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Perceptions of Covid-19 Vaccines among Students at DEBESMSCAT-Cawayan Campus, Cawayan, Masbate, Philippines

Sheena Joyce P· Velza¹ [⊠], Roger Y· Ibañez Jr·¹a[,] Jacob Frederick P· Velza¹ ¹ Dr· Emilio B· Espinosa Sr· Memorial State College of Agriculture and Technology[,] Philippines

Article Info

Abstract

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This study investigated students' perceptions at DEBESMSCAT Cawayan Campus regarding COVID-19 vaccines. A descriptive survey method was used, and data were collected using a questionnaire. The findings revealed that most students at DEBESMSCAT Cawayan Campus had received COVID-19 vaccinations, falling short of the targeted vaccination rate of 70% mandated by the Commission on Higher Education (CHED) for the resumption of face-to-face classes. Some unvaccinated students expressed willingness to receive the vaccine. Overall, the COVID-19 vaccine was perceived as a crucial tool in preventing and protecting individuals from the virus, ensuring the safety of students' health in the face of the COVID-19 pandemic. However, a portion of students harbored doubts about the vaccine's Efficacy in protecting against the virus. The study identified common reasons behind vaccine hesitancy among students, including fear of potential side effects, lack of trust in the vaccine's safety and effectiveness, and exposure to misinformation about the vaccine. These findings highlight the importance of addressing the concerns of hesitant students through educational initiatives and awareness campaigns emphasizing the benefits of vaccination. Such efforts will play a vital role in promoting vaccine acceptance and ensuring the well-being of students and the broader community in the face of the ongoing pandemic. Further research is warranted to explore the underlying factors influencing students' decision-making processes regarding vaccination.

Introduction

The COVID-19 pandemic has had far-reaching consequences globally, causing significant morbidity and mortality (Smith et al., 2020). In response to this unprecedented crisis, researchers have swiftly developed vaccines that effectively prevent severe illness and death associated with COVID-19 (Polack et al., 2020; Voysey et al., 2021). However, despite the availability of vaccines, vaccine hesitancy remains a challenge, influenced by factors such as concerns about side effects. lack of trust, and misinformation (Fisher et al., 2021; Freeman et al., 2020). The COVID-19 pandemic has prompted the implementation of various preventive measures, including social distancing, personal hygiene, and

quarantine protocols, to mitigate the spread of the virus (Ahmed, 2020; Arya, 2020). These measures have been significant in lowincome countries, where limited resources and weaker health systems make pandemic control more challenging (Vieira et al., 2020). Despite the challenges, these measures have effectively reduced the spread of the virus and highlighted the need for global collective action in combating the pandemic. These measures have had significant socioeconomic impacts, with businesses forced to close, increasing unemployment and dependence on government support (Deb et al., 2020). In the educational sphere, students have had to adapt to new modes of learning, such as online and modular approaches, relying on electronic

devices.

Developing and deploying effective COVID-19 vaccines have become crucial in ending the pandemic. These vaccines have undergone rigorous testing to ensure their safety and Efficacy in combating the virus (Bhartiya et al., 2021). However, vaccines' rapid development and deployment have also raised doubts and misconceptions among individuals. In this context, this study aims to explore the perceptions and opinions of students at the DEBESMSCAT Cawayan Campus regarding the COVID-19 vaccine. Vaccines have been pivotal in controlling pandemics, including influenza and other infectious diseases (Pogue et al., 2020). The expedited development of COVID-19 vaccines, achieved within nine months of virus identification, represents an unprecedented achievement through political will, global collaboration, and favorable circumstances (Bhartiya et al., 2021). However, this accelerated timeline has contributed to doubts and misconceptions that warrant investigation.

The objective of this study is to examine the perceptions of students at the DEBESMSCAT Cawayan Campus concerning the COVID-19 vaccine. Specifically, the study aims to determine the reasons behind vaccine hesitancy among certain students. By addressing these objectives, this study intends to contribute to the existing body of knowledge on vaccine perceptions and inform the development of effective strategies to address concerns related to COVID-19 vaccination. As the COVID-19 vaccination program gains momentum, understanding the factors influencing vaccine acceptance and hesitancy is essential for ensuring its successful implementation. The findings of this study will provide valuable insights into the attitudes and concerns of students, who represent a significant demographic in the population, contributing to evidence-based strategies for promoting vaccine acceptance and addressing hesitancy.

Method

For this study, a descriptive research design was used to gather information about the perception of the COVID-19 vaccine among students at the DEBESMSCAT Cawayan Campus. Descriptive research is suitable for this study as it aims to describe and understand the students' perceptions without manipulating or controlling variables. A convenience sampling technique was employed to select the sample for this study. Convenience sampling involves selecting participants based on their availability and willingness to participate rather than using a random selection process. In this case, the researchers selected students who were readily accessible and willing to participate. The total number of respondents targeted for this study was 150 students. Since convenience sampling does not ensure representativeness, the findings of this study may be limited to the characteristics of the students who participated and may not be generalizable to the entire population of the DEBESMSCAT Cawayan Campus.

