	19	14	9	13	9	1	2
	Female	1124	0	39	225	188	157	133	94	66	66	51	30	30	14	11	13	4	3
1979	Total	1784	0	39	356	345	230	192	141	96	76	86	75	34	46	31	22	10	5
	Male	652	0	8	127	150	94	64	46	32	20	25	25	15	16	15	9	4	2
	Female	1132	0	31	229	195	136	128	95	64	56	61	50	19	30	16	13	6	3
1980	Total	1897	2	71	370	341	272	200	142	111	91	87	60	54	26	33	21	11	5
	Male	714	0	19	130	143	113	72	49	31	40	31	19	26	7	13	14	4	3
	Female	1183	2	52	240	198	159	128	93	80	51	56	41	28	19	20	7	7	2
1981	Total	1850	1	45	356	383	240	208	138	120	80	71	57	50	31	28	21	11	10
	Male	696	1	10	109	168	93	75	45	34	36	37	22	22	14	12	8	4	6
	Female	1154	0	35	247	215	147	133	93	86	44	34	35	28	17	16	13	7	4
1982	Total	1996	2	55	382	390	281	215	152	121	87	86	81	43	41	28	22	9	1
	Male	777	1	15	113	171	117	81	51	49	39	50	30	20	20	10	7	3	0
	Female	1219	1	40	269	219	164	134	101	72	48	36	51	23	21	18	15	6	1
1983	Total	2074	3	54	417	404	272	220	180	119	96	78	70	62	44	25	17	10	3
	Male	806	3	10	158	168	131	95	60	28	37	25	29	26	20	8	4	2	2
	Female	1268	0	44	259	236	141	125	120	91	59	53	41	36	24	17	13	8	1
1984	Total	1920	1	64	379	369	245	213	159	107	79	62	77	58	35	32	20	10	10
	Male	764	1	9	150	160	108	85	64	36	29	23	33	18	15	10	12	4	7
	Female	1156	0	55	229	209	137	128	95	71	50	39	44	40	20	22	8	6	3
1985	Total	1948	2	76	396	340	246	213	175	123	83	81	54	41	30	37	30	18	3
	Male	805	2	14	159	143	118	102	68	46	36	36	19	16	12	14	10	8	2
	Female	1143	0	62	237	197	128	111	107	77	47	45	35	25	18	23	20	10	1
1986	Total	1942	0	69	411	344	259	207	168	122	94	75	51	34	40	27	19	12	10
	Male	755	0	16	136	152	103	87	60	45	36	36	27	14	18	7	7	8	3
	Female	1187	0	53	275	192	156	120	108	77	58	39	24	20	22	20	12	4	7
1987	Total	2045	0	67	463	362	267	220	164	122	94	68	59	37	31	37	25	22	7
	Male	818	0	12	170	164	112	93	60	46	34	28	28	19	13	11	15	11	2
	Female	1227	0	55	293	198	155	127	104	76	60	40	31	18	18	26	10	11	5
1988	Total	2210	2	63	510	384	294	192	191	163	103	62	61	60	43	30	27	17	8
	Male	871	1	11	176	168	109	75	82	68	51	21	26	24	19	14	12	8	6
	Female	1339	1	52	334	216	185	117	109	95	52	41	35	36	24	16	15	9	2
1989	Total	2035	1	52	453	346	294	220	179	132	89	63	40	40	38	37	28	12	11
	Male	831	1	11	161	155	143	93	79	38	31	27	17	18	19	14	13	6	5
	Female	1204	0	41	292	191	151	127	100	94	58	36	23	22	19	23	15	6	6
1990	Total	2118	0	54	430	402	287	220	178	147	101	80	55	44	40	31	23	15	11
	Male	852	0	13	140	175	128	90	76	51	40	38	31	21	19	11	9	9	1
	Female	1266	0	41	290	227	159	130	102	96	61	42	24	23	21	20	14	6	10

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1991	Total	2009	0	42	407	352	304	223	175	143	91	71	41	43	43	26	23	15	10
	Male	829	0	12	139	163	134	97	59	59	39	33	26	18	13	14	10	7	6
	Female	1180	0	30	268	189	170	126	116	84	52	38	15	25	30	12	13	8	4
1992	Total	2167	1	62	368	435	301	237	192	153	118	80	55	35	46	28	31	19	6
	Male	856	0	7	112	195	135	98	71	58	54	34	22	17	19	12	14	5	3
	Female	1311	1	55	256	240	166	139	121	95	64	46	33	18	27	16	17	14	3
1993	Total	2378	0	68	452	396	311	325	240	190	125	74	56	37	26	27	21	20	10
	Male	896	0	10	141	168	121	138	95	66	42	32	26	14	13	12	8	6	4
	Female	1481	0	57	311	228	190	187	145	124	83	42	30	23	13	15	13	14	6
1994	Total	2419	5	107	415	468	309	278	208	178	133	90	63	38	43	30	26	15	13
	Male	897	3	17	111	209	128	109	92	59	42	30	27	15	19	12	7	8	9
	Female	1522	2	90	304	259	181	169	116	119	91	60	36	23	24	18	19	7	4
1995	Total	2570	2	109	430	478	382	319	257	200	122	92	37	37	27	37	15	19	7
	Male	1015	2	26	145	180	166	153	97	79	48	38	17	15	12	19	7	9	2
	Female	1555	0	83	285	298	216	166	160	121	74	54	20	22	15	18	8	10	5
1996	Total	2635	0	72	452	427	405	346	298	189	148	104	52	25	35	25	22	12	23
	Male	1000	0	13	143	159	143	131	122	76	59	44	24	18	21	17	13	6	11
	Female	1635	0	59	309	268	262	215	176	113	89	60	28	7	14	8	9	6	12
1997	Total	2728	1	83	454	396	387	356	297	236	181	106	76	38	38	20	27	17	15
	Male	994	1	14	125	147	163	124	112	87	70	43	27	25	19	11	12	6	8
	Female	1734	0	69	329	249	224	232	185	149	111	63	49	13	19	9	15	11	7
1998	Total	2823	2	67	423	351	400	388	363	289	190	105	55	44	46	32	30	25	13
	Male	1080	1	12	139	142	167	154	120	124	68	42	25	16	21	18	13	11	7
	Female	1743	1	55	284	209	233	234	243	165	122	63	30	28	25	14	17	14	6
1999	Total	2726	1	70	392	315	386	385	372	259	183	131	59	30	38	31	29	23	22
	Male	999	0	21	112	116	162	157	124	84	64	53	27	12	17	17	12	14	7
	Female	1726	1	49	280	199	223	228	248	175	119	78	32	18	21	14	17	9	15
2000	Total	3202	1	88	453	386	382	446	423	341	244	158	100	45	37	33	24	22	19
	Male	1168	0	17	122	147	156	187	132	130	93	56	45	17	17	21	8	7	13
	Female	2034	1	71	331	239	226	259	291	211	151	102	55	28	20	12	16	15	6
2001	Total	3674	0	86	584	476	417	474	466	370	276	197	107	48	53	45	43	26	6
	Male	1174	0	13	125	149	158	172	141	100	100	72	42	23	19	21	24	10	5
	Female	2500	0	73	459	327	259	302	325	270	176	125	65	25	34	24	19	16	1
2002	Total	3851	1	67	579	561	407	445	515	481	310	191	95	45	41	34	32	31	16
	Male	1210	1	11	126	157	161	126	161	124	121	83	42	22	16	16	20	14	9
	Female	2641	0	56	453	404	246	319	354	357	189	108	53	23	25	18	12	17	7
2003	Total	3958	1	88	600	550	401	499	503	465	293	241	105	63	42	34	30	21	22
	Male	1189	1	16	139	149	147	156	171	99	107	80	37	23	20	16	10	12	6
	Female	2768	0	72	461	401	254	343	332	366	186	160	68	40	22	18	20	9	16
2004	Total	3990	1	106	616	525	425	510	428	490	319	247	121	72	37	29	32	22	10
	Male	1194	0	9	150	170	122	162	158	130	99	75	41	24	14	14	14	8	4
	Female	2796	1	97	466	355	303	348	270	360	220	172	80	48	23	15	18	14	6

