

Acceptability of Covid-19 Vaccine Informations to Health Consciousness Tourism Industries in Bandung City

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Abstract

This research reveals as well as examines the relationship between the acceptability of Covid-19 vaccine information on health awareness in the tourism industry sector in the city of Bandung. This city is one of the tourist destinations that must rise from adversity due to Covid-19. The vaccine program was launched by the government to attract tourists again. The approach to answering this research uses a positivistic paradigm with quantitative research techniques. The validity and reliability test using SPSS was carried out on 85 respondents from a population of 300. A strong relationship was found between the acceptability of the Covid 19 vaccine information and the health awareness of tourism sector business actors in the city of Bandung. They were positive to receive information about the Covid vaccine to run their business. This study also found that respondents received vaccine information based on the purpose so that their business could run. It was also revealed that respondents were not sure with certainty that they could carry out the vaccine process. Furthermore, significant data were found that respondents were less active in seeking information about health.

Keywords

acceptability; information; covid-19 vaccine; health awareness; tourism industry



I. Introduction

The form of information is socialization on mainstream media, it can be in the form of information that utilizes social media content or information disseminated by public communication through state officials and community leaders. However, it is undeniable that the public will receive various responses regarding the information of the Covid-19 vaccine. Moreover, the enactment of legislation still Health, Republic of Indonesia Number 36 the Year 2009 chapter five verse three which states that every person has the right are independent and responsible for determining its ministry of health is necessary for him (komisiinformasi.go.id, 2018). Law number 36 is counterproductive to presidential regulations and regulations from the minister of health that have only been enacted since the Covid-19 pandemic. Some people choose not to vaccinate for various reasons, mainly for efficacy and safety concerns. The contradictory messages became a signal for some people who were the targets of the Covid-19 vaccine information. External cues in this context are informations or information coming from anywhere related to vaccines that will be taken into consideration in deciding to carry out a vaccine (Kobayashi et al., 2021). Covid 19 pandemic caused all efforts not to be as maximal as expected (Sihombing and Nasib, 2020).

People also experience dissonance of understanding due to contradictory rules and information with one another. This has caused variations in responses regarding informations about the Covid-19 vaccine in various communities. The public's

acceptability in the perspective of linear communication can be detected empirically and sensually by the Covid-19 vaccine communicator. Broadly speaking, this has implications for the community's response, which is polarized into two parts, namely those who carry out the vaccine and those who refuse to be vaccinated. However, this study seeks to reveal the relationship between the acceptability of COVID-19 vaccine information and the consciousness of the business community in the city of Bandung who purely carry out vaccines for health reasons and not based on other things. The condition is that the community is accepting of exposure to information on the Covid-19 vaccine. Because they don't want to be seen or give a refusing response in front of the communicator. But it does not rule out the community to vaccinate but is based on compulsion. For example, to achieve group immunity in the city of Bandung, so that the tourism industry can be revived. This research also reveals the extent of the indications circulating in the community that there are vaccines not based on health, but for the convenience of the administrative process and the revival of the tourism sector in Bandung. Through this presentation, the author's curiosity is summarized in one problem formulation, the relations between the acceptability of the Covid-19 vaccine Information on the health consciousness of the tourism sector industries in the City of Bandung?

II. Review of Literature

2.1 Covid-19 Vaccine Information Acceptability

The acceptability of vaccine information leads to information of the Covid-19 Vaccine to the public. The goal is to achieve communal immunity to prevent the spread of the virus between individuals in the community so that the pandemic ends. Informations are understood as conveying messages or information, and this is known as communication. A message is a form of instrument that is conveyed to achieve change. Communication messages in this context tend to lead to the health aspect. The elements involved, both the communicator, the content of the message, and the communicant, are all health-oriented. Health messages are constructed, modified, packaged, and maintained to give meaning to health it self (Cho, 2012). Health according to the World Health Organization (WHO) is a healthy condition both physically and mentally. Furthermore, health must realistically and logically reside within a person. While there are still health communicators (1) who do not understand health as the value of life (2) fail to recognize the important difference between the essence of health and what affects health itself (3) it is inappropriate to see health as a subjective human construction as opposed to seeing health as an objective phenomenon (Balog, 2005).