This study's primary data collection method was a questionnaire administered through Google Forms. The researchers adopted Mant et al.'s survey questionnaire (2021), which consisted of questions related to perceptions of the COVID-19 vaccine. The questionnaire was designed to be easily understandable and accessible to the students. To distribute the questionnaire, the researchers shared the link to the survey questionnaire on social media platforms such as Facebook and Messenger. Specifically, the link was shared in the Group Chat of the students of DEBESMSCAT Cawayan Campus. This method allowed for convenient and efficient data collection, considering the limitations posed by the ongoing pandemic.

The collected data will be analyzed using descriptive statistics. The researchers aim to calculate the mean, frequency, and percentage of students' perception of the COVID-19 vaccine at the DEBESMSCAT Cawayan Campus. To calculate the mean, the formula $\bar{x} = \sum fx/N$ was utilized, where \bar{x} represents the mean, Σfx denotes the sum of all frequencies, and N represents the total number of observations. The researchers also computed the percentage of each perception using the formula $\% = \Sigma fx/N \ge 100\%$, where % represents the total percentage, Σfx is the sum of all frequencies, and N is the total number of respondents. Based on the convenience sample obtained, these analytical techniques will provide insights into the students' perception of the COVID-19 vaccine at the DEBESMSCAT Cawayan Campus. However, it is essential to acknowledge the limitations of convenience sampling and interpret the findings cautiously, considering the potential bias the sampling method introduces.

Results and Discussion

The table analyzes vaccinated and unvaccinated students at the DEBESMSCAT Cawayan Campus. It provides insights into the student's vaccination status, preferred vaccines, experienced side effects, and willingness to be vaccinated. The findings shed light on the students' perceptions and choices regarding COVID-19 vaccination. Out of the 150 respondents, 55.3% reported being vaccinated, while 2% indicated being partially vaccinated. In contrast, 42.7% of the students said they had not received the vaccine yet. These numbers reflect the current vaccination status of students at the DEBESMSCAT Cawayan Campus. Notably, the mass vaccination program in the Philippines is expected to increase the number

Questions	Frequency	Percentage
1. Are you vaccinated?		
Yes	83	55.3
Partially vaccinated	3	2.0
Not yet vaccinated	64	42.7
2. What was your preferre	d vaccine?	
Pfizer	32	21.3
Sinovac	32	21.3
Johnson & Johnson	13	8.7
Moderna	7	4.7
AstraZeneca	2	1.3
3. What were the side effe	cts?	
Fever	30	20
Swelling	6	4
Headache	30	20
Dizziness	6	4
Feeling weakness	36	24
Migraine	1	0.7
Coldness	1	0.7
Sleepy	1	0.7
None	15	10
4. Are you willing to be va	ccinated?	
Yes	109	72.7
No	41	27.3
5. What was your preferre	d vaccine?	
Pfizer	37	24.6
Sinovac	28	18.7
Johnson & Johnson	16	10.7
Moderna	9	6
AstraZeneca	3	2

Table 1. Analysis of Vaccinated and Unvaccinated Students

of vaccinated individuals.

The table reveals the students' preferred vaccines among those who responded. Pfizer and Sinovac emerged as the top choices, receiving 21.3% of the responses. Johnson & Johnson followed with 8.7%, Moderna with 4.7%, and AstraZeneca with 1.3% of the responses. This preference aligns with a survey conducted in the Philippines, where Sinovac Biotech and Pfizer-BioNTech were the most recommended COVID-19 vaccine brands (Liu et al., 2021). Sinovac, a Chinese vaccine, accounted for most of the vaccines received in the country then. Regarding the side effects experienced, the table shows that fever and headache were the most commonly reported, affecting 20% of the respondents, and feeling weak after vaccination was experienced by 24% of the students. At the same time, 4% reported swelling at the injection site and dizziness. A smaller percentage of students experienced migraine, coldness, and sleepiness. Notably, 10% of the respondents reported no adverse side effects. It is essential to acknowledge that most of the reported side effects were minor and short-lived, lasting only a few days (Kaur et al., 2021). These findings provide insights into the experiences of vaccinated students at the DEBESMSCAT Cawayan Campus.

Results showed that over half of the students (42.70%) remained unvaccinated, which can be related to vaccination reluctance. Concerns about vaccination safety continue to be among the leading causes of vaccine reluctance. Multiple studies confirm the conclusions of this study, indicating that persons who are hesitant to acquire a COVID-19 vaccination prioritize safety (Brandt et al., 2021). Some issues with the COVID-19 vaccine were its novelty and quick development (Bell et al., 2020). greater vaccine effectiveness has also been linked to an increase in intention to get vaccinated against COVID-19, with the projected advantage of greater Efficacy serving as a significant positive predictor of intent to be vaccinated using a COVID-19 vaccine (Kaplan et al., 2019). Consequently, safety and effectiveness concerns are significant, independent predictors of vaccination hesitation.