## Appendix 11: Intentional Self-harm Hospitalisations by Life-cycle Age Group and Sex, Pacific, 1978–2004

Year		Total	Age group (years)					
			5–14	15–24	25–34	35–44	45–64	65+
1978	Total	30	2	14	9	2	3	0
	Male	10	1	6	2	1	0	0
	Female	20	1	8	7	1	3	0
1979	Total	18	2	10	3	3	0	0
	Male	12	1	7	3	1	0	0
	Female	6	1	3	0	2	0	0
1980	Total	45	2	20	12	6	4	1
	Male	15	0	7	5	1	1	1
	Female	30	2	13	7	5	3	0
1981	Total	36	1	18	10	6	1	0
	Male	13	0	7	4	2	0	0
	Female	23	1	11	6	4	1	0
1982	Total	34	1	17	11	3	2	0
	Male	12	0	4	4	2	2	0
	Female	22	1	13	7	1	0	0
1983	Total	52	2	24	16	3	7	0
	Male	31	0	15	11	2	3	0
	Female	21	2	9	5	1	4	0
1984	Total	37	2	19	10	6	0	0
	Male	21	0	13	5	3	0	0
	Female	16	2	6	5	3	0	0
1985	Total	47	3	28	8	3	4	1
	Male	27	0	17	5	2	3	0
	Female	20	3	11	3	1	1	1
1986	Total	60	4	36	10	7	3	0
	Male	31	2	16	8	4	1	0
	Female	29	2	20	2	3	2	0
1987	Total	73	2	39	22	7	3	0
	Male	39	1	20	13	4	1	0
	Female	34	1	19	9	3	2	0
1988	Total	70	4	42	15	6	3	0
	Male	34	0	21	9	2	2	0
	Female	36	4	21	6	4	1	0
1989	Total	81	0	51	23	5	2	0
	Male	37	0	19	15	3	0	0
	Female	44	0	32	8	2	2	0
1990	Total	75	3	44	13	6	5	4
	Male	35	1	17	6	6	4	1
	Female	40	2	27	7	0	1	3

Year		Total	Age group (years)					
			5–14	15–24	25–34	35–44	45–64	65+
1991	Total	64	1	36	17	5	4	1
	Male	33	0	20	10	2	1	0
	Female	31	1	16	7	3	3	1
1992	Total	76	3	39	22	7	5	0
	Male	28	0	14	10	3	1	0
	Female	48	3	25	12	4	4	0
1993	Total	83	3	48	21	7	4	0
	Male	32	0	13	11	4	4	0
	Female	51	3	35	10	3	0	0
1994	Total	101	11	51	29	9	1	0
	Male	35	1	18	12	4	0	0
	Female	66	10	33	17	5	1	0
1995	Total	98	5	48	29	9	4	3
	Male	27	0	8	12	3	2	2
	Female	71	5	40	17	6	2	1
1996	Total	125	6	56	34	25	3	1
	Male	48	0	18	18	8	3	1
	Female	77	6	38	16	17	0	0
1997	Total	116	4	58	31	13	8	2
	Male	42	1	20	9	6	4	2
	Female	74	3	38	22	7	4	0
1998	Total	104	8	39	26	22	9	0
	Male	49	0	15	14	16	4	0
	Female	55	8	24	12	6	5	0
1999	Total	123	10	52	30	21	7	3
	Male	41	3	14	15	5	3	1
	Female	82	7	38	15	16	4	2
2000	Total	143	0	68	48	15	9	3
	Male	63	0	28	26	4	5	0
	Female	80	0	40	22	11	4	3
2001	Total	164	3	92	40	11	13	5
	Male	64	0	28	24	7	2	3
	Female	100	3	64	16	4	11	2
2002	Total	191	5	104	40	22	17	3
	Male	60	0	24	18	6	10	2
	Female	131	5	80	22	16	7	1
2003	Total	193	1	90	45	40	14	3
	Male	67	0	19	18	25	5	0
	Female	126	1	71	27	15	9	3
2004	Total	177	4	80	45	22	22	4
	Male	61	1	25	16	10	8	1
	Female	116	3	55	29	12	14	3

## Appendix 12: Intentional Self-harm Hospitalisations by Life-cycle Age Group and Sex, Asian, 1978–2004

Year		Total	Age group (years)					
			5–14	15–24	25–34	35–44	45–64	65+
1978	Total	8	0	3	2	2	1	0
	Male	1	0	0	0	1	0	0
	Female	7	0	3	2	1	1	0
1979	Total	2	0	0	2	0	0	0
	Male	1	0	0	1	0	0	0
	Female	1	0	0	1	0	0	0
1980	Total	11	0	5	4	0	1	1
	Male	4	0	1	2	0	1	0
	Female	7	0	4	2	0	0	1
1981	Total	6	0	1	3	1	1	0
	Male	2	0	0	1	0	1	0
	Female	4	0	1	2	1	0	0
1982	Total	9	0	3	1	1	4	0
	Male	3	0	1	1	0	1	0
	Female	6	0	2	0	1	3	0
1983	Total	13	0	5	5	1	2	0
	Male	7	0	2	2	1	2	0
	Female	6	0	3	3	0	0	0
1984	Total	8	0	6	1	0	1	0
	Male	1	0	1	0	0	0	0
	Female	7	0	5	1	0	1	0
1985	Total	11	0	5	3	1	2	0
	Male	3	0	2	1	0	0	0
	Female	8	0	3	2	1	2	0
1986	Total	11	1	5	1	1	3	0
	Male	3	0	3	0	0	0	0
	Female	8	1	2	1	1	3	0
1987	Total	22	2	13	4	3	0	0
	Male	4	0	2	0	2	0	0
	Female	18	2	11	4	1	0	0
1988	Total	32	0	13	11	5	2	1
	Male	8	0	4	2	1	0	1
	Female	24	0	9	9	4	2	0
1989	Total	34	0	19	10	4	0	1
	Male	9	0	5	3	0	0	1
	Female	25	0	14	7	4	0	0
1990	Total	47	0	13	20	7	7	0
	Male	18	0	2	10	1	5	0
	Female	29	0	11	10	6	2	0

Year		Total	Age group (years)					
			5–14	15–24	25–34	35–44	45–64	65+
1991	Total	38	2	12	13	8	3	0
	Male	14	1	0	7	4	2	0
	Female	24	1	12	6	4	1	0
1992	Total	41	2	12	20	3	1	3
	Male	17	0	5	9	1	1	1
	Female	24	2	7	11	2	0	2
1993	Total	45	1	18	20	2	3	1
	Male	10	0	3	5	0	2	0
	Female	35	1	15	15	2	1	1
1994	Total	44	3	21	13	3	4	0
	Male	14	1	9	2	1	1	0
	Female	30	2	12	11	2	3	0
1995	Total	63	1	25	19	10	8	0
	Male	20	0	9	5	2	4	0
	Female	43	1	16	14	8	4	0
1996	Total	58	3	24	15	10	3	3
	Male	15	0	5	3	2	2	3
	Female	43	3	19	12	8	1	0
1997	Total	66	1	27	22	9	6	1
	Male	16	1	3	6	4	1	1
	Female	50	0	24	16	5	5	0
1998	Total	80	1	32	18	23	4	2
	Male	22	0	9	7	2	3	1
	Female	58	1	23	11	21	1	1
1999	Total	64	0	29	11	16	5	3
	Male	11	0	5	1	5	0	0
	Female	53	0	24	10	11	5	3
2000	Total	119	3	59	32	15	7	3
	Male	31	1	13	10	6	1	0
	Female	88	2	46	22	9	6	3
2001	Total	139	1	60	48	17	9	4
	Male	32	0	12	12	4	3	1
	Female	107	1	48	36	13	6	3
2002	Total	165	4	71	40	35	15	0
	Male	40	0	15	8	13	4	0
	Female	125	4	56	32	22	11	0
2003	Total	183	5	79	47	36	14	2
	Male	53	0	21	18	12	2	0
	Female	130	5	58	29	24	12	2
2004	Total	178	5	90	37	32	13	1
	Male	42	0	24	10	6	1	1
	Female	136	5	66	27	26	12	0

## Appendix 13: Intentional Self-harm Hospitalisations by Life-cycle Age Group and Sex, European/Other, 1978–2004

Year		Total	Age group (years)					
			5–14	15–24	25–34	35–44	45–64	65+
1978	Total	1757	55	684	441	241	257	79
	Male	659	17	282	160	82	84	34
	Female	1097	38	402	281	158	173	45
1979	Total	1764	37	691	417	234	271	114
	Male	639	7	270	154	77	85	46
	Female	1125	30	421	263	157	186	68
1980	Total	1841	71	686	456	247	287	94
	Male	695	19	265	178	79	114	40
	Female	1146	52	421	278	168	173	54
1981	Total	1808	45	720	435	251	256	101
	Male	681	11	270	163	77	116	44
	Female	1127	34	450	272	174	140	57
1982	Total	1953	56	752	484	269	291	101
	Male	762	16	279	193	98	136	40
	Female	1191	40	473	291	171	155	61
1983	Total	2009	55	792	471	295	297	99
	Male	768	13	309	213	85	112	36
	Female	1241	42	483	258	210	185	63
1984	Total	1875	63	723	447	260	275	107
	Male	742	10	296	188	97	103	48
	Female	1133	53	427	259	163	172	59
1985	Total	1890	75	703	448	294	253	117
	Male	775	16	283	214	112	104	46
	Female	1115	59	420	234	182	149	71
1986	Total	1871	64	714	455	282	248	108
	Male	721	14	269	182	101	112	43
	Female	1150	50	445	273	181	136	65
1987	Total	1950	63	773	461	276	255	122
	Male	775	11	312	192	100	108	52
	Female	1175	52	461	269	176	147	70
1988	Total	2108	61	839	460	343	281	124
	Male	829	12	319	173	147	120	58
	Female	1279	49	520	287	196	161	66
1989	Total	1920	53	729	481	302	230	125
	Male	785	12	292	218	114	93	56
	Female	1135	41	437	263	188	137	69
1990	Total	1996	51	775	474	312	268	116
	Male	799	12	296	202	120	121	48
	Female	1197	39	479	272	192	147	68
1991	Total	1907	39	711	497	305	239	116
	Male	782	11	282	214	112	113	50
	Female	1125	28	429	283	193	126	66