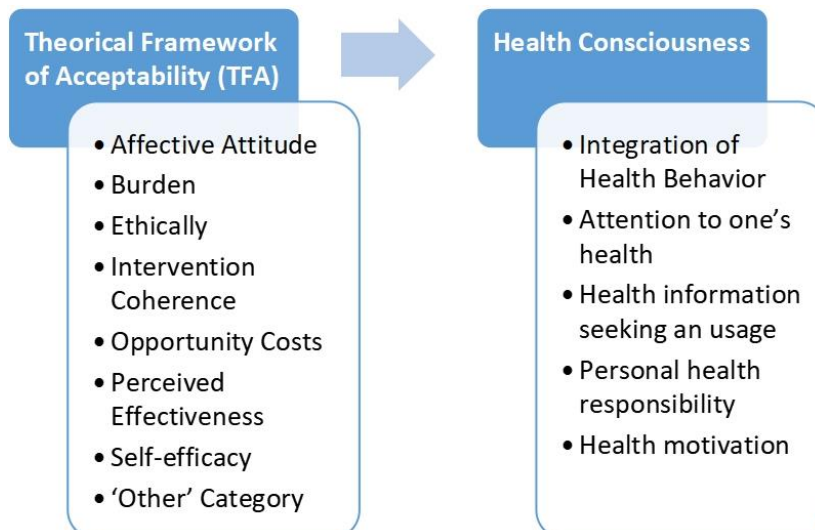
2.2 Health Consciousness

Health conscious is a psycho-graphic variable that plays an important role in this research. The consciousness variable explains the deeper segmentation of the audience related to health problems comprehensively. Previous studies have shown that health consciousness predicts various health attitudes and behaviors. Then the aspect of the level of consciousness is also important with how health information is obtained and how to respond to that health information (Hong, 2011). Designing and packaging health messages for the public interest cannot be separated from individual health consciousness. Because it will determine their response to health information and the source of that information.

2.3 Theoretical Framework of Acceptability

Theoretical Framework of Acceptability (TFA)	Definition
Affective Attitude	Anticipated Affective attitude: How an individual feels about the intervention, prior to taking part Experienced Affective attitude: How an individual feels about the intervention, after taking part
Burden	Anticipated burden: The perceived amount of effort that is required to participate in the intervention Experienced burden: The amount of effort that was required to participate in the intervention
Ethicality	The extent to which the intervention has a good fit with an individual's value system
Intervention Coherence	The extent to which the participant understands the intervention and how it works
Opportunity Costs	Anticipated opportunity cost: The extent to which benefits, profits, or values must be given up to engage in the intervention Experienced opportunity cost: The benefits, profits or values that were given up to engage in the intervention
Perceived Effectiveness	Anticipated effectiveness: The extent to which the intervention is perceived to be likely to achieve its purpose Experienced effectiveness: The extent to which the intervention is perceived to have achieved its intended purpose
Self-efficacy	The participant's confidence that they can perform the behaviour(s) required to participate in the intervention
'Other' category	Utterances that answer the research question but do not necessarily reflect the TFA constructs (e.g. burden associated with trial documentation)

2.4 Framework



2.5 Tourism Industries

The tourism industry broadly covers the business aspects of natural tourist attractions, cultural tourist attractions, and or tourist attractions created by humans or artificial ones (Luturlean et al., 2019). Through the master plan of the 2010-2025 National Tourism Development Master Plan as stipulated in Government Regulation No. 50 of 2011, those tourism facilities include accommodation, restaurants, tourist information and services, immigration services, tourism information, e-tourism kiosks, police, and task forces. tours, souvenir shops, tourist directions (setkab.go.id, 2011). From the understanding and the research subjects, the people of Bandung city who are included in the tourism sector actors in this context are real people who are engaged in natural tourism objects, cultural arts tourism, and local customs. Then the accompanying facilities can be hotels, restaurant including food-beverages, gift shops, and travel services.

