

Drug-related and drug misuse deaths in Northern Ireland, 2022

Frequency: Annual

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This report presents finalised statistics on Northern Ireland (NI) drug-related mortality in 2022. Figures are based on deaths registered in NI that are known to be drug-related or a direct consequence of drug misuse.

Drug death statistics and mortality statistics more generally, are published by NISRA, as the number of deaths *registered* within a calendar year, rather than the number of deaths that occurred in that period. This method ensures annual data do not continuously change; however, it introduces a limitation to the statistics as registration-based figures build in delays in procedural systems and processes which can drive annual fluctuations in the series; and do not enable occurrence-based analyses which may be important in informing operational and policy responses. Annual changes in the numbers of registered deaths should therefore be interpreted with caution; three-year rolling averages have been provided below to give a better indication of change over time.

Key points

- The 154 drug-related deaths *registered* in Northern Ireland in 2022 (154) was down from 213 deaths registered in 2021. The same was true for drug misuse deaths, decreasing from 175 in 2021 to 127 in 2022, it is important to note that registration-based figures build in delays arising from system wide processes which can drive annual fluctuations in the series.
- Since 2012, NI has seen deaths due to drug related causes rise by 98% from 110 to a peak of 218 in 2020 and to 213 in 2021. The 2022 total (154) represents a 40% increase on the number of drug deaths registered a decade ago.

- Looking at the three-year rolling average, the number of drug-related deaths registered between 2020-2022 has decreased by 12 (5.9 percent) from the 207 registered in 2019-2021.
- Males accounted for more than two-thirds (69.5%) of drug-related deaths in 2022.
- The 25-34 age group had the highest crude drug-related death rate in 2022, at 19.2 per 100,000 population and also the highest crude drug misuse death rate at 18.7 per 100,000 population.
- The average age-standardised drug-related death rate from 2020 - 2022 was 10.5 deaths per 100,000, a decrease of 5.5% on the 2019-2021 figure of 11.2 deaths per 100,000. The comparative figure for drug misuse averaged 8.3 deaths per 100,000 between 2020 and 2022, a decline of 6.8% on the 2019-2021 average rate of 9.3 deaths per 100,000. Prior to this, the three-year average for both drug-related deaths and drug misuse has been steadily increasing since 2012.
- Looking at the three-year rolling average, opioids were mentioned most often on the death certificates of drug-related deaths, appearing in 118 cases on average between 2020 and 2022. However, Pregabalin was the specific drug mentioned most often, mentioned in 61 of the 154 deaths registered in 2022.
- The percentage of drug-related deaths also involving alcohol has been declining over the last decade, falling from 31.8% in 2012 to 17.5% in 2022.
- Over two-thirds (68.8%) of drug-related deaths in 2022 involved two or more drugs. In contrast in 2012, 60.0% of drug-related deaths involved two or more drugs.
- Cocaine emerged as the predominant substance mentioned in deaths involving only *one* drug in 2022, constituting 9.1% of total drug-related deaths and 35.0% of single-drug deaths.
- Belfast LGD had the highest age-standardised rate of drug-related deaths (14.3 deaths per 100,000 population). Drug-related and drug misuse deaths continue to be higher in areas of highest deprivation.

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What you need to know

The Northern Ireland Statistics and Research Agency (NISRA) produces data on births, deaths, marriages, civil partnerships and adoptions from civil registration events which are registered with the General Register Office (GRO). Drug-Related and Drug Misuse deaths statistics are derived from cause of death recorded when a death is registered in Northern Ireland. Drug misuse deaths are a sub-set of drug-related deaths, more information including the definitions can be found in Annex A. Statistics are published annually and include counts and death rates for all drug-related deaths registered in Northern Ireland.

The annual **Drug-Related and Drug Misuse Deaths, Northern Ireland** release presents statistics on the most recent, official death registration data available on drug-related mortality across Northern Ireland (NI). These figures were first published in 2009 with a time series going back to 1997.

This is the third release using the slightly revised definition (revised for the 2020 release in February 2022) for drug misuse deaths in order to fully align with the definition used by the Office for National Statistics (ONS). See the '*Definitions and further information section*' in this report, and the [Drug-related deaths Information paper](#) for more details of the change and impact.

While drug-related deaths account for less than 1 per cent of all deaths in NI, there has been a general upward trend in the number of such deaths. With this known effect on premature mortality, there is considerable political, media and public interest in these figures which are used by a range of public bodies. In addition, drug-related information is used by academia to investigate trends in drug-related deaths and the effectiveness of public interventions.

The Department of Health, NI (DoH) use drug-related death statistics to inform policy and monitor the strategy: [Preventing Harm, Empowering Recovery](#), the aim of which is to reduce the level of alcohol and drug-related harm in Northern Ireland.

NISRA's annual release presents figures on drug-related and drug misuse deaths in NI on a 10-year rolling basis, broken down by cause of death, sex and geographic indicators relating to the usual residence of the deceased, and the substances involved.

Rebased Mid-Year Population Estimates for Northern Ireland

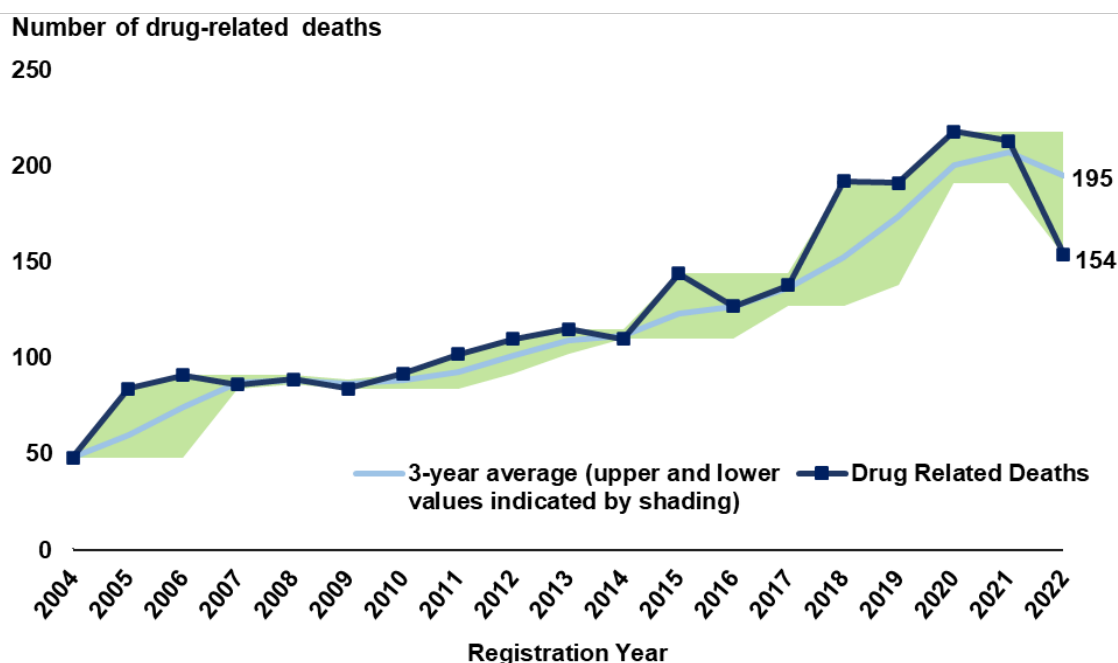
On 29 June 2023 NISRA published the rebased population and migration estimates Northern Ireland (2011-2021). This statistical report uses updated population estimates from mid-2011 to mid-2021, based on the results of Census 2021. The death rates in this report are based on the updated population estimates and therefore may not match those previously published.