Year		Total	Age group (years)					
			5–14	15–24	25–34	35–44	45–64	65+
1992	Total	2050	58	752	496	335	282	127
	Male	811	7	288	214	125	125	52
	Female	1239	51	464	282	210	157	75
1993	Total	2250	64	782	595	421	285	103
	Male	854	10	293	243	157	108	43
	Female	1395	53	489	352	264	177	60
1994	Total	2274	98	811	545	374	319	127
	Male	848	18	293	223	146	113	55
	Female	1426	80	518	322	228	206	72
1995	Total	2409	105	835	653	438	276	102
	Male	968	28	308	302	171	112	47
	Female	1441	77	527	351	267	164	55
1996	Total	2452	63	799	702	452	323	113
	Male	937	13	279	253	188	140	64
	Female	1515	50	520	449	264	183	49
1997	Total	2546	79	765	690	511	387	114
	Male	936	13	249	272	189	160	53
	Female	1610	66	516	418	322	227	61
1998	Total	2639	60	703	744	607	381	144
	Male	1009	13	257	300	226	144	69
	Female	1630	47	446	444	381	237	75
1999	Total	2539	61	626	730	594	391	137
	Male	947	18	209	303	198	153	66
	Female	1591	43	417	426	396	238	71
2000	Total	2940	86	712	748	734	531	129
	Male	1074	16	228	307	252	205	66
	Female	1866	70	484	441	482	326	63
2001	Total	3371	82	908	803	808	606	164
	Male	1078	13	234	294	230	232	75
	Female	2293	69	674	509	578	374	89
2002	Total	3495	59	965	772	939	609	151
	Male	1110	12	244	261	266	254	73
	Female	2385	47	721	511	673	355	78
2003	Total	3582	83	981	808	892	674	144
	Male	1069	17	248	267	233	240	64
	Female	2512	66	733	541	659	433	80
2004	Total	3635	98	971	853	864	724	125
	Male	1091	8	271	258	272	230	52
	Female	2544	90	700	595	592	494	73



## Appendix 14: Suicide Deaths by DHB, by Life-cycle Age Group and Sex, 1983–1985, 1992–1994, 2001–2003

DHB	Age group	1983–1985			1992–1994			2001–2003		
		Total	Male	Female	Total	Male	Female	Total	Male	Female
Auckland	5–14	3	2	1	0	0	0	0	0	0
	15–24	36	26	10	27	20	7	19	8	11
	25–34	32	24	8	40	32	8	30	16	14
	35–44	22	15	7	17	13	4	24	17	7
	45–64	38	29	9	32	25	7	25	16	9
	65+	27	21	6	7	3	4	12	9	3
Bay of Plenty	5–14	0	0	0	0	0	0	1	0	1
	15–24	6	4	2	30	27	3	16	13	3
	25–34	9	8	1	13	12	1	20	16	4
	35–44	5	5	0	6	4	2	16	11	5
	45–64	11	8	3	17	12	5	21	17	4
	65+	10	8	2	5	3	2	13	10	3
Canterbury	5–14	0	0	0	0	0	0	0	0	0
	15–24	20	16	4	58	49	9	31	28	3
	25–34	27	20	7	41	33	8	32	23	9
	35–44	9	5	4	31	28	3	44	37	7
	45–64	22	12	10	50	32	18	56	44	12
	65+	30	24	6	13	10	3	22	16	6
Capital and Coast	5–14	1	1	0	2	2	0	0	0	0
	15–24	18	14	4	26	20	6	21	15	6
	25–34	10	7	3	26	22	4	21	18	3
	35–44	17	15	2	14	9	5	18	15	3
	45–64	13	10	3	27	20	7	15	7	8
	65+	7	4	3	10	6	4	14	9	5
Counties Manukau	5–14	2	0	2	6	5	1	2	1	1
	15–24	13	12	1	30	27	3	40	29	11
	25–34	15	12	3	30	27	3	33	25	8
	35–44	9	7	2	19	11	8	29	23	6
	45–64	13	7	6	20	15	5	27	17	10
	65+	8	4	4	16	11	5	13	9	4
Hawke's Bay	5–14	2	2	0	3	2	1	1	1	0
	15–24	14	13	1	14	12	2	17	10	7
	25–34	14	13	1	16	14	2	18	11	7
	35–44	5	4	1	11	9	2	18	16	2
	45–64	15	9	6	17	14	3	16	8	8
	65+	15	10	5	7	4	3	9	8	1
Hutt Valley	5–14	0	0	0	2	1	1	0	0	0
	15–24	7	6	1	20	17	3	11	5	6
	25–34	7	4	3	12	8	4	8	6	2
	35–44	9	7	2	9	8	1	7	4	3
	45–64	10	6	4	12	9	3	10	8	2
	65+	11	6	5	7	7	0	7	4	3

DHB	Age group	1983–1985			1992–1994			2001–2003		
		Total	Male	Female	Total	Male	Female	Total	Male	Female
Lakes	5–14	1	0	1	0	0	0	1	0	1
	15–24	9	6	3	19	13	6	6	3	3
	25–34	5	3	2	14	12	2	10	9	1
	35–44	6	4	2	7	7	0	9	7	2
	45–64	8	5	3	7	6	1	11	6	5
	65+	9	8	1	4	4	0	2	2	0
MidCentral	5–14	0	0	0	0	0	0	0	0	0
	15–24	12	10	2	21	19	2	14	11	3
	25–34	9	8	1	14	11	3	14	12	2
	35–44	8	6	2	13	10	3	18	14	4
	45–64	18	11	7	9	8	1	14	12	2
	65+	7	6	1	9	7	2	7	3	4
Nelson-Marlborough	5–14	0	0	0	0	0	0	1	1	0
	15–24	3	1	2	5	4	1	12	8	4
	25–34	3	1	2	7	7	0	10	7	3
	35–44	5	3	2	10	9	1	11	10	1
	45–64	10	9	1	9	8	1	13	11	2
	65+	5	3	2	4	4	0	6	3	3
Northland	5–14	1	0	1	0	0	0	1	1	0
	15–24	8	7	1	13	10	3	10	8	2
	25–34	6	5	1	6	4	2	13	8	5
	35–44	4	3	1	8	7	1	12	10	2
	45–64	11	7	4	14	8	6	13	10	3
	65+	8	5	3	8	6	2	7	7	0
Otago	5–14	0	0	0	0	0	0	0	0	0
	15–24	11	9	2	11	11	0	11	10	1
	25–34	18	13	5	17	13	4	17	10	7
	35–44	10	8	2	9	6	3	17	12	5
	45–64	13	11	2	14	9	5	11	6	5
	65+	13	11	2	12	9	3	9	6	3
South Canterbury	5–14	0	0	0	0	0	0	0	0	0
	15–24	4	3	1	12	10	2	1	1	0
	25–34	7	6	1	5	3	2	4	4	0
	35–44	1	1	0	2	2	0	5	3	2
	45–64	3	2	1	1	0	1	5	5	0
	65+	6	5	1	4	4	0	5	4	1
Southland	5–14	0	0	0	1	1	0	0	0	0
	15–24	9	8	1	15	15	0	11	8	3
	25–34	9	7	2	9	9	0	8	6	2
	35–44	4	2	2	6	6	0	15	12	3
	45–64	11	8	3	7	6	1	9	8	1
	65+	3	2	1	10	6	4	2	2	0

DHB	Age group	1983–1985			1992–1994			2001–2003		
		Total	Male	Female	Total	Male	Female	Total	Male	Female
Tairāwhiti	5–14	0	0	0	1	0	1	1	1	0
	15–24	0	0	0	1	1	0	4	4	0
	25–34	3	3	0	2	1	1	7	5	2
	35–44	3	1	2	2	1	1	3	3	0
	45–64	2	2	0	5	5	0	5	5	0
	65+	5	5	0	3	2	1	3	3	0
Taranaki	5–14	1	1	0	0	0	0	0	0	0
	15–24	8	8	0	15	11	4	3	3	0
	25–34	6	5	1	5	4	1	9	8	1
	35–44	3	2	1	4	4	0	8	8	0
	45–64	5	4	1	13	9	4	5	3	2
	65+	5	3	2	7	6	1	4	2	2
Waikato	5–14	1	0	1	0	0	0	0	0	0
	15–24	13	12	1	35	32	3	25	20	5
	25–34	11	10	1	26	19	7	27	26	1
	35–44	20	15	5	19	18	1	21	16	5
	45–64	27	22	5	24	14	10	26	21	5
	65+	16	13	3	16	14	2	14	10	4
Wairarapa	5–14	0	0	0	0	0	0	0	0	0
	15–24	1	0	1	5	4	1	1	1	0
	25–34	2	2	0	3	1	2	3	2	1
	35–44	1	1	0	3	3	0	8	4	4
	45–64	0	0	0	2	2	0	4	3	1
	65+	3	3	0	9	6	3	4	4	0
Waitematā	5–14	1	1	0	0	0	0	0	0	0
	15–24	19	15	4	27	24	3	35	22	13
	25–34	14	11	3	39	28	11	38	34	4
	35–44	15	8	7	16	12	4	40	32	8
	45–64	26	16	10	26	21	5	37	31	6
	65+	11	5	6	18	16	2	17	15	2
West Coast	5–14	0	0	0	0	0	0	0	0	0
	15–24	2	2	0	1	1	0	0	0	0
	25–34	2	2	0	2	2	0	1	1	0
	35–44	3	2	1	1	1	0	5	5	0
	45–64	8	4	4	7	7	0	4	4	0
	65+	1	1	0	5	5	0	2	2	0
Whanganui	5–14	0	0	0	0	0	0	0	0	0
	15–24	3	2	1	5	4	1	8	5	3
	25–34	5	4	1	6	6	0	6	5	1
	35–44	3	2	1	5	5	0	6	1	5
	45–64	3	2	1	6	4	2	10	8	2
	65+	3	3	0	2	2	0	5	3	2