III. Research Method

The positivistic paradigm with quantitative communication research techniques (Watson, 2015), (Kriyantono, 2014)) is the most appropriate way to answer the main problems of this research. The reality studied is the variable acceptability of information regarding the Covid-19 vaccine information using the Theoretical Framework of Acceptability or TFA (Carter & Wheeler, 2019) and this is the independent variable. While consciousness of health (Health Consciousness) is the dependent variable. The quantitative research approach used is explanatory research (Asad et al., 2019). Thus the emphasis on research design, measurement, and sampling is symbolized in the form of numbers and then examines the relationship between variables and generalizes from the phenomena that occur (Sugiyono, 2017). This technique is often done by survey method. Researchers distributed questionnaires both online and directly to pre-determined respondents. The purpose of using this type of explanatory research is to explain the influence and relationship and find the cause and effect of the variables studied.

The population is taken from entrepreneurs in the tourism sector in the city of Bandung who has been certified for Cleanliness, Health, Safety, and Environment Sustainability or CHSE. The Ministry of Tourism and Creative Economy or Kemenparekraf issued 385 certificates for tourism business actors in the city as a guarantee of security and comfort for tourists (detik.com, 2021). Sampling techniques that do not provide equal opportunities or opportunities for each element or member of the population to be selected are Non-Probability Sampling (Wolf et al., 2016). Researchers randomly selected samples from the population (Sugiyono, 2017).

In this case, the population of tourism entrepreneurs who have received CHSE certification in the city of Bandung is calculated by Slovin (Umar, 2021). So it becomes as follows:

$$n = \frac{N}{1 + Ne^2}$$

n is the number of samples, N is the population and e² is the error value (10% - 0.1) with a confidence level (95%). So

$$n = \frac{385}{1 + ((385) \times (0,1))^2} = \frac{385}{4,85} = 79 \text{ respondents}$$

The number of samples was 79 people and rounded up to 80 people taken from the population of CHSE-certified tourism entrepreneurs in the city of Bandung. In order to avoid sample saturation (Sugiyono, 2017) and at the same time reduce the percentage of sampling error (Wingersky et al., 1983) so that validity can be maintained. After the data is obtained, the next step is to perform data analysis techniques. This is done by testing the data starting from a simple linear regression analysis using the F test, namely the joint variable testing and the t-test (partial test). Then it is continued with the classical assumption test of normality test, multicollinearity test, and heteroscedasticity test (Sugiyono, 2017).). Furthermore, the findings in the form of quantitative are interpreted and elaborated according to the references and the subject matter of this research.

Variable Operations

a. Theoretical Framework of Acceptability (TFA)

Dimension	Sub Dimension	Question Items	Measuring Scale
Affective Attitude	<p>Anticipated Affective Attitude: How the individual felt about the intervention, prior to taking part</p> <p>Experienced Affective Attitude: How the individual felt about the intervention, after taking part</p>	<p>1) Covid-19 vaccine information is good for me, my business, and my employees.</p> <p>2) I will try to get vaccinated.</p> <p>3) I'm not worried about the covid virus after being vaccinated</p> <p>4) I feel the vaccine is good for my body's resistance to the Covid-19 virus intervention.</p> <p>5) With the vaccine, my business can continue and run again.</p>	Differential Semantics
Burden	<p>Anticipated burden: The perceived amount of effort required to participate in the intervention</p> <p>Burden experienced: The amount of effort required to participate in the intervention</p>	<p>6) I registered all employees to participate in the Covid-19 vaccination.</p> <p>7) Employees are willing to take part in the Covid-19 vaccination.</p> <p>8) I motivate employees to take vaccinations.</p>	Differential Semantics
Ethicality	The degree to which the intervention has good fit with the individual's value system	<p>9) I warmly welcome Covid-19 vaccination information.</p> <p>10) The Covid-19 vaccine information is in accordance with the values that I adhere to and understand.</p>	Differential Semantics