Section 1: Number of Drug-Related Deaths

There were 154 drug-related deaths registered in Northern Ireland in 2022. This represents a decrease of 59 (27.7 per cent) from the 213 drug-related deaths registered in 2021; however, it should be remembered that registration-based statistics will always be subject to fluctuations in the time which lapses between the date of death and the date the Coroner is able to close the investigation (and thereafter be incorporated in the registration based statistics).

Every death reported to the Coroner is carefully considered and is influenced by several factors specific to each case. These include whether the Coroner orders a post mortem, whether an inquest is required, the complexity of each case, and the number of cases reported to and being investigated by the Coroner at any point in time. Such fluctuations are notably evident within the annual drug-related death figures for 2022. It is therefore important to look at the trend over a longer period of time. Figure 1 below, shows the number of drug-related deaths from 2004 to 2022 along with a three-year rolling average. Looking at the three-year rolling average, the number of drug-related deaths registered between 2020-2022 has decreased by 12 (5.9 percent) from the 207 registered in 2019-2021. Prior to this, the three-year average has been steadily increasing since 2004.

Figure 1: Drug-related deaths by registration year



Section 2: Sex and Age

Figures 2 and 3 show the number of drug-related and drug misuse deaths by sex and age group 2022. 107 (69.5 per cent) of the total drug-related deaths in 2022 were males and 47 (30.5 per cent) were females.

Figure 2: Drug-related deaths by age and sex, 2022

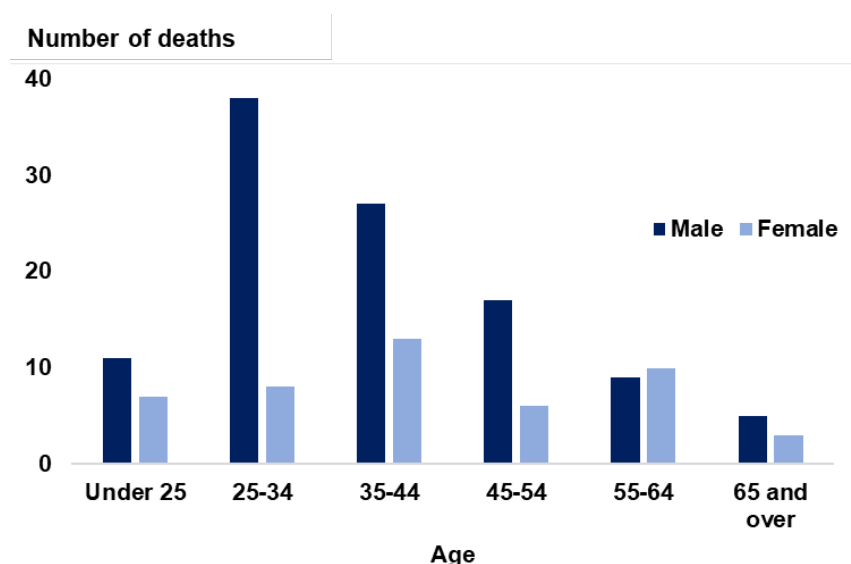
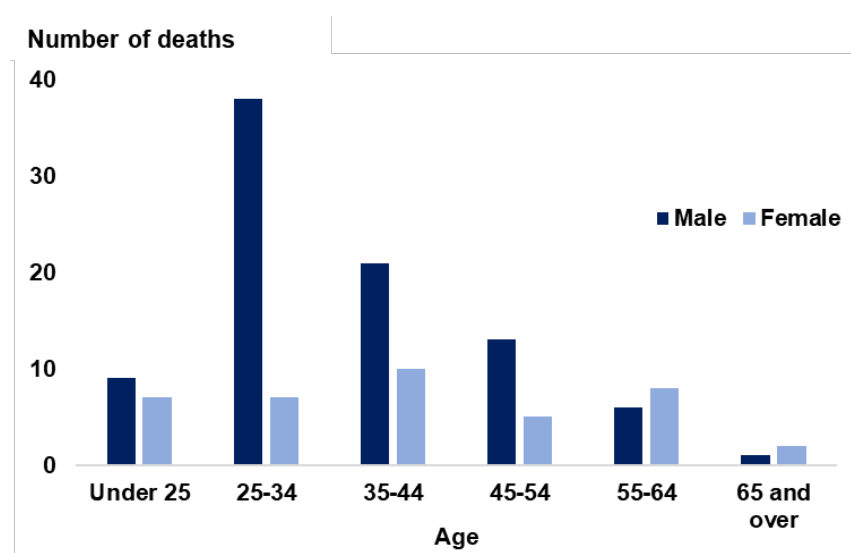


Figure 3: Drug misuse deaths by age and sex, 2022



Looking at the number of deaths by age, the 25-34 and 35-44 age groups together consistently account for the majority of drug-related and drug misuse deaths annually (between 50% and 64%). Figures 2 and 3 illustrate the distribution of drug-related deaths and drug misuse deaths (respectively) across age groups in Northern Ireland for 2022.

In 2022, the 25-34 and 35-44 age groups together accounted for 55.8% of all drug-related deaths, and is the same as the average across the previous 10 years, 2012-2022 (55.8%).

The 25-34 age group had the highest crude drug-related death rate in 2022, at 19.2 per 100,000 population (see tables 2a and 2b in the accompanying [spreadsheet](#)). Similarly, 59.8% of drug misuse deaths involved 25-44 year olds, while the highest crude drug misuse death rate was among 25-34 year olds at 18.7 per 100,000 population.

Figure 4: Crude rate of drug-related deaths (per 100,000 population) by age, 2022

