

SWL ICB

Spring grants 2025 insight report – Sutton

Healthy communities and healthy hearts

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1. Executive summary

The South West London 2025 spring engagement programme in Sutton focused on understanding local residents' access to NHS services, healthy lifestyle behaviours, and views on cardiovascular disease (“healthy hearts”), particularly among Core20 and underserved communities. Thirteen local voluntary and community sector organisations were funded to deliver 28 activities, engaging over 28 ethnic groups across the borough's four Integrated Neighbourhood Teams (INTs).

Key borough wide findings:

- **Access to care:** Residents experienced difficulties booking GP appointments, long waits for GP, specialist, and A&E services. Long waits resulted in some to delay seeking care.
- **Mental health support:** Access to mental health support is limited with there being a need for more mental health support and earlier intervention.
- **Communication and language barriers:** Language and cultural differences impacted access and contributed to isolation; there is a need for more inclusive, culturally relevant health information.
- **Healthy lifestyles:** Cost of living, time pressures, stress, and lack of affordable facilities constrained healthy eating and physical activity.

Key healthy hearts findings:

- **Low awareness of symptoms:** Many were unsure of early signs of heart problems.
- **Limited heart checks:** Confusion over booking, eligibility, and lack of reminders for routine checks and blood pressure monitoring.
- **Lifestyle challenges which impact health:** Communities linked work, finances, time, bereavement, caring responsibilities and isolation to impacting health.
- **Cultural and gender barriers:** Men often avoided medical help due to work pressures, self-employment constraints, or perceptions that symptoms were not serious. Ethnic minority groups stressed the importance of culturally relevant health messaging.
- **Proactive support:** Requests for local, free health checks, symptom-awareness sessions, and community drop-ins for screening.

Next steps

Insights will guide neighbourhood-level, local interventions to improve prevention, access and equity in health services. Findings will be shared with INT and Long Term Conditions Steering Groups to guide person-centred service design and address health inequalities.

2. Introduction

This report details the feedback we received in Sutton borough during our South West London 2025 spring engagement programme. This involved working with community leaders from our Core20 populations and deprived areas, providing a

voice to the most marginalised and underserved communities. We offered grants of up to £550 to Voluntary Community Sector (VCS) organisations to hold activities with these populations to help us understand their access to and experience of local NHS services, as well as their behaviours in maintaining healthy lifestyles.

Our approach for this grant funding focused on gathering qualitative feedback, rather than sharing communication messages - as we did in for our [winter engagement programme 24/25](#). Funding was targeted based on health inequalities.

In each borough we had a particular topic of focus. In Sutton our focus was Cardiovascular Disease (CVD), referenced in this grant as 'healthy hearts'. We aimed to keep the conversations broad - to help us really understand what was important to local people. We chose healthy hearts because preventing CVD is a key priority in Sutton, where an ageing, diverse population faces rising rates of long-term conditions (LTCs) including high blood pressure and diabetes - drivers of CVD and health inequalities. The topic aligns with a priority focus of Sutton INTs which are taking a "start small" approach to neighbourhood service development.

Insight on CVD is currently limited. Volunteer Centre Sutton's 'Preventing Cardiovascular Disease in Central Sutton' report provides perspectives on how Central Sutton residents understand and experience heart health. [Sutton's annual Public Health report \(2023/24\)](#) also provides further understanding into the lifestyle factors that influence long term conditions. These existing insights, combined with our own findings, help to build a local picture of views and experiences of CVD, and the wider determinants of health which contribute to long term conditions.

To support this move to more neighbourhood level work, we have broken the data down by Integrated Neighbourhood Teams (INTs), to enable this work to be used more widely. This involved mapping the reach of the activities to geographies. This doesn't mean that these organisations only work in these areas - however, it helped us to interrogate the data at a different level.

3. Methodology

To support programme delivery and coordination, we worked with Community Action Sutton who hold trusted relationships with local groups and were able to provide knowledge and expertise to successfully deliver the work.

Grants were awarded based on who the organisation could reach and how closely it matched our target audiences, as well as their engagement approach for gathering insight.