## Appendix 15: Intentional Self-harm Hospitalisations by DHB, by Life-cycle Age Group and Sex, 1983–1985, 1992–1994, 2001–2003

DHB	Age group	1983–1985			1992–1994			2001–2003		
		Total	Male	Female	Total	Male	Female	Total	Male	Female
Auckland	5–14	23	4	19	28	5	23	26	3	23
	15–24	307	141	166	286	97	189	534	150	384
	25–34	205	106	99	207	95	112	482	207	275
	35–44	110	47	63	126	62	64	312	111	201
	45–64	116	41	75	107	51	56	241	102	139
	65+	48	18	30	42	15	27	61	25	36
Bay of Plenty	5–14	5	0	5	19	5	14	17	3	14
	15–24	111	49	62	168	77	91	143	37	106
	25–34	43	21	22	82	30	52	119	49	70
	35–44	36	6	30	52	26	26	132	45	87
	45–64	33	10	23	39	13	26	67	27	40
	65+	13	5	8	14	5	9	32	14	18
Canterbury	5–14	64	17	47	50	5	45	67	16	51
	15–24	525	217	308	495	185	310	850	183	667
	25–34	284	115	169	342	160	182	591	159	432
	35–44	149	44	105	206	79	127	520	153	367
	45–64	135	42	93	143	55	88	353	145	208
	65+	58	24	34	37	14	23	76	25	51
Capital and Coast	5–14	14	1	13	23	7	16	12	1	11
	15–24	230	98	132	224	85	139	145	45	100
	25–34	161	65	96	157	55	102	133	57	76
	35–44	84	35	49	91	32	59	98	33	65
	45–64	74	39	35	67	26	41	89	42	47
	65+	14	5	9	30	15	15	21	2	19
Counties Manukau	5–14	22	4	18	42	6	36	39	13	26
	15–24	178	76	102	330	127	203	487	158	329
	25–34	104	48	56	192	82	110	348	143	205
	35–44	57	21	36	89	24	65	338	113	225
	45–64	61	19	42	89	34	55	229	101	128
	65+	15	6	9	23	8	15	45	18	27
Hawke's Bay	5–14	13	2	11	33	6	27	10	1	9
	15–24	112	44	68	226	76	150	83	26	57
	25–34	61	23	38	93	40	53	82	26	56
	35–44	35	12	23	57	20	37	84	25	59
	45–64	28	10	18	38	15	23	53	17	36
	65+	13	5	8	25	15	10	10	5	5
Hutt Valley	5–14	16	4	12	16	5	11	20	3	17
	15–24	146	56	90	152	62	90	119	40	79
	25–34	69	32	37	86	30	56	100	35	65
	35–44	43	15	28	65	30	35	154	22	132
	45–64	38	11	27	26	11	15	96	36	60
	65+	12	7	5	13	7	6	28	10	18

DHB	Age group	1983–1985			1992–1994			2001–2003		
		Total	Male	Female	Total	Male	Female	Total	Male	Female
Lakes	5–14	13	1	12	13	0	13	8	1	7
	15–24	92	42	50	147	62	85	115	33	82
	25–34	50	23	27	69	21	48	88	45	43
	35–44	25	11	14	43	22	21	78	39	39
	45–64	21	12	9	23	7	16	35	10	25
	65+	4	2	2	5	2	3	8	5	3
MidCentral	5–14	8	1	7	17	5	12	11	5	6
	15–24	136	58	78	241	96	145	99	27	72
	25–34	103	42	61	172	63	109	143	55	88
	35–44	55	21	34	63	22	41	117	19	98
	45–64	57	19	38	53	15	38	65	28	37
	65+	24	11	13	21	3	18	23	14	9
Nelson-Marlborough	5–14	4	1	3	4	0	4	15	1	14
	15–24	74	25	49	67	22	45	121	33	88
	25–34	31	18	13	66	29	37	86	31	55
	35–44	16	7	9	34	10	24	121	31	90
	45–64	11	5	6	32	14	18	81	29	52
	65+	9	3	6	9	2	7	14	6	8
Northland	5–14	10	3	7	12	3	9	11	2	9
	15–24	78	28	50	78	31	47	119	32	87
	25–34	40	17	23	54	22	32	142	50	92
	35–44	18	6	12	43	23	20	102	27	75
	45–64	28	13	15	20	9	11	78	33	45
	65+	9	4	5	9	6	3	12	4	8
Otago	5–14	12	3	9	19	2	17	19	4	15
	15–24	203	104	99	193	57	136	263	71	192
	25–34	109	46	63	124	63	61	164	59	105
	35–44	75	28	47	90	42	48	152	45	107
	45–64	51	17	34	60	22	38	109	29	80
	65+	19	9	10	17	7	10	18	14	4
South Canterbury	5–14	3	1	2	4	0	4	1	1	0
	15–24	61	38	23	37	17	20	29	11	18
	25–34	25	13	12	22	10	12	24	9	15
	35–44	14	4	10	16	4	12	26	14	12
	45–64	13	3	10	7	5	2	17	7	10
	65+	9	3	6	6	5	1	3	1	2
Southland	5–14	2	1	1	20	3	17	8	3	5
	15–24	112	39	73	91	40	51	79	21	58
	25–34	62	33	29	61	27	34	48	19	29
	35–44	18	7	11	45	13	32	57	21	36
	45–64	18	13	5	17	7	10	61	12	49
	65+	2	1	1	10	5	5	7	5	2
Tairāwhiti	5–14	7	0	7	12	2	10	7	2	5
	15–24	62	19	43	55	26	29	42	19	23
	25–34	23	10	13	26	6	20	19	8	11
	35–44	9	1	8	12	4	8	27	5	22
	45–64	7	3	4	5	2	3	16	2	14
	65+	2	0	2	5	2	3	4	2	2

DHB	Age group	1983–1985			1992–1994			2001–2003		
		Total	Male	Female	Total	Male	Female	Total	Male	Female
Taranaki	5–14	10	0	10	9	1	8	9	1	8
	15–24	59	28	31	106	49	57	66	29	37
	25–34	25	18	7	90	37	53	104	40	64
	35–44	17	6	11	59	19	40	64	20	44
	45–64	22	15	7	24	12	12	57	11	46
	65+	4	2	2	9	3	6	7	6	1
Waikato	5–14	24	9	15	42	7	35	33	3	30
	15–24	246	89	157	353	117	236	407	110	297
	25–34	150	63	87	191	79	112	294	94	200
	35–44	76	23	53	121	40	81	213	69	144
	45–64	71	26	45	79	32	47	157	66	91
	65+	18	8	10	33	17	16	33	14	19
Wairarapa	5–14	5	1	4	12	1	11	5	4	1
	15–24	38	14	24	57	16	41	45	14	31
	25–34	18	11	7	28	13	15	34	16	18
	35–44	6	3	3	11	3	8	39	6	33
	45–64	9	3	6	17	4	13	17	9	8
	65+	2	0	2	9	6	3	12	7	5
Waitemata	5–14	21	3	18	22	4	18	50	9	41
	15–24	173	76	97	199	77	122	590	157	433
	25–34	96	46	50	174	70	104	427	156	271
	35–44	85	27	58	100	43	57	573	135	438
	45–64	76	30	46	103	35	68	289	85	204
	65+	36	10	26	40	11	29	62	39	23
West Coast	5–14	4	1	3	2	0	2	3	0	3
	15–24	31	8	23	38	24	14	38	9	29
	25–34	11	5	6	25	6	19	17	4	13
	35–44	9	2	7	16	4	12	65	12	53
	45–64	7	2	5	16	7	9	54	18	36
	65+	7	4	3	3	0	3	4	2	2
Whanganui	5–14	14	1	13	7	1	6	6	0	6
	15–24	68	14	54	65	23	42	37	15	22
	25–34	41	21	20	55	20	35	31	13	18
	35–44	26	8	18	23	5	18	43	12	31
	45–64	17	9	8	18	5	13	23	8	15
	65+	8	5	3	6	4	2	8	5	3