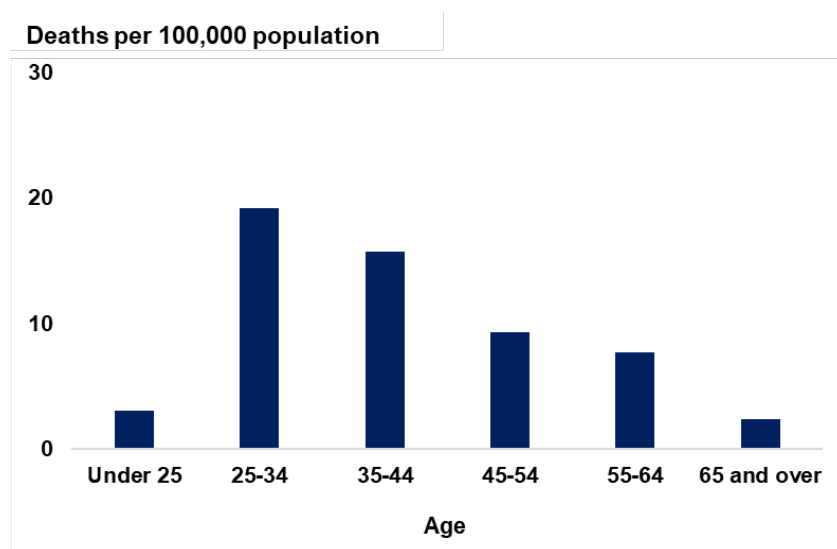
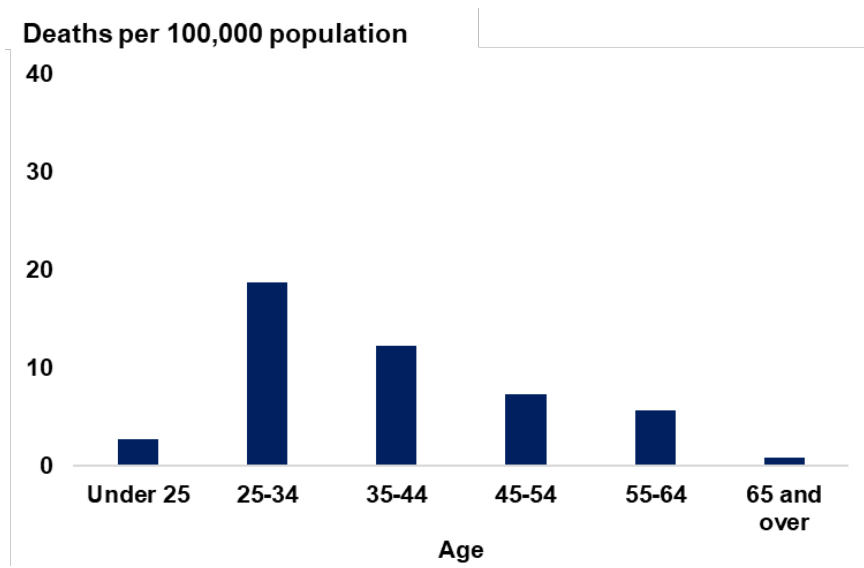


Figure 5: Crude rate of drug misuse deaths (per 100,000 population) by age, 2022



Section 3: Age-standardised Drug-related Death Rate for NI

Trends in drug-related deaths by sex can be compared by removing the potential impact of the age profile of each sex through standardising for age.

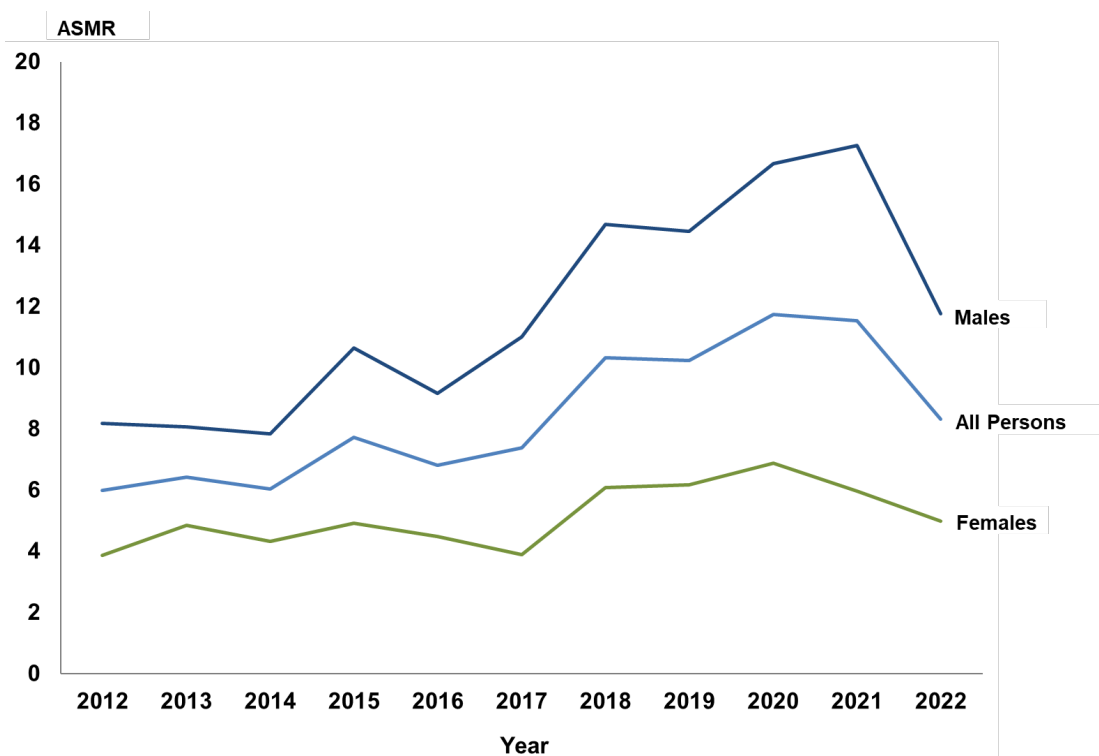
What are Age-Standardised Mortality Rates (ASMRs)?

Age-standardised mortality rates adjust for differences in the age structure of populations and therefore allow valid comparisons to be made between geographical areas, the sexes and over time. In this bulletin, age-standardised mortality rates are presented per 100,000 people and standardised to the 2013 European Standard Population.

The age-standardised drug-related death rate in Northern Ireland shown in Figure 6 was 8.3 deaths per 100,000 in 2022. The corresponding figure for males was 11.8 deaths per 100,000 and 5.0 deaths per 100,000 for females.

For drug misuse deaths, the overall ASMR was 6.9 deaths per 100,000 in 2022. The ASMR due to drug misuse for males was 9.6 deaths per 100,000 compared to 4.1 deaths per 100,000 for females.

Figure 6: Age-Standardised Mortality Rate (ASMR) of drug-related deaths by sex, 2012-2022

