

Statistical bulletin

Suicides in UK armed forces veterans, England and Wales: 2021

Suicide rates among UK armed forces veterans, based on death registration records linked to Census 2021 and the Ministry of Defence (MOD) Service Leavers Database (SLD). These are official statistics in development.

Contact:
Mortality, Quality and Coherence
health.data@ons.gov.uk
+44 1329 444110

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1 . Main points

- In 2021 in England and Wales, out of 5,175 suicides in those aged 16 years and over, 253 suicides occurred in UK armed forces veterans.
- Of the 253 UK armed forces veteran suicides occurring in 2021, 93.7% (237) were male and 6.3% (16) were female.
- Overall, after accounting for age, there was no evidence of a difference in the rate of suicide between male UK armed forces veterans and the male general population.
- However, male UK armed forces veterans aged 25 to 44 years had a higher rate of suicide compared with males aged 25 to 44 years in the general population.
- In the male UK armed forces veteran population, deaths from firearm discharge accounted for 5.9% of suicides in 2021, compared with the male general population where this method accounted for 1.6% of suicides in the same year.

If you are a journalist covering a suicide-related issue, please consider following the [Samaritans' media guidelines on the reporting of suicide](#) because of the potentially damaging consequences of irresponsible reporting. In particular, the guidelines advise on terminology and include links to sources of support for anyone affected by the themes in the article.

If you are struggling to cope, please call Samaritans for free on 116 123 (UK and the Republic of Ireland) or contact other sources of support, such as those listed on the [NHS help for suicidal thoughts](#) webpage. Support is available around the clock, every day of the year, providing a safe place for you, whoever you are and however you are feeling.

These are [official statistics in development](#). The methodology used to compile these statistics is new and subject to future review.

2 . Suicide deaths in UK armed forces veterans

The statistics presented in this release were obtained by linking Office for National Statistics (ONS) death registration data with Census 2021 and the Service Leavers Database (SLD), provided by the Ministry of Defence (MOD), which contains records of UK armed forces service leavers who have left service since 1975 to the present day. For more information on the data, see [Section 6: Measuring the data](#).

The analysis in this release is based on deaths in ONS mortality data that occurred in 2021. We have used information on deaths registered up to the end of 2022. Because of registration delays there will be some suicides, veteran and non-veteran, that occurred in 2021 which will have been registered after 2022, which will not be included in our analysis.

There were 5,175 deaths caused by suicide in 2021 in those aged 16 years and over in England and Wales; 4.9% (253) of these suicides were identified as UK armed forces veterans. Of the 253 veteran suicides in 2021, the majority were male, 93.7% (237 deaths), compared with female, 6.3% (16 deaths). This is equivalent to approximately 15 suicides per 100,000 UK armed forces veterans, with 16 suicides per 100,000 male veterans and 7 suicides per 100,000 female veterans.

Because of the predominantly male composition of the veteran population, our analysis in this release primarily focuses on male suicides, unless otherwise stated.

The analysis includes both veterans who have served in the regular armed forces and the reserve armed forces. According to [Census 2021 in England and Wales](#), just over three-quarters of UK armed forces veterans in England and Wales had previously served in the regular forces (76.3%), 19.5% in the reserve forces, and 4.3% served in both the regular and reserve forces. It was not possible to distinguish between respective service histories in the MOD SLD data held by the ONS. Therefore, we have not provided separate suicide figures for regular and reserve forces in this release.

Because of the time taken to complete an inquest, it can take months or even years for a suicide to be registered. As a result of these registration delays, some suicides of UK armed forces veterans occurring in 2021 may not yet be included in the ONS death registrations data. In 2021, of the suicide deaths registered, 19% occurred more than 12 months before their registration. For more information see our article [Impact of registration delays on mortality statistics in England and Wales](#).

Suicide method

The two most common methods of suicide among male UK armed forces veterans in 2021 were by hanging, strangulation and suffocation, which accounted for 57.0% (135 deaths), and poisoning, which accounted for 19.0% (45 deaths) of suicide deaths. In the male general population, the proportions of suicides caused by these methods were 62.6% and 16.0%, respectively.