Dimension	Sub Dimension	Question Items	Measuring Scale
		11) The information regarding the Covid-19 vaccination was well received by the employees.	
Intervention Coherence	The extent to which participants understand the intervention and how it works	12) I know the side effects after the Covid-19 vaccine. 13) I give work time dispensation to employees who get side effects after the Covid-19 vaccine	Differential Semantics
Opportunity Costs	Anticipated opportunity costs: The extent to which benefits, gains, or value must be given up to engage in the intervention	14) I understand the benefits of the Covid-19 vaccination for business continuity. 15) I think the Covid-19 vaccination is important for all parties involved in the business.	Differential Semantics
	Experienced opportunity costs: The benefits, benefits, or value provided for engaging in the intervention	16) I participated for the Covid-19 vaccination because of the mandatory government recommendation for entrepreneurs.	
	Anticipated effectiveness: The degree to which the intervention is deemed likely to achieve its objectives Experienced effectiveness: The degree to which the intervention is deemed to have achieved its intended purpose	17) I will be responsible if there are employees who are not willing (there are comorbidities) in the vaccine. 18) I was forced to take the decision to lay off employees who were not willing to be vaccinated according to government regulations and work agreements.	Differential Semantics
Perceived Effectiveness	Participants' belief that they can perform the behaviors required to participate in the intervention	19) Vaccination is good for my health and that of my employees. 20) Vaccination provides easy access to business.	Differential Semantics
Self-efficacy	Speech that answers the research question but does not reflect TFA constructs (e.g. expenses associated with trace documentation)	21) Information regarding the Covid-19 vaccination is important to me and the running of my business. 22) Information on how to register for the Covid-19	Differential Semantics

Dimension	Sub Dimension	Question Items	Measuring Scale
		vaccination is easy. 23) Information about the side effects of Covid-19 vaccination for running business	
'Other' category	Anticipated Affective Attitude: How the individual felt about the intervention, prior to taking part Experienced Affective Attitude: How the individual felt about the intervention, after taking part	24) Information about the COVID-19 vaccination is scary for business people. 25) Information about how to register for a Covid-19 vaccination is confusing for business people. 26) Information regarding the COVID-19 vaccination is clear and safe.	Differential Semantics

b. Health Consciousness

Dimension	Sub Dimension	Question Items	Measuring Scale
Integration of health behavior	(1) Concern for the hazardous environment, (2) physical fitness, (3) personal responsibility, and (4) Nutrition and stress management	27) I care about environmental and physical health. 28) I always try to consume nutritious food and drinks for myself and employees. 29) I give special time to myself and employees to “optimize the time they have” in between work.	Differential Semantics
Attention to one's health	(1) Responsible for health (2) Health preventive behavior (3) Health maintenance in daily life (4) Actively participate in online and/or offline health communities	30) I apply the 5M health protocol at my place of business. 31) I oblige every employee to always do the 5M (health protocol) process and take vitamins. 32) I am active in the business community to get updated information about Covid-19 related to business.	Differential Semantics
Health information seeking and usage	(1) Health Information Search (2) Health information learning (3) Use of communication channels	33) I always look for information and learn about Covid-19 to anticipate operational activities at my place of business.	Differential Semantics

Dimension	Sub Dimension	Question Items	Measuring Scale
personal health responsibility,	(1) Health information orientation (2) Health beliefs, and (3) Healthy activities	34) I tend to get information about Covid-19 from social media and digital accounts covid.go.id 35) I tend to get information about Covid-19 from conventional media (TV, Magazines, Newspapers) 36) Living a healthy life is very important to me.	Differential Semantics
Health motivation	(1) Health information acquisition behavior (2) Health maintenance behavior	37) I quoted information (<i>repost</i>) about Covid-19 as a message on social media or messenger. 38) I take care of my health not only because of Covid-19.	Differential Semantics

IV. Results and Discussion

4.1 Results

Through the findings of the research, the profiles of the tourism sector actors in the city of Bandung who became respondents were 55.3% men and 44.7% women. The age of respondents was dominated by 25-34 years reaching 48.2%. The last education is a bachelor's degree of 43.5%, a master's degree of 28.2%, and a high school equivalent of 28.2%. The tourism sector that most respondents are engaged in is culinary business 70.6%, vehicle rental 11.8% and lodging business 7.1%

Test the validity and reliability on 38 questionnaire questions with the variable X Theoretical Framework of Acceptability (TFA) as many as 26 questions and on the variable Y (Health Consciousness) there are 12 questions. The validity and reliability test using SPSS was carried out on 85 respondents with an error degree of 5% with a two-sided test, then $df = n - 2$ so that $df = 85 - 2 = 83$ with an r table of 0.216. The assumption is that if the validity value of each questionnaire statement item is greater than 0.30 then the statement item is considered valid (Andriana et al., 2020).