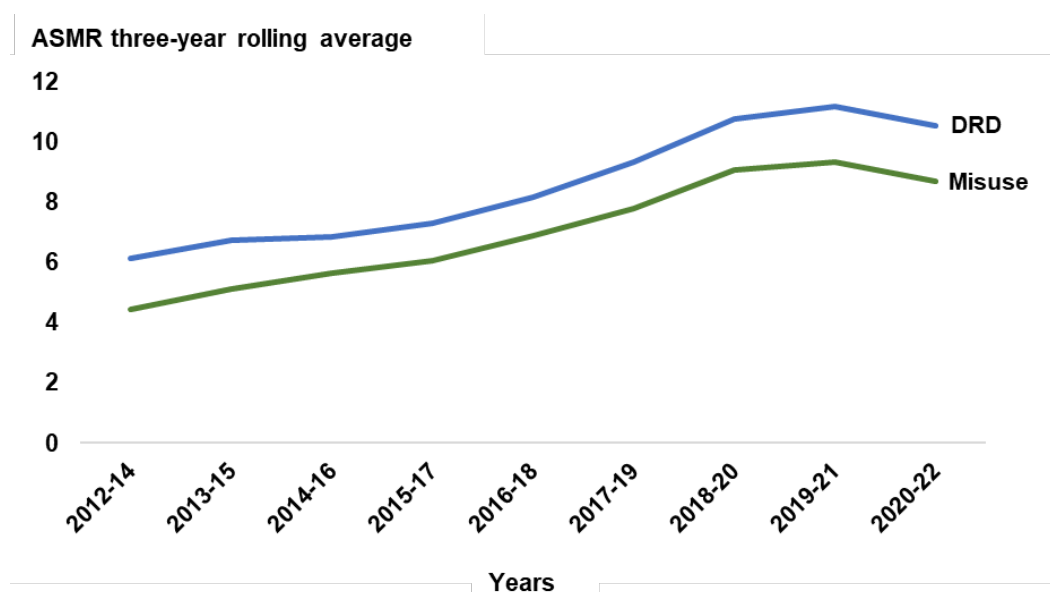


As outlined on page 1, it is important to note that annual fluctuations in registration-based figures build in procedural delays therefore three-year rolling average ASMRs have been provided below to give a better indication of change over time.

Figure 7, shows the age-standardised death rates for drug-related and drug misuse deaths from 2012 to 2022 using a three-year rolling average.

Looking at the three-year rolling average, the average age-standardised drug-related death rate of those registered between 2020 and 2022 was 10.5 deaths per 100,000, a decrease of 5.5% on the 2019-2021 figure of 11.2 deaths per 100,000. The comparative figure for drug misuse averaged 8.3 deaths per 100,000 between 2020 and 2022, a decline of 6.8% on the 2019-2021 figure of 9.3 deaths per 100,000. Prior to this, the three-year average for both drug-related deaths and drug misuse has been steadily increasing since 2012.

Figure 7: Age-Standardised Mortality Rate (ASMR) of drug-related and drug misuse deaths by sex, 2012-2022 (three-year rolling average)



Section 4: Drug-related deaths by Mentions of drug types

Again, it is important to note that annual fluctuations in relatively small numbers of drugs deaths are not necessarily an indication of a 'true' change and it is important to look at trends over a longer period of time. Figure 8 examines these trends using a three-year rolling average number of deaths by selected drugs and drug groups.

Looking at the three-year rolling average, opioids were mentioned most often on the death certificates of drug-related deaths, appearing in 118 cases on average between 2020 and 2022. Heroin/Morphine was the opioid recurrently mentioned most often.

The next most commonly mentioned type of drug was benzodiazepines, appearing on 95 death certificates on average between 2020 and 2022.

Drug-related deaths involving pregabalin have risen consistently since its first appearance in these statistics in 2013. The annual number of deaths involving this controlled substance rose from 1 between 2011 and 2013, to an average of 67 between 2020 and 2022.

Recent years have seen a sharp increase in the number of drug-related deaths where a psychoactive substance¹ was mentioned on the death certificate, from 12 between 2017 and 2019 to an average of 50 between 2020 and 2022. Further analysis shows that this increase was primarily driven by mentions of flubromazolam, flualprazolam and etizolam on death certificates.

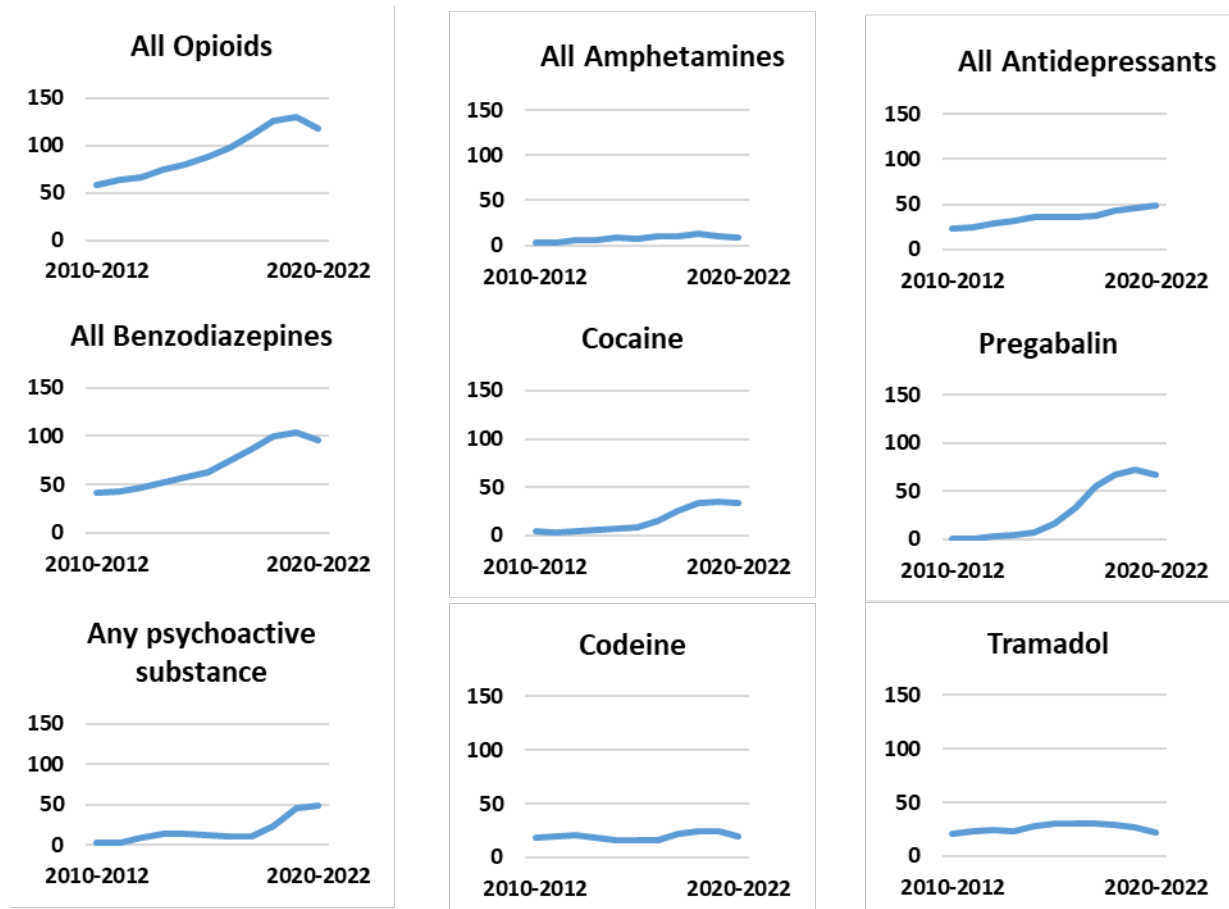
Deaths involving anti-depressants have been on a steady increase over the last decade. The annual average number of drug-related deaths involving anti-depressants increased over the three-year period 2020-2022 (49) to more than double compared with the three-year period 2010-2012 (23).

The number of deaths where cocaine was mentioned saw a sharp increase around 2017. The annual average number of deaths mentioning cocaine has increased over the three-year period 2016-2018 from 15 deaths to 34 deaths in 2020-2022.

