NSW Health

NSW Suicide Monitoring System

Data to April 2026

29 June 2026

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NSW GOVERNMENT

Introduction

This report provides estimates of suspected and confirmed suicides in NSW since 2022 from the NSW Suicide Monitoring and Data Management System.

Warning

The following report contains information about the collection and reporting of suicide data in NSW. NSW Health acknowledges that behind these numbers are people, their families and their friends who are deeply affected by suicide. Some people may find the content of this report confronting or distressing. If affected in this way, please contact:

Beyond Blue, 1300 22 4636, www.beyondblue.org.au or Lifeline, 13 11 14, www.lifeline.org.au

What is the NSW Suicide Monitoring and Data Management System?

The NSW Suicide Monitoring and Data Management System is a collaboration between the NSW Ministry of Health, Department of Communities and Justice, the State Coroner and NSW Police. It estimates the number of recent suspected and confirmed suicides in NSW, using data collected by NSW Police and the State Coroner.

Where does this suicide data come from?

All suicides or suspected suicides in NSW are reported to the Coroner. Data on these Police notifications of suspected suicides are obtained from the "JusticeLink" information system managed by NSW Department of Communities and Justice. As well as the initial Police advice, records are searched for potential indicators of suicide in other fields. These include the manner or place of death, and whether the person communicated their intention to family and friends. Each potential suicide death record is then screened manually by the Department of Communities and Justice to confirm the classification of suspected or confirmed suicide.

How accurate is this data?

The data about suspected suicides are an estimate. A final determination of the manner of death can only be made by the Coroner after detailed enquiry. This will mean that there may be small differences in the number of suicides between reports for the same reporting period. The numbers reported for the most recent month may be underestimated due to time taken to record a report of a death. Evidence from Suicide Registers in other states shows that initial Police advice is usually accurate. However, once all facts are known some suspected suicide deaths are found to be due to other causes, and some deaths initially thought to be accidental are found to be due to suicide.

This report will differ from suicide statistics reported by the Australian Bureau of Statistics (ABS), which count suicide deaths which have been confirmed or are being finalised through the coronial process. ABS reported the number of suicide deaths in NSW was 940 in 2022, 911 in 2023 and 935 in 2024. National and state reports may also differ slightly in how they count years and locations of death. Some deaths occur in one year and are registered in another, and some deaths occur in a location in a different state from the person's address.

Current findings

There have been 305 suspected or confirmed suicide deaths reported in NSW from 1 January to 30 April 2026.

Suspected suicide deaths in NSW

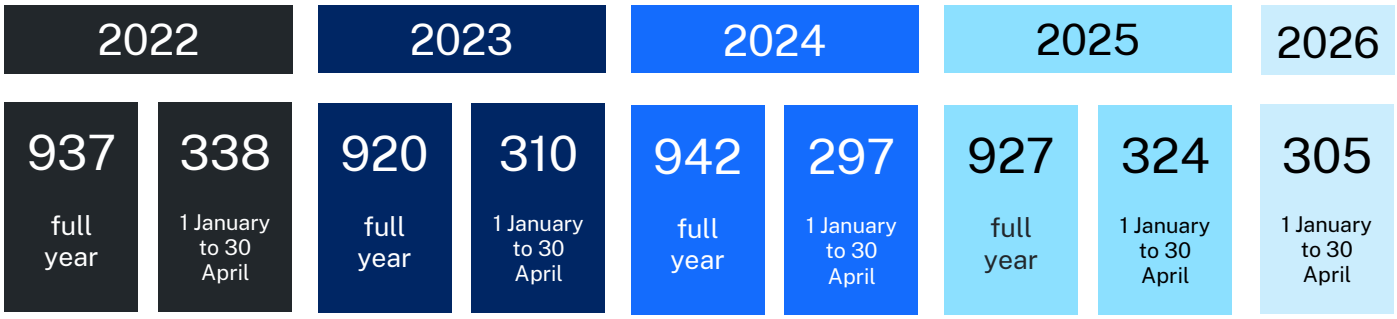

Table 1 Monthly frequency

	2022	2023	2024	2025	2026
January	77	87	80	89	84
February	72	68	75	66	67
March	97	86	68	88	84
April	92	69	74	81	70
May	75	85	82	73	-
June	65	74	76	61	-
July	89	90	72	67	-
August	72	69	81	75	-
September	79	76	77	79	-
October	73	81	75	76	-
November	74	69	106	85	-
December	72	66	76	87	-
Total	937	920	942	927	305

