Suicide in Africa, a neglected reality...

Rationale

The reduction of suicide mortality is considered by the World Health Organization (WHO) as a public health priority. To this end, the reduction of suicide mortality is included as an indicator in the United Nations Sustainable Development Goals (UN SDG) under target 3.4.

UN SDG Target 3.4

By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being.

Africa must break the taboo around suicide, which can affect anyone regardless of gender, age, culture and religion. Suicide is defined as the act of deliberately killing oneself. Although most of the available statistics present the deaths by suicides, these are likely underestimates, and the reality is much more serious if we consider the attempted suicides. This document aims to raise awareness of the public health importance of suicide and attempted suicide in Africa. “We cannot... and we must not” ignore suicide.

Findings

- Today 1 in 100 deaths in the world is a suicide death.
- The suicide rate in the African Region is the highest in the world, estimated at 11.2 per 100,000 population in 2019, compared to the Global average of 9.0 per 100,000 population.
- The WHO African Region male suicide rate is the highest of all Regions at 18 per 100,000 population, compared to the global average of 12.4 per 100,000 population.
- Suicide can occur at any point in life, In 2019, suicide was the fourth leading cause of death in this age group.
- Suicide is not only a phenomenon in high-income countries. It was estimated in 2019 that 77% of suicides occurred in low- and middle-income countries.
- Several countries in the African Region stand out as having the highest suicide age adjusted rates in the world, namely Lesotho, Eswatini, Zimbabwe, South Africa, Mozambique, Central African Republic, Botswana, Eritrea, Cameroon, and Côte d’Ivoire. All have rates above 15 per 100,000 population, with peaks of 87.5 and 40.5 per 100,000 population respectively for Lesotho and Eswatini.
- Globally, the availability and quality of data on suicide and suicide attempts is poor. It is likely that under-reporting and misclassification are greater problems for suicide than for most other causes of death.
Suicide in the WHO African Region

Global and Regional public health concern

Figure 1. Global Age standardized suicide rate (per 100,000 population), both sexes, 2019

- Each year it is estimated that over 700,000 people die by suicide worldwide. For every suicide there are usually many more attempted suicides.
- It is estimated that 88% of adolescents who died by suicide were from low-and-middle income countries.
- There is 10% reduction in the global age standardised suicide rates.
- The African Region age standardized rate has seen a steady decline over the past ten years, from 14.2 in 2009 to 11.2 per 100,000 population in 2019.

Figure 2. Age standardized suicide rates per 100,000 population, over time, by WHO Regions, both sexes

• Across the World, the suicide rate is higher for men (12.6 per 100,000) than for women (5.4 per 100,000).

• In the WHO African Region, the male suicide rate is the highest of all Regions at 18.0 per 100,000.

• While for women, the AFRO average rate is slightly below the world average, i.e., 5.2 per 100,000, the highest rate for females globally is for Lesotho at 34.6 per 100,000 population.

• The age standardized rates are highest in the Southern Africa Region, with male rates being extremely high.

• Highest rates for each sub region are Cote d’Ivoire for West Africa, Eritrea for East Africa, CAR for Central Africa and Lesotho for Southern Africa.

• The crude suicide rates for 15- to 19-year-olds are very similar as the age standardized rates, with highest rates being in Southern Africa.

• For 15–19-year-olds, the highest rates are Benin for West Africa, Mauritius for East Africa, and CAR and Lesotho remain highest for Central Africa and Southern Africa respectively.
Table 1: Top 10 Countries in suicide rate (all ages) in the African Region, 2019