Mentions of drugs such as codeine, tramadol and any amphetamines have remained relatively stable over the last decade.

¹ Psychoactive substances include all substances that have been controlled under the Psychoactive Substance Act 2016, including drugs that have subsequently been classed under the Misuse of Drugs Act. Please note, psychoactive drugs in this report also appear in the relevant class of drug, i.e. a drug may be classed as New Psychoactive Substance (NPS) and an opioid, amphetamine, benzodiazepine or anti-depressant.

Figure 8: Number of drug-related deaths where selected substances were mentioned on the death certificate by registration year, 2010-2012 to 2020-2022 (three-year rolling average)



Section 5: Drug-related deaths by underlying cause of death

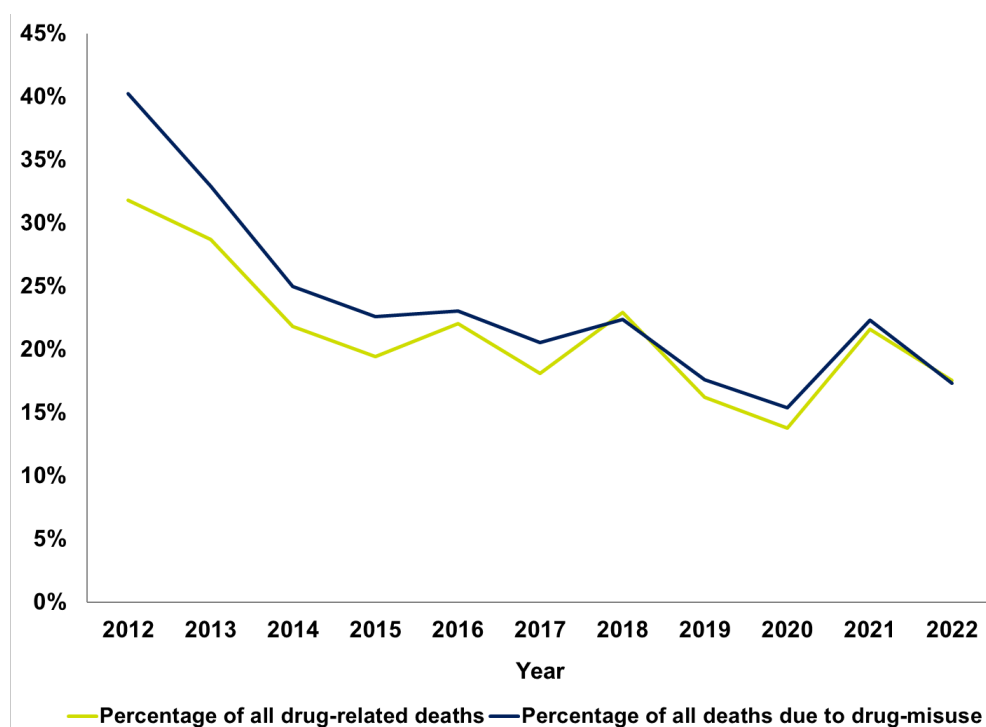
The majority of drug-related deaths are consistently accounted for by accidental poisonings, as decided by the Coroners' Service for NI (CSNI). This cause accounted for 81.8% of drug-related deaths in 2022. The second most common cause of death is intentional self-poisoning which accounted for 16.9% of the 154 drug-related deaths registered in 2022.

Similar can be said for drug misuse deaths where in 2022 87.4% of the 127 drug misuse deaths were accounted for by accidental poisoning and a further 11.0% were accounted for by intentional self-poisoning.

Section 6: Drug-related deaths and mention of alcohol

There were 27 drug-related deaths registered in 2022 where alcohol was also mentioned on the death certificate, equating to 17.6% of drug-related deaths mentioning alcohol. This is a decrease from the 2021 proportion of 21.6%. The general trend for alcohol being mentioned on the death certificate of drug-related deaths has been declining over the last decade. In 2012 the proportion of drug-related deaths involving alcohol was 31.8%, falling to 17.6% in 2022.

Figure 9: Proportion of drug-related deaths and deaths due to drug misuse where alcohol was also mentioned on the death certificate by registration year, 2012-2022

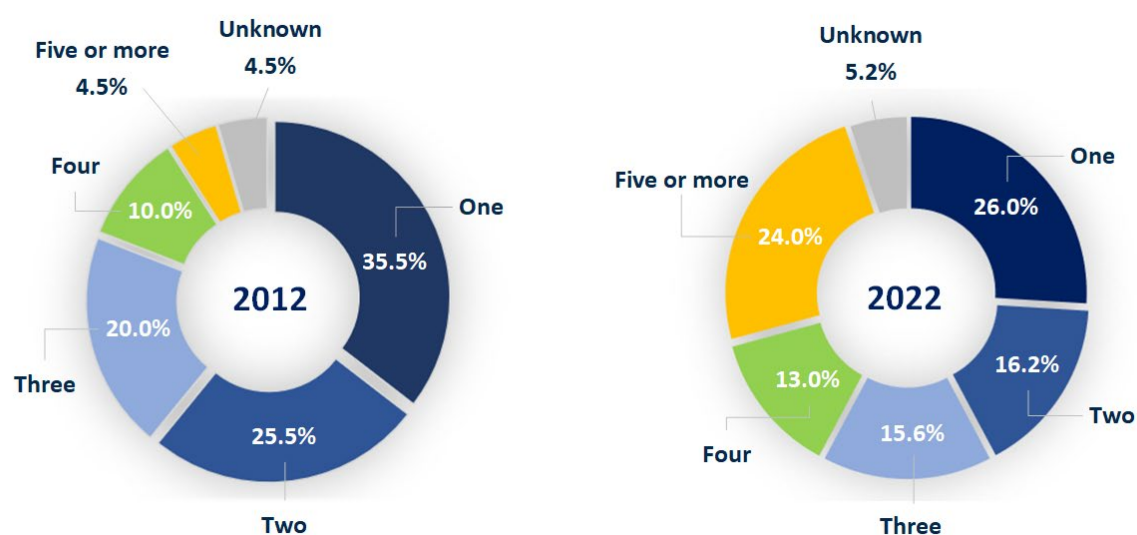


Section 7: Drug-related deaths by number of drugs mentioned

Compared with 2012, drug-related deaths in more recent years were more likely to be caused by a number of drugs, rather than one specific drug. In 2022, over two thirds (68.8%) of drug-related deaths had two or more drugs listed on the death certificate, while in 2012 it was 60.0%.

A quarter (26.0%) of all drug-related deaths registered in 2022 had a single drug mentioned on the death certificate, compared with 35.5% in 2012. Cocaine emerged as the predominant substance mentioned in deaths involving only one drug in 2022, constituting 9.1% of total drug-related deaths and 35.0% of single-drug deaths.