## Appendix 16: Suicide Deaths by Poisoning by Solid or Liquid Substances, by Five-year Age Group and Sex, Total Population, 1983–2003

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1983	Total	55	0	0	6	11	7	6	4	5	5	1	2	3	1	2	1	0	1
	Male	27	0	0	4	6	3	4	2	2	2	1	1	1	0	1	0	0	0
	Female	28	0	0	2	5	4	2	2	3	3	0	1	2	1	1	1	0	1
1984	Total	53	0	0	2	4	3	8	3	2	5	3	7	2	3	5	2	2	2
	Male	31	0	0	1	1	3	4	2	1	4	2	3	1	1	2	2	2	2
	Female	22	0	0	1	3	0	4	1	1	1	1	4	1	2	3	0	0	0
1985	Total	64	0	1	4	6	8	8	3	3	5	5	7	4	3	6	1	0	0
	Male	35	0	0	2	4	5	7	2	2	3	3	1	1	2	3	0	0	0
	Female	29	0	1	2	2	3	1	1	1	2	2	6	3	1	3	1	0	0
1986	Total	74	0	1	6	8	8	9	10	5	4	4	4	4	4	1	6	0	0
	Male	30	0	0	1	6	4	3	6	2	2	1	1	0	2	0	2	0	0
	Female	44	0	1	5	2	4	6	4	3	2	3	3	4	2	1	4	0	0
1987	Total	50	0	0	2	5	3	6	4	2	5	4	6	1	5	3	1	3	0
	Male	28	0	0	1	2	1	4	3	2	3	2	5	1	3	0	0	1	0
	Female	22	0	0	1	3	2	2	1	0	2	2	1	0	2	3	1	2	0
1988	Total	72	0	0	10	12	8	5	7	3	7	4	2	6	3	0	3	2	0
	Male	39	0	0	5	8	4	3	5	3	5	1	1	0	1	0	2	1	0
	Female	33	0	0	5	4	4	2	2	0	2	3	1	6	2	0	1	1	0
1989	Total	61	0	1	3	10	6	4	8	2	8	8	3	4	1	2	0	1	0
	Male	33	0	1	1	5	5	0	6	1	5	5	1	1	1	1	0	0	0
	Female	28	0	0	2	5	1	4	2	1	3	3	2	3	0	1	0	1	0
1990	Total	60	0	0	4	8	3	8	10	9	3	2	3	3	1	2	3	0	1
	Male	27	0	0	2	3	1	3	4	5	3	0	2	2	1	0	0	0	1
	Female	33	0	0	2	5	2	5	6	4	0	2	1	1	0	2	3	0	0
1991	Total	54	0	1	3	11	6	5	6	4	5	3	0	4	4	1	1	0	0
	Male	24	0	1	1	7	1	2	3	2	1	1	0	2	2	0	1	0	0
	Female	30	0	0	2	4	5	3	3	2	4	2	0	2	2	1	0	0	0
1992	Total	53	0	1	3	6	5	4	4	4	6	3	7	6	0	2	1	1	0
	Male	25	0	0	2	3	3	3	3	2	3	1	1	1	0	2	1	0	0
	Female	28	0	1	1	3	2	1	1	2	3	2	6	5	0	0	0	1	0
1993	Total	53	0	0	3	7	6	7	3	5	5	2	1	5	2	3	3	1	0
	Male	23	0	0	0	4	2	3	2	3	2	0	1	1	1	2	2	0	0
	Female	30	0	0	3	3	4	4	1	2	3	2	0	4	1	1	1	1	0
1994	Total	73	0	1	5	8	7	11	5	4	7	7	2	5	1	6	1	2	1
	Male	30	0	0	0	4	4	5	2	2	2	2	1	4	0	1	0	2	1
	Female	43	0	1	5	4	3	6	3	2	5	5	1	1	1	5	1	0	0
1995	Total	46	0	0	1	7	5	5	3	3	4	4	0	1	4	3	3	3	0
	Male	24	0	0	0	5	2	3	1	1	3	3	0	0	1	1	2	2	0
	Female	22	0	0	1	2	3	2	2	2	1	1	0	1	3	2	1	1	0
1996	Total	59	0	1	8	6	2	5	5	6	3	2	3	4	5	4	2	3	0
	Male	30	0	0	3	3	1	2	3	3	1	1	1	3	4	2	1	2	0
	Female	29	0	1	5	3	1	3	2	3	2	1	2	1	1	2	1	1	0
1997	Total	59	0	1	4	5	6	8	2	11	2	5	6	1	1	2	3	1	1
	Male	26	0	0	2	4	2	3	1	6	0	0	3	1	1	0	2	1	0
	Female	33	0	1	2	1	4	5	1	5	2	5	3	0	0	2	1	0	1
1998	Total	64	0	1	10	3	2	10	4	8	7	6	5	2	1	2	1	2	0
	Male	31	0	0	3	0	1	8	3	4	3	2	2	2	1	1	1	0	0
	Female	33	0	1	7	3	1	2	1	4	4	4	3	0	0	1	0	2	0

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1999	Total	52	0	0	2	4	6	5	5	7	8	6	4	0	1	1	1	1	1
	Male	22	0	0	1	2	4	2	2	1	4	3	2	0	0	0	0	1	0
	Female	30	0	0	1	2	2	3	3	6	4	3	2	0	1	1	1	0	1
2000	Total	39	0	0	2	0	8	3	5	5	2	3	2	1	1	0	0	4	3
	Male	22	0	0	0	0	4	2	2	3	2	3	2	0	1	0	0	1	2
	Female	17	0	0	2	0	4	1	3	2	0	0	0	1	0	0	0	3	1
2001	Total	58	0	1	3	3	5	5	6	8	5	3	3	1	3	4	5	2	1
	Male	31	0	0	1	0	2	3	3	6	3	1	2	1	2	2	3	1	1
	Female	27	0	1	2	3	3	2	3	2	2	2	1	0	1	2	2	1	0
2002	Total	47	0	0	1	4	4	9	7	2	4	4	3	0	1	2	1	2	3
	Male	24	0	0	1	1	3	3	4	2	2	0	2	0	0	1	1	2	2
	Female	23	0	0	0	3	1	6	3	0	2	4	1	0	1	1	0	0	1
2003	Total	58	0	0	1	2	4	5	9	6	11	4	1	7	2	4	0	2	0
	Male	33	0	0	0	0	4	4	2	4	6	3	1	4	2	2	0	1	0
	Female	25	0	0	1	2	0	1	7	2	5	1	0	3	0	2	0	1	0



## Appendix 17: Suicide Deaths by Hanging, Strangulation and Suffocation, by Five-year Age Group and Sex, Total Population, 1983–2003

