DOES TRUST IN VACCINATION AFFECT EATING OUT BEHAVIOR?: AN APPLICATION ON LOCAL PEOPLE

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Abstract

The aim of this study is to reveal trust in vaccination and intention to eating out bahavior. There may be many variables among the reasons why people choose to eat out. However, it is reasonable to think that the food and beverage industry has suffered due to the current pandemic. Vaccination is one of the remedies recommended to consumers who want to leave their homes and return to their pre-pandemic lives. If the vaccine is not received positively by the society and therefore a sufficient majority of the population does not have antibodies, it does not seem possible for the pandemic period to end. In order to reveal the relationship between the two variables that constitute the study, an application was made to the local people living in the Rize region. A survey form containing the variables of this research was created. A total of 615 usable data were obtained and various analyses were made using SPSS and AMOS software. As a result of these analyses, a positive and significant relationship was found between trust in vaccination and intention to eating out bahavior.

Keywords: Local People; Trust in Vaccination; Intention to Eating out; Covid-19.

A CONFIANÇA NA VACINAÇÃO AFETA O COMPORTAMENTO COMER FORA?: UMA APLICAÇÃO EM PESSOAS LOCAIS

Resumo

O objetivo deste estudo é revelar a confiança na vacinação e a intenção de comer fora de casa. Pode haver muitas variáveis entre as razões pelas quais as pessoas optam por comer fora. No entanto, é razoável pensar que a indústria alimentar e de bebidas sofreu devido à atual pandemia. A vacinação é um dos remédios recomendados aos consumidores que desejam sair de casa e retornar à vida pré-pandemia. Se a vacina não for recebida positivamente pela sociedade e, portanto, uma maioria suficiente da população não tiver anticorpos, não parece possível que o período pandêmico termine. Para revelar a relação entre as duas variáveis que constituem o estudo, foi feita uma aplicação à população local que vive na região de Rize. Foi elaborado um formulário de levantamento contendo as variáveis desta pesquisa. Foram obtidos um total de 615 dados utilizáveis e diversas análises foram feitas utilizando os softwares SPSS e AMOS. Como resultado destas análises, foi encontrada uma relação positiva e significativa entre a confiança na vacinação e a intenção de comer fora de casa.

Palavras-chave: Pessoas locais; Confiança na vacinação; Intenção de comer fora; Covid-19.

AFECTA LA CONFIANZA EN LA VACUNACIÓN A LA COMPORTAMIENTO FUERA DE CASA?: UNA APLICACIÓN A LA POBLACIÓN LOCAL

Resumen

El objetivo de este estudio es revelar la confianza en la vacunación y la intención de comer fuera de casa. Puede haber muchas variables entre las razones por las que las personas eligen salir a comer. Sin embargo, es razonable pensar que la industria de alimentos y bebidas se ha visto afectada debido a la actual pandemia. La vacunación es uno de los remedios recomendados a los consumidores que quieren salir de casa y volver a la vida anterior a la pandemia. Si la sociedad no recibe positivamente la vacuna y, por tanto, una mayoría suficiente de la población no tiene anticuerpos, no parece posible que termine el período pandémico. Para revelar la relación entre las dos variables que constituyen el estudio, se realizó una aplicación a la población local que vive en la región de Rize. Se creó un formulario de encuesta que contiene las variables de esta investigación. Se obtuvieron un total de 615 datos utilizables y se realizaron varios análisis utilizando el software SPSS y AMOS. Como resultado de estos análisis, se encontró una relación positiva y significativa entre la confianza en la vacunación y el comportamiento de intención de comer fuera de casa.

Palabras clave: Gente local; Confianza en la vacunación; Intención de salir a comer; Covid-19.

1 INTRODUCTION

A respiratory infection disease became a global emergency in the latter few months of 2019 and the first quarter of 2020 in an unexpected way, and the World Health Organization proclaimed a global pandemic on March 11, 2020. As of April 2, 2020 (WHO, 2020), the coronavirus illness 2019 (COVID-19) had infected people in 180 countries and territories, resulting in months of closures in educational institutions and non-essential businesses in numerous nations, including Spain, Italy, Turkey, England, and the United States of America. Nearly all economic operations have been harmed because of the Covid-19 epidemic.

There has been a global socio-economic crisis and deep psychological pain by virtue of the emergence of the COVID-19 epidemic (Arl & Bayrhan, 2021; Serafini et al., 2020). However, the service industry bore the brunt of these unfavorable consequences (Nicola et al., 2020; Kılıçlar & Aktuna., 2021; Arabacıoğlu, 2023). Due to their general conditions (isolation, loss of money, loneliness) and their unique predicament (fear, uncertainty, worry, grief, and post-traumatic stress), infected people have experienced psychological issues (Luchetti et al., 2020; Guo et al., 2020).

Uninfected people have witnessed their family and friends become ill, and some have even died, leaving them feeling helpless, anxious, and afraid (Ahorsu et al., 2020). Threat severity and vulnerability might rise to "fear of travelling" which leads to protection motivation and protective travel behaviors long after the pandemic, according to the findings of a study done by Zheng, Luo, and Ritchie (2021).