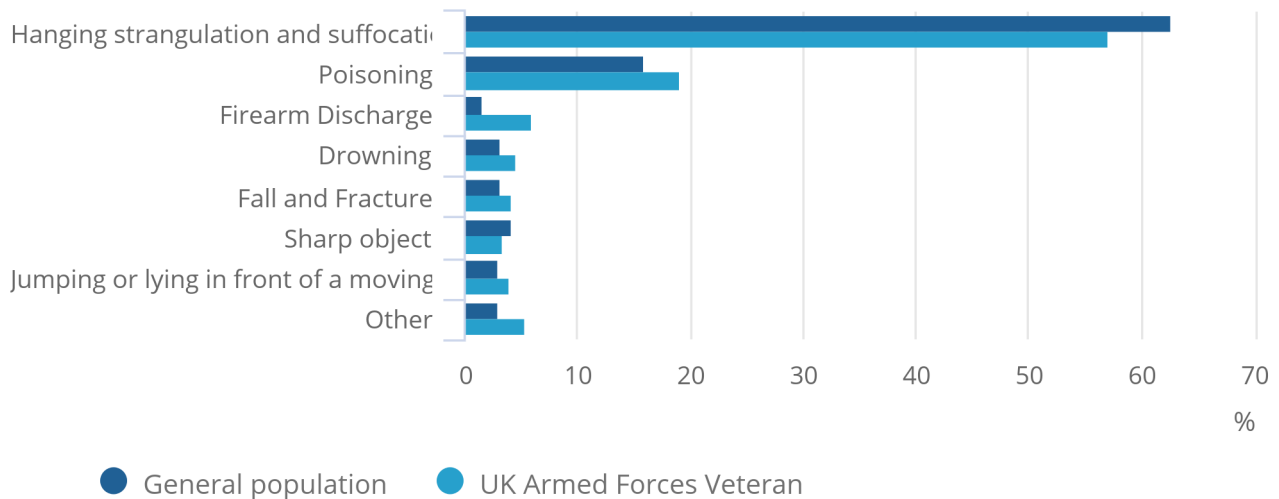
The third most common method of suicide in male veterans was deaths caused by firearm discharge, accounting for 5.9% (14 deaths) of suicide deaths in this group in 2021. In the male general population, deaths caused by firearm discharge, the least common method of suicide, accounted for 1.6% of suicide deaths in this group (Figure 1).

Figure 1: The two most common methods of suicide among male veterans were hanging, strangulation and suffocation, and poisoning

Comparison of proportions of male UK armed forces veterans and male general population suicide occurrences by method in 2021, England and Wales

Figure 1: The two most common methods of suicide among male veterans were hanging, strangulation and suffocation, and poisoning

Comparison of proportions of male UK armed forces veterans and male general population suicide occurrences by method in 2021, England and Wales



Source: Census 2021 and death registrations from the Office for National Statistics, Service Leavers Database from the Ministry of Defence

Notes:

1. The National Statistics definition of suicide is given in [Section 5: Glossary](#).
2. Includes deaths of non-residents of England and Wales.
3. Figures are for males aged 16 years and over.
4. UK armed forces veteran population includes those who have served in the regular armed forces and the reserve armed forces.
5. The general population includes a very small proportion of currently serving UK armed forces personnel, for more information on suicides in UK armed forces see: [UK armed forces suicides](#).
6. Figures are for deaths occurring in 2021, not deaths registered.

Overall, we identified 57,130 UK armed forces veteran deaths in the ONS death registrations database that occurred between 1 January 2021 and 31 December 2021, after linking with Census 2021 and the SLD.

For a full breakdown of all causes of deaths, as classified by the [International Classification of Diseases version 10](#), see our [accompanying dataset](#).

The UK armed forces veteran age distribution

The UK armed forces veteran population differs substantially to the general population in relation to sex and age distributions, with veterans being predominantly male and older. For more information see our article [Characteristics of UK armed forces veterans, England and Wales: Census 2021](#).

