The World Health Organization (WHO) defines suicide as the act of deliberately killing oneself. The causes of suicide are multifaceted, and suicide is often a result of different factors. It is therefore a complex challenge to prevent suicide. Research studies have shown that the most important risk factors for suicide are previous suicide attempts and mental illnesses such as depression. Suicide is among the three most frequent causes of death in the world among 15–44-year-olds. Although suicide is generally rare in children under the age of 15, it is the second-most common cause of death in the age group 15–25 years in many countries.

Prevalence

The procedure for and the quality of the registration of suicide as a cause of death vary from country to country, and in a global context there is still uncertainty about the prevalence of suicide. WHO estimates that the annual number of suicides is approximately 800,000, and that about 80% of global suicides occur in low- and middle-income countries (WHO). Data from the United States show that the suicide rate was about 14 per 100,000 people in 2015 (CDC). In China, the suicide rate was 8 per 100,000 in 2015, while it was about 11 per 100,000 in Canada and 8 in Great Britain (WHO).

Between 1960s and 1980s, the suicide rate doubled in Norway, but since 1988 the rate has been decreasing yearly, with some variations. The past 10–15 years, the suicide rate has stabilized at around 12–14 per 100,000 people. The rate is 2–3 times higher in men than women. This amounts to a total of 500 to 600 suicides every year, according to Statistics Norway (SSB). The most common suicide method is hanging, followed by poisoning, firearms, and drowning.

The most important facts about suicide in Norway (2018)

- According to recent statistics, 674 people died by suicide in 2018 (14.4 per 100,000 people over 10 years old). Of these, 472 were men and 202 were women, which corresponds to a rate of 20.1 for men and 8.7 for women per 100,000 people over 10 years old.
- Suicide is the cause of death for 83 young people of 15-24 years old, accounting for 43.2% of all deaths among young people of this age group. This makes suicide the first leading cause of death for this age group of population.
- 311 people died by suicide in the age group 40–64 years. There were 30 suicides among those who are 80 years old and over.
- Hanging and strangulation were the most common methods for suicide in both men and women, and in total 313 suicides (46.4%) died by these methods. Firearms and explosives were the second common methods for suicide in men whilst poisonings were the second common methods in women.
- Oslo had the highest absolute number of suicides with 83 suicides in 2017, which indicated a rate of 14.0 per 100,000 people over the age of 10 years. This was followed by Akershus with 75 suicides (14.0 per 100,000) and Rogaland with 66 suicides (16.1 per 100,000). Telemark and Aust-Agder counties had the highest suicide rate (21.3 and 19.4 per 100,000 respectively) and Sogn and Fjordane had the lowest suicide rate (9.2 per 100,000 people over the age of 10 years).
- May was the month with the highest prevalence of suicide, followed by April in 2018.

Based on suicide data from the Norwegian Public Health Institute (FHI) in 2009, researchers found that 33.3% of the deceased tested positive for alcohol, 23% for antidepressants, and 20.8% for painkillers, opiates, and heroin.
More detailed statistics are available on the Norwegian Institute of Public Health’s website (statistikkbank.fhi.no/dar) (FHI) and the National Centre for Suicide Research and Prevention (NSSF) (www.selvmord.no).

**Risk factors**
Risk factors can affect individuals or the environment and may be associated with an increased probability for negative events in the future. Suicidal behaviour is multifaceted and often the result of an interaction between multiple factors, from mental illness to socioeconomic factors. Risk factors for suicide can affect anyone, but some groups of people are more inclined to be affected by risk factors than others. Risk factors may vary with age, gender, or ethnic group, and they may occur in combination with each other and change over time. The following is a selection of important risk factors for suicide.

### Individual risk factors
- Mental illness (especially depression, schizophrenia and other psychotic disorders, drug addiction disorders, and personality disorders)
- Previous suicide attempts or self-harm
- Somatic illness
- Socioeconomic difficulties
- Stressful life events (such as experiencing loss, violence, sexual assault, or other trauma)
- Family history of suicide or suicidal behavior

### Environmental risk factors
- Access to suicide means that have a high risk of death when used (such as firearms, household products with high levels of toxicity, tall buildings and bridges, medicines that are poisonous when used for overdose)
- Exposure to negative social factors such as bullying, unemployment, and social isolation
- Dramatic and sensationalized reports of suicide in the mass media, with detailed descriptions of suicide methods and the time and place for concrete incidents of suicide.

**Table: Number of suicide according to gender and calendar year. Selected years 1970-2018.**

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References