

## **Indicator: 3.4.2**

### **Indicator Name, Target and Goal**

**Indicator 3.4.2** Suicide mortality rate

**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

**Goal 3** Ensure healthy lives and promote well-being for all at all ages

### **Definition and Rationale**

#### Definition

The annual number of suicides is divided by the Japanese population and expressed per 100,000 population.

#### Concepts

Codes X60 to X84 and Y87.0 of the International Statistical Classification of Diseases and Related Health Problems 10th Revision (ICD-10) are considered to be deaths by suicide.

#### Rationale and Interpretation:

Vital statistics has been conducted by making death records from death certificates submitted to each local government, and then identifying the ultimate cause of death from the cause of death and conditions written in the death records. Deaths identified as suicides from this data are compiled annually to find the number of suicides.

### **Data Sources and Collection Method**

Vital statistics

### **Method of Computation and Other Methodological Considerations**

#### Computation Method

Suicide rate = number of suicides in a year/Japanese population of that year x 100,000

#### Comments and limitations

The figures were calculated as while only codes X60 to X84 of the ICD-10

are considered suicides for the purpose of vital statistics, the SDGs include Y87.0 in codes X60 to X84.

### **Data Disaggregation**

Although calculation by age group (five years age groups) is possible, since it becomes enormous data files, the total data is posted.

### **References**

Vital statistics

### **Custodian Ministries of Data**

Ministry of Health, Labour and Welfare

### **Custodian Ministries of Related Policies**

Ministry of Health, Labour and Welfare

### **International Organizations**

World Health Organization (WHO)