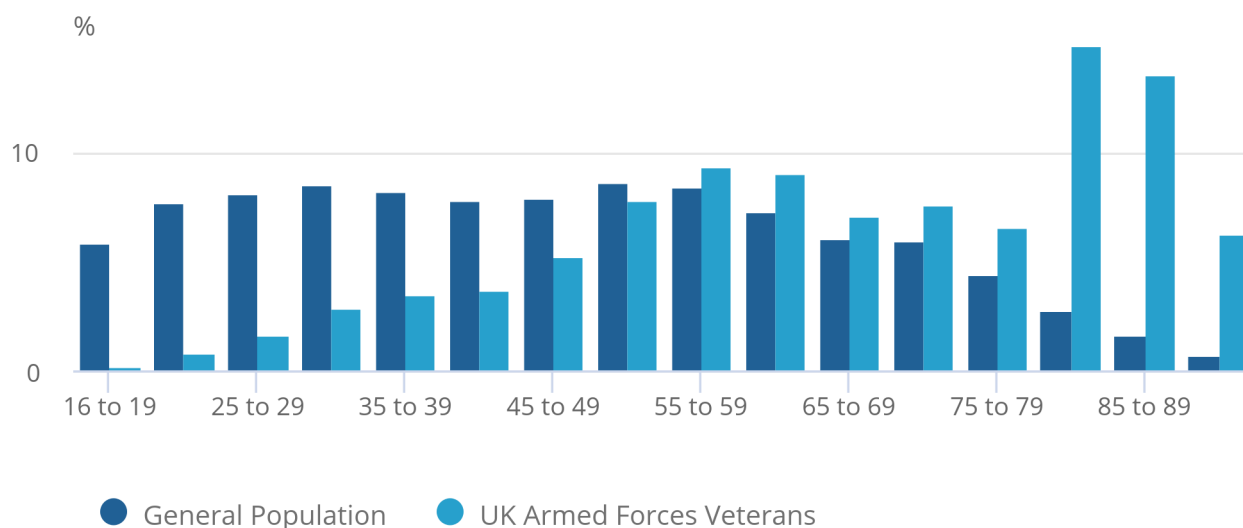
The veteran population contains a greater proportion of those aged 80 years and over (34.8%) in comparison with the general population (5.2%) (Figure 2). This is likely to be because of the ages of those who served as part of National Service and War Service from 1939 to 1960.

Figure 2: Male UK armed forces veterans have an older age distribution compared with males in the general population

Comparison of proportions of male UK armed forces veterans and male general population by age groups in 2021, England and Wales

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Comparison of proportions of male UK armed forces veterans and male general population by age groups in 2021, England and Wales



Source: Census 2021 and death registrations from the Office for National Statistics, Service Leavers Database from the Ministry of Defence

Notes:

1. Percentages are for males aged 16 years and over.
2. Veteran population figures are based on 1,740,281 veterans identified through Census 2021 with a valid NHS number (see [Section 6: Measuring the data](#)), while general population figures are derived from mid-year population estimates.
3. UK armed forces veteran population includes those who have served in the regular armed forces and the reserve armed forces.
4. The general population includes a very small proportion of currently serving UK armed forces personnel.

3 . Suicide rates in the UK armed forces veteran population

To calculate rates, we have used UK armed forces veterans with a valid NHS number recorded in Census 2021 for the UK armed forces veteran population, and mid-year population estimates for the general population (see [Section 6: Measuring the data](#)).

To account for the difference in age distribution in male veterans and the male general population (Figure 2), we have calculated age-standardised rates standardised to the age distribution of the UK armed forces veteran population (see [Section 5: Glossary](#)). This ensures our estimates accurately reflect the unique age distribution of veterans. For more information on the importance of using population-specific standards for the population of interest, see the International Journal of Epidemiology article [Reflection on modern methods: statistical, policy and ethical implications of using age-standardized health indicators to quantify inequities](#).

The age-standardised rate of suicide for male UK armed forces veterans (15.7 per 100,000, 95% [confidence interval \(CI\)](#) 14.1 to 17.4) was comparable with males in the general population (16.5 per 100,000, 95% CI 16.1 to 16.9) (Figure 3). This indicated that after adjusting for differences in the age distribution between the two groups, there was no evidence of a difference in the rate of suicide.

Figure 3: Rates of suicide occurrences in male UK armed forces veterans and the male general population are comparable in 2021

Age-standardised male suicide rates, England and Wales, 2021

Notes:

1. The National Statistics definition of suicide is given in [Section 5: Glossary](#).
2. Includes deaths of non-residents of England and Wales.
3. Figures are for males aged 16 years and over.
4. UK armed forces veteran population includes those who have served in the regular armed forces and the reserve armed forces.
5. Figures are for deaths occurring in 2021, not deaths registered.
6. The general populations include a very small proportion of currently serving UK armed forces personnel, for more information on suicides in UK armed forces see: [UK armed forces suicides](#).
7. Age-standardised suicide rates per 100,000 population. Rates have been age standardised to the veteran population estimate (see [Section 6: Measuring the data](#)), expressed per 100,000 people. Age-standardised rates are used to allow comparison between populations that may contain different proportions of males of different ages.
8. When the confidence intervals for age-standardised rates overlap, it suggests that, for a given period, there is no statistically significant difference in the rate of suicide compared with the general male population of England and Wales. The overlapping confidence intervals indicate that observed rates are within the expected range of fluctuations, and caution should be exercised in inferring any meaningful distinction between the two groups.