Across south west London, we worked with 87 organisations reaching 6,019 local people. In Sutton, we awarded grants to 13 organisations, who conducted 28 activities and events and spoke to people from across 28 ethnicities. Activities ranged from coffee mornings with people who do not speak English as their first language; mental health walk and talks with men and interactive discussions with African and Caribbean older adults.

Successful organisations were invited to attend an online training session to support them to collect insight in inclusive and accessible ways. Each group was asked to explore the following topics, using prompts to encourage conversation: experiences of NHS services; how people stay healthy; knowing when to seek help and understanding other factors that shape people's health and wellbeing. In addition, we also asked questions about our healthy hearts topic in Sutton.

Following their event, organisations were asked to submit a summary of what they heard, together with quotes and photos. Where additional support was needed, Community Action Sutton followed up with 121 conversations to help capture the key feedback from the activities.

4. Healthy communities' insight – challenges and barriers

Findings by neighbourhood

An action from our winter engagement work was to start connecting our VCSE organisations with the emerging neighbourhoods so we have reviewed the healthy communities' insights by neighbourhoods to inform developing neighbourhood health working. VCSE organisations taking part in the spring grants programme have been mapped to the neighbourhood where they are based; we are aware that local people may have attended activities from across the borough.

** Note: Some organisations may also engage with residents from outside the specified INT areas referenced in this report.*

4.1 Carshalton INT

Carshalton INT covers the north of the borough of Sutton and is made up of five wards: St Helier West, St Helier East, Hackbridge, The Wrythe and Carshalton Central. The table below outlines details for funded organisations which cover these areas*.

Organisation and description	Activity	Who they spoke to
Pure Futsal Academy - supports with people from disadvantaged backgrounds, Black, Asian and minority ethnic communities, and those experiencing mental health issues	Held a football session with attendees	Men living in Sutton including those from Black, Asian and minority ethnic communities.
Sutton Men in Sheds (People Arise Now) - supports men facing	Held a spring focused discussion with attendees	Men living in Sutton including those experiencing mental health challenges

mental health challenges

My Mental Wellness UK CIC - supports carers, friends and families of those experiencing mental health challenges and those experiencing homelessness.

Held eight talking arts and crafts therapy sessions

Carers, friends and families of those experiencing mental health challenges, majority being over 45 years.

Key findings for Carshalton INT

Access to mental health support

The need for more mental health services was raised (Sutton Men in Sheds, My Mental Wellness UK CIC). The need for mental health professionals based at GP practices which are “*easier to access*” and “*more specialised GP practitioners*” was raised (My Mental Wellness UK CIC).

There were concerns about the lack of interim support while waiting for specialist care: “*It’s all very well getting an appointment with the GP, but if the GP refers to the mental health team where waiting lists can be up to a year or more, what do they do meanwhile?*”.

Men were noted to feel embarrassed about discussing mental health (Sutton Men in Sheds. It was noted that men do not attend preventative health services in the same way as women due to feeling that “*mental health issues are not picked up*”.

Hospital waiting times

Long waits was a reoccurring issue raised across groups. Pure Futsal Academy described an incident where an ambulance “*didn’t arrive and a volunteer had to take someone to A&E instead*”.

Waiting times caused some people to avoid emergency services altogether, with most said they would “*only go to A&E if the GP advised it was serious, otherwise they felt it would be a waste of time*”.

In contrast, some felt it was “*easier to go to A&E than make a GP appointment*” (My Mental Wellness UK CIC).

Access to GP services

Booking GP appointments was highlighted as a challenge. Those with mental health needs said: “*Getting up at 8am to make an appointment is extremely difficult, it was much better when you could phone for an afternoon appointment at 2pm*”.

Some relied on self-diagnosis: *“I go to Google as my initial information source and then to a GP if it’s serious”* (My Mental Wellness UK CIC). Men were noted to struggle with confidence and used online searches for information, with some reaching their GP *“as a last desperate attempt”* (Sutton Men in Sheds).

There was positive feedback about phone appointments, while noted as being less personal, phone appointments made it *“easier to open up”*.

Fear of judgement and stigma prevented some from seeking care: *“Those with mental health problems do not often go to the GP as they fear being judged, of stigma and feel too proud to go to see someone”* (My Mental Wellness UK CIC).