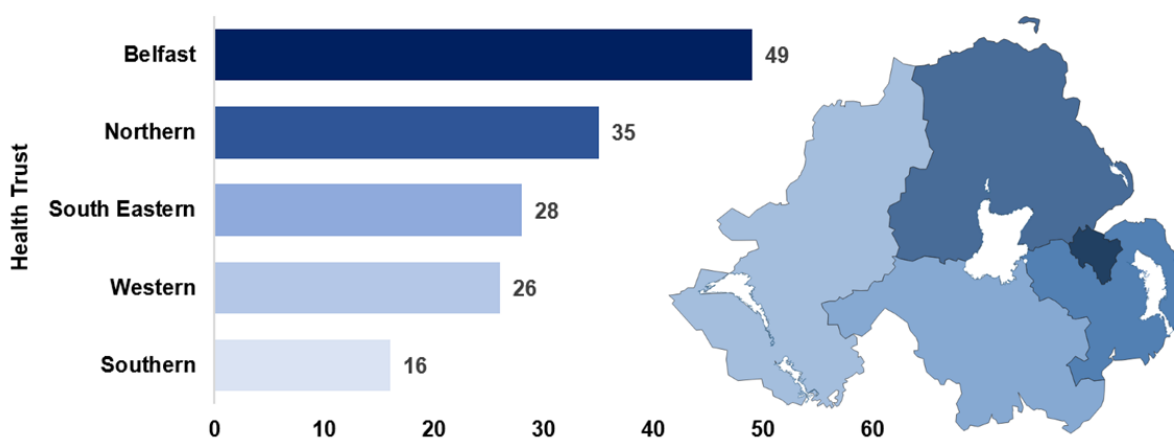
Figure 10: Proportion of drug-related deaths by the number of drugs mentioned on the death certificate by registration year, 2012 and 2022



Section 8: Health and Social Care Trust (HSCT)

Belfast HSCT had the highest number (49) of drug-related deaths in Northern Ireland in 2022 (Figure 11). Table 8a in the accompanying spreadsheet shows the number of deaths for Northern Ireland between 2018 and 2022. Belfast HSCT has consistently had the highest number of drug-related deaths.

Figure 11 Number of Drug-Related Deaths in NI by Health Trust, 2022

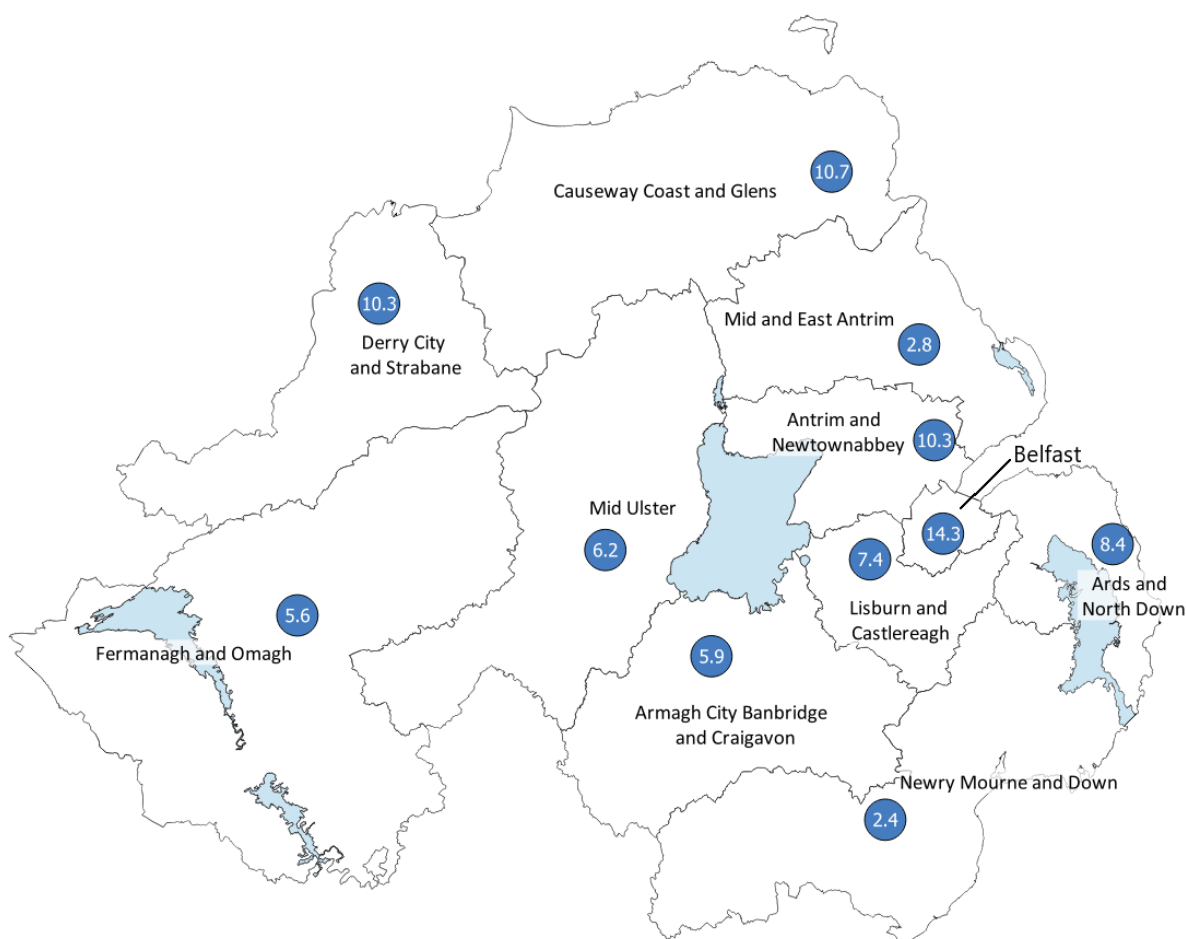


Section 9: Local Government District (LGD)

Belfast LGD had the highest number of drug-related deaths registered in Northern Ireland in 2022, accounting for over a third (33.8%) of the 154 drug-related deaths. Conversely, Newry, Mourne & Down and Mid & East Antrim each had 4 (2.6%) drug-related deaths (see table 9a in accompanying [spreadsheet](#)).

Since the introduction of the 11 councils, Belfast LGD has consistently had the highest number of drug-related deaths. In terms of age-standardised mortality rates per 100,000 population, Belfast LGD also had the highest rate (14.3 in 2022, see Figure 12), while Causeway Coast & Glens LGD had the second highest age-standardised rate in 2022 at 10.7 per 100,000 population.

Figure 12: Map of NI showing age-standardised drug-related death rates by Local Government District, 2022



Section 10: Multiple Deprivation Measure (MDM)

The most deprived 20% of areas (quintile) in Northern Ireland experienced the highest number of drug deaths for the combined years 2018-2022. This quintile accounted for 44.5% of drug-related deaths and 44.4% of drug misuse deaths in the last 5 years. This is in comparison with areas in the least deprived quintile in Northern Ireland, which accounted for 7.6% of drug-related deaths, and 7.2% of drug misuse deaths in the last 5 years.