[Download the data](#)

However, when looking at the rate of suicide by age groups, we found that there were some differences between the male UK armed forces veterans and the male general population.

Male UK armed forces veterans aged between 25 to 34 years (38.2 deaths per 100,000, 95% CI 25.0 to 56.0) and 35 to 44 years (33.5 deaths per 100,000, 95% CI 23.5 to 46.4) had a higher rate of suicide compared with those aged between 25 to 34 years and 35 to 44 years in the male general population (18.0 deaths per 100,000, 95% CI 16.7 to 19.3), and (18.8 deaths per 100,000, 95% CI 17.4 to 20.2), respectively.

Figure 4: Male UK armed forces veterans, aged 25 to 44 years, had higher age-specific suicide rates compared with the general population

Age-specific suicide rates, males, England and Wales in 2021

Notes:

1. The National Statistics definition of suicide is given in [Section 5: Glossary](#).
2. Caution is advised for age bands 16 to 24 and 65 to 74 years because of small numbers of deaths, affecting reliability; for more information see [accompanying dataset](#).
3. Includes deaths of non-residents of England and Wales.
4. Figures are for males aged 16 years and over.
5. UK armed forces veteran population includes those who have served in the regular armed forces and the reserve armed forces.
6. Figures are for deaths occurring in 2021, not deaths registered.
7. The general population includes a very small proportion of currently serving UK armed forces personnel, for more information on suicides in UK armed forces see: [UK armed forces suicides](#).
8. Age-specific suicide rates per 100,000 population.
9. When the confidence intervals for age-standardised rates overlap, it suggests that, for a given period, there is no statistically significant difference in the rate of suicide compared with the general male population of England and Wales. The overlapping confidence intervals indicate that observed rates are within the expected range of fluctuations, and caution should be exercised in inferring any meaningful distinction between the two groups.

[Download the data](#)

Standardised mortality ratios (SMRs) have also been calculated and are available in the [accompanying dataset](#). The SMRs also show that there was no evidence of a difference in suicide risk between male UK armed forces veterans and the male general population.

Accounting for the changing UK armed forces veteran population

The rates presented in the previous section assume that the UK armed forces veteran population is constant in 2021. In reality, the population is changing every day, as serving members of the UK armed forces become veterans and some veterans die. To accurately capture the changing dynamics of the UK armed forces veteran population, we also undertook time-at-risk analysis, where instead of a fixed population we used the number of person-days as denominators.

A person-day at risk, for both veterans and non-veterans, refers to each day during the study period that individuals could experience the event being studied (suicide). This method ensures that we accurately account for their time as a veteran throughout the study period.

- Our study period was from 21 March 2021 to 31 December 2021, inclusive.
- The population at risk consisted of males recorded on Census Day (21 March 2021) who were aged 15 years and older, intended to remain in England and Wales, and linked to the Personal Demographic Service (PDS) to obtain a valid NHS number; this age requirement accounts for individuals who, during the study period, either reached 16 years of age, joined the UK armed forces, and subsequently left to become part of the veteran population or remained as a non-veteran.
- We compared the veteran population with the non-veteran population, instead of the general population, as previously in this release.
- Individuals who transitioned to veteran status during the study period initially contributed time at risk to the non-veteran population until they became veterans.

In assessing veteran mortality risk, it is important to consider the varying amount of time that individuals have been a veteran for. However, because of data limitations, accurately accounting for a veteran's risk period since leaving service, particularly if it occurred before the start of the study period, was not possible.

At the start of our study period, we had approximately 21.5 million males in our population at risk; 7.2% were veterans and the remaining 92.8% were non-veterans. During the study period, around 5,000 currently serving UK armed forces personnel, in the non-veteran population, transitioned to veteran status. Over the study period, male veterans accumulated around 1.2 million years at risk, while male non-veterans accumulated approximately 15.6 million years at risk.