Cultural norms played a role. Some who are also members of Sutton African & Caribbean Cultural Organisation, said *“they would talk to their own friends and family before consulting with a GP”*.

Barriers to healthy lifestyles

Employment was highlighted as a barrier: *“Work commitments, particularly for the self-employed, make it harder to attend health appointments”*. This was particularly an issue for self-employed individuals who *“fear income loss”*, making them less likely to seek treatment or attend appointments (Sutton Men in Sheds). Societal expectations, work-related stress or unemployment, financial difficulties, inadequate housing, loneliness and relationship breakdowns were found to negatively impact men’s mental health (Sutton Men in Sheds).

A lack of local and accessible spaces/activities was noted for men with mental health issues (Sutton Men in Sheds).

4.2 Central Sutton INT

Central Sutton INT covers the centre of the borough of Sutton and is made up of five wards: Belmont, Sutton Central, Sutton North, Sutton South, Sutton West and East Cheam. The table below outlines details for funded organisations which cover these areas*.

Organisation and description	Activity	Who they spoke to
SUTTONfx – charity which supports Sutton communities	Held conversations during three activities including a coffee morning/chatty cafe, community gardening and litter picking.	Those at risk of isolation including those who do not speak English as their first language, young adults with SEN and refugees and migrants.
Malayalee Association Sutton Surrey (MASS) - supports Malayalee families from Kerala in India and South Asian communities	A health event and group talk.	Malayalee families.

Sutton Women's Centre – supports women experiencing domestic abuse

Held three health events.

Ahmadiyya Women living in Sutton.

Key findings for Central Sutton INT

Access to NHS care

Difficulties with GP appointments: SUTTONfx highlighted that older residents struggled with *“long phone queues, appointment cancellations, and difficulties navigating NHS systems”*.

“Self-doubt, fear of overreacting and not wanting to burden the NHS” prevented some from accessing care (SUTTONfx): *“We want to feel more confident in raising concerns with our doctor”*.

Many said they were *“unsure about how to navigate the appointment process and how to secure an appointment”* (MASS).

Frustrations with service access and booking systems. Clearer triage roles for receptionists and more face-to-face appointments were highlighted (MASS).

Limited awareness of support pathways such as Pharmacy First and social prescribing (Sutton Women's Centre).

Access to NHS 111 was highlighted, with some being hesitant to use the service due to perceived long wait times on the phone.

Early intervention and preventative support

The need for more proactive and preventative support, particularly in mental health was highlighted:

“Prevention is better than cure... there's got to be more proactive support, especially in mental health, before people hit crisis” (SUTTONfx).

Long waiting times

Delays in follow-ups, diagnostics, and specialist referrals were reported. MASS attendees described difficulties accessing services like physiotherapy, CAMHS, and speech therapy, specialist tests (ultrasounds and X-Rays) and highlighted long waiting times for A&E.

“Even though I knew I should go, I didn't - because I couldn't face waiting in A&E” (SUTTONfx).

Slow referrals were also referenced, noting that some *“sometimes didn't happen at all”* (MASS).

Language barriers

Language was reported as barrier to accessing health and care services and contributes to isolation for migrant communities. Migrant women raised that difficulty speaking English contributed to isolation. One person shared, *“sometimes I feel lonely, especially when I cannot speak English well. Coming to this group helps me feel better and not alone”*.

Another added, *“this group helps my mental health. I made friends, I learn English, and I feel more confident”*.

Reluctance to seek help

Some hesitated to seek help when experiencing symptoms: *“we soldier on, you don’t want to trouble the doctor - especially older generations”*.

Some said they only seek care when daily tasks became difficult, or symptoms are minor. *“It’s how you feel inside, you know if something’s not right”* although that didn’t always prompt action as some felt that they didn’t want to burden the NHS (SUTTONfx).

Confidence in using health services

Confidence in navigating the system varied. Some were unclear about how and when to seek help, with a MASS attendee saying, *“not comfortable calling 111 due to long waiting times in A&E”*.