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1983	Total	86	0	2	6	9	12	3	10	4	4	6	7	3	10	2	4	3	1
	Male	57	0	2	5	7	8	2	5	3	2	2	6	2	8	0	1	3	1
	Female	29	0	0	1	2	4	1	5	1	2	4	1	1	2	2	3	0	0
1984	Total	129	0	3	13	22	17	11	8	9	6	5	6	8	4	7	5	5	0
	Male	101	0	1	12	16	14	9	8	8	5	3	4	6	4	6	2	3	0
	Female	28	0	2	1	6	3	2	0	1	1	2	2	2	0	1	3	2	0
1985	Total	102	0	3	14	15	12	8	7	3	5	6	6	4	7	6	4	2	0
	Male	79	0	1	12	11	10	7	6	2	4	4	4	4	5	5	3	1	0
	Female	23	0	2	2	4	2	1	1	1	1	2	2	0	2	1	1	1	0
1986	Total	116	0	2	15	23	11	9	6	4	5	8	2	5	8	7	5	6	0
	Male	88	0	1	11	14	10	7	5	2	5	6	1	5	7	5	4	5	0
	Female	28	0	1	4	9	1	2	1	2	0	2	1	0	1	2	1	1	0
1987	Total	154	0	4	19	31	20	10	11	5	9	9	11	5	5	0	8	6	1
	Male	118	0	4	14	26	16	8	8	3	7	5	7	5	5	0	7	3	0
	Female	36	0	0	5	5	4	2	3	2	2	4	4	0	0	0	1	3	1
1988	Total	141	0	1	20	33	15	15	7	5	7	2	11	6	4	7	5	3	0
	Male	118	0	1	18	27	14	10	6	5	7	1	11	6	2	5	3	2	0
	Female	23	0	0	2	6	1	5	1	0	0	1	0	0	2	2	2	1	0
1989	Total	162	1	5	32	31	21	8	9	9	8	6	3	7	8	4	2	7	1
	Male	136	1	5	29	27	14	7	9	6	6	4	2	6	7	3	2	7	1
	Female	26	0	0	3	4	7	1	0	3	2	2	1	1	1	1	0	0	0
1990	Total	167	1	0	26	40	21	18	11	7	9	7	4	8	4	3	4	3	1
	Male	135	1	0	23	35	14	14	11	3	8	5	3	8	2	2	2	3	1
	Female	32	0	0	3	5	7	4	0	4	1	2	1	0	2	1	2	0	0
1991	Total	169	0	2	26	30	21	18	19	13	10	6	4	8	3	3	4	2	0
	Male	150	0	2	26	28	19	17	17	10	9	4	3	6	3	1	3	2	0
	Female	19	0	0	0	2	2	1	2	3	1	2	1	2	0	2	1	0	0
1992	Total	170	0	4	25	38	23	10	6	11	9	10	7	14	4	5	2	0	2
	Male	144	0	4	22	34	19	9	6	8	6	8	7	12	2	5	1	0	1
	Female	26	0	0	3	4	4	1	0	3	3	2	0	2	2	0	1	0	1
1993	Total	143	0	3	19	34	14	17	13	8	11	4	8	3	3	3	0	2	1
	Male	122	0	2	18	31	10	13	13	6	10	2	6	2	3	3	0	2	1
	Female	21	0	1	1	3	4	4	0	2	1	2	2	1	0	0	0	0	0
1994	Total	166	0	6	29	36	20	23	3	10	7	4	7	1	6	3	3	4	4
	Male	136	0	5	25	30	18	19	2	8	6	3	5	1	5	2	1	2	4
	Female	30	0	1	4	6	2	4	1	2	1	1	2	0	1	1	2	2	0
1995	Total	221	0	3	44	47	25	21	14	13	17	9	5	6	4	3	5	3	2
	Male	174	0	2	32	38	24	17	12	10	12	7	3	4	4	3	3	2	1
	Female	47	0	1	12	9	1	4	2	3	5	2	2	2	0	0	2	1	1
1996	Total	230	0	6	37	51	33	30	16	8	12	7	8	3	7	4	2	5	1
	Male	190	0	3	26	45	29	27	13	7	9	5	8	3	6	2	2	4	1
	Female	40	0	3	11	6	4	3	3	1	3	2	0	0	1	2	0	1	0
1997	Total	232	0	6	40	37	34	24	23	16	13	10	10	5	4	4	1	3	2
	Male	185	0	5	24	30	30	23	18	13	9	10	6	4	3	4	1	3	2
	Female	47	0	1	16	7	4	1	5	3	4	0	4	1	1	0	0	0	0
1998	Total	250	0	11	38	36	46	30	21	24	13	6	4	3	4	6	5	0	3
	Male	189	0	8	22	31	36	24	16	13	12	6	4	3	4	3	5	0	2
	Female	61	0	3	16	5	10	6	5	11	1	0	0	0	0	3	0	0	1

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1999	Total	240	0	6	32	50	32	22	26	14	13	12	9	6	6	6	5	1	0
	Male	180	0	3	18	36	26	20	21	9	11	10	8	5	4	4	5	0	0
	Female	60	0	3	14	14	6	2	5	5	2	2	1	1	2	2	0	1	0
2000	Total	215	0	3	31	29	33	36	18	12	9	14	10	3	6	6	0	3	2
	Male	186	0	2	26	27	28	32	16	10	6	12	8	3	5	6	0	3	2
	Female	29	0	1	5	2	5	4	2	2	3	2	2	0	1	0	0	0	0
2001	Total	232	0	2	28	41	29	27	25	27	9	5	11	7	7	2	4	6	2
	Male	182	0	1	21	36	21	22	21	24	6	3	10	3	5	2	3	2	2
	Female	50	0	1	7	5	8	5	4	3	3	2	1	4	2	0	1	4	0
2002	Total	220	0	0	29	31	27	27	25	19	15	14	14	6	4	3	2	1	3
	Male	168	0	0	17	24	23	22	21	15	9	11	13	3	4	3	1	0	2
	Female	52	0	0	12	7	4	5	4	4	6	3	1	3	0	0	1	1	1
2003	Total	247	0	5	41	28	28	25	29	23	8	17	8	9	7	4	5	6	4
	Male	185	0	4	29	21	20	19	21	22	8	11	8	8	3	4	3	3	1
	Female	62	0	1	12	7	8	6	8	1	0	6	0	1	4	0	2	3	3

## Appendix 18: Suicide Deaths by Firearms and Explosives, by Five-year Age Group and Sex, Total Population, 1983–2003

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1983	Total	70	0	2	9	14	6	5	5	4	3	5	5	3	4	3	2	0	0
	Male	64	0	1	9	14	5	4	4	3	3	4	5	3	4	3	2	0	0
	Female	6	0	1	0	0	1	1	1	1	0	1	0	0	0	0	0	0	0
1984	Total	75	0	1	6	6	11	4	4	4	3	5	6	6	5	4	6	4	0
	Male	69	0	1	5	6	10	3	3	3	3	5	5	6	5	4	6	4	0
	Female	6	0	0	1	0	1	1	1	1	0	0	1	0	0	0	0	0	0
1985	Total	63	0	0	7	12	4	6	1	6	4	4	4	2	7	3	1	1	1
	Male	60	0	0	7	11	4	6	1	5	3	4	4	2	7	3	1	1	1
	Female	3	0	0	0	1	0	0	0	1	1	0	0	0	0	0	0	0	0
1986	Total	77	0	0	9	11	9	2	11	11	6	4	2	8	3	0	1	0	0
	Male	72	0	0	9	11	8	2	10	10	5	3	2	8	3	0	1	0	0
	Female	5	0	0	0	0	1	0	1	1	1	1	0	0	0	0	0	0	0
1987	Total	78	0	0	5	14	9	7	3	8	6	6	5	4	2	2	3	3	1
	Male	72	0	0	5	12	6	7	3	8	6	5	5	4	2	2	3	3	1
	Female	6	0	0	0	2	3	0	0	0	0	1	0	0	0	0	0	0	0
1988	Total	102	0	1	15	14	11	9	3	6	6	12	7	6	3	5	4	0	0
	Male	95	0	1	15	12	9	8	2	6	6	11	7	6	3	5	4	0	0
	Female	7	0	0	0	2	2	1	1	0	0	1	0	0	0	0	0	0	0
1989	Total	68	0	0	8	8	12	2	1	8	4	4	2	7	5	2	3	1	1
	Male	63	0	0	7	8	10	2	1	8	2	4	2	7	5	2	3	1	1
	Female	5	0	0	1	0	2	0	0	0	2	0	0	0	0	0	0	0	0
1990	Total	75	0	0	10	13	11	1	6	1	4	9	5	3	2	5	4	0	1
	Male	73	0	0	9	13	11	1	5	1	4	9	5	3	2	5	4	0	1
	Female	2	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0
1991	Total	84	0	1	10	15	16	13	5	3	5	4	2	1	4	1	2	2	0
	Male	76	0	1	8	14	15	11	3	3	5	4	2	1	4	1	2	2	0
	Female	8	0	0	2	1	1	2	2	0	0	0	0	0	0	0	0	0	0
1992	Total	92	0	0	9	15	17	7	7	6	4	2	4	6	5	3	2	4	1
	Male	86	0	0	9	15	14	6	7	5	4	2	4	6	5	3	2	4	0
	Female	6	0	0	0	0	3	1	0	1	0	0	0	0	0	0	0	0	1
1993	Total	74	0	0	5	10	9	8	6	10	3	3	2	3	6	4	4	1	0
	Male	67	0	0	5	9	9	8	5	9	3	2	1	3	6	2	4	1	0
	Female	7	0	0	0	1	0	0	1	1	0	1	1	0	0	2	0	0	0
1994	Total	71	0	0	9	12	5	2	2	7	4	6	5	3	5	5	2	3	1
	Male	69	0	0	7	12	5	2	2	7	4	6	5	3	5	5	2	3	1
	Female	2	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1995	Total	64	0	3	3	13	7	5	4	5	8	1	1	1	4	4	2	2	1
	Male	62	0	2	3	13	7	5	4	5	7	1	1	1	4	4	2	2	1
	Female	2	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0
1996	Total	47	0	0	4	4	9	7	3	2	3	2	3	1	2	3	1	1	2
	Male	46	0	0	4	4	9	6	3	2	3	2	3	1	2	3	1	1	2
	Female	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0
1997	Total	56	0	1	5	8	7	9	4	3	6	2	4	2	2	1	1	1	0
	Male	52	0	0	5	7	7	7	4	3	6	2	4	2	2	1	1	1	0
	Female	4	0	1	0	1	0	2	0	0	0	0	0	0	0	0	0	0	0
1998	Total	72	0	0	6	9	7	3	5	7	5	5	10	8	2	3	1	1	0
	Male	71	0	0	6	9	7	3	5	7	5	4	10	8	2	3	1	1	0
	Female	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1999	Total	47	0	0	1	3	11	6	1	4	5	4	2	2	1	3	2	1	1
	Male	43	0	0	1	2	10	6	1	3	5	4	2	2	0	3	2	1	1
	Female	4	0	0	0	1	1	0	0	1	0	0	0	0	1	0	0	0	0
2000	Total	36	0	0	0	3	8	3	4	3	3	1	2	2	1	3	3	0	0
	Male	34	0	0	0	3	7	3	4	3	2	1	2	2	1	3	3	0	0
	Female	2	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0
2001	Total	50	0	0	3	1	5	9	6	10	3	4	3	3	1	1	1	0	0
	Male	49	0	0	3	1	5	9	5	10	3	4	3	3	1	1	1	0	0
	Female	1	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0
2002	Total	49	0	0	4	2	3	3	5	8	4	4	5	4	3	2	2	0	0
	Male	46	0	0	3	2	3	3	3	8	4	4	5	4	3	2	2	0	0
	Female	3	0	0	1	0	0	0	2	0	0	0	0	0	0	0	0	0	0
2003	Total	41	0	0	2	1	1	5	2	3	5	6	5	0	0	3	7	1	0
	Male	37	0	0	2	0	1	5	2	3	5	6	4	0	0	1	7	1	0
	Female	4	0	0	0	1	0	0	0	0	0	0	1	0	0	2	0	0	0