We identified 2,184 male suicides that occurred from 21 March 2021 to 31 December 2021 among those recorded in Census 2021, aged 15 years and over, and intending to stay in England and Wales; 90.9% (1,985) were non-veterans compared with 9.1% (199) that were identified as veterans.

It is important to note that 845 male suicides, that occurred from 21 March 2021 to 31 December 2021, did not link to a respondent recorded in the 2021 Census because of the linkage between the 2021 Census and the [Personal Demographic Service \(PDS\)](#). Further information can be found in [Section 6: Measuring the data](#).

Despite this, the analysis that produced age-standardised and age-specific rates of suicide found no evidence of a difference in the suicide rate between male veterans and male non-veterans. This is consistent with the findings detailed previously. A full breakdown of the rates calculated for the time-at-risk analysis can be found in the [accompanying dataset](#).

4 . Suicides in UK armed forces veterans, England and Wales 2021: data

[Suicides in UK armed forces veterans, England and Wales](#)

Dataset | Released 5 April 2024

Analysis of the risk of suicide among UK armed force veterans, including the number of deaths, standardised mortality ratios and age-standardised rates, England and Wales, 2021. Including counts of all deaths, along with the proportion of suicides by method. Annual data. These are official statistics in development.

5 . Glossary

UK armed forces veteran

People who have previously served in the UK armed forces. This covers everyone who has served for at least one day in HM's armed forces, either regular or reserves, or Merchant Mariners who have seen duty on legally defined military operations. It does not include those who are still serving, even if they have left and rejoined, those who have only served in foreign armed forces, or for this study, those who have served in the UK armed forces and are currently living outside of England and Wales.

Usual resident

A usual resident is anyone who on Census Day (21 March 2021) was in England and Wales and had stayed or intended to stay for a period of 12 months or more.

For a full glossary of terms, please see our [Census 2021 dictionary](#).

Standard population

A standard population is a theoretical construct with a fixed age distribution, used as a reference for calculating age-standardised rates. It represents the age structure of a specific population at a given time, allowing comparisons across different populations. When standardisation is necessary, using a population-specific standard, such as one based on UK armed forces veterans, ensures that metrics accurately reflect the reality for the focus population. In this bulletin, the standard population refers specifically to UK armed forces veterans, enabling accurate statistical comparisons.

For more information see the International Journal of Epidemiology article [Reflection on modern methods: statistical, policy and ethical implications of using age-standardized health indicators to quantify inequities](#).

Age-standardised rate

Age-standardised mortality rate (ASMR) in this bulletin refers to a weighted average of the age-specific mortality rates per 100,000 people, standardised to the Census 2021 UK armed forces veteran population with a valid NHS number.

Age-specific rate

Age-specific rate is the number of deaths per 100,000 people within specific age groups. It is calculated by dividing the number of deaths within an age group by the total population in that age group, then multiplying by 100,000.

Standardised mortality ratio (SMR)

SMR in this bulletin refers to the ratio of expected mortality risk for a population, given age-specific mortality rates from a reference population. In the initial analysis, the reference population consists of male suicides in the Office for National Statistics (ONS) mortality data occurring in 2021, along with the 2021 male mid-year population estimates. In the time-at-risk analysis, the reference population comprises males recorded in Census 2021 that were identified as non-veterans and linked to the Patient Demographic Service (PDS) to obtain NHS numbers, representing their time at risk before any potential transition to veteran status.

Deaths caused by suicide

The definition of suicide used in this article includes all deaths from intentional self-harm for persons aged 10 years and over, and deaths where the intent was undetermined for those aged 15 years and over.

The [International Classification of Diseases 10 \(ICD-10\)](#) codes used to define suicides are:

- intentional self-harm (people aged 10 years and above) (ICD-10 codes X60 to X84)
- injury or poisoning of undetermined intent (people aged 15 years and above) (ICD-10 codes Y10 to Y34)

6 . Measuring the data

Death registrations data

Mortality statistics are derived from information provided when deaths are certified and registered. These statistics are compliant with the [Code of Practice for Statistics](#) and are designated as [National Statistics](#).

More quality and methodology information on strengths, limitations, uses, and how the data were created is available in our [Mortality statistics in England and Wales QMI](#), our [Suicide rates in the UK QMI](#) and our [User guide to mortality statistics](#).