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According to the Turkish Statistical Institute's (TUİK) figures (TUİK, 2022), the total number of visitors to Turkey in 2019 was 51 860 042. In 2020, when the Covid-19 epidemic started to appear in Turkey, the total number of visitors was 15 826 266. This means a decrease of 3.27 times compared to 2019. Fear of travel is an important determinant of tourism mobility and tourism income (Mayer, & Coelho, 2021).

It is known that a large part of tourism revenues are obtained from the food and beverage sector (Kivela & Crotts, 2006). It is known that food and beverage businesses are exposed to increasing demand in today's societies for the goods and services produced. Unfortunately, some factors negatively affect this demand.

Among these factors, infectious diseases may take the first place. It is because the Covid-19 epidemic, which emerged in Wuhan, China in 2019 and was observed in Turkey on March 11, 2020, caused a significant decrease in tourism revenues. Accordingly, there has been a significant decrease in the revenues of the food and beverage industry (Aksoy, Aytaç, & Mammadova, 2021).

The Theory of Planned Behavior proposes that people perform their actions as a result of their intentions and perceived ability to control. This theory states that for a behavior to occur, the individual's intention, attitude, perceived behavioral control and social norms must come together. In this context, the relationship between vaccine trust and intention to eat out examined in this study can be explained.

That is, people who trust the vaccine and are not resistant to vaccination may show the intention and attitude to eat out. This may indicate that the intentions and attitudes in the theory of planned behavior come together to explain the intention to eat out (Ajzen, 1991). In this context, this paper aims to show the relationships among the trust of individuals in Covid-19 vaccines and their eating out intentions and to be a supply of facts for some plans and policies as well as strategies that can be created during the pandemic and afterwards.

While explaining the trust in the vaccine and the intention to eat out, which are discussed in the article, it is necessary to include the components of the theory of planned behavior. The purpose of the study is tried to be revealed more clearly by using the intentions and attitudes that constitute the theory of planned behavior. Intentions and attitudes discussed within the scope of the theory of planned behavior were included in the research as follows (Ajzen, 1991):

Intentions: This article attempts to explain the relationship between trust in Covid-19 vaccines and intentions to eat out. According to the Theory of Planned Behavior, intentions have a critical role in the realization of a behavior. This will help understand how confidence in Covid-19 vaccines may affect the intention to eat out.

Attitudes: Another important component of the theory is individuals' attitudes towards a particular behavior. In the research, it can be examined how trust in the vaccine affects the intention to eat out and how these attitudes are shaped, and the formation of intentions and attitudes with trust in the vaccine can be achieved.

The economic recession that occurred during the pandemic period affected everyone directly or indirectly (Onat, Karakuş, Pimentel, & Doğan, 2021). Especially in terms of the service sector, the situation has reached much more serious dimensions. For this reason, it is very important to put out as much scientific information as possible to manage these processes. This study, which was handled in terms of the food and beverage industry, examined the confidence levels of individuals for Covid-19 vaccines and their intention to eat out, and suggestions were presented in this direction.

Within the scope of this research, an investigation was conducted on trust in Covid-19 vaccines and intention to eat out, and it was aimed to show the relationships between them. Thus, efforts were made in order to get findings which might be a basis for information for some plans and policies besides strategies to be created for the economic activities after the pandemic (chiefly for the food and beverage industry).

In spite of plenty of research having been done on Covid-19, the lack of a study that deals with the effects of trust in the vaccine in this way is an important reason for conducting this study. This current study is very important in the sense that it fills the gap in scientific knowledge. This article is a research article. In this context, the purpose and importance of the study is tried to be explained by directly using primary data.

2 CONCEPTUAL FRAMEWORK

The Covid-19 pandemic, which has been globally effective, is a great representative of how helpless the world could be (Markose, Brown, & George, 2023). It is a fact that there are viruses which mankind has previously been disclosed to (SARS, MERS, etc.) and no vaccine has been found for them. Yet, when all those other viruses and the Covid-19 virus are compared, it can be said that Covid-19 virus is highly contagious.

That is why, it has taken all the world under its influence and has made life stop to a considerable degree. No medicine has been developed against this virus yet. Some drugs which are used to treat other infections are used, but none of them has a full ability to cure Covid-19 (covid19-druginteractions.org, 2020). At this stage, the most powerful thing mankind must fight against Covid-19 seems to be the vaccine.

All aroud the world in many different locations, a lot of scientists are trying to find a formula for a vaccine that can be used against the virus. Some of these initiatives have been successful in their trials to find vaccines, and after these vaccines were applied, people began to develop immunity against the Covid-19 virus. Nonetheless, currently, the fact that people have a positive perspective towards this vaccine is important to ensure the immunity of the community.

For this attitude to develop, people's trust in the Covid-19 vaccines is required and they should believe that they it will be beneficial for them once they use it. Nevertheless, it is striking that it is known that there are many individuals in societies who have an attitude of distrust towards this vaccine. Indeed, it is a widely known fact that among these individuals there are also healthcare workers in significant numbers who never have a trust in vaccine (Dror et al., 2020; Lucia, Kelekar, & Afonso, 2020).