## Appendix 19: Suicide Deaths by Poisoning by Gases and Vapours, by Five-year Age Group and Sex, Total Population, 1983–2003

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1983	Total	67	0	0	0	5	6	9	9	8	4	2	5	3	10	4	2	0	0
	Male	52	0	0	0	5	4	9	9	4	3	1	3	2	9	2	1	0	0
	Female	15	0	0	0	0	2	0	0	4	1	1	2	1	1	2	1	0	0
1984	Total	74	0	0	2	6	13	10	10	8	7	5	5	4	2	0	1	1	0
	Male	60	0	0	2	6	10	9	9	4	4	4	5	4	1	0	1	1	0
	Female	14	0	0	0	0	3	1	1	4	3	1	0	0	1	0	0	0	0
1985	Total	62	0	1	2	6	6	5	7	6	8	5	3	4	3	2	3	0	1
	Male	51	0	1	2	4	5	4	4	5	6	5	3	4	2	2	3	0	1
	Female	11	0	0	0	2	1	1	3	1	2	0	0	0	1	0	0	0	0
1986	Total	93	0	1	6	4	11	6	9	12	5	10	10	10	2	3	1	2	1
	Male	81	0	1	6	3	9	4	8	11	4	9	9	9	1	3	1	2	1
	Female	12	0	0	0	1	2	2	1	1	1	1	1	1	1	0	0	0	0
1987	Total	117	0	2	8	19	23	9	9	11	10	6	6	3	4	4	2	0	1
	Male	103	0	2	8	19	21	6	7	11	6	4	5	3	4	4	2	0	1
	Female	14	0	0	0	0	2	3	2	0	4	2	1	0	0	0	0	0	0
1988	Total	111	0	0	8	16	14	11	6	9	12	3	6	7	5	9	4	1	0
	Male	93	0	0	8	11	10	8	6	7	12	3	5	5	4	9	4	1	0
	Female	18	0	0	0	5	4	3	0	2	0	0	1	2	1	0	0	0	0
1989	Total	118	0	0	10	16	19	14	8	10	6	7	6	5	8	5	2	1	1
	Male	100	0	0	10	14	15	14	6	10	6	6	4	2	7	2	2	1	1
	Female	18	0	0	0	2	4	0	2	0	0	1	2	3	1	3	0	0	0
1990	Total	112	0	0	3	19	16	6	12	14	7	6	10	6	2	2	2	6	1
	Male	100	0	0	2	19	15	6	12	11	6	5	8	5	1	2	2	5	1
	Female	12	0	0	1	0	1	0	0	3	1	1	2	1	1	0	0	1	0
1991	Total	111	0	0	4	20	13	11	7	13	14	9	4	4	4	4	1	2	1
	Male	89	0	0	4	15	11	10	5	8	12	6	4	4	3	3	1	2	1
	Female	22	0	0	0	5	2	1	2	5	2	3	0	0	1	1	0	0	0
1992	Total	129	0	0	7	19	20	16	13	14	8	11	6	6	2	3	1	2	1
	Male	108	0	0	6	15	19	15	12	11	8	6	4	6	1	2	0	2	1
	Female	21	0	0	1	4	1	1	1	3	0	5	2	0	1	1	1	0	0
1993	Total	130	0	0	8	31	12	15	14	9	11	8	5	4	8	1	3	1	0
	Male	105	0	0	8	29	9	9	13	4	10	5	4	2	8	1	2	1	0
	Female	25	0	0	0	2	3	6	1	5	1	3	1	2	0	0	1	0	0
1994	Total	157	0	0	10	17	19	19	20	14	11	7	8	12	6	8	3	3	0
	Male	140	0	0	9	15	15	18	19	13	10	5	7	11	6	7	3	2	0
	Female	17	0	0	1	2	4	1	1	1	1	2	1	1	0	1	0	1	0
1995	Total	147	0	0	5	20	24	10	17	13	12	11	14	3	11	4	2	1	0
	Male	118	0	0	5	14	20	5	14	10	11	9	14	2	9	4	0	1	0
	Female	29	0	0	0	6	4	5	3	3	1	2	0	1	2	0	2	0	0
1996	Total	157	0	0	7	19	26	21	19	13	16	11	8	4	5	7	1	0	0
	Male	126	0	0	3	12	22	16	18	12	11	9	8	4	5	6	0	0	0
	Female	31	0	0	4	7	4	5	1	1	5	2	0	0	0	1	1	0	0
1997	Total	157	0	0	19	17	29	21	16	16	5	11	3	4	3	7	3	2	1
	Male	134	0	0	19	16	25	15	11	13	4	8	3	4	3	7	3	2	1
	Female	23	0	0	0	1	4	6	5	3	1	3	0	0	0	0	0	0	0
1998	Total	134	0	0	6	19	22	7	16	12	11	2	8	5	7	7	7	4	1
	Male	111	0	0	4	19	19	6	15	9	8	1	6	4	6	5	7	2	0
	Female	23	0	0	2	0	3	1	1	3	3	1	2	1	1	2	0	2	1

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1999	Total	116	0	0	8	7	14	18	21	17	3	9	4	4	0	6	2	2	1
	Male	94	0	0	5	6	14	15	14	13	3	8	3	4	0	5	1	2	1
	Female	22	0	0	3	1	0	3	7	4	0	1	1	0	0	1	1	0	0
2000	Total	110	0	0	3	15	13	11	15	9	12	11	8	6	1	2	1	2	1
	Male	87	0	0	1	13	12	8	12	7	9	8	6	4	1	2	1	2	1
	Female	23	0	0	2	2	1	3	3	2	3	3	2	2	0	0	0	0	0
2001	Total	106	0	0	2	11	15	15	18	10	9	7	1	6	4	2	3	2	1
	Male	85	0	0	2	9	10	13	15	7	6	5	0	6	4	2	3	2	1
	Female	21	0	0	0	2	5	2	3	3	3	2	1	0	0	0	0	0	0
2002	Total	99	0	0	3	10	11	12	12	18	9	6	3	6	1	3	0	2	3
	Male	79	0	0	2	6	8	9	10	14	9	6	3	4	1	3	0	1	3
	Female	20	0	0	1	4	3	3	2	4	0	0	0	2	0	0	0	1	0
2003	Total	103	0	0	4	8	7	14	10	16	13	8	7	4	1	3	4	2	2
	Male	75	0	0	3	4	5	11	6	13	8	6	6	4	1	2	3	1	2
	Female	28	0	0	1	4	2	3	4	3	5	2	1	0	0	1	1	1	0

## Appendix 20: Suicide Deaths by Poisoning by Solid or Liquid Substances, by Five-year Age and Ethnic Group, 1996–2003

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1996	Total	59	0	1	8	6	2	5	5	6	3	2	3	4	5	4	2	3	0
	Māori	11	0	1	1	1	1	0	2	2	0	2	0	1	0	0	0	0	0
	Non-Māori	48	0	0	7	5	1	5	3	4	3	0	3	3	5	4	2	3	0
1997	Total	59	0	1	4	5	6	8	2	11	2	5	6	1	1	2	3	1	1
	Māori	11	0	1	3	2	1	2	0	2	0	0	0	0	0	0	0	0	0
	Non-Māori	48	0	0	1	3	5	6	2	9	2	5	6	1	1	2	3	1	1
1998	Total	64	0	1	10	3	2	10	4	8	7	6	5	2	1	2	1	2	0
	Māori	10	0	0	4	1	0	0	0	1	2	1	1	0	0	0	0	0	0
	Non-Māori	54	0	1	6	2	2	10	4	7	5	5	4	2	1	2	1	2	0
1999	Total	52	0	0	2	4	6	5	5	7	8	6	4	0	1	1	1	1	1
	Māori	5	0	0	0	1	1	2	0	0	0	1	0	0	0	0	0	0	0
	Non-Māori	47	0	0	2	3	5	3	5	7	8	5	4	0	1	1	1	1	1
2000	Total	39	0	0	2	0	8	3	5	5	2	3	2	1	1	0	0	4	3
	Māori	4	0	0	1	0	0	0	1	1	0	0	0	0	0	0	0	1	0
	Non-Māori	35	0	0	1	0	8	3	4	4	2	3	2	1	1	0	0	3	3
2001	Total	58	0	1	3	3	5	5	6	8	5	3	3	1	3	4	5	2	1
	Māori	6	0	0	1	0	1	1	1	0	1	0	0	0	1	0	0	0	0
	Non-Māori	52	0	1	2	3	4	4	5	8	4	3	3	1	2	4	5	2	1
2002	Total	47	0	0	1	4	4	9	7	2	4	4	3	0	1	2	1	2	3
	Māori	5	0	0	0	1	0	4	0	0	0	0	0	0	0	0	0	0	0
	Non-Māori	42	0	0	1	3	4	5	7	2	4	4	3	0	1	2	1	2	3
2003	Total	58	0	0	1	2	4	5	9	6	11	4	1	7	2	4	0	2	0
	Māori	1	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0
	Non-Māori	57	0	0	1	2	4	5	9	5	11	4	1	7	2	4	0	2	0