Following coroner inquest and death registration, the Office for National Statistics (ONS) assigns each death with a code from the [International Classification of Diseases \(ICD-10\)](#), based on the coroner's conclusion.

In this bulletin, we have used information on deaths that occurred in 2021 and were registered up to the end of 2022. There will be some deaths that occurred in 2021 which will have been registered after 2022, which will not be included in our analysis.

Population data

To calculate the veteran population estimate used in the rates calculations in the article, we used Census 2021 data. The 2021 Census asked a question about previous service in the UK armed forces for the first time. All respondents aged 16 years and over were asked whether they had previously served in the regular or reserve UK armed forces. Anyone who has served for at least one day in the armed forces, either as a regular or reserve, or Merchant Mariners who have seen duty on legally defined military operations is classed as a veteran.

In Census 2021 data, we identify 1,853,112 veterans planning to remain in England and Wales for the next 12 months. Of these, 93.9% (1,740,281) could be linked to the Personal Demographic Service (PDS) to obtain NHS numbers, forming our veteran population estimate in 2021, which was used to calculate mortality rates for veterans. This ensured that our analysis focused on those veterans who were actively residing in the region and could accurately be tracked and accounted for in 2021.

The NHS numbers of the 1,740,281 veterans enumerated in Census 2021 who were linked to the PDS, were used to identify the majority of veteran deaths, which occurred in 2021, in Office for National Statistics (ONS) mortality data. [Census 2021 provides a snapshot of the veteran population on a specific day, 21 March 2021](#), and does not enable us to identify veteran deaths occurring between 1 January 2021 and Census Day (21 March 2021) as well as deaths in those who left the UK armed forces and became a veteran after Census Day (22 March 2021 until 31 December 2021). To identify these deaths and to ensure a more accurate representation of veteran death occurrences in 2021 we used the Service Leavers Database (SLD), provided by the Ministry of Defence (MOD).

The SLD contains records of UK armed forces service leavers who have left service since 1975. While NHS number is included in the SLD, it has a high proportion of missingness which has improved in recent years. Because of this it cannot be solely used to identify veterans. Further information on the SLD can be found in the following Quality section.

The mortality rates in the general population of England and Wales are calculated using the number of deaths and [mid-year population estimates](#) provided by the ONS Population Estimates Unit. Population estimates are based on the decennial England and Wales census estimates and use information on births, deaths and migration to estimate the mid-year population in non-census years.

Time-at-risk study population

The time-at-risk study population consisted of those recorded in Census 2021 data, planning to remain in England and Wales for the next 12 months, and could be linked to the PDS to obtain an NHS number, identified as either a veteran or non-veteran.

The SLD was used to identify those recorded in Census 2021, who were currently serving UK armed forces personnel and identified as non-veteran, who transition to veteran status during the study period. This inclusion ensured a more accurate representation of the veteran time-at-risk, accounting for changes over time and providing a comprehensive view of individuals entering the veteran community.

Additionally, the SLD allowed us to identify individuals present in Census 2021 data who had not explicitly indicated their veteran status but were present in the SLD.

The study population comprised approximately 21.5 million males who:

- responded to the 2021 Census
- could be linked to an NHS number via [Personal Demographic Services \(PDS\)](#)
- were intending to stay in England and Wales over the next 12 months
- were aged 15 years or over on 21 March 2021 (Census Day)

Of 2021 Census male respondents who were intending to stay in England and Wales, and aged 15 years or over at the start of the study period, 88.8% could be linked to the PDS.

Further information on the linkage of 2021 Census to PDS is available in our [Census 2021 to Personal Demographics Service linkage report](#).

Study period

The study period for the time-at-risk analysis covered 21 March 2021 to 31 December 2021. The time-at-risk analysis focused on those present in Census 2021, as it was not feasible to start earlier. Additionally, the ONS death registration data could only be used to analyse deaths occurring up until 31 December 2021 at the time of writing.

During the study period, 11.0% of death occurrences could not be linked to a respondent in our study population because of individuals who were unable to be linked to the PDS to obtain an NHS number. Among these death occurrences, 1,001 were suicides, comprising 24.6% of all suicides during the study period. Of these 1,001 suicides, 84.4% (845) were male deaths, while 15.6% (156) were female deaths.

Quality

Quality considerations along with the strengths and limitations of Census 2021 are provided in our [Quality and Methodology Information \(QMI\) for Census 2021](#). Read more about the specific quality considerations for [UK armed forces veterans](#).