Figure 13: Percentage of Drug-Related and Drug Misuse Deaths by NI Multiple Deprivation Measure (2017), 2022



Section 11: Occurrence Year Analysis

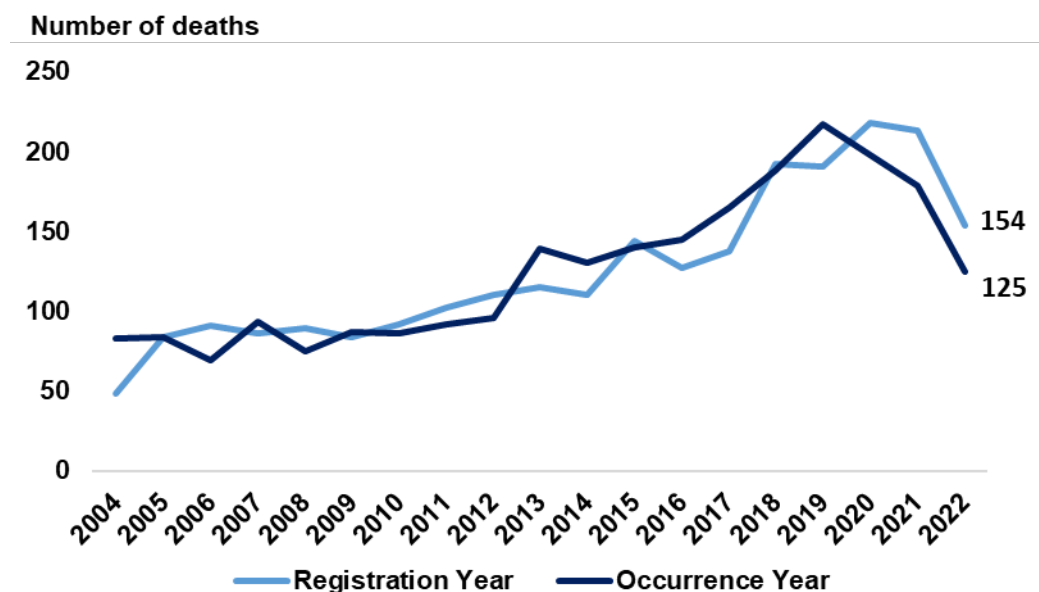
A death which is accidental, unexpected or suspicious, such as a drug-related death, must be referred to the coroner and can only be registered after the coroner has completed their investigation. Registration of a drug-related death can therefore take months or even years.

NISRA is only notified that a death has occurred once it is registered with the GRO and a significant number of drug deaths registered in any year will have occurred in earlier years. For example, of the 154 such deaths registered in 2022, 47 occurred in 2022, 86 in 2021, 11 in 2020, with the remaining 10 occurring in 2019 or earlier. Drug-related death statistics and mortality statistics more generally are published by NISRA as the number of deaths registered within a calendar year, as opposed to the number of deaths that occurred in that period. This method ensures timely and unchanging data over time; however, it also introduces some limitations to the statistics as they can be impacted by delays in procedural systems and do not enable occurrence-based analyses which may be important in informing operational and policy responses.

While annual data based on the date of occurrence are accurate if enough time has lapsed, for more recent years they will be incomplete as more registrations will follow. Most drug deaths (94 per cent) are registered within three years of the death occurring.

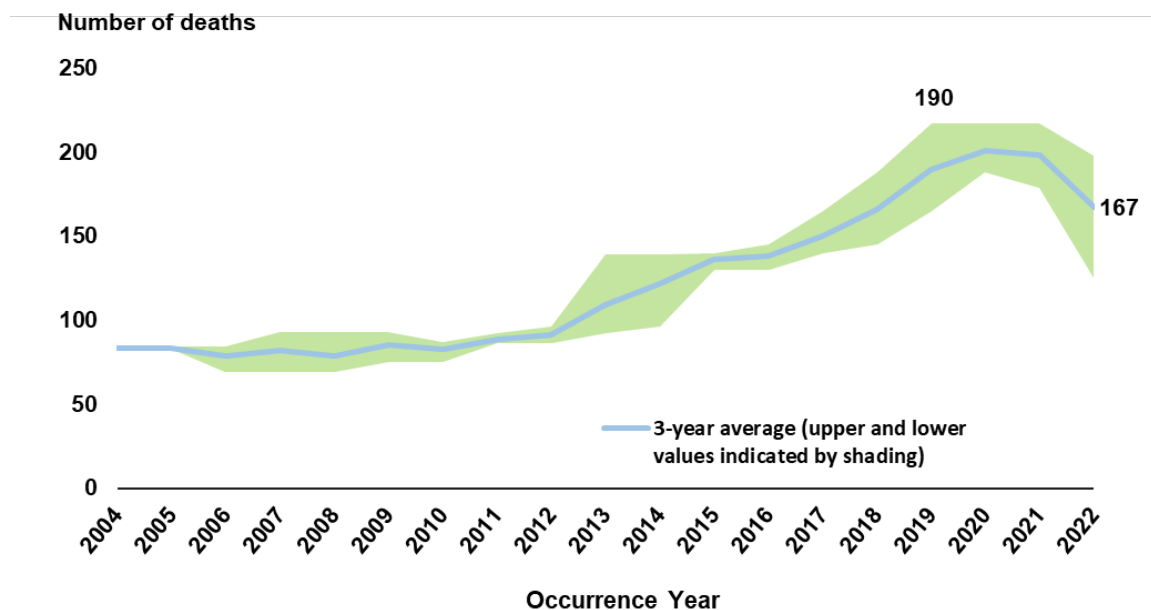
Figure 14 presents a comparison of the number of drug deaths registered in Northern Ireland over time along with the number occurring. Annual fluctuations are expected between these two series, given the median time from death to registration is constantly changing.

Figure 14: Number of drug-related deaths in NI by Registration & Occurrence Year, 2004-2022



Users are therefore cautioned against drawing inferences based on annual changes. However, the graph shows that the number of drug related deaths peaked at 217 in 2019 with figures thereafter likely to be subject to further change as more cases are registered. Information is presented in Figure 15 on occurrence trends based on a 'three-year rolling average' approach.

Figure 15: Number of drug-related deaths (three-year rolling average) in NI by Occurrence Year, 2004-2022



Annex A

Definitions and further information

Drug Deaths

There are two standard definitions associated with drug-related mortality:

Drug-related deaths

A death is drug-related when the underlying cause of death recorded on the death certificate is drug poisoning, drug abuse or drug dependence. These deaths can be identified solely through the [International Classification of Diseases \(ICD\)](#). The current National Statistics definition and the ICD ninth (ICD-09) and ICD tenth (ICD-10) revision codes used to define drug-related deaths are given in Table 1.