## Appendix 21: Suicide Deaths by Hanging, Strangulation and Suffocation, by Five-year Age and Ethnic Group, 1996–2003

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1996	Total	230	0	6	37	51	33	30	16	8	12	7	8	3	7	4	2	5	1
	Māori	65	0	3	16	17	12	11	2	1	0	1	1	0	1	0	0	0	0
	Non-Māori	165	0	3	21	34	21	19	14	7	12	6	7	3	6	4	2	5	1
1997	Total	232	0	6	40	37	34	24	23	16	13	10	10	5	4	4	1	3	2
	Māori	67	0	3	15	10	16	12	5	2	1	1	0	2	0	0	0	0	0
	Non-Māori	165	0	3	25	27	18	12	18	14	12	9	10	3	4	4	1	3	2
1998	Total	250	0	11	38	36	46	30	21	24	13	6	4	3	4	6	5	0	3
	Māori	74	0	9	12	15	18	11	3	3	2	1	0	0	0	0	0	0	0
	Non-Māori	176	0	2	26	21	28	19	18	21	11	5	4	3	4	6	5	0	3
1999	Total	240	0	6	32	50	32	22	26	14	13	12	9	6	6	6	5	1	0
	Māori	58	0	4	9	18	10	10	3	4	0	0	0	0	0	0	0	0	0
	Non-Māori	182	0	2	23	32	22	12	23	10	13	12	9	6	6	6	5	1	0
2000	Total	215	0	3	31	29	33	36	18	12	9	14	10	3	6	6	0	3	2
	Māori	59	0	1	13	10	13	12	2	2	3	2	1	0	0	0	0	0	0
	Non-Māori	156	0	2	18	19	20	24	16	10	6	12	9	3	6	6	0	3	2
2001	Total	232	0	2	28	41	29	27	25	27	9	5	11	7	7	2	4	6	2
	Māori	55	0	1	13	12	11	10	3	3	1	0	1	0	0	0	0	0	0
	Non-Māori	177	0	1	15	29	18	17	22	24	8	5	10	7	7	2	4	6	2
2002	Total	220	0	0	29	31	27	27	25	19	15	14	14	6	4	3	2	1	3
	Māori	61	0	0	13	14	6	12	7	4	2	2	1	0	0	0	0	0	0
	Non-Māori	159	0	0	16	17	21	15	18	15	13	12	13	6	4	3	2	1	3
2003	Total	247	0	5	41	28	28	25	29	23	8	17	8	9	7	4	5	6	4
	Māori	67	0	5	15	13	9	9	8	7	0	1	0	0	0	0	0	0	0
	Non-Māori	180	0	0	26	15	19	16	21	16	8	16	8	9	7	4	5	6	4



## Appendix 22: Suicide Deaths by Firearms and Explosives, by Five-year Age and Ethnic Group, 1996–2003

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1996	Total	47	0	0	4	4	9	7	3	2	3	2	3	1	2	3	1	1	2
	Māori	4	0	0	0	0	2	2	0	0	0	0	0	0	0	0	0	0	0
	Non-Māori	43	0	0	4	4	7	5	3	2	3	2	3	1	2	3	1	1	2
1997	Total	56	0	1	5	8	7	9	4	3	6	2	4	2	2	1	1	1	0
	Māori	8	0	0	1	0	3	2	1	0	0	0	1	0	0	0	0	0	0
	Non-Māori	48	0	1	4	8	4	7	3	3	6	2	3	2	2	1	1	1	0
1998	Total	72	0	0	6	9	7	3	5	7	5	5	10	8	2	3	1	1	0
	Māori	10	0	0	2	2	1	0	0	1	0	1	1	1	0	1	0	0	0
	Non-Māori	62	0	0	4	7	6	3	5	6	5	4	9	7	2	2	1	1	0
1999	Total	47	0	0	1	3	11	6	1	4	5	4	2	2	1	3	2	1	1
	Māori	2	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0
	Non-Māori	45	0	0	1	3	9	6	1	4	5	4	2	2	1	3	2	1	1
2000	Total	36	0	0	0	3	8	3	4	3	3	1	2	2	1	3	3	0	0
	Māori	4	0	0	0	0	1	0	2	0	0	0	1	0	0	0	0	0	0
	Non-Māori	32	0	0	0	3	7	3	2	3	3	1	1	2	1	3	3	0	0
2001	Total	50	0	0	3	1	5	9	6	10	3	4	3	3	1	1	1	0	0
	Māori	4	0	0	0	0	1	1	0	1	0	0	0	1	0	0	0	0	0
	Non-Māori	46	0	0	3	1	4	8	6	9	3	4	3	2	1	1	1	0	0
2002	Total	49	0	0	4	2	3	3	5	8	4	4	5	4	3	2	2	0	0
	Māori	4	0	0	1	1	1	0	0	0	0	0	1	0	0	0	0	0	0
	Non-Māori	45	0	0	3	1	2	3	5	8	4	4	4	4	3	2	2	0	0
2003	Total	41	0	0	2	1	1	5	2	3	5	6	5	0	0	3	7	1	0
	Māori	4	0	0	0	0	0	2	0	0	1	1	0	0	0	0	0	0	0
	Non-Māori	37	0	0	2	1	1	3	2	3	4	5	5	0	0	3	7	1	0

## Appendix 23: Suicide Deaths by Poisoning by Gases and Vapours, by Five-year Age and Ethnic Group, 1996–2003

Year		Total	Age group (years)																
			5-	10-	15-	20-	25-	30-	35-	40-	45-	50-	55-	60-	65-	70-	75-	80-	85+
1996	Total	157	0	0	7	19	26	21	19	13	16	11	8	4	5	7	1	0	0
	Māori	10	0	0	0	2	3	1	1	1	1	1	0	0	0	0	0	0	0
	Non-Māori	147	0	0	7	17	23	20	18	12	15	10	8	4	5	7	1	0	0
1997	Total	157	0	0	19	17	29	21	16	16	5	11	3	4	3	7	3	2	1
	Māori	8	0	0	2	2	3	0	1	0	0	0	0	0	0	0	0	0	0
	Non-Māori	149	0	0	17	15	26	21	15	16	5	11	3	4	3	7	3	2	1
1998	Total	134	0	0	6	19	22	7	16	12	11	2	8	5	7	7	7	4	1
	Māori	9	0	0	1	2	1	0	3	0	1	0	0	0	0	1	0	0	0
	Non-Māori	125	0	0	5	17	21	7	13	12	10	2	8	5	7	6	7	4	1
1999	Total	116	0	0	8	7	14	18	21	17	3	9	4	4	0	6	2	2	1
	Māori	5	0	0	1	1	2	0	0	1	0	0	0	0	0	0	0	0	0
	Non-Māori	111	0	0	7	6	12	18	21	16	3	9	4	4	0	6	2	2	1
2000	Total	110	0	0	3	15	13	11	15	9	12	11	8	6	1	2	1	2	1
	Māori	7	0	0	0	3	0	2	0	0	0	1	1	0	0	0	0	0	0
	Non-Māori	103	0	0	3	12	13	9	15	9	12	10	7	6	1	2	1	2	1
2001	Total	106	0	0	2	11	15	15	18	10	9	7	1	6	4	2	3	2	1
	Māori	10	0	0	1	1	3	1	2	1	0	0	0	1	0	0	0	0	0
	Non-Māori	96	0	0	1	10	12	14	16	9	9	7	1	5	4	2	3	2	1
2002	Total	99	0	0	3	10	11	12	12	18	9	6	3	6	1	3	0	2	3
	Māori	8	0	0	0	2	2	1	1	1	0	1	0	0	0	0	0	0	0
	Non-Māori	91	0	0	3	8	9	11	11	17	9	5	3	6	1	3	0	2	3
2003	Total	103	0	0	4	8	7	14	10	16	13	8	7	4	1	3	4	2	2
	Māori	7	0	0	1	1	2	1	1	1	0	0	0	0	0	0	0	0	0
	Non-Māori	96	0	0	3	7	5	13	9	15	13	8	7	4	1	3	4	2	2