

NCIS FACT SHEET

Intentional self-harm deaths of older persons in Australia

7 deaths

per week
on average

5,686

intentional self-harm
deaths aged 65+
2001 - 2016

76.8%

were male
aged 65+

Intentional self-harm in Australia

Intentional self-harm is the 13th leading cause of death in Australia. In 2017, 3,128 people died from an act of intentional self-harm in Australia (1). While the highest frequency of intentional self-harm fatalities occurs among middle aged persons, rates among older persons remain high. Recent data indicates suicide rates for those aged 65 and over have remained consistent throughout 2013 - 2016, with increases for both males and females in the 75-79 year age bracket (2).

Intentional self-harm of older persons

There were 5,686 intentional self-harm deaths of persons aged 65 years and over (older persons) reported to a coroner from 2001 - 2016 inclusive, comprising 14.3% of all reported intentional self-harm deaths. There was a consistent increase in the number of deaths per calendar year from 2007 (n=322) to 2013 (n=421).

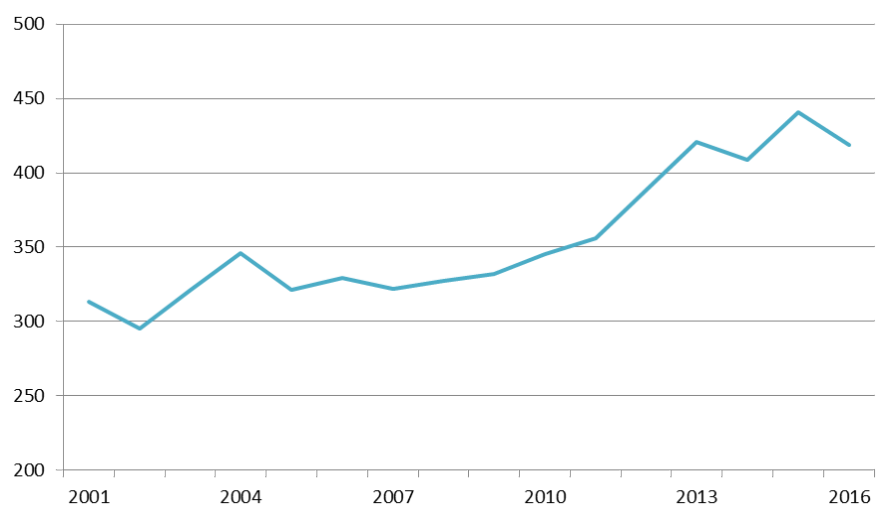


Figure 1. Frequency of intentional self-harm deaths of older persons by year

Rates of intentional self-harm deaths of older persons per 100,000 population were higher in WA, TAS and the ACT in 2016 than in 2001.

Rates of intentional self-harm deaths of older persons in 2016 were higher in QLD, WA, TAS, the NT and the ACT than the national figure.

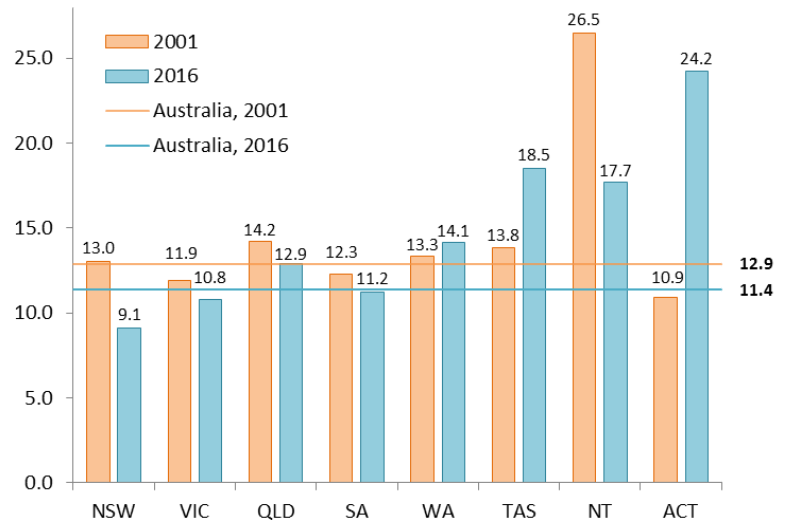


Figure 2. Comparison of rates of intentional self-harm deaths of older persons per 100,000 by jurisdiction of investigation, 2001 and 2016