Some gained confidence after attending the activity: *“I now understand when to call 999, when to go to the pharmacy, or when to see the GP. This helps me feel more confident to ask for help”* (Sutton Women’s Centre).

Barriers to maintaining a healthy lifestyle

Financial constraints and the cost of living were seen as a barrier to maintaining a healthy lifestyle, with suggestions for *“more affordable activities such as gym and swimming sessions”* (MASS).

More mental health support was also noted, particularly during the winter months when people feel isolated or low:

“Mental health support will be really useful especially during winter time.”

Bereavement, loneliness, stressful work or travel and caring responsibilities was also highlighted (SUTTONfx).

4.3 Wallington INT

Wallington INT covers the east of the borough of Sutton and is made up of six wards: Carshalton Central, Carshalton South and Clockhouse, Wallington North, Wallington South, Beddington and South Beddington & Roundshaw. The table below outlines details for funded organisations which cover these areas*.

Organisation and description	Activity	Who they spoke to
Creative Heritage promotes cultural art and celebrations in the forms of music, dance, drama and creative workshops	Held a health quiz and talk with attendees.	Bulgarian, Ukrainian, Black African, and Indian communities in Sutton
Wallington Community Wellbeing Charity promotes wellbeing, mental health and fitness with older residents	Organised a health and wellbeing event.	Older people
Home Start Sutton supports vulnerable families with children under 5 years	Held a focus group and survey.	Parents with children under 5 years.
Wallington SDA Hub works with families and young people - holding food banks, youth and family sessions.	Organised information sessions with attendees.	Families living in Wallington.
African & Caribbean Heritage Association Sutton (ACHA) brings together senior members of African and Caribbean communities.	Held a health talk with attendees.	African and Caribbean older adults living in Sutton.

Key findings for Wallington INT

GP access and appointments

Frustration with delays in accessing non-emergency services, including long waits for appointments (Home-Start Sutton).

Wallington Community Wellbeing Charity noted that many people faced “*long waiting times for GPs (ranging from four to six weeks)*”, with older adults expressing dissatisfaction with telephone appointments being “*not enough - I can’t explain what’s wrong properly.*”

Difficulties in accessing GP appointments meant some felt their *“trust in the healthcare system was undermined”* as they waited until it’s *“really serious”* and are no longer able to manage using remedies at home (Creative Heritage).

This was also reflected at Home-Start Sutton, where some said they would only attend a GP if the issue was *“detrimental”* to their health.

Staff shortages, *“overcrowding”* and *“not enough medical staff”* contributed to difficulties accessing services, leaving some turning to Google to look-up signs and symptoms (Creative Heritage, Wallington SDA Hub).

Reception staff were mentioned with some describing receptionists as helpful and friendly, while others felt they were a barrier, being *“rude”* and a need for them to be friendly (Wallington Community Wellbeing Charity, Wallington SDA Hub).

Parents felt not taken seriously: Parents felt GPs *“don’t always take you seriously”*, describing experiences of being *“palmed off”* if the symptoms are minor (Home-Start Sutton).

Some received good care from the NHS but noticed a decline in recent years with some negative experiences at GP practices.

A&E access

Mixed feedback about emergency services: People at Creative Heritage felt emergency services are *“really good and the medical staff at A&E do their job really well, but they are becoming very overwhelmed due to lack of quality non-emergency health services or not good enough access to them”*.

In contrast, Home-Start Sutton highlighted A&E waiting times as *“ridiculous”*.

Challenges navigating the healthcare system

Confusion and lack of information around healthcare services. Attendees at Creative Heritage raised *“People don’t know what’s available. Services keep changing and there’s no clear place to find the information.”*

Difficulties accessing support for children

Challenges accessing children services: Parents described challenges accessing developmental and mental health services for children. Home-Start Sutton reported issues with referrals, noting these were often delayed, with families being told to self-refer or manage on their own and waiting lists being too long. Long waiting lists for children’s services was also reported by Wallington SDA Hub.

One parent shared *“I’m finding the service is failing my son currently as we are waiting too long to see specific services.”*

Self-referral forms were seen as *“confusing and inaccessible”*.