Table 1. Validity of Variable X TFA

	Item-Total Statistics				Cronbach's Alpha if Item Deleted
	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item-Total Correlation	Squared Multiple Correlation	
AffectiveAttitude1	215.8118	868.512	.596	.	.743
AffectiveAttitude2	215.6000	872.005	.637	.	.744
AffectiveAttitude3	217.0706	883.304	.126	.	.749
AffectiveAttitude4	216.7294	873.771	.251	.	.746
AffectiveAttitude5	216.0471	852.426	.726	.	.738
Burden1	215.8941	854.548	.743	.	.738
Burden2	215.8941	859.143	.687	.	.740
Burden3	215.8706	859.971	.648	.	.740

Ethicality1	215.8706	862.019	.701	.	.741
Ethicality2	215.9176	855.315	.821	.	.738
Ethicality3	215.9412	858.151	.734	.	.739
InterventionCoherence1	215.9059	868.634	.545	.	.743
InterventionCoherence2	215.7765	865.818	.608	.	.742
OpportunityCosts1	215.7882	856.145	.818	.	.739
OpportunityCost2	215.8588	853.218	.833	.	.738
OpportunityCost3	215.7529	860.212	.763	.	.740
OpportunityCost4	216.3176	865.838	.435	.	.743
OpportunityCost5	216.6706	850.914	.573	.	.738
PerceivedEffectiveness1	215.8824	854.724	.802	.	.738
PerceivedEffectiveness2	216.0000	849.214	.809	.	.737
Selfefficacy1	215.8706	851.900	.846	.	.737
Selfefficacy2	215.7882	861.574	.728	.	.741
Selfefficacy3	216.1294	856.947	.611	.	.740
OtherCategory1	217.2471	863.783	.317	.	.743
OtherCategory2	217.4000	876.171	.178	.	.748
OtherCategory3	215.9647	860.177	.671	.	.740
TheoreticalFrameofAcceptability	110.1765	223.695	1.000	.	.924

Source: Research Processed Data (2021)

The results of the X TFA validity test are in the table 1, two statements are considered invalid, namely the statement about the third affective attitude “I am not worried about the covid virus after being vaccinated” and the statement about the second other categories “Information about how to register for the Covid-19 vaccination confuses business industries”. Both of these statements will be removed because they are considered invalid. Meanwhile, Y Health Consciousness (table 2) is declared valid.

Table. 2 Validitas Y Health Consciousness

	Item-Total Statistics				
	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item-Total Correlation	Squared Multiple Correlation	Cronbach's Alpha if Item Deleted
IntegrationofHealthBehavior1	101.1647	135.282	.432	.	.749
IntegrationofHealthBehavior2	101.2588	131.646	.624	.	.741
IntegrationofHealthBehavior3	101.3765	129.238	.713	.	.735
AttentionToOne'sHealth1	101.1765	131.266	.637	.	.740
AttentionToOne'sHealth2	101.2471	130.188	.630	.	.738
AttentionToOne'sHealth3	101.7882	121.764	.788	.	.718
HealthInformationSeekingandUsage1	101.6588	125.489	.716	.	.727
PersonalHealthEesponsibility1	101.9412	125.961	.598	.	.730
PersonalHealthEesponsibility2	101.8588	125.646	.558	.	.731
PersonalHealthEesponsibility3	101.1765	132.457	.646	.	.742
HealthMotivation1	102.1176	128.391	.481	.	.737
HealthMotivation2	101.1529	135.322	.360	.	.750
HealthConsciousness	52.9529	35.117	1.000	.	.858

Source: Research Processed Data (2021)

The results of the reliability test on the X TFA variable (table 3) obtained the value of Cronbach's alpha (α) of 0.750 and the results of the reliability test on the Y Health Consciousness variable with the value of Cronbach's alpha (α) of 0.755 (Table 4). Based on the assumption that Cronbach's alpha (α) value of less than 0.600 is considered less

reliable, while Cronbach's alpha (α) 0.700 is acceptable and reliable, while Cronbach's alpha (α) 0.800 is considered good. From these assumptions, the research questionnaire is considered acceptable and reliable, so that the research can be continued because it meets the requirements above the value of 0.700 (Andriana et al., 2020).