The rate of intentional self-harm deaths per 100,000 in 2016 was higher among those aged 75 - 99 years than the national rate across all ages of 10.8 deaths per 100,000 (Figure 3). There were no relevant deaths identified of persons aged 100+ years in 2016. As a result, no rate is available in Figure 3.

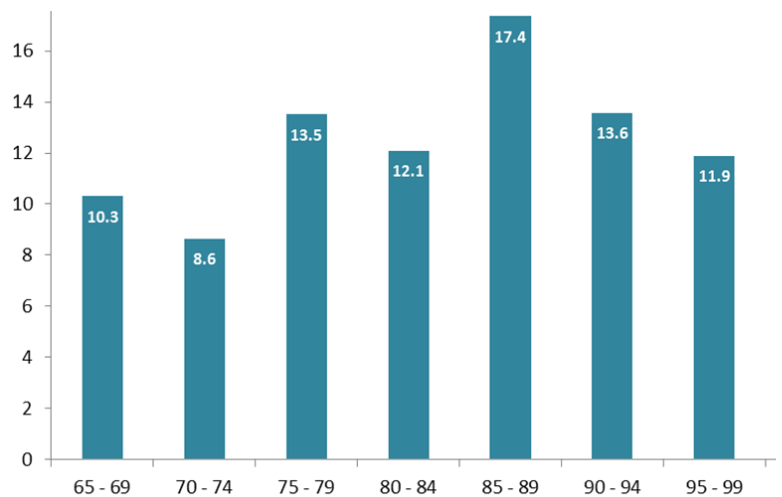


Figure 3. Rate of intentional self-harm deaths of older persons per 100,000 by age range of the deceased, 2016

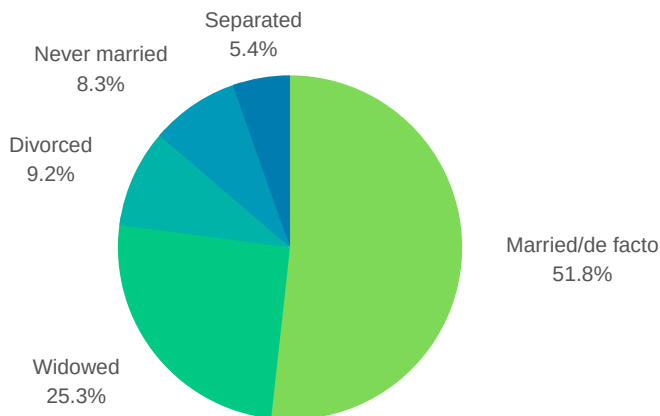


Figure 4. Proportion of intentional self-harm deaths of older persons by marital status, 2001 - 2016

76.3%
of intentional self-harm incidents leading to the deaths of older persons occurred in the home, consistent with intentional self-harm deaths of persons under 65 years.

Mechanism of injury

28.6% ASPHYXIATION BY HANGING

▼ lower than under 65 year olds (51.6%)

17.1% PHARMACEUTICAL DRUG TOXICITY

▲ higher than under 65 year olds (12.3%)

15.9% FIREARM RELATED

▲ more than twice as common as under 65 year olds (6.1%)

9% PLASTIC BAG ASPHYXIATION

▲ nearly four times as common as under 65 year olds (2.3%)

8% CARBON MONOXIDE ASPHYXIATION

▼ lower than under 65 year olds (10.1%)

5.2% DROWNING RELATED

▲ more than twice as common as under 65 year olds (1.8%)