GPs were also flagged as *“not specifically being knowledgeable for children’s needs”*.

Wallington SDA Hub highlighted children's mental health services as "poor" with there being a lack of support for children.

Cultural understanding and gender differences

Cultural understanding was noted as important. The need for culturally relevant information and care was highlighted. People expressed that care was more effective when providers understood their background.

Attendees of African & Caribbean Heritage Association Sutton's event highlighted, *"It makes a difference when someone understands your background - especially with things like cancer or diabetes."*

Men reported to be reluctant to seek care: There is reluctance in men *"taking action"* when needed (African & Caribbean Heritage Association Sutton)

Language barriers were raised at Wallington SDA Hub, and Creative Heritage noted these had been reported previously in their community.

Early intervention and preventative support including mental health

Preventative healthcare had become less accessible. Many older residents were unaware they were no longer receiving routine health screenings. One person said, *"I didn't know I wasn't getting checks anymore - no one tells you when it stops."* (Wallington Community Wellbeing Charity).

More routine check-ups: Creative Heritage raised for more regular routine check-ups with a GP, also available to younger people:

"People do not want to wait until they notice a problem and have to go to the doctor to solve it. They would rather have access to routine check-ups as a preventative care and they believe these are currently not made available to them. Younger people need preventative care and testing too."

Wallington SDA Hub raised similar concerns around mental health, with people stating, *"It shouldn't get to breaking point before something happens."*

Support for dementia

Limited support for those with dementia: African & Caribbean Heritage Association Sutton raised concerns about the limited support for those with dementia, particularly those living alone: *"more support for those with dementia, especially those living alone"*.

They suggested the need for an advocacy service and a mechanism for raising concerns when vulnerable people may be at risk.

4.4 Cheam and South Sutton INT

Cheam and South Sutton INT covers the west of the borough of Sutton and is made up of six wards: Worcester Park North, Stonecot, North Cheam, Worcester Park

South, Cheam and Belmont. The table below outlines details for funded organisations which cover these areas*.

Organisation and description	Activity	Who they spoke to
Sutton United Foundation is a community programme reaching a range of communities living in Sutton (e.g. older people, those living with disabilities, mental health).	Had conversations and ran a survey.	People living with disabilities and Black, Asian and Minority Ethnic communities.
Sutton Mental Health Foundation offers support, activities and events for people aged over 18 with mental health issues in Sutton.	Held a health session with attendees.	People aged over 18 years with mental health issues.

Key findings for Cheam and South Sutton INT

Access to GP practices

People reported only seeking GP support for major issues: *“I am aware that my GP is very busy and I limit my request for support only to major issues”*.

Frustration with waiting times for appointments, phone calls and repeated letters – which discouraged some from seeking care (Sutton United Foundation). It was highlighted that the patient’s relationship with their GP can influence how quickly someone would seek support.

Accessing mental health support

Access to mental health support was reported as limited. Sutton Mental Health Foundation highlighted that people were aware of the need for early intervention but felt it was not always available: *“mental health cannot be overlooked as a part of physical health”*.

The importance of earlier education about mental health was also emphasised.

Long waits for hospital services and barriers

Hospital waiting lists were reported as too long and A&E experiences were described as *“almost universally negative”* (Sutton United Foundation).

One commented, *“A&E is overwhelmed, and people attend for things that GP or nurses could deal with. A better triage system is needed”*

A&E waiting times cause some to delay seeking care. Some delay seeking care for as long as possible because they “*can’t face A&E waiting times*” - hoping to recover without medical intervention or waiting until the issue is severe (Sutton United Foundation).

Others mentioned that repeated letters for the same hospital appointment and long delays discouraged them. Hospital parking was also mentioned as “*far too high and punitive*”.

Language and communication barriers

Language barriers make it challenging to register with a GP. Language barriers were highlighted as “*challenging when trying to register with GPs*” or access specialist services (Sutton Mental Health Foundation).

More culturally appropriate communication. People wanted clearer, culturally relevant and inclusive communication and information to cater for all communities.

Brazilian women felt isolated and unaware of what support is available:

“There is help out there, but no one knows where to find it”. “There’s a lack of accessible information and disappointment that more hasn’t been done to foster community integration” (Sutton Mental Health Foundation).