Table 3. Reliability Var X TFA
Reliability Statistics

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.750	.950	27

Source: Research Processed Data (2021)

Table 4. Reliabilitas Var Y Health Consciousness
Reliability Statistics

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.755	.899	13

Source: Research Processed Data (2021)

a. Description of the Variable Dimensions of Covid-19 Vaccine Information Acceptability

Table 5 shows that the average (mean) of the dimensions of Acceptability of the Covid-19 Vaccine Information is greatest in the Opportunity Cost dimension or the opportunity obtained when receiving the Covid-19 vaccine information in the form of benefits, advantages, or the value of doing the vaccine, which is 21.38. The second-order fell on the Affectiveness Attitude dimension or the entrepreneur's affective attitude towards the COVID-19 vaccine information before administering the vaccine and after administering the vaccine, which was 17.22. Furthermore, the third order from the Acceptability dimension of Covid vaccine informations is the Burden or Efforts and Efforts made by entrepreneurs in receiving Covid-19 vaccine informations to themselves and their employees of 13.40, while the smallest mean average is the Perceive Effectiveness dimension or the belief of tourism entrepreneurs that they were able to carry out the Covid-19 vaccine of 8.82.

Table 5. Dimensions of Variable X Theoretical Framework of Acceptability (TFA)

	Descriptive Statistics				
	N	Minimum	Maximum	Mean	Std. Deviation
Affective Attitude	85	9	20	17.22	2.514
Burden	85	5	15	13.40	2.336
Ethicality	85	5	15	13.33	2.243
Intervention Coherence	85	2	10	9.02	1.354
Opportunity Cost	85	7	25	21.38	3.529

Perceive Effectiveness	85	2	10	8.82	1.642
Self Efficacy	85	3	15	13.27	2.275
Other Category	85	6	15	10.45	2.986
Valid N (listwise)	85				

Source: Research Processed Data (2021)

b. Description of the Variable Dimensions of Health Consciousness

Referring to table 06, it is known that the Health Consciousness dimension which has the highest average is the Integration of Health Behavior or Integrity towards consciousness of behavior to get the health of 13.92, the second-order is in the Attention to One's Health dimension or attention and consciousness of health. of 13.51. Furthermore, the third-order on the dimension of Personal Health Responsibility or Responsible for managing health is 12.74. Meanwhile, the dimension of the Health Consciousness variable which has the smallest average is the Health Information Seeking and Usage dimension of 4.25. This illustrates the dimensions of Integration of Health Behavior, Attention to One's Health, and Personal Health Responsibility in the Health Consciousness variable or the health consciousness of tourism entrepreneurs to be important. The range of average values for the Integration of Health Behavior dimension is 13.92, which is above 13.0, which means that the dimension of integrity consciousness of healthy behavior is very high.

Table 6. Variable Y Health Consciousness
Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Integration Of Health Behavior	85	10	15	13.92	1.482
Attention To One's Health	85	6	15	13.51	1.931
Health Information Seeking and Usage	85	1	5	4.25	.885
Personal Health Responsibility	85	8	15	12.74	2.013
Health Motivation	85	6	10	8.54	1.171
Valid N (listwise)	85				

c. Hypothesis test

The study tested the hypothesis of whether there was a relationship between the acceptability of the Covid-19 Vaccine Information on the Health Consciousness of Tourism Sector Actors in the City of Bandung. Hypothesis testing can be seen as follows in table 07. The initial test carried out was testing the correlation between variables. Tests were carried out on the acceptability variable (Theoretical Framework of Acceptability - TFA) for the Covid-19 vaccine information with the health consciousness variable (Health Consciousness). Testing the relationship obtained results in table 7 below:

Table 7. Correlation Test
Correlations

		Theoretical Frame of Acceptability	Health Consciousness
Theoretical Frame of Acceptability	Pearson Correlation	1	.686**
	Sig. (2-tailed)		.000
	N	85	85

Health Consciousness	Pearson Correlation	.686**	1
	Sig. (2-tailed)	.000	
	N	85	85

** . Correlation is significant at the 0.01 level (2-tailed).

Source: Research Processed Data (2021)

In the table 7, it can be seen that the p-value of the correlation test is 0.000, this indicates that the correlation value is below the sig value. (2 tailed) which means $0.000 < 0.05$ (2-tailed). These results show that there is a relationship between the acceptability of the COVID-19 vaccine information on the health consciousness of tourism sector actors in the city of Bandung. Based on these results, the requirements for regression testing can be continued because there is a relationship between the two variables studied. This means that the two variables have the potential to influence each other by looking at the predictions of the existing relationship between the variables.

The next test is a simple linear regression series, by looking at whether or not there are differences in the receipt of the COVID-19 vaccine information on the health consciousness of tourism sector actors in the city of Bandung

Table 8. Test of Differences between Variables

ANOVA ^a						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	1388.104	1	1388.104	73.773	.000 ^b
	Residual	1561.708	83	18.816		
	Total	2949.812	84			

a. Dependent Variable: Health Consciousness

b. Predictors: (Constant), Theoretical Frame of Acceptability

Source: Research Processed Data (2021)

Table 8 shows that the p-value of Anova is at a value of 0.000, which means that the value is below the significant value of 0.05. This value shows that there is a difference in the acceptance/acceptability of the Covid-19 vaccine information on the health consciousness of tourism sector actors in the city of Bandung. So the statistical test is below the value of 0.05 (< 0.05), it is assumed to accept H_a where the tourism sector business actors in the city of Bandung before and after receiving information about the Covid-19 vaccine there are differences in acceptance (acceptability), so it is clear that business actors The tourism sector in the city of Bandung were indeed affected by the information of the Covid-19 vaccine.

Testing the Acceptability of the Covid-19 vaccine information on the health consciousness of the tourism sector in the city of Bandung.

Table 9. Acceptability Testing of Covid-19 Vaccine Informations Against Health Consciousness of the Tourism Sector in the City of Bandung

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.686 ^a	.471	.464	4.338

a. Predictors: (Constant), Theoretical Frame of Acceptability

Source: Research Processed Data (2021)

Table 9 shows that the R Square value obtained from the test is 0.471 which explains that there is a relationship and influence of the acceptability of the Covid-19 vaccine information with the health consciousness of tourism business actors in Bandung. But the level of influence is still considered in the standard course for only about 47.1%, which means Covid-19 vaccine acceptability informations in the mass media affect health consciousness (health consciousness), and the remaining 52.9% are influenced by other elements. Likewise, the regression value obtained is 0.686 or 68.6%, the acceptability of the Covid-19 vaccine information affects the health consciousness of tourism business actors in the city of Bandung. The regression value is categorized at a good level because it almost reaches 70% which means that it influences changes in the health consciousness of tourism business actors in the city of Bandung.

Table 10. Simple Regression Coefficients
Coefficients^a

Model	Unstandardized Coefficients		Standardized Coefficients Beta	t	Sig.
	B	Std. Error			
1 (Constant)	23.909	3.414		7.003	.000
Theoretical Frame of Acceptability	.279	.033	.686	8.589	.000

a. Dependent Variable: Health Consciousness

Source: Research Processed Data (2021)

Table 10 is describe coefficients used to see whether there is a linear relationship individually between the Covid-19 vaccine information acceptability variable and the health consciousness variable. In this case, the null hypothesis will be rejected if the p-value of the t-test is less than 0.05 (Sarikho & Prisgunanto, 2019)

The results of the coefficient table show that the constant value (a value) is 23.909 and the coefficient value (b value) is 0.279 so that the simple linear equation becomes as follows:

$$Y = a + bx$$

$$Y = 23,909 + 0,279x$$

X is Acceptability

Y is Health Consciousness

Conditions:

1. The value of a = 23,909 states constant, which means that the effect of the acceptability of the COVID-19 vaccine information on the health consciousness of business actors is 23,909.
2. The value of the regression coefficient is positive at 0.279 which means that adding or reducing the value of the X variable (Acceptability) by 1 (one) unit will increase or decrease the value of the Y variable (Health Consciousness) by 0.279.