Table 1: ICD9 and ICD10 codes relating to Drug-Related Deaths

ICD-10 Underlying Cause Code	ICD-09 Underlying Cause Code	Description
F11–F16, F18–F19	292, 304, 305.2–305.9	Mental and behavioural disorders due to drug use (excluding alcohol and tobacco)
X40–X44	E850–E858	Accidental poisoning by drugs, medicaments and biological substances
X60–X64	E950.0–E950.5	Intentional self-poisoning by drugs, medicaments and biological substances
X85	E962.0	Assault by drugs, medicaments and biological substances
Y10–Y14	E980.0–E980.5	Poisoning by drugs, medicaments and biological substances, undetermined intent

The second definition is a subset of the definition above and relates to deaths due to;

Drug misuse – Deaths classified as drug misuse must be a drug poisoning and meet either one (or both) of the following conditions:

- the underlying cause is drug abuse or drug dependence, defined by ICD-10 as mental and behavioural disorders due to use of: opioids (F11), cannabinoids (F12), sedatives or hypnotics (F13), cocaine (F14), other stimulants, including caffeine (F15), hallucinogens (F16) and multiple drug use and use of other psychoactive substances (F19); or
- any of the substances controlled under the Misuse of Drugs Act 1971 are involved, this includes class A, B and C drugs.

Table 2: ICD10 codes relating to Drug-Misuse

ICD-10 Underlying Cause Code	Controlled drug mentioned on death record	Description
F11-F16*		Opioids, Cannabinoids, Sedatives or Hypnotics, Cocaine, Other stimulants, including caffeine, Hallucinogens
F19*		Multiple drug use and use of other Psychoactive Substances
X40–X44	✓	Accidental poisoning by drugs, medicaments and biological substances
X60–X64	✓	Intentional self-poisoning by drugs, medicaments and biological substances
Y10–Y14	✓	Poisoning by drugs, medicaments and biological substances, undetermined intent
X85	✓	Assault by drugs, medicaments and biological substances
F18	✓	Mental and behavioural disorders due to use of volatile substances

* excluding alcohol, tobacco and volatile substances

This release is based on an update to the definition of drug misuse deaths to make Northern Ireland data comparable with England and Wales data. Please see the [Drug-related deaths information paper](#), which contains more details on the change.

It is important to note:

1. This definition does **not** include every death which involved drugs, for example, transport accidents where the driver was under the influence of drugs are excluded.
2. Only deaths related to poisonings by drugs, medicaments and biological substances are included. Poisonings by other types of chemicals are excluded.

A list of controlled drugs mentioned on death certificates in Northern Ireland is available on the NISRA website at: <https://www.nisra.gov.uk/statistics/cause-death/drug-related-deaths>

Underlying cause: underlying cause of death is the disease or injury that initiated the train of morbid events leading directly to death, or the circumstances of the accident or violence that produced the fatal injury.

MDM: The Measure of Multiple Deprivation in Northern Ireland (MDMNI) for 2017. Northern Ireland is split into 890 spatial areas known as Super Output Areas (SOAs), with an average population of around 2,100 people. Distinct types, or domains, of deprivation are made up from one or more indicators. The 7 domains of deprivation are:

- Income Deprivation Domain
- Employment Deprivation Domain
- Health Deprivation & Disability Domain
- Education, Skills & Training Deprivation Domain
- Access to Services Domain
- Living Environment Domain
- Crime & Disorder Domain

The indicators in each domain were analysed to produce a domain specific deprivation ranking of the 890 SOAs in Northern Ireland, from 1 (most deprived) to 890 (least deprived). The ranks of the 7 domains were weighted and combined, to provide a ranking of multiple deprivation (MDM) for the 890 SOAs.

More information on the 2017 MDMNI is available from the [NISRA website](#).

Quintile: The 890 SOAs have been divided in 5 even groups, or quintiles, according to their MDM ranks, with quintile 1 representing the most deprived areas in Northern Ireland.

Crude Mortality Rate: The crude rate is calculated by dividing the number of deaths by the population and multiplying by 100,000. This is the number of deaths per 100,000 population. This rate has not been adjusted to account for any differences in the age structures of the populations being compared.

Age-standardised mortality rates (ASMRs) Age-standardised mortality rates adjust for differences in the age structure of populations and therefore allow valid comparisons to be made between geographical areas, the sexes and over time. In this bulletin, age-standardised mortality rates are presented per 100,000 people and standardised to the 2013 European Standard Population.

Links to relevant publications

[Drug deaths registered in the England and Wales](#)

[Drug deaths registered in Scotland](#)

[Deaths in Ireland \(including cause\)](#)

List of Tables

Data accompanying this bulletin are available from the NISRA website in Excel format. The [spreadsheet](#) includes the following tables.

Table 1: Number and rate of drug-related deaths and deaths due to drug misuse by gender and registration year, 2012-2022

Table 2a: Number of drug-related deaths by gender, age and registration year, 2012-2022

Table 2b: Crude rate of drug-related deaths and deaths due to drug misuse by age and registration year, 2012-2022

Table 3a: Number of drug-related deaths by gender, age and registration year, 2012-2022

Table 3b: Proportion of drug-related deaths in each age group by gender and registration year, 2012-2022

Table 3c: Number of drug misuse deaths by gender, age and registration year, 2012-2022

Table 3d: Proportion of drug misuse deaths in each age group by gender and registration year, 2012-2022

Table 4a: Number of drug-related deaths where selected substances were mentioned on the death certificate by registration year, 2012-2022

Table 4b: Percentage of drug-related deaths where selected substances were mentioned on the death certificate by registration year, 2012-2022

Table 5a: Number of drug-related deaths by underlying cause of death and registration year, 2012-2022

Table 5b: Number of deaths due to drug misuse by underlying cause of death and registration year, 2012-2022

Table 6: Number of drug-related deaths and deaths due to drug misuse where alcohol was also mentioned on the death certificate by registration year, 2012-2022

Table 7: Number of drug-related deaths by number of drugs mentioned on the death certificate and registration year, 2012-2022

Table 8a: Number of drug-related deaths by Health and Social Care Trust and registration year, 2012-2022

Table 8b: Number of drug misuse deaths by Health and Social Care Trust and registration year, 2012-2022

Table 9a: Number and rate of drug-related deaths by Local Government District and registration year, 2012-2022

Table 9b: Number and rate of drug misuse deaths by Local Government District and registration year, 2012-2022

Table 10a: Number of drug-related deaths by deprivation quintile NIMDM17, 2018-2022

Table 10b: Number of deaths due to drug misuse by deprivation quintile NIMDM17, 2018-2022

Table 11: Number of drug-related deaths by registration year and occurrence year, 2004-2022

Table 12: Number of drug-related deaths occurring by gender, 2004-2022

This is a National Statistics publication.

National Statistics are produced to high professional standards set out in the [Code of Practice for Official Statistics](#). They are produced free from any political interference.

The UK Statistics Authority has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the Code of Practice for Official Statistics.

Designation can be broadly interpreted to mean that the statistics:

- meet identified user needs
- are well explained and readily accessible
- are produced according to sound methods
- are managed impartially and objectively in the public interest

Once statistics have been designated as National Statistics it is a statutory requirement that the Code of Practice shall continue to be observed.

NISRA Consultation

NISRA recently consulted on proposed changes to a range of statistical outputs. The consultation, which ended on 15 October, sought views from users and help NISRA to address the financial constraints imposed by the budget settlement for 2023-24, whilst minimising the impact on users and stakeholders. The full the outcome of the consultation, including users' responses, actions planned and mitigations, can be found at:

<https://www.nisra.gov.uk/publications/outputs-consultation>

Contact Details

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