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1. Introduction

Definition of main concepts and what this is about the view of patients seeking medical attention during the COVID- 19 outbreak in UK.

1.1 Aim

To investigate the health care seeking attention during the covid-19 pandemic in the UK

1.2 objectives

To establish the factors that influence the healthcare-seeking attention during the covid-19 pandemic in the UK

2. Background

According to NHS Digital (2021), the COVID-19 pandemic had its impact felt the most in the year 2019-2021. The government announced the first lockdown on 16th of March 2020. The second lockdown was implemented on 5th November 2020 following the increased spread of the disease. Prior to the first lockdown, about 2,500,000 appointment attendance. Following the first lockdown, the weekly appointments were reduced by more than 40%, and weekly attendance to appointments reduced by 50% compared to the average before the pandemic. BMA (2021) revealed that the outbreak of COVID-19 had a huge impact on core NHS services. Millions of patients with health problems including those with life-threatening conditions were affected due to reduced care seeking behaviour, as well as postponed or cancelled treatment appointments. It is estimated that between 1.32 million and 15 million new elective admissions were reported compared to usual expectations, and between 2.47 million and 2.60 fewer first time outpatient attendance. Furthermore, it was estimated that between 20,800 and 25,900 fewer patients stated cancer treatment than projected. BMA (2020) state the situation in this case can be associated with range of factors but healthcare avoidance is the dominance aspect. NHS UK is therefore faced with backlog of many cases to be attended and return the access and quality of care to the pre-COVID-19 status.

3.The Rationale of the research

Howarth et al. (2021) reveal that the first wave of the COVID-19 pandemic has a significant impact on the utilization of healthcare services. The finding revealed that the decrease in healthcare-seeking patients was about 70% immediately after the announcement of the pandemic.

and the first lockdown. The health-seeking behaviour however improved in two months but did not reach the rates of the previous year. The reduced rate of health-seeking behaviour is a negative aspect due to the likely impact on the quality of life of the people. It is therefore important to seek knowledge on factors that influenced the perception of the patients to seek healthcare services. Moynihan et al. (2021) held that the knowledge of the effect of COVID-19 on healthcare-seeking behaviour is an instrument in assisting in the study would also assist in enhancing the knowledge about the hidden impact of COVID-10 on access and quality of care. It is therefore a fundamental tool for the development of strategies to face similar situations in case it re- occurs in the future.

4. methodology and Methods Research Design

Research can be primary or secondary designed. A primary study is characterised by the collection of data from the informatics, or sources directed and for the sole purpose of the given study. According to Edmonds & Kennedy (2016), the methods used in primary design include interviews, observations, focus group discussions and experiments. Second research design involves the combination of the gathering of data and information from sources already compiled by others on the same or related concepts to the research topic. The sources of data for the secondary study include textbooks, news bulleting, and journal articles among others. For the current research, secondary design is preferred due to its easiness of use, time saving and low cost of undertaking the study. Furthermore, a study can be exploratory, descriptive, or experimental designed. Exploratory study is focus on compiling insights about the study problem been handled. Experimental study is a scientific method where the research is undertaken in a controlled environment to investigating the relationship between variables. Descriptive study is largely applied when one intends to describe a given phenomenon such as a process, an object, or a setting. The current study is largely exploratory in that it deals with the perceptions about healthcare-seeking behaviour as influenced by COVID-19. In the case, the systematic literature review Is used as the method for exploring the concepts related to the topic.

5. Data collection / Search strategy

The search strategy for sources used in a secondary study is an important undertaking that should be effective and highly reliable. The data sources for the current study involved the search for sources from online databases. The two databases used include Google scholar and PudMed. The databases are preferred because they are highly reliable and offer a wide range of peer-reviewed journals to review and select as sources. The search phrases used in the attempt to access the sources include: i) healthcare-seeking behaviour during the Covid-19 pandemic; ii) factors influencing the healthcare-seeking behaviour during the Covid-19 pandemic, iii) healthcare-seeking behaviour during Covid-19 pandemic in the UK. The phrases in this case are preferred because they capture the components of the research topic and therefore can give access to highly relevant sources.