Therefore, the attitudes of health-care professionals towards this vaccine may have great impact on the notions and perspectives of the other parts of the people (Verger & Dubé, 2020; Ward, Peretti-Watel, Bocquier, Seror, & Verger, 2019). Yet, because of ignoring the fact that not each healthcare professional is a vaccination expert, there may be a resistance to vaccines in society.

Vaccine resistance or anti-vaccination is a concept that has emerged with the initiation of mass vaccination (Kutlu & Altındiş, 2018). To explain this with an example, Lady Montague, the queen of concern, closely followed the mass vaccination of the people in the Ottoman Empire. In one of the letters, the queen thought that she wanted this vaccine to be applied in England, but the people could create resistance to the vaccine.

However, she wrote that the vaccine could be applied to the whole population by combating this opposition to vaccination (Töreci, 2012). In the 1800s, Edward Jenner introduced the concept of vaccine to the medical field. Vaccination became compulsory in England in the 1840s. However, in 1867, the Vaccination Opponents Association was established with the age of 14 being vaccinated (Kutlu & Altındiş, 2018). In the 1870s and 1880s, the books, brochures, and magazines issued by the anti-vaccinists borne fruit. In these years, the vaccination rate in Stockholm decreased to 40%. However, with the emergence of a widespread disease in the city in these years, the demand for mass vaccination increased again (Wolfe & Sharp, 2002). As a consequence of the studies carried out by anti-vax people in 1898, the concept of "Conscientious Objection" took place in British laws. Today, this argument is used by anti-vaccinists(Kutlu & Altındiş, 2018).

As Vergara, Sarmiento and Lagman (2021) indicate, as a consequence of the outstanding research made by experts in addition to authorities, the quest to suppress and finish the Covid-19 virus has given rise to the emanation of vaccines at a great speed (Lobo et al., 2020). On the other hand, this quick emergence causes uncertainty about the long-term side effects of the vaccine and as a result, the sense of trust can be damaged.

One other thing that may be effective on preventing public's trust in the vaccine is what the world health organization calls "infodemic", which means spreading the misleading and false information (WHO, 2021). Such news may cause misleading information that may be adopted by people. Some people may not belive in the reality of the Covid-19 virus or they may think that providing immunity against the virus may not be the central aim of vaccines (Goodman & Carmichael, 2020).

Therefore, it can be problematic circumstance which could lead to vaccine insecurity and impair the fight against the virus in the long run. To be able to achieve herd immunity, it is required to vaccine 60-70% of the population so that they can develop antibodies or they should defeat the virus (Science conversation, 2020). Thus, in order to get rid of the pandemic and go back to normal period of life, societies need to be vaccinated. Also, to ensure immunity against Covid-19 in the population, a trust in Covid-19 vaccines should be created and transformed into observable behaviors.

The concept of intention, which corresponds to the desire and fiction that individuals develop for being able to engage in any behavior, plays a decisive role between attitude and behavior (Mutlu, Çeviker, & Çirkin, 2011; Çıtak, & Yılmaz, 2023). In the consumer purchasing process, with the emergence of the need, the products that have the potential to meet the need are examined and it is decided to buy the product that is believed to have the optimum benefit. In this process, it is already known that there are many factors in the formation of purchase intention in choosing among the available alternatives.

However, in any case, in order for the purchase to take place, the purchase intention must be formed as a result of the attitudes of the individual and the factors affecting the purchase decision. As a result of the unique nature of the service industry, the purchasing decision is much more complex. There may even be a feeling of opposition or avoidance towards the purchase of certain products for many reasons (Karakuş & Kalay, 2017).

That is why, it is very significant to have a favorable understanding of the precursors of purchase intention. Therefore, the variable of vaccine confidence in this study is expected to be a positive antecedent to the intention to eat out. In order to explain this relationship, the theory of planned behavior is included in this study.

Theory of Planned Behavior is a psychological theory that focuses on a person performing a certain behavior in line with his/her intention. This theory was developed to understand, explain, and predict human behavior. The Theory of Planned Behavior is used especially in the fields of social psychology and behavioral economics (Ajzen, 1991). The basic components of the theory are as follows:

- Intention: The concept at the center of the theory is intention. Intention refers to the likelihood that a person will perform a certain behavior. For example, a person's intention to consume healthy meals is like their intention to visit restaurants that serve healthy meals.
- Attitude: According to the Theory of Planned Behavior, a person's attitude towards a behavior affects their intention to perform this behavior. Attitude is based on the positive or negative perception of behavior. For example, if a person sees consuming healthy foods as positive, it may positively affect that person's intention to consume healthy foods.
- Social Norms (Subjective Norms): They have an impact on a person's intention to perform a behavior guided by environmental factors and social influences. Social norms are a reflection of environmental influences and society's expectations. For example, thinking that one's friends and family positively support healthy food consumption may increase one's intention to consume healthy food.
- Perceived Behavioral Control: A person's ability to perform a particular behavior is also important. Perceived behavioral control refers to the degree to which a person believes himself or herself to perform a particular behavior. For example, whether a person has access to healthy foods and the economic resources to access them affects perceived behavioral control.