Table 2 Gender and age group

	Full year				1 January to 30 April				
	2022	2023	2024	2025	2022	2023	2024	2025	2026
Total	937	920	942	927	338	310	297	324	305
Under 18	24	24	19	33	9	9	5	7	7
18-24	76	83	61	77	30	28	19	32	24
25-34	157	148	157	160	55	58	50	61	47
35-44	178	155	169	171	65	54	59	60	67
45-54	165	182	181	163	56	57	57	56	55
55-64	164	158	160	148	62	54	47	50	50
65-74	85	89	103	86	30	29	31	33	28
75-84	58	58	56	64	21	17	18	16	18
85 plus	30	23	36	25	10	4	11	9	9
Female	209	199	223	234	75	61	67	80	79
Under 18	10	9	7	14	5	6	-	4	4
18-24	21	20	15	18	10	8	4	8	8
25-34	38	34	43	37	13	11	12	15	9
35-44	36	42	29	41	13	14	10	13	16
45-54	33	34	39	42	9	10	13	12	13
55-64	36	28	45	41	12	6	13	13	13
65-74	16	16	29	15	7	3	9	9	8
75-84	11	9	8	16	5	2	3	4	4
85 plus	8	7	8	10	1	1	3	2	4
Male	727	721	717	689	262	249	229	243	225
Under 18	14	15	12	19	4	3	5	3	3
18-24	55	63	46	58	20	20	15	23	16
25-34	118	114	112	122	41	47	37	46	38
35-44	142	113	140	128	52	40	49	47	50
45-54	132	148	142	121	47	47	44	44	42
55-64	128	130	115	107	50	48	34	37	37
65-74	69	73	74	71	23	26	22	24	20
75-84	47	49	48	48	16	15	15	12	14
85 plus	22	16	28	15	9	3	8	7	5

Table 3 Location of usual residence

	Full year				1 January to 30 April				
	2022	2023	2024	2025	2022	2023	2024	2025	2026
Greater Sydney	522	472	474	497	190	154	153	176	161
Rest of NSW	404	424	449	408	143	144	136	137	139
Overseas/ Interstate	11	24	19	22	5	12	8	11	5
Total	937	920	942	927	338	310	297	324	305

Information about methods

Deaths have been coded as suspected suicides using a two-stage process of (i) computerised screening followed by (ii) manual review and checking by experienced staff from the NSW Department of Communities and Justice.

All deaths in the NSW JusticeLink database in 2022, 2023, 2024, 2025 and 2026 were screened. Deaths were flagged as “Suspected Suicides” if the apparent cause of death was described as suicide or suspected suicide, or if key fields included words suggesting specific suicide methods, that the person had left a note or indicated to their family or others that they intended to end their life. All deaths flagged as “Suspected Suicide” were then manually checked against other information, including the Coroner’s determination where this was available.

Deaths were also flagged for screening if they met any of three other criteria. First, if the death occurred in circumstances that are sometimes due to suicide, such as drug overdoses or single vehicle accidents. Second, if Police had recorded that the person had previously attempted to end their life. Third, if the person had experienced recent stressors such as relationship breakups or job loss. All of these records were manually checked, and some were re-classified as “Suspected Suicide” deaths.

People with a recorded residential address in NSW were allocated to Capital City Geographical Area (Greater Sydney, Rest of NSW) using Australian Bureau of Statistics definitions. Rest of NSW includes the Level 4 Statistical Areas (SA4s) of Richmond - Tweed, Coffs Harbour, Grafton, Mid North Coast, Newcastle and Lake Macquarie, Hunter Valley, New England and North West, Central West, Far West and Orana, Murray, Riverina, Capital Region, Illawarra, Southern Highlands and Shoalhaven. Central Coast and Blue Mountains regions are included in Greater Sydney. People with an interstate or overseas address, or no address but a residency status of Overseas Visitor were classified as interstate or overseas visitors.

Inclusion and exclusion criteria for reporting

Issue	What is included	What has been corrected	What is excluded
Month and Year of death	Deaths occurring in 2022, 2023, 2024 ,2025 and 2026	Date of death is unknown for some records – the date of recording of death has been used for those records	Deaths occurring prior to 2019, even if registered in 2019 or 2020
Place of death	Deaths occurring in NSW, or involving a NSW resident and investigated by the State Coroner	Records where the place of death is unknown or missing are assumed to have occurred in NSW	Three records were excluded, one in 2019 and two in 2020. See note (1) below
Address of the person	All records; Totals include records where the address of the person is not known	No correction	No exclusion
Age group	All records; Totals include records where age is not known	No correction	No exclusion
Gender	All records; Totals include records where gender is not known or other	No correction	No exclusion

Notes

(1) Three deaths of interstate residents were excluded where the incident occurred in the state of residence, but death occurred in a NSW hospital. These incidents were investigated by that state's Coroner and would be included in reporting in that state. A small number of incidents occurred in NSW and involved NSW Police and the Coroner, but death occurred after transfer to an interstate hospital: these are included in the figures in this report.

NSW Health

1 Reserve Road
St Leonards NSW 2060

Office hours:
Monday to Friday
9.00am — 5.00pm

SHPN (SIA) 260001
ISBN 978-1-74231-276-7

T: (02) 9391 9000
F. (02) 9391 9101
TTY. (02) 9391 9900
W: www.health.nsw.gov.au

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