Concerns with COVID-19 vaccinations are widespread (Lin et al., 2020). Despite

vaccination reluctance, vaccine demand grows over time, with significant variations in vaccine access among and between countries (Kothari et al., 2021). Even though the fundamental reasons for vaccination hesitancy are frequently context-specific, several experts concur that trust and confidence in the COVID-19 vaccine are crucial in promoting vaccine adoption (King et al., 2021). By Palgi et al. (2021), vaccination reluctance predicts a quantitative and substantial fraction of COVID-19 vaccine side effects, indicating that side effects in vaccinated persons include a psychosomatic nocebo component. The data also demonstrated varied risk levels of subsequent side effects, indicating the necessity for tailored public health messaging.

Despite the potential adverse effects for the public, Merkley and Loewen (2021) found that consumers ranked the brand as the most critical feature, notably Pfizer and Moderna, amongst other brands. Furthermore, vaccines with an effectiveness of 90% or above were chosen, with one out of every 100 patients reporting adverse effects. When selecting a COVID-19 vaccine, we found that safety and Efficacy are the most important considerations. Interestingly, consumers' preferences for accessible vaccinations were shown to be driven by their knowledge and comprehension of the COVID-19 vaccine. Meanwhile, weakness, fever, and headache were discovered to be the most prevalent negative consequences of post-Covid 19 vaccination, which was validated by Hatmal et al. (2021), who investigated a broad spectrum of probable post-vaccination side effects independent of the type of COVID-19 vaccine received. The most prevalent adverse effects included fatigue/tiredness, injection site discomfort and swelling, headache, drowsiness and lethargy, chills, myalgia, joint pain, and fever.

The quick creation of COVID-19 vaccines due to the pandemic's urgency, technology improvements, and current vaccine candidates (Ball, 2021) has led to several rumors. Vaccine rumors are pervasive during the post-vaccination interval. A small fraction of individuals indicated interest in getting involved in vaccination experiments (Abu-Farha et al., 2020). Another study

discovered that COVID-19 disinformation and conspiracy theories have a detrimental effect on vaccination reluctance. This might be a pivotal hurdle to effectively managing the epidemic. Vaccine hesitancy was associated with a reliance on social media as the primary source of information for COVID-19 vaccines (Sallam et al., 2021). As a result, because multiple vaccines are being utilized in the Philippines' national immunization program, there is an urgent need to examine adverse reactions and perceptions following vaccination to combat vaccine hesitancy and myths.

The table indicates that 15.3% of the students who have not yet been vaccinated expressed their willingness to receive the vaccine. On the other hand, 27.3% of the students said they were not willing to be vaccinated. These findings are consistent with a study conducted in Kuwait, where approximately 53.1% of the participants expressed willingness to accept a COVID-19 vaccine (Algudeimat et al., 2021). Factors such as gender, perception of vaccine health hazards, previous influenza vaccination, and self-perceived risk of infection influenced individuals' willingness to be vaccinated. Despite the adverse effects of COVID-19 vaccines, it was shown that practically all responders were willing to be immunized. This finding is reinforced by Caple et al. (2021), who found that most respondents (62.5%) were willing to get vaccinated against COVID-19. To reduce the enormous health, social, and economic harm of COVID-19, the Philippines is launching a nationwide immunization effort to combat the worldwide pandemic. Caple et al. investigated COVID-19 immunization intent in the country by launching a national open-access online survey two months before the national vaccination campaign began. According to the Health Belief Model (HBM), individuals with enough motivation and cues to act are more likely to embrace disease-preventative activities and accept medical treatments such as immunizations.

Finally, results revealed significant vaccine brand preference among Filipino student respondents. Most participants were 'willing' (72.7%) to be vaccinated using a COVID-19 vaccine made in the USA. These findings mirror those reported by Caple et al. (2021) already described above, which showed that most Filipinos who were opting to get vaccinated preferred the Pfizer vaccine. In contrast, most participants indicated they needed vaccination (64 or 42.7%). Regardless of the reasons, this vaccine preference has to be managed by the national government to prevent Filipinos from unnecessarily delaying immunization to obtain their preferred vaccine brand.

Among the students who expressed willingness to be vaccinated, Pfizer was the most preferred vaccine, with 24.6% of the responses. Sinovac followed with 18.7%, Johnson & Johnson with 10.7%, Moderna with 6.0%, and AstraZeneca with 2.0% of the responses. These preferences align with a survey in the Philippines, where Sinovac and Pfizer were the top choices (Social Weather Stations, 2021). These results highlight the students' preferences regarding vaccine brands if allowed to choose. According to the study, many pupils (42.7%) remain unvaccinated against COVID-19 and are still hesitant to get immunized (27.3%). The study identified vaccine hesitancy, or a reluctance to vaccinate, as one of the primary reasons respondents did not get vaccinated, despite evidence that immunizations are vital in enhancing public health outcomes. With this inadequate healthcare and other medical problems, the healthcare system is unlikely to satisfy the needs of people living within its capabilities. The epidemic further strained countries, which has overloaded several healthcare systems.

Table 2 presents the students' diagnosis, symptoms, vaccine hesitancy, influences, perceptions, and realizations. Of the 150 