6. The selection Criteria

The run through the databases lead to wide range of option of the sources and hence it important to select the best suited sources to use. First, the research considered only peer reviewed that are primary studies are the sources. The importance of this was to ensure that highly reliable sources are used. Long et al. (2020) infers CASP evaluation criterion hold that, for a journal article to be of high quality, it must have distinct features such as clearly stated title, abstract, methodology, findings and conclusion. Secondly, a source should provide most recent state of the study phenomenon. In this regard, COVID-19 is a recent phenomenon and hence the primary sources to be used were selected from among those published in the last three years. Furthermore, sources published in English as the language were selected to avoid issues arising from the interpretation of the findings. Through the criteria, nine primary peer reviewed articles were selected for the review.

7. The importance of Ethical Practice in research

Ethical practice in research is fundamental in that it influence the acceptance and reliability of findings. Unethical practice can compromise the findings and therefore not acceptable by potential users (Miller , 2012). Research in healthcare is highly sensitive in that it is likely to have a significant on the matters of health and life of the people. In this regard, the research considered ethical suitability of the sources used. Furthermore, the researcher ensures that no form of biasness was adopted to ensure that the findings are only based on the data and information from the selected sources (Edmonds & Kennedy, 2016)

8. A Thematic Review of published Literature Related to the Research Topic: The healthcare seeking behaviour during COVID-19

Quinn-Scoggins et al. (2021) conducted a UK population-based survey to seek information about the cancer symptoms and help-seeking behaviour. The findings revealed that 40.1% of the 7,543 participants experienced potential cancer symptoms but 44.8% did not contact general practitioners for help. Waston et al. (2021) conducted semi-structured interview to investigate parental perceptions about seeking healthcare during the pandemic. The findings revealed that there was reduced paediatric services seeking behaviour as many parents decide to keep off the hospital due to fear of unknown (Waston et al. 2021). However, parents with children. Schuster's et al. (2021) undertook a study to investigate the cancelation and or avoidance of medical care among the colder people during the COVID-19. The researchers used questionnaire of the longitudinal aging study which revealed a high rate of cancelation and avoidance of the care. About 35% of the 880 older adults aged involved as the sample reported to have incidences of cancelation or avoidance to healthcare during the period (Schuster et al. 2021). The high rate of missing treatments was a significant concern because most of the aged people are usually affected by chronic conditions and multimorbidity. Lu, Kong & Shelley (2021) found that most of the adult perceived COVID-19 as a dangerous disease considering the information given by relevant institutions and governments. As a result, many people resulted into self-preventive behaviour to avoid the risk of infection. In this regard, avoidance to medical care was used as one of the self-preventive strategies. Lu, Kong & Shelley (2021) found that about 21% of the participants avoided contact with healthcare facilities and workers due to the perceived risk of exposure to COVID-19.

Ducan & Cheng (2021) undertook two online surveys on public perception of NHS general practice in the first six months of the COVID-19. The findings revealed that 105 of 150 participants had considered contacting general practitioners when in need of health care. However, half of the 105 participants avoided or delayed the contacting general practice due to the fear of COVID-19 infection. Holder-Dixon et al. (2022) undertook a survey to investigate the medical avoidance among marginalized groups with the focus the impact of the COVID-19 pandemic. The findings revealed that a large number of the participants endorsed general avoidance, mild-discrimination-related avoidance, and moderate level of COVID-19 avoidance. The perceptions in this case led to increased level of healthcare seeking avoidance among the participants.

Splinter et al. (2021) undertook a survey investigating the pervasiveness and factor of healthcare avoidance during the COVID-19 pandemic. The findings reveal that the number of consultations and diagnosis in most of the primary care facilities declined significantly. The study involved 8,732 participants from the population-based study, in which 1,142 (20.2%) revealed that they avoided healthcare. In this case, 414 participants who avoided healthcare had symptoms that warranted urgent evaluation. Lee & you (2021) undertook a similar study with the focus on general population and the avoidance of medical care. The findings revealed that in the first few days and weeks of the announcement of the COVID-19 outbreak, about 73.2% of the participants stated they avoided utilizing healthcare services particularly regarding the physical visiting to facilities. It therefore implies that only 26.8 did not avoid the healthcare service. Which is a significantly low rate. It is evident that even some patients with serious healthcare issues would avoid seeking healthcare services. However, the rate avoidance declined with time as the issues and fear about the COVID-19 were look into . Islam et al,(2022) it also revealed that there was increased rate of healthcare avoid in Australia. In the study voiding 1.110 young people,39.5% reported to have avoid healthcare facilities and service due to the fear of COVID-19.