4.2 Discussion

Through the results of research and analysis, there is a strong influence between the acceptability of the Covid-19 vaccine information on the health consciousness of tourism sector business actors in the city of Bandung. Business actors in the tourism sector in the city of Bandung have acceptability or positive acceptance of the Covid-19 vaccine information for running of their business. In the perspective of communication of transmission terminology, the findings of this research are a real illustration that has occurred in connection with the acceptability of the Covid-19 vaccine information with a level of health consciousness with a value of 0.279. This relationship will be described in this discussion.

Something is interesting in the research findings on the dimension of the influential variable, in this case, the Acceptability of the Covid-19 Vaccine Information, the opportunity cost dimension, or the opportunity obtained when receiving the Covid-19 vaccine information reaches 21.38. This score is above the value of 20 (between 7 - 25), which means the value of the Opportunity Cost dimension is very high. In other words, behind the success of the information information about the Covid-19 vaccine, it turns out that the respondent received the information based on the reason for obtaining non-medical benefits or benefits for himself. The benefit or value that will be obtained is the main reason because of the government's recommendation which requires business to be vaccinated against Covid-19. In this context. Obviously it is for profit and running of the business in the tourism sector that they are involved in. Material value is the main reason for them to be able to receive informations about the Covid-19 Vaccine.

Efforts that tourism business Industries can continue to earn profits, in this context, their business is not hampered, it is not supported optimally by the efforts of these business people in motivating their employees to carry out vaccines. This aspect is shown by the dimension of the burden or the efforts and efforts made by the entrepreneur in encouraging his employees to get the vaccine, which is only 13.40 in value.

Another interesting thing is that the data found that the Perceive Effectiveness dimension or belief in being able to take vaccine action on respondents only made a small contribution in influencing the acceptability or receipt of informations about the Covid-19 Vaccine. This data shows that respondents' confidence in being able to carry out the Covid-19 vaccine is not so significant on acceptability vaccine information. Even though they have received information information about the Covid-19 vaccine, it turns out that they are not too sure about the certainty that they can carry out the vaccine process or vice versa. For this reason, the credibility and competence contained in the Covid-19 vaccine information element is constraint that causes it.

The next finding is the respondent's health consciousness variable or health consciousness. In this dimension, health and healthy living behavior are priorities for respondent reference considerations in seeking information information about the Covid-19 vaccine. The score for the achievement value is 13.92. Through this research, it was also found evidence of respondents being less active in searching for health information or learning about health information. Inactivity here is understood as the respondent's reluctance to be passive in seeking health information or relying on information that is not intentionally sought. This finding explains that respondents found that health information, whether about the Covid-19 vaccine or other information, was obtained not based on their intentions and motivations. The indication can be seen from the dimension value of Health information seeking and usage which is only 4.25.

V. Conclusion

Bandung is a city that is a tourist destination that is certainly affected by the Covid-19 outbreak. The tourism sector actors in the city are trying to rise from adversity due to the pandemic, one of which is the Covid-19 vaccine program launched by the government. This quantitative research reveals the relationship between the acceptability of the Covid-19 vaccine information to the health consciousness of tourism sector actors in the city of Bandung. In this study, there were also findings regarding the relationship between Covid-19 vaccine information and public health consciousness. This of course can be a reference for further research or other stakeholders. Research on the Covid-19 vaccine virus that is linked to information will be in the public spotlight considering that the number of victims due to the virus is not small and the panic caused by it has swept the world. For this reason, further research is needed that opens up opportunities to reveal new facts regarding Covid-19 information.

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