To achive a successful destination activities, the local people of that destination must be included in these tourism activities (Aslan, Güneren, & Çoban, 2014; Karakuş, Onat, & Güneren Özdemir, 2019). While determining the type of

tourism in a destination, the factors affecting the development of tourism and tourism policies, local people should be involved in these activities (Karakuş, 2023).

Only in this way will the tourism movement, which is accepted and supported by the local people, be successful. Developed tourism policies and strategies will also increase the destination to the desired tourism level (Erkılıç, 2019; Oborin, 2022). It is known that the tourism movement is more sustainable if the local people, which are very important for the success of the tourism movement in a destination, benefit from the things such as the goods and services that the tourism facilities produce (Wani, & Nagaraj, 2022).

As a matter of fact, the tourism movement is affected by war, economic crisis, and epidemics. For this reason, tourism facilities should produce goods and services for the local people and focus on this area in order to minimize foreign dependency and being affected by any negative situation in tourism (Karakuş, 2022). Local people have been chosen as a sample in this study, which is very important for tourism activities to achieve their purpose and to minimize the effects of any negative effects that can be observed around the world.

When examined within the scope of the Protection Motivation Theory, it is necessary to reveal some issues that prevent individuals from performing the act of eating out. That is, there are several factors which affect or determine the attitudes and behaviors of individuals, and one of them is the feeling of trust. People will not want to be in an environment where they do not feel safe. Not relying on the Covid-19 vaccine may cause individuals to resist vaccination and avoid eating out for fear of being infected with Covid-19. In summary, a significant relationship is expected between individuals' confidence levels in the vaccine and their intention to eat out.

3 METHOD

3.1 Instrument, data collection and sampling

Quantitative research techniques were adopted for this current study. The data for the research was provided through a questionnaire form. The created questionnaire was applied to the local people living in Rize. Convenience sampling method was adopted as the sampling method. For the intention to eat out, a 3-item scale developed by Ashton, Scott, Solnet ve Breakey (2010), was used. The scale of confidence in vaccines was adapted into 5 statements, taking into account the study of Látková and Vogt (2012).

A 5-point Likert-type scale was made use of to measure the whole items. The scale ranged from "strongly disagree (1)" to "strongly agree (5)". In addition, in order to obtain data about the demographic characteristics, some items asking for participants' age and gender as well as their level of education were included. The research model created for this study can be seen in Figure 1.

H1= Trust in the vaccination positively and significantly affects the intention to eating out.

Figure 1. Research Model

Source: own elaboration.

3.2 Sampling

In this current paper, convenience sampling method, which is one of the non-probabilistic (non-random) sampling methods, was used. In this sampling technique, until the sample for the study needed is reached, the data is collected by the researchers from the subjects who are eaiest to access (Gürbüz & Şahin, 2014: 130). The reason for using this sampling technique is that the sample size which would represent the population is to be reached in a short time by applying this questionnaire to the accessible local people in Rize.

In this kind of sampling method, the research population's ability to be represented is limited. Therefore, the data obtained for this research may not have been generalized for the whole population. It is because the data collected in different periods in the same population may differ (Büyüköztürk, Çakmak, Akgün, Karadeniz, & Demirel, 2009).

Within the scope of the research, residents living in Rize were selected as the research population. When the official data for 2020 is examined, it is seen that the total population of Rize is 344 359 people. Of this people, 172 469 are men and 171 890 are women (Population Data, 2021). While determining the sample size, the universe and sample size tables created by Ural & Kılıç (2005) were used.

According to these tables, the sample size of 384 was determined to be sufficient in samples of 100 000 people and above. Within the scope of this study, a web survey and a face-to-face survey were prepared. Web surveys were distributed on social media. The face-to-face questionnaire was collected by two people in the city center of Rize. In this context, a total of 630 questionnaires were reached.

As a result of the examination of these questionnaires, those with a missing value of 50% or more of the total number of statements were excluded from the analysis (Hair, Black, Babin & Anderson, 2013: 43). In this context, a total of 615 available questionnaires remained. Since this number of questionnaires was well above the recommended value, the analyses continued.

3.3 Data Collection Method and Analysis of Data

The data were gathered by means of a questionnaire including the scale items related to the dependent and independent variables defined above and the questions about the demographic characteristics of the local people. The questionnaire was applied to the residents in Rize. Gathered data were analyzed via SPSS and AMOS 24 packages. In the study, it was determined whether the data would show a normal distribution by looking at the skewness and kurtosis values. Since the data were normally distributed, parametric analyses were conducted.

The scales used in the research were adapted for this study. As a consequence of the translation and adaptation of a scale into a different language, it must initially be subjected to explanatory factor analysis. Therefore, in this study, firstly, explanatory factor analysis and then confirmatory factor analysis (CFA) were applied to test the validity.

As a consequence of the explanatory factor analysis, the 7th statement from the vaccine trust scale was excluded from the analyses because it was below the desired threshold value. Thus, after removing this expression, the

normal distribution of the scales was tested and subjected to reliability analysis. Eventually, structural equation modeling (SEM), which includes error variances in the model and has more significant explanatory power than regression analysis, was used in this study to identify the related relationship.