9. The factors influencing healthcare seeking for attention during COVID-19

According to Lee & you (2021) revealed that the majority of healthcare professionals utilization avoidances include both the socio-demographic factors and health-related factors. The participants living in rural areas and less develop urban settings had a higher likelihood of avoiding healthcare services compared to those in rural areas. Furthermore, the findings revealed that participants without any underlying health conditions were more likely to avoid healthcare services than those attending compared to those with pre-existing conditions. Lee & you (2021) found that the percentage of healthcare avoidance was in first days of reported COVID-19 case as people feared the risk of infection in the hospitals. Regardless the efforts by the government and health officials' efforts ensure access to safe care, the general public considered hospitals to be high risk areas.

Islam et al. (2021) reveals that family cohesion was one of the key factors that influenced care seeker attention or behaviour. Finding revealed that parents had a significant influence on whether the young and adolescents would go to hospital during COVID-19 pandemic. Parents ke any other person were anxious and fearful f the unknown about the COVID-10 considers that it was already announced to be a dangerous and highly spreading disease.

Therefore, parents would be also hesitant to have the young ones visit the hospitals unless they are aware that is necessary. The finder also revealed that individuals with er-existing conditions were 1.38 times more likely to avoid healthcare compared to hose without such

conditions. The individuals with pre-existing conditions avoided the hospitals, because of the word fear of getting to them by infection control conditions the information that mortality rate for COVID-19 was high among individuals living condition such as diabetes patient, high blood pressure, and cancer among others.

Splinter et al. (2021) found that ages is a key determinant of healthcare avoidance. The older people had high likelihood of avoiding health during the COVID-19 compared to the young people. The finding revealed that individuals with low level of education attainment were more likely to avoid healthcare compared to those who have attained higher education and vocational training. It was evident that the participants with poor self-appreciated health and those with symptoms of depression or anxiety had high likelihood of healthcare seeking avoidance. Furthermore, spliter let al, (2021) revealed that the fear for contacting COVID-19 in the visit to healthcare facilities was a fundamental factor influencing the avoidance of healthcare during the pandemic.

Lu. Kong & Shelley (20221) identified risk perception as a key driver to the medical care preventive behaviour during a pandemic. The findings revealed that a large number of the participants revealed that the fear of the high risk at infection in the healthcare facilities is a strong indicator of healthcare availability during the COVID-19 pandemic was a key driver . Lu, Kong & Shelley (2021) also revealed that having incorrect knowledge about COVID-19 was key drive to the perceived risk and a strong predictor of medical avoidances and preventive behaviour. The findings also residents had higher level of preventive behaviour and avoidance to medical care.

Quinn-Scoggins et al.(2021) Focus on patients cancer and their avoidance to seek healthcare. According to the finding revealed that there was a lower healthcare seeking behavioural among patients who considered that symptoms experienced were as a result of COVID-19. However, patients would have avoid seeking for healthcare attention to avoid been tested positive for the virus. A significant number of the participants (12.6%) revealed that they avoided contacting or visiting their general practitioners as a way of easing the pressure on the health system. The participants in the case perceived that the healthcare professionals were fully occupied in attending to increased demand for care than normal due to COVID-19. furthermore, the fear of getting infected with the COVID-19 while attending healthcare services led to a large number to keep off the hospitals,. Some decided to put personal health issues on hold until the crisis is eased.

Watson et al. (2021) revealed that the delay or avoidance to seek paediatric service during a pandemic such as COVID-19 is the fear of getting infection while in the hospital. The community perception that hospital are the platforms for high spread the COVID-19 virus

was also identified as a key predictor of healthcare avoidance. Furthermore, the media portrayal of the COVID-19 and the situation in the hospitals accelerated the fear and triggered the decision to avoid seeking healthcare in the facilities. For instance. The media report on the congestions in hospital, and overwhelmed healthcare staff increases the likelihood of avoidance to seek healthcare unless the conditions is serious and may not wait any further(Zhang,2021; Dopfer et al. (2020), revealed that there were few diagnoses of cancer during the COVID-19 pandemic due to avoidance by a significant number of patients with cancer related symptoms.