Further information on our quality assurance processes is provided in our [Maximising the quality of Census 2021 population estimates report](#).

The Service Leavers Database (SLD), as a dataset, has limited variables available for linkage and exhibits significant missingness in main variables. Our analysis primarily focused on the presence of NHS numbers within the SLD. Although NHS numbers are present, there is a high percentage of missing data, which has shown improvement in recent years. For example, between 2010 and 2021, 78.4% of records contained a valid NHS number. In 2021, 73.2% (10,592) of all service leavers possessed a valid NHS number, leaving 26.8% (3,876) unable to be linked to ONS death registrations.

Related methodology

[Service leavers database linkage to 2011 Census](#)

Methodology | Released 2 August 2023

Methods used to link the Service Leavers Database, provided by the Ministry of Defence, to 2011 Census using deterministic and probabilistic methods.

[UK armed forces veterans quality information for Census 2021](#)

Methodology | Released 10 November 2022

Quality information about the UK armed forces veterans data from Census 2021 in England and Wales to help users correctly interpret them.

[Armed forces community \(veterans\) question development for Census 2021](#)

Methodology | Released 27 January 2021

Information on how we researched, developed and tested the Census 2021 question on the armed forces veterans community, including extra detail on the definitions of the main terms.

7 . Strengths and limitations

Strengths

The Service Leavers Database (SLD) helped us capture individuals transitioning from currently serving UK armed forces personnel to veteran status throughout our study. By using SLD data, we included information about veterans beyond Census Day 2021, improving post-census veteran population estimates. Additionally, the SLD identified veteran suicides before Census Day, giving a more complete picture of veteran suicides for the year. Combining SLD and census data ensured inclusion of service leavers who left service before 1 January 2021, and those not captured by the SLD before 1975, making our analysis more comprehensive.

Our analysis uses age-standardised mortality rates, age-specific rates and standardised mortality ratios to calculate suicide rates among veterans. These methods enable us to compare the risk of suicide among veterans with both the general and non-veteran populations. Age-standardised mortality rates adjust for differences in age distribution while standardised mortality ratios consider population size and age structure.

Limitations

The analysis in this release has been produced as [official statistics in development](#), which are in the testing phase and not yet fully developed.

The analysis is based on deaths that occurred between 1 January 2021 and 31 December 2021, which could be identified as UK armed forces veteran deaths.

However, our reliance on NHS numbers for identifying veterans presents a limitation. Excluding records lacking NHS numbers may result in an incomplete representation of the veteran population. Particularly, veterans who left service before Census Day (21 March 2021), as well as those who left service after Census Day without a valid NHS number and therefore could not be linked to ONS mortality data. This limitation means that some deaths may not be identified as belonging to a UK armed forces veteran.

The analysis includes both regular veterans and reservist veterans. At the time of writing, it was not feasible to distinguish between their respective service histories. While regular veterans served full-time in the armed forces, reservists balanced military obligations with civilian life. In future updates, rates will be computed for both regular veterans and reservist veterans, allowing for a more comprehensive analysis. Understanding the unique challenges faced by each group is essential for providing tailored support and improving the well-being of all individuals who have served in the UK armed forces.

8 . Related links

[Suicides in England and Wales: 2022 registrations](#)

Bulletin | Released 19 December 2023

Registered deaths in England and Wales from suicide analysed by sex, age, area of usual residence of the deceased, and suicide method.

[Characteristics of UK armed forces veterans, England and Wales: Census 2021](#)

Bulletin | Released 3 February 2023

UK armed forces veteran population from Census 2021 data, includes population age, where people were born, religion, ethnic group, legal partnership status and general health.

[UK armed forces veterans variables Census 2021](#)

Supporting information | Released 9 November 2022

Lists variables and classifications used in Census 2021 data about UK armed forces veterans.

[UK armed forces veterans, England and Wales: Census 2021](#)

Bulletin | Released 10 November 2022

UK armed forces veterans population who have either previously served in the regular forces, reserve forces or both, Census 2021 data.

[Suicide after leaving the UK Armed Forces 1996 to 2018: A cohort study](#)

Web journal | Released 08 August 2023

Explores suicide risk among former military personnel over 22 years, underscoring the need for ongoing mental health support.

9 . Cite this statistical bulletin

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