4 FINDINGS

4.1 Normality Distributions of Scales Used in the Study

The variables in the measurement tool employed in the study are intended to be normally distributed on their own and with all others combined (Çokluk, Şekercioğlu, & Büyüköztürk, 2016). To put it differently, the mutual effects of the variables employed in the study are expected to be distributed in a normal way (Hair et al., 2013). Multivariate normality tests can be graphed and statistically calculated.

A scatter diagram matrix can be used to evaluate normality graphically (Çokluk et al., 2016). It can be determined statistically by examining the multivariate normal distribution, skewness, and kurtosis values (Çokluk et al., 2016; Hair, Black, Babin, & Anderson, 2009; Tabachnick & Fidell, 2014). Critical skewness and kurtosis values influence significance levels.

The threshold values about normality ought to be at the 0.01 significance level (-2.58) and at the 0.05 significance level (-+1.96), according to Hair et al. (2009). The skewness and kurtosis tests (p>0.05) reveal that the skewness values range from -1,270 to -1.092, while the kurtosis values range from 0.588 to 1.241. The indicators regarding the kurtosis and skewness of the measurement tools used are shown in Table 1.

Table 1. Kurtosis and Skewness Values.

Statements	Skewness	Kurtosis
TIV1	-1.207	.878
TIV2	-1.226	1.131
TIV3	-1.096	.588
TIV4	-1.194	.943
TIV5	-1.270	1.241
TIV6	-1.231	1.043
EOB1	-1.237	1.047
EOB2	-1.231	1.169
EOB3	-1.166	.897

Source: own elaboration.

As observed in Table 1, -1,096 seems to be the highest skewness value in the measurement tool whereas the lowest one observed is -1,270. When looking at the kurtosis values, the greatest is 1.241 and the lowest is 0.588. These numbers fall inside the range of the above-mentioned thresholds. As a result, parametric testing will be made use of in the later stages of this research.

4.2 Descriptive Statistics

The descriptive statistics of the local people that constitute the sample of this reserach are shown in Table 2. The study of Onat et al. (2021) was used to classify the descriptive statistics used in this research.

Table 2. Descriptive Statistics of Respondents.

	N	Frekans	Percentage (%)
Gender	615		
Male		367	59,8
Female		247	40,2
Mising Value		1	0,2
Age	615		
20 and Below		182	29,6
21-30		137	22,3
31-40		94	15,3
41-50		110	17,3
51 and Above		92	15
Educational Status	615		
Primary Education		101	16,4
Secondary Education		108	17,6
High School		201	32,7
Associate's Degree		107	17,4
Undergraduate Degree		88	14,3
Doctoral & Master's Degrees		10	1,6
Monthly Income (₺)	615		
0-3000		145	23,6
3001-6000		211	34,3
6001-9000		122	19,8
9001 and Above		137	22,3

Source: own elaboration.

The majority of the local people participating in the research are women (59.8%). Men, on the other hand, make up 40.2% of the participants, as seen in Table 2. When the age ranges of the local people are taken into account, the participants aged 20 and under form the most part, with a ratio of 29.6%. This ratio is followed by 22.3% for the 21-30 age range, 15.3% for the 31-40 age range, 17.3% for the 41-50 age range, and 15% for the local people aged 51 and over.

When the educational status of the local people was examined, it was observed that 32.7% of the participants graduated from high school. 16.4% of the participants are primary school graduates, 17.6% secondary school graduates, 17.4% have an associate degree, 14.3% have a bachelor's degree, and 1.6% have a master's or doctoral degree. When the monthly income of the local people is examined, the majority (34.3%) are the participants with an income of 3001-6000 TL. It is observed that the other participants have a monthly income of 0-3000 with 23.6%, 6001-9000 with 19.8%, 9001, and above with 22.3%.

In summary, the majority of the local people participating in the research are women, between the ages of 20 and below, and high school graduates. When the monthly income of these participants is examined, it is observed that the majority of them are local people with an income of 3001-6000 TL.

4.3 Measurement Model

Validity can be described as "the degree of accuracy of the measurement, reflecting the actual differences in the observed scale scores of the measured features" (Nakip, 2006). It is more exactly how accurately the scales' expressions measure the notion they are trying to measure. (Hair et al., 2013: 3). Factor analysis, in other respects, provides for the scaling of scales as well as the assessment

of content validity and is used to test the scale's validity (J. F. Hair et al., 2013).

Factor analysis can be specified as "a multivariate statistical tecniques applied to understand a few number of conceptually significant new variables by harvesting more number of interrelated variables or to test measurement models that explain the relationships defined between factors and their indicators" (Çokluk et al., 2016). There are two types of factor such as exploratory factor analysis (EFA) and CFA (Tabachnick & Fidell, 2014: 614). Whereas EFA is commonly used in the early stages of research (Tabachnick & Fidell, 2014), exploratory studies appreciate it more (eg, searching for structures within variable sets).

On the other hand, the researcher can use CFA when there is a theoretical bias concerning the measurement structures (J. F. Hair et al., 2013). More specifically, while exploratory factor analysis is commonly used in the early stages of research, it is mostly used to explain which

component the statements in the scale are grouped under. It is commonly used in exploratory research. It is used to find structure within a freshly formed scale's variable sets (Kurtuluş, 2010).