10. Discussion

The research finds compiled revealed that there was a significant increase in the rate of healthcare avoidance during COVID-19 (Lee & you. 2021;Islam et al. 2022; Lu, Kong & Shelley, 2021). Existing literature also reveals similar trends. Shah et al. (2022) revealed that data from England, Wales, and Scotland reported a significant decrease in unscheduled admissions. For instance, in England, the rate of unscheduled admissions declined by 9.5%. the overall admission rate in England Scotland, and Wales declined by 20.8%, 21.6%. and 22.0% respectively in August-September 2020 compared to the same period in the pre-pandemic year Din Mohamed et al.(2020) had similar findings revealed that COVID-19 brought about significant changes in cancer diagnosis in the Netherlands. The data from cancer registries across the country showed that there was a notable decrease in cancer diagnosis compared to the pre- COVID-19 outbreaking period. The main factor behind the decrease is the avoidance by people with relevant symptoms to keep off medical facilities for reasons associated with COVID-19.

Jessup et al. (2021) had similar findings; their study, it is revealed that New South Wales and victor were the most hit cities by COVID-19 and were highly associated with healthcare-seeker avoidance compare to other cities in the country. Many people delayed seeking healthcare due to the fear and unclear issues arising from the COVID-19 pandemic (Cao et al. 2020). Taylor et al. (2020) supported the insight about fear of unknown stating that concern about the risk of contracting COVID- 19 forces of people to avoid seeking healthcare. Therefore, it was evident that wide range of research studies agree that there was reduced healthcare – seekers attention among them including individual who have been diagnosed with various conditions as well as those exhibiting symptom of life- threatening conditions such as cancer

The finding revealed that there is range of reasons for healthcare avoidance during COVID-19. According to Watson et al.(221), with the fear of contracting the disease in the process of reaching medical care, many people avoid visiting healthcare facilities. however, others factor identified as gender, mental health illness such as depression, level of education, and self- appreciated health have a notable influence on decision to avoid seeking healthcare (Czeisler et al. 2020; Taylor, et al. 2020). For instance, the COVID-19 stress syndrome arising from the effects of the control measures and disorientation in life affect the perception of people regarding their health. Result, the affected individuals tend to develop healthcare avoidance attention.

Din Mohamed et al. (2020) concur with the insight that individuals with relevant symptoms are kept off the hospital's due to the fear of infections as well as the desire to give the practitioners the to attend of increased patients arising from COVID-19- related complications. Watson et al. (2021) found that reduction in seeking or delay to seek paediatric services during COVID-19 was associated with the fear of getting infected in process of medication in the hospitals. As a result , parents felt that it was not safe for their babies, children , and young people to be attended to in the hospitals unless it is a condition that could not wait. Saunders et al. (2021) support the insight by stating that the low rate of seeking paediatric primary care services was due to the fear of contracting the COVID-19 virus as well as the perception that they can assist the healthcare system to concentrate on managing the pandemic before (Papafakis et al. 2020). Furthermore, the information through the media implied that many COVID-19 patients needed life-saving care and hence individual patients and those with controllable symptoms give those in critical conditions the chance to be treated. Moynihan et al. (2021) stated that delaying or avoiding seeking healthcare led to a significant reduction in the utilization of healthcare facilities. The reason is that even in healthcare facilities and units where COVID-19 cases were not handle . however, few patients turn up for appointment and treatment or sort healthcare services for the first time.

11. Conclusion and Recommendations

The research findings reveal that there was significance reluctance to seek healthcare services during the COVID-19. It is evident that fear of getting infected in the healthcare

facilities was one of the key factors leading to the delay or avoidance to see care. It is also evident that factors such as gender, education level, perception about self-health, the perception about the overwhelming of the healthcare system influence the avoidance to seek health care services (Saunders et al. 2021). The avoidance or delay in seeking can lead to negative effects such as escalation of health problem that would have been controlled or can lead to death.

While the future term is to focus on investigation healthcare avoidance by individual group such as Ethnic, Gender, and Education levels. Research would be in assisting the healthcare professionals to identify patients with likelihoods of avoiding care. Furthermore; research in the future should focus on instigating the effect of the delay and avoidance in seeking healthcare during COVID-19 on health of the people and healthcare system. The research in the case would assist in enhancing the development the policies and best practice in healthcare services delivery.

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