Cultural understanding and gender

Shame and stigma around seeking help. Sutton Mental Health Foundation reported “*shame and stigma*” around seeking help, especially in Black, Asian and Minority Ethnic and religious communities.

Women from the Brazilian community expressed frustration that broad terms like “*BAME*” ignored important differences and raised outreach should go beyond this to listen to all communities (Sutton Mental Health Foundation).

Men denied delaying seeking medical advice to fit the “*macho stereotype*”, whereas women in the groups were known to approach the NHS more frequently (Sutton United Foundation).

Challenges for healthy lifestyles

Cost of living, caring responsibilities, and stress were reported barriers to healthy living.

Sutton United Foundation highlighted “*advice about health often assumes a level of privilege, time, and resources not everyone has*”.

Financial pressures were known to make it difficult to for people to eat healthily or access fitness facilities.

Green spaces like Manor Park and Beddington Park were seen as supportive for mental health, but some felt “*unsafe using them, especially in the evenings*”.

Sutton Mental Health Foundation reported that LGBTQ+ individuals felt “*stress from discrimination*” and lack of safe spaces were highlighted as contributors to poor health.

5. Borough wide themes

This section captures the key themes raised across Sutton engagement activities. It reflects shared experiences from multiple organisations and highlights where views and experiences differed.

5.1 Difficulty accessing NHS care

Across Sutton, negative experiences accessing NHS services were reported. Multiple groups, including My Mental Wellness UK CIC, MASS, and SUTTONfx, described challenges with GP appointment systems - particularly the requirement to call at 8am and long phone queues.

Mental health support was highlighted as difficult to access, with groups suggesting for more mental health support including professionals at GP surgeries (My Mental Wellness UK CIC). Feelings of embarrassment and stigma as acted as a barrier to accessing support.

Although only referenced in one group, trust in care was highlighted to improve when services were culturally sensitive or when the GP shared a similar background (African & Caribbean Heritage Association Sutton).

Reception staff were also mentioned, with mixed experiences across groups. While some groups had good experiences and described receptionists as helpful and friendly, others described them as rude and highlighted the need for them to be friendly (Wallington SDA Hub, Wallington Community Wellbeing Charity).

Some people found phone appointments helpful, while others felt they were impersonal. Some noted that these calls don't feel like the same kind of conversation, particularly for older people and reinforced the need for more face-to-face appointments (Wallington Community Wellbeing Charity, SUTTONfx, My Mental Wellness UK CIC).

Similarly, views on emergency services and phone appointments varied. Some found A&E more accessible than GP services, while others avoided it due to long waits.

5.2 Long waits for appointments

Long waiting times were a common issue across all Sutton INTs.

Delays in accessing GP and specialist services led many to delay seeking help or only act during crises (Home-Start Sutton, Creative Heritage, MASS).

Long waits for specialist services such as paediatrics, mental health, and diagnostics was mentioned (Wallington Community Wellbeing Charity, Home-Start Sutton). This was particularly highlighted as an issue for children's services (Home-Start Sutton, Wallington SDA Hub).

5.3 Language and communication barriers

Language and communication barriers were apparent for migrant and ethnic minority communities living in Sutton.

Sutton Mental Health Foundation and Sutton Women's Centre raised language as a barrier, with some feeling isolated and others experiencing difficulties registering with a GP.

There was concern about the lack of culturally appropriate, inclusive and accessible health information (Wallington Community Wellbeing Charity, Sutton Women's Centre).

5.4 Challenges for healthy lifestyles

Barriers to healthy living were raised across several groups.

Cost, time, stress, and mental health were frequently mentioned as obstacles (Home-Start Sutton, MASS, Creative Heritage).

Gym memberships, healthy food, and travel were often unaffordable, and stress, lack of childcare, and unsafe areas made it harder to stay active (MASS, Sutton Mental Health Foundation).

6. Healthy hearts - awareness, attitudes and behaviour

This section captures the key findings on healthy hearts raised across Sutton engagement activities. It reflects shared experiences and views from multiple organisations.

6.1 Low awareness and uncertainty about heart disease symptoms

Many were unsure of early or less obvious signs of heart issues.

“All said they were unsure what the signs of a heart problem might be. A pain in the chest and pain down one arm around the same time could indicate a heart problem, although they couldn't decide which arm” (My Mental Wellness UK CIC).

“Symptoms associated with heart conditions included chest pain, breathlessness, palpitations, dizziness, fatigue, and referred pain (like backache)” (SUTTONfx).

Sutton Men in Sheds noted that men were unaware of symptoms and when noticing symptoms often believe they are stress related so will not seek consultation.

“Not aware of symptoms and not comfortable calling 111 due to long waiting times in A&E” (SUTTONfx)

Groups reported relying on Google and NHS resources to self-assess (My Mental Wellness UK CIC, SUTTONfx). Some people said they only seek care when daily tasks became difficult, or symptoms are minor.

6.2 Heart health checks

Most people reported not receiving regular heart checks or reminders.

Some didn't know how to book and others assumed they weren't eligible (SUTTONfx).

“I haven't had my heart checked for a year - I know I need to. You can't just go and ask for a heart check - it's up to the doctor to decide” (SUTTONfx).

“People agree it is a good idea to go for a heart check-up but not something some knew how to book” (Pure Futsal Academy).

“There was a lack of awareness of how to book a heart scan” (Sutton United Foundation).

People highlighted the importance of regular blood pressure checks and reminders for these, recognising the role in early detection and prevention of heart disease (Wallington Community Wellbeing Charity).

6.3 Stress and emotional health linked to heart risks

Groups linked high stress, anxiety, and emotional strain to poor heart health.

Life pressures like work, finances, bereavement, caring responsibilities and mental wellbeing were seen as contributors to poor health (MASS, Sutton Mental Health Foundation, SUTTONfx).

“Diet and exercise matter, but stress is a big one too - it’s more complex than just food and fitness” (SUTTONfx).

“Family can be both a support and a source of stress, especially when someone is unwell” (SUTTONfx).

“Mental health is often overlooked as a part of physical health. Stress, money worries, housing issues affect everyday wellbeing” (Sutton Mental Health Foundation).

MASS and Sutton Mental Health Foundation also highlighted the emotional toll of financial insecurity and isolation.

6.4 Cultural and gender-specific challenges

Men were more likely to ignore symptoms with factors such as work hindering them from seeking care.

Sutton Men in Sheds reported:

“When the men notice any symptoms they believe that they are stress related and not anything physical so will not seek a consultation. They are unlikely to go the NHS for initial symptoms and they would not access the NHS Direct website either”.

“They felt that they did not have the time to go to the GP as they didn’t want to take time off work and if self-employed there were financial constraints to consider. Men who are self-employed don’t get sick leave pay and felt that if they needed any treatment they could not afford to take the time off - so it wasn’t worth going to get checked out.”

The African & Caribbean Heritage Association highlighted the need for culturally relevant health messaging and representation, helping to make services more accessible for ethnic communities.

6.5 Lifestyle change limited by cost and access

Barriers like cost-of-living pressures, lack of affordable gyms or activities, and time constraints made it difficult to follow healthy routines - as people recognised that maintaining a healthy lifestyle can reduce the risk of health problems.

“Healthy eating is a challenge” (Sutton United Foundation).

“More free exercise classes for people who can’t afford a gym membership and discounts on gym and swimming” (Sutton United Foundation).

MASS and Home-Start Sutton also noted that stress, childcare, and unsafe areas were a barrier to physical activity.

6.6 More accessible and proactive support

Prevention for heart health was recognised.

Some groups made suggestions for the prevention and improvement of heart health including more local health checks, short courses on recognising heart symptoms, and drop-in checks for blood pressure and cholesterol. People felt these should be free, clearly promoted, and available in community settings (Creative Heritage, Sutton United Foundation, MASS)

Creative Heritage also highlighted the need for proactive screening: *“People do not want to wait until they notice a problem and have to go to the doctor to solve it”*.

“The need for regular routine check-ups with the GP is most needed.”