On the other hand, in CFA, the linkages that underpin the structure generated by the variables are established by confirming the specific hypotheses that have been developed theoretically. In general, CFA analysis is used to see if the acquired data confirms the original structure of formerly used scales (Gürbüz & Şahin, 2014). Taking into account all the explanations for the current research, it was determined that the Confidence in Vaccine scale had not been used before. Since the EFA was included in both scale expressions utilized in this study because the intention to eat out scale was adapted from another study. CFA analysis was used to show the validity of all tools in the next stage. Table 3 shows the SEM and CFA goodness-of-fit values (GoFV) based on this study.

Table 3. SEM and CFA Goodness of Fit Values.

Fitness Criteria	Good Fit	Acceptable Fit	References
Overall Fitness of the Model			
χ2/df	0 ≤ χ2/df ≤ 2	2 < χ2/df ≤ 5	(Byrne, 2010)
p value	.05 < p ≤ 1.00	.01 ≤ p ≤ .05	(Gürbüz & Şahin, 2014)
Comparative Fit Indices			
RMSEA	0 ≤ RMSEA ≤ .05	.05 < RMSEA ≤ .08	(Schermelleh-Engel, Moosbrugger & Müller, 2003)
IFI	.95 ≤ IFI ≤ 1.00	.90 ≤ IFI < .95	(Marsh & Hau, 1996)
NFI	.95 ≤ NFI ≤ 1.00	.90 ≤ NFI < .95	(Byrne, 2010)
NNFI	.95 ≤ NNFI ≤ 1.00	.90 ≤ NNFI < .95	(Mulaik et al., 1989)
CFI	.95 ≤ CFI ≤ 1.00	.90 ≤ CFI < .95	(Bentler, 1992; Hu & Bentler, 1999)
Absolute Fit Indices			
GFI	.90 ≤ GFI ≤ 1.00	.80 ≤ GFI ≤ .89	(Marsh, Balla & McDonald, 1988)
AGFI	.90 ≤ AGFI ≤ 1.00	.80 ≤ AGFI ≤ .89	(Doll, Xia & Torkzadeh, 1994)
SRMR	0 ≤ SRMR ≤ .05	.05 < SRMR ≤ .08	(Gürbüz & Şahin, 2014)

Source: Onat et al., (2021).

The term "reliability" refers to the consistency of a variable or a set of variables to be measured (Hair et al., 2013). In another way of expression, it is the consistency of the responses to the scale's claims (Büyüköztürk et al., 2009). Internal consistency is a method for determining reliability, and the Cronbach Alpha reliability coefficient is the most often used method for determining internal consistency.

The minimal number of reliability coefficients (Cronbach Alpha) for the scales used in a study is 0.70, but there ought to be more (Hair, Hult, Ringle & Sarstedt, 2017). Other studies in the literature have found that 0.60 and 0.50 are acceptable. In this investigation, acceptable dependability was determined to be 0.70.

Table 4. Validity Results of Vaccine Confidence Scale (EFA Results).

Items	Factor Loading	Common Variance	Cronbach's Alpha	Eigenvalues	Total Variance
TIV1	.764	.583			
TIV2	.797	.635			
TIV3	.778	.605	0.858	3.557	59.584
TIV4	.788	.621			
TIV5	.773	.598			
TIV6	.717	.515			
KMO Measure of Sampling Adequacy					.852
Bartlett's Test of Sphericity				Approx. Chi-Square	1589.243
				df	15
				Sig.	.000

Source: own elaboration.

The EFA results of the vaccine confidence scale can be seen in Table 4. Çokluk et al. (2016: 207) indicate that this value is good enough. In accordance with this test, factor analysis can be used on this data. According to Eigenvalue, it can be stated that the TIV scale has a one-dimensional

structure. However, the common variance values of the 7th (.586) expression in the trust in vaccination scale were found to be lower than the recommended value of .60. (Hair et al., 2013: 116).

Thus, this statement was eliminated from the scale, and the analysis was completed with only six statements. The vaccine has a 60 percent explanation rate, according to the scale of trust in the vaccine. According to Hair et al. (2013: 109), in most cases, the scale's dimensions must explain 60 percent or more of the overall variance. Accordingly, the fact that the total variance explained after removing the expressions below the common variance is around 60% shows that this expectation is met in the study. Meanwhile, since the two factor loads and common variance values are over the threshold levels, the EFA results indicate that the validity of the scale validity is guaranteed.

Table 5. Validity Results of the Intention to Eat Out Scale (EFA Results).

Items	Factor Loading	Common Variance	Cronbach's Alpha	Eigenvalues	Total Variance
EOB1	.821	.675			
EOB2	.881	.776	0.831	2.243	74.760
EOB3	.890	.792			
KMO Measure of Sampling Adequacy					.705
Bartlett's Test of Sphericity				Approx. Chi-Square	728.549
				df	3
				Sig.	.000

Source: own elaboration.

The EFA results of the intention to eat out scale can be seen in Table 5. The KMO sample level is between 0.70 and0.80. Çokluk et al. (2016: 207) indicate that this value is at an acceptable level. Factor analysis can be used on this data, concurring to this test. According to Eigenvalue, it can be stated that the EOB scale has a one-dimensional structure. It can be said that the explanation rate for the scale of intention to eat out is roughly 75%.