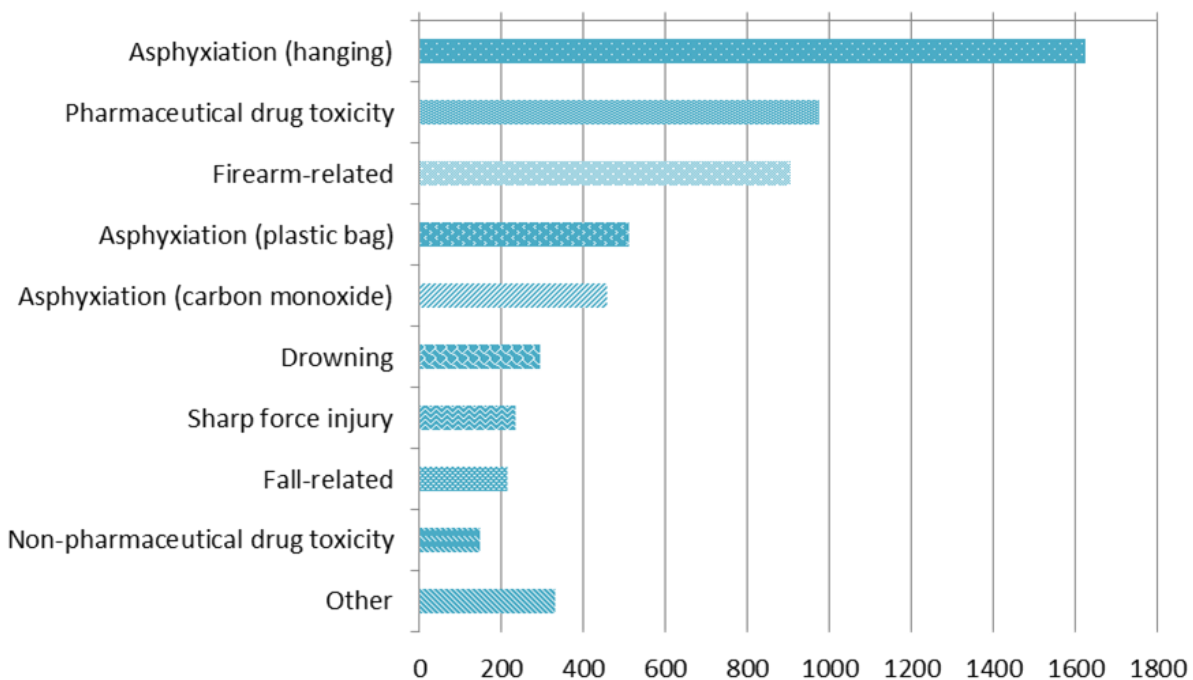


Figure 5. Frequency of intentional self-harm deaths of older persons by mechanism of injury, 2001 - 2016

Barbiturates

Intentional self-harm deaths involving barbiturates have been highlighted as a subset of pharmaceutical drug toxicity deaths in this fact sheet. Barbiturates are sedative drugs, and are often used for euthanising animals. Of the 365 intentional self-harm deaths involving barbiturates from 2001 - 2016, 43.0% (n=157) occurred among older persons. The majority of barbiturate-related intentional self-harm deaths among older persons involved pentobarbital (88.5%).

Year of Notification	Frequency
2001	2
2002	7
2003	2
2004	2
2005	6
2006	5
2007	5
2008	7
2009	7
2010	6
2011	19
2012	17
2013	17
2014	22
2015	19
2016	14
Total	157

Figure 6. Frequency of intentional self-harm deaths of older persons involving barbiturates by year of notification, 2001 - 2016

1.2. Australian Bureau of Statistics 2018, *Causes of Death, Australia, 2017*.

The data presented in this fact sheet was obtained from the NCIS in January 2019. The dataset extracted contained every fatality of a person aged 65 years or over reported to an Australian coroner between 1 January 2001 and 31 December 2016 that was coded as resulting from an act of intentional self-harm, and where the coronial investigation had concluded and the case was closed on the NCIS. Population data was sourced from the ABS. Visit the NCIS website for information on [data sources and limitations](#). To request a comprehensive data report, contact the NCIS or visit www.ncis.org.au.

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