<table>
<thead>
<tr>
<th>Country</th>
<th>Sex</th>
<th>Number of suicides, all ages, 2019</th>
<th>Crude suicide rates, all ages (per 100 000), 2019</th>
<th>Age-standardized suicide rates, (per 100 000), all ages, 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lesotho</td>
<td>both sexes</td>
<td>1539</td>
<td>72.4</td>
<td>87.5</td>
</tr>
<tr>
<td></td>
<td>females</td>
<td>324</td>
<td>30.1</td>
<td>34.6</td>
</tr>
<tr>
<td></td>
<td>males</td>
<td>1215</td>
<td>116</td>
<td>146.9</td>
</tr>
<tr>
<td></td>
<td>both sexes</td>
<td>338</td>
<td>29.4</td>
<td>40.5</td>
</tr>
<tr>
<td>Eswatini</td>
<td>females</td>
<td>27</td>
<td>4.7</td>
<td>6.4</td>
</tr>
<tr>
<td></td>
<td>males</td>
<td>310</td>
<td>55.1</td>
<td>78.7</td>
</tr>
<tr>
<td></td>
<td>both sexes</td>
<td>2069</td>
<td>14.1</td>
<td>23.6</td>
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<td>Zimbabwe</td>
<td>females</td>
<td>673</td>
<td>8.8</td>
<td>13.5</td>
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<td></td>
<td>males</td>
<td>1395</td>
<td>20</td>
<td>37.8</td>
</tr>
<tr>
<td></td>
<td>both sexes</td>
<td>13774</td>
<td>23.5</td>
<td>23.5</td>
</tr>
<tr>
<td>South Africa</td>
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<td>37.9</td>
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<tr>
<td></td>
<td>males</td>
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<tr>
<td></td>
<td>both sexes</td>
<td>585</td>
<td>12.3</td>
<td>23</td>
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<td>Central African Republic</td>
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<td>124</td>
<td>5.2</td>
<td>9.3</td>
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<tr>
<td></td>
<td>males</td>
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<td>19.6</td>
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<td></td>
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<td>males</td>
<td>1763</td>
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<tr>
<td></td>
<td>both sexes</td>
<td>2288</td>
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<td>15.7</td>
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<td>Côte d’Ivoire</td>
<td>females</td>
<td>361</td>
<td>2.8</td>
<td>5</td>
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<tr>
<td></td>
<td>males</td>
<td>1927</td>
<td>14.9</td>
<td>25.7</td>
</tr>
</tbody>
</table>

- For the African Region, particular attention should be paid to the elderly, especially those 85 years of age and older. Annex 3 has the sub regional graphs for crude suicide rates, per country, in ten-year age gaps.
- The trend of rates being highest for those 85 years and older holds for all countries, except for Mauritius and Seychelles that have flat graphs; Lesotho and Eswatini with peaks at 35 to 44 and 45 to 54 years; and South Africa with peaks at 25 to 34 years and 35 to 44 years.

**Policy implications for the Region**

1. There is a need to strengthen the quality of suicide data collection in the African Region.
2. The African Region has the highest rates of age standardized suicide rates globally. This presents a dilemma which need a specific focus in mental health interventions.
3. Suicide rates for some countries, especially in the Southern African countries are in the most productive age groups, while for most other countries, they are highest in the older and elderly adults. The implication is that approaches to be developed must be aligned to an adult population, with a special focus on the elderly.
4. Much more will need to be done to establish the causes and risk factors for suicide in the African Region, to design preventive interventions aligned to the risk factors.
Annex 1: Sub Regional Data, age standardized suicide rates (all ages), per 100,000 population
**Annex 2: Sub Regional Data.** Crude suicide rates (15 to 19 years), per 100,000 population

**East Africa 15-19 years**

- South Sudan
- Kenya
- Ethiopia
- Tanzania
- Madagascar
- Uganda
- Rwanda
- Comoros
- Burundi
- Eritrea
- Seychelles
- Mauritius

**Central Africa 15 to 19 years**

- Sao Tome and principe
- Congo
- DRC
- Angola
- Gabon
- Chad
- Equatorial Guinea
- Cameroon
- CAR
Annex 3: Crude suicide rate by 10-year age groups for each country within sub-regions in Africa

Central Africa

East Africa

South Africa
West Africa

Crude suicide rate per 100,000

- 85+ years
- 75-84 years
- 65-74 years
- 55-64 years
- 45-54 years
- 35-44 years of age
- 25-34 years of age
- 15-24 years
References

5. WHO Special Initiative for Mental Health – Situation Assessment

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