As Hair et al. (2013: 109) indicate, the dimensions that take place in the scale are in general required to explain 60% or more of the total variance. The total variance of the DYN scale in this study is observed to be approximately 75%. It is observed that the desired value is met here. At the same time, the validity of the DYN scale can be stated based on the EFA results because both factor loads and common variance values are above the threshold values.

The TIV and EOB scales that were used in this study were adapted from earlier studies. For this reason, TIV and EOB scales were first performed on EFA. It was observed that the validity of the scales was ensured as a result of the EFA analysis. The first-level multi-factor CFA analysis was undertaken as part of the ongoing research to see if the structures of these scales, which had a theoretical explanation, were supported by the data. The results of the first level multifactorial CFA analysis are given in Table 6.

Table 6. First Level Multifactor CFA Results.

Model	Dimension	Item	Std. Path Coefficients	t Vlue	CR	AVE
1. Level	Trust in vaccine (TIV)	TIV.1	0,667	13,409	0,854	0,500
		TIV.2	0,713	14,134		
		TIV.3	0,721	14,311		
		TIV.4	0,742	16,319		
		TIV.5	0,731	14,453		
		TIV.6	0,642	Fixed *		
	Eating out behavior (EOB)	EOB.1	0,776	15,649	0,856	0,665
		EOB.2	0,876	17,519		
		EOB.3	0,790	Fixed *		
Fit indices: χ2/sd= 4,331; CFI= 0,971; GFI= 0,965; AGFI= 0,932; RMSEA= 0,074; TLI= 0,954; SRMR= ,039.						

Source: own elaboration.

Table 6 shows that dependability is guaranteed because the Composite Reliability (CR) values are greater than 0.70 (Boğan & Dedeoğlu, 2019; Fornell & Larcker, 1981). Nevertheless, because the Average Explained Variance "OAV" (average variance extracted, AVE) and standardized factor loads surpass 0.50, the scale expressions are considered to be convergent (Dedeoğlu, Balıkçıoğlu & Küçükergin, 2016; Hair et al., 2009). The values obtained as a consequence of the analyses performed in this study are listed in Table 3. As a result, construct validity and reliability can be stated to have been met (see Table 6).

4.4 Structural Model

The fundamental goal of Structural Equation Modeling (SEM) is to test a set of relationships between one or more independent and dependent variables (Gürbüz & Şahin, 2014: 323). There are one independent and one dependent variable in the model created in this study. This model can be examined using traditional analysis methods, but the purpose for adopting SEM in this study is that SEM analysis includes error variances that are not included in traditional analysis methods, improving the model's explanatory rate.

Furthermore, traditional methods targeted at assessing the links between structures make it impossible to test a model holistically. However, the fact that a model with different relations with SEM can be tested by the produced GoFVs can be shown as one of the reasons for using SEM in this study (Hayes, 2009). SEM was used in this study to test the model and hypothesis that were based on the literature. Table 7 summarizes the results of the applied SEM study in great detail.

Table 7. Structural Model Results.

Hypothes	Relationship	Std. Factor Loading (β)	t value	P value	Result
H₁	TIV ➡ EOB	0,707**	12,579	<.001	supported

Fit indices: X²/df= 4,331; **GFI=** 0,965; **CFI=** 0,971; **RMSEA=** 0,074; **AGFI=** 0,932;
R²: EOB = .499
**p<.01
TIV= Trust in Vaccination; **EOB=** Eating Out Behavior
Source: own elaboration.

As seen in Table 7, trust in the vaccine positively and significantly affects the intention to eat out (β= 0.707; t= 12.579; p<.001). Therefore, in the light of these findings, the H1 hypothesis that confidence in the trust in vaccination affects the eating out bahavior positively and significantly is supported.

Also, it is predicted that there will be a 71% increase in the eating out bahavior in the face of a one-unit change in trust in vaccination. The path coefficients inferentialed as a result of the prosesses in Table 7 are among the GoFVs specified in Table 3 (CFI= 0.971, GFI= 0.965, AGFI=0.932, RMSA= 0.074). Therefore, it can be said that the model created for this study is in good agreement with the collected data.

5 DISCUSSIONS AND CONCLUSIONS

Consumers may develop an intention to eat out for many different reasons. For example, some individuals may develop an intention to eat out to experience different food and beverage, while others may develop an intention to eat out to get away from the monotony of daily life. Özdemir & Şahin (2021) stated in their study that personal values create and shape the intention to eat out. It is possible to include personal fears in these values.

For example, individuals can change the restaurant, region, or country where they will eat due to any threat or danger. It is because, due to the nature of individuals, they do not want to be in places where they do not see themselves as safe (Vergara et al., 2021). As a matter of fact, Bahar & Çelik İlal (2020) emphasize that there is a significant economic loss in the tourism sector due to Covid-19 in their study.

This economic loss is due to the fact that individuals do not see themselves as safe and do not want to consume the goods and services produced by tourism facilities. At this point, the phenomenon of eating out, which is considered for this research and constitutes a very important part of tourism, has been discussed with the variable of trust in the vaccine. The relationship between these variables is explained as follows.