7. Next steps

We're working closely with the Health and Care Integration Programme Lead to ensure that the feedback helps to shape a more effective, person-centred approach to preventing CVD in Sutton. By sharing resident insights and experiences, Sutton INTs can better understand the barriers residents face and co-design solutions that meet local needs. This feedback will inform the development of targeted interventions, stronger community partnerships, and more proactive outreach. Findings will be shared at INT, LTC Steering Group and INT Leadership Group meetings to further discuss the difference they can make.

8. Appendix

Roughly mapping VCSE organisations



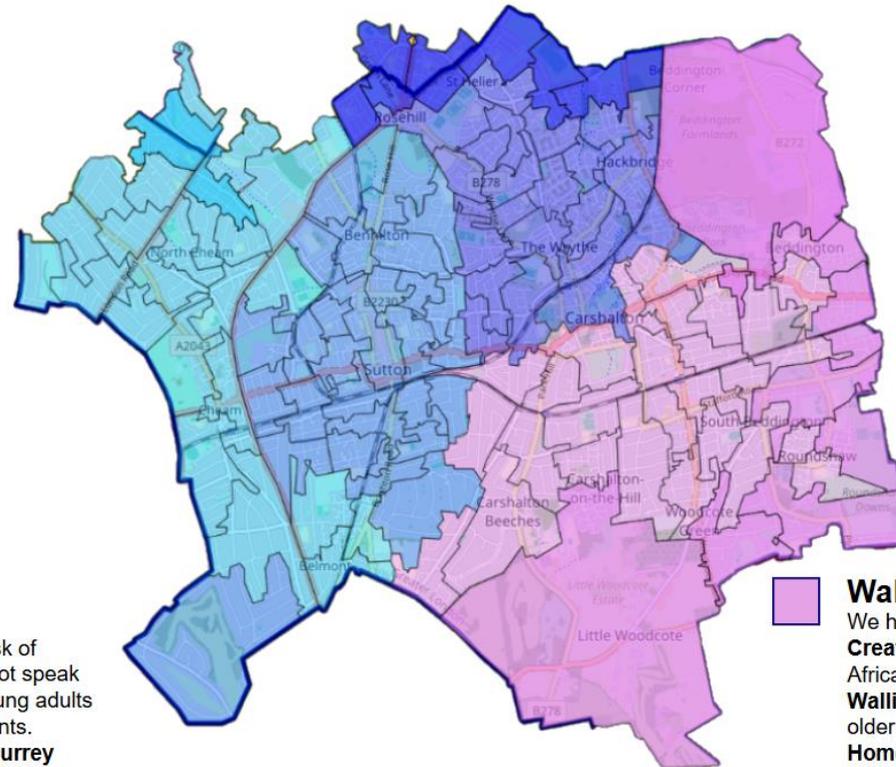
South West London

Cheam and South Sutton INT

We heard from:
Sutton United Foundation reaches older people, those living in areas of deprivation, families on low-income, people living with disabilities or long-term health conditions (including mental health), families from the Hong Kong community and young people.
Sutton Mental Health Foundation provides mental health support to local residents.

Central Sutton INT

We heard from:
SUTTONfx works with those at risk of isolation including those who do not speak English as their first language, young adults with SEN and refugees and migrants.
Malayalee Association Sutton Surrey (MASS) supports Malayalee families from Kerala in India.
Sutton Women's Centre works with Ahmadiyya women living in Sutton.



Carshalton INT

We heard from:
Pure Futsal Academy supports with people from disadvantaged backgrounds, Black, Asian and minority ethnic communities, and those experiencing mental health issues.
Sutton Men in Sheds supports men facing mental health challenges
My Mental Wellness CIC supports carers, friends and families of those experiencing mental health challenges and those experiencing homelessness.

Wallington INT

We heard from:
Creative Heritage works with Bulgarian, Ukrainian, Black African, and Indian communities living in Sutton.
Wallington Community Wellbeing Charity works with older residents living in Wallington.
Home Start Sutton supports vulnerable families with children under 5 years.
Wallington SDA Hub works with families and young people.
African & Caribbean Heritage Association Sutton (ACHA) works with African and Caribbean older adults living in Sutton.