

Queensland Suicide Data

Monthly report – November 2025

About this report

This report contains information about suicide in Queensland. The Queensland Mental Health Commission (the Commission) acknowledges that behind each of these numbers is a person who had friends and family who loved them. Suicide is a far-reaching tragedy that stretches across all age groups and all walks of life. Each suicide profoundly affects families, friends, kinship groups, colleagues, classmates and communities.

This report is released as part of Queensland's effort to reduce suicide across the state. Improving the availability and accessibility of data assists services to help identify trends, emerging areas of concern and to inform responses.

Some people may find the content of this report distressing. If you need help, please ask for the support you need. If affected in any way, please contact:

- [Beyond Blue](#) on 1300 22 4636
- [Lifeline](#) on 13 11 44
- or seek help from these [other helplines](#).

The Commission respectfully recognises those who have died or have been affected by suicide. We recognise and thank those people with a lived experience of suicide who provided feedback on this reporting template, and we are committed to working with people with lived experience of suicide and suicidal distress to support suicide prevention in Queensland.

Where does the monthly data come from?

The Queensland Government has funded the monitoring of suicide deaths with a suicide register for over three decades. In Queensland there are two systems that are used to monitor suicide deaths: the Queensland Suicide Register (QSR) that includes data since 1990 and is used to monitor longer-term trends, and the interim Queensland Suicide Register (iQSR) that was established in 2011 to provide real-time information on suicide deaths.

This report is based on data from the iQSR. The iQSR is a real-time suicide monitoring system that records interim data on suspected suicides in Queensland, shortly after the death occurs. Data on suspected suicides is based on initial police reports and other information that is available to police at the time when they refer the death to the coroner.

The iQSR supports communities, service delivery/direct care organisations and government agencies in detecting emerging issues and informing place-based responses to suspected suicides, including suicide postvention measures.

The iQSR is currently managed by the Commission on behalf of the Queensland Government, with support from the Coroners Court of Queensland (CCQ) and the Queensland Police Service (QPS).

Monthly reports are published approximately eight weeks from the last day of the reporting month. This time allows for processing, cross-checking and updating of data, and preparation of reports and approvals.

How accurate is the data?

The data in the iQSR provides an estimate of suicide numbers in Queensland. A final determination of whether a death is a confirmed suicide can only be made after the detailed coronial investigation into that death is completed. As this report is developed using information about open coronial investigations, the term 'suspected suicide' is used as the final coronial determination has not been made. This is a technical and legal term to refer to the collection of data and the Commission recognises that there are diverse views around the use of technical language when discussing sensitive and emotive issues.

Information in the iQSR is not directly comparable with official cause of death data released by the Australian Bureau of Statistics, which is based on final coronial determinations. The differences are generally small, however appropriate caution should be applied to iQSR data.

Number of suicides from 01 January to 30 November 2025

There have been 695 suspected deaths by suicide reported in Queensland from 01 January to 30 November 2025.

Table 1. Number of suspected suicides

| 2021 | | 2022 | | 2023 | | 2024 | | 2025 |
|-------------------------|-----------------------------------|-------------------------|-----------------------------------|-------------------------|-----------------------------------|-------------------------|-----------------------------------|-----------------------------------|
| 816 Full year | 748 1 January to 30 Nov | 795 Full year | 719 1 January to 30 Nov | 782 Full year | 707 1 January to 30 Nov | 769 Full year | 692 1 January to 30 Nov | 695 1 January to 30 Nov |

Table 2. Number of suspected suicides by month

| Month | 2021 | 2022 | 2023 | 2024 | 2025 |
|--------------|------------|------------|------------|------------|-----------------------------------|
| January | 70 | 71 | 73 | 86 | 67 |
| February | 81 | 64 | 64 | 52 | 45 |
| March | 62 | 71 | 65 | 50 | 72 |
| April | 54 | 65 | 64 | 64 | 55 |
| May | 67 | 50 | 66 | 56 | 56 |
| June | 70 | 52 | 47 | 58 | 60 |
| July | 72 | 65 | 68 | 51 | 69 |
| August | 68 | 63 | 56 | 63 | 72 |
| September | 67 | 53 | 69 | 65 | 63 |
| October | 70 | 73 | 72 | 77 | 62 |
| November | 67 | 92 | 63 | 70 | 74 |
| December | 68 | 76 | 75 | 77 | - |
| Total | 816 | 795 | 782 | 769 | <i>Calendar year to date: 695</i> |