The results of this investigation show that there is a meaningful and directly proportional relationship between individuals' trust in Covid-19 vaccines and their eating out behaviour. The theory of planned behavior also supports this finding. It is because this research includes the vaccine trust variable as the justification for intentions and attitudes. As a result of the study, there is a parallel increase and decrease with vaccine confidence and intention to eat out.

As a result of a 1-unit increase in vaccine confidence, there will be an approximately 71% increase in the intention to eat out. In other words, in the theory of planned behavior, the intention to eat out can turn into behavior by providing the justification that creates the intentions and attitude. With this point of view, it is necessary to increase the level of trust in vaccines so that individuals can participate more in social

and economic activities such as eating out. It is very important to increase the confidence in the Covid-19 vaccines in the society.

Currently, the greatest weapon of human beings against the Covid-19 pandemic is the vaccine, and it is very important to gain social immunity. At this point, efforts to increase the confidence level of the society in vaccines will not only increase their intention to eat out but will even accelerate the adaptation of the society to the (new) normal. For this reason, it is recommended that the necessary planning, policy production, and strategy development activities for the pandemic period and beyond should be carried out by taking into account the emerging findings.

In this study, the relationship between the intention to eat out and trust in the vaccine is revealed. No study has been found in the literature explaining the relationship between these two variables. However, it is possible to talk about the positive effects of this concept (Keskin, Sezen, & Dağ, 2020; Nişancı, Özdoğan, & Bölüktepe, 2018) and its negative effects (Özdemir, 2010) in studies examining the concept of intention to eat out in the literature. In this study, the relationship between the intention to eat out and trust in the vaccine is explained as positive and significant.

The following recommendations are presented within the scope of this study:

▪ It is necessary to identify the factors that cause individuals in the society to distrust the vaccine.
▪ Insufficient pharmacological knowledge of individuals about Covid-19 vaccines can cause uncertainty about the vaccine and can damage the sense of trust. For this reason, the society should be properly informed about vaccines.
▪ False information pollution, which the World Health Organization calls "infodemic", should be combated. There is a lot of misleading information, especially on social media. For this reason, serious steps should be taken to improve the media literacy of the society.
▪ Misleading information sources adopted by the society are actually an opportunity at the same time. Efforts to make these information sources disseminate accurate information are important.
▪ Eating out is not just about nutrition. Especially with the effect of the restrictions that emerged during the pandemic period, the society experienced problems at the point of socialization, and this caused emotional problems in individuals (Luchetti et al., 2020). For this reason, it is necessary to develop the necessary strategies for the normalization of eating out, which is an important social activity.
▪ People act reluctantly in an environment where they do not feel safe. For this reason, the rules for ensuring this

trust in food and beverage businesses should be followed.

- In this study, the relationship between vaccine trust and intention to eat out was tried to be explained more clearly by using the intention and attitude dimensions that constitute the theory of planned behavior. In future studies, the variables in this research can be examined by considering the perceived behavioral control and social norms dimensions that constitute the theory of planned behavior. Example: Perceived Behavioral Control: The Theory of Planned Behavior also takes into account the ability of individuals to perform a behavior. How does trust in the Covid-19 vaccine affect people's ability to control eating in public?

This allows for an analysis that seeks to understand the role of perceived behavioral control and it can be investigated in future studies. The other dimension, the Social Norms dimension: Another important component of the theory suggests that individuals shape their behavior according to environmental norms. In the study, the effect of social norms on this relationship can also be addressed by examining the relationship between vaccine confidence and expenditures on food and beverage.

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Final Table, CRediT author statement.

Term	Definition	Author 1
Conceptualization	Ideas; formulation or evolution of overarching research goals and aims	x
Methodology	Development or design of methodology; creation of models	x
Software	Programming, software development; designing computer programs; implementation of the computer code and supporting algorithms; testing of existing code components	x
Validation	Verification, whether as a part of the activity or separate, of the overall replication/ reproducibility of results/experiments and other research outputs	x
Formal analysis	Application of statistical, mathematical, computational, or other formal techniques to analyze or synthesize study data	x
Investigation	Conducting a research and investigation process, specifically performing the experiments, or data/evidence collection	x
Resources	Provision of study materials, reagents, materials, patients, laboratory samples, animals, instrumentation, computing resources, or other analysis tools	x
Data Curation	Management activities to annotate (produce metadata), scrub data and maintain research data (including software code, where it is necessary for interpreting the data itself) for initial use and later reuse	x
Writing - Original Draft	Preparation, creation and/or presentation of the published work, specifically writing the initial draft (including substantive translation)	x
Writing - Review & Editing	Preparation, creation and/or presentation of the published work by those from the original research group, specifically critical review, commentary or revision – including pre-or postpublication stages	x
Visualization	Preparation, creation and/or presentation of the published work, specifically visualization/ data presentation	x
Supervision	Oversight and leadership responsibility for the research activity planning and execution, including mentorship external to the core team	x
Project administration	Management and coordination responsibility for the research activity planning and execution	x
Funding acquisition	Acquisition of the financial support for the project leading to this publication	x

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