Table 3. Number of suspected suicides by gender and age group

| | Full year | | | | 01 January to 30 Nov | | | | |
|-----------------|------------|------------|------------|------------|----------------------|------------|------------|------------|------------|
| | 2021 | 2022 | 2023 | 2024 | 2021 | 2022 | 2023 | 2024 | 2025 |
| Male | | | | | | | | | |
| Under 18 | 17 | 9 | 10 | 13 | | 17 | 9 | 8 | 12 |
| 18 to 24 | 71 | 55 | 53 | 41 | | 65 | 51 | 49 | 38 |
| 25 to 34 | 117 | 107 | 118 | 119 | | 109 | 95 | 111 | 105 |
| 35 to 44 | 103 | 110 | 103 | 125 | | 93 | 99 | 87 | 109 |
| 45 to 54 | 115 | 129 | 105 | 115 | | 104 | 117 | 94 | 105 |
| 55 to 64 | 86 | 85 | 77 | 89 | | 82 | 78 | 67 | 78 |
| 65 to 74 | 52 | 58 | 60 | 46 | | 46 | 51 | 55 | 45 |
| 75 plus | 51 | 58 | 57 | 54 | | 46 | 53 | 53 | 43 |
| Unknown | - | - | - | - | | - | - | - | 2 |
| Subtotal | 612 | 611 | 583 | 602 | | 562 | 553 | 524 | 535 |
| Female | | | | | | | | | |
| Under 18 | 12 | 6 | 11 | 9 | | 12 | 6 | 11 | 8 |
| 18 to 24 | 20 | 22 | 19 | 10 | | 16 | 21 | 19 | 10 |
| 25 to 34 | 33 | 29 | 29 | 34 | | 30 | 26 | 27 | 31 |
| 35 to 44 | 37 | 28 | 35 | 35 | | 33 | 25 | 31 | 33 |
| 45 to 54 | 42 | 42 | 44 | 34 | | 38 | 40 | 41 | 32 |
| 55 to 64 | 29 | 27 | 28 | 23 | | 27 | 23 | 24 | 22 |
| 65 to 74 | 12 | 14 | 14 | 12 | | 12 | 11 | 12 | 9 |
| 75 plus | 19 | 15 | 19 | 10 | | 18 | 13 | 18 | 9 |
| Unknown | - | 1 | - | - | | - | 1 | - | - |
| Subtotal | 204 | 184 | 199 | 167 | | 186 | 166 | 183 | 157 |
| All | | | | | | | | | |
| Under 18 | 29 | 15 | 21 | 22 | | 29 | 15 | 19 | 20 |
| 18 to 24 | 91 | 77 | 72 | 51 | | 81 | 72 | 68 | 48 |
| 25 to 34 | 150 | 136 | 147 | 153 | | 139 | 121 | 138 | 136 |
| 35 to 44 | 140 | 138 | 138 | 160 | | 126 | 124 | 118 | 142 |
| 45 to 54 | 157 | 171 | 149 | 149 | | 142 | 157 | 135 | 137 |
| 55 to 64 | 115 | 112 | 105 | 112 | | 109 | 101 | 91 | 100 |
| 65 to 74 | 64 | 72 | 74 | 58 | | 58 | 62 | 67 | 57 |
| 75 plus | 70 | 73 | 76 | 64 | | 64 | 66 | 71 | 52 |
| Unknown | - | 1 | - | - | | - | 1 | - | - |
| Total | 816 | 795 | 782 | 769 | | 748 | 719 | 707 | 692 |
| | | | | | | | | | 695 |

Table 4. Number of suspected suicides by location of usual residence

| | Full year | | | | 01 January to 30 Nov | | | | |
|-----------------|------------|------------|------------|------------|----------------------|------------|------------|------------|------------|
| | 2021 | 2022 | 2023 | 2024 | 2021 | 2022 | 2023 | 2024 | 2025 |
| Major Cities | 442 | 434 | 426 | 387 | 406 | 393 | 387 | 352 | 368 |
| Inner Regional | 205 | 191 | 194 | 177 | 187 | 172 | 180 | 156 | 139 |
| Outer Regional | 141 | 129 | 115 | 137 | 131 | 119 | 99 | 123 | 134 |
| Remote | 11 | 17 | 15 | 26 | 9 | 15 | 13 | 22 | 13 |
| Very Remote | 9 | 17 | 11 | 12 | 7 | 16 | 11 | 11 | 11 |
| Other / Unknown | 8 | 7 | 21 | 30 | 8 | 4 | 17 | 28 | 30 |
| Total | 816 | 795 | 782 | 769 | 748 | 719 | 707 | 692 | 695 |

Notes on methodology

Deaths are counted as suspected suicides if the apparent cause of death is described by QPS as a suspected suicide or if information is included in the police report to suggest that the death may be a suicide (e.g., the deceased person left a note or had indicated to family or friends that they intended to take their own life).

Totals may vary between tables due to missing data on some variables (e.g., not all suspected suicides include information about location of usual residence).

Suspected suicides by interstate or international visitors have been included in the totals. For those people where no information about usual residential address was available, it is assumed that the deceased person was a Queensland resident unless the police report contains information to suggest otherwise.

Numbers may vary slightly over time due to suspected suicides being added after the monthly reporting period (e.g., suspected suicides that had not been received during the monthly reporting period).

The year and month of death indicate the time when the death occurred, not when it was registered.

Numbers are not adjusted for population size or for the age structure of the population. Caution should be used when interpreting this data.

Until September 2023, the iQSR was managed by the Australian Institute for Suicide Research and Prevention (Griffith University) on behalf of the Queensland Government. From September 2023, the iQSR has been managed by the Commission. All reasonable efforts have been made to ensure data continuity and consistency over time, however this transition period should be noted and appropriate caution applied to the interpretation of the data.

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Published: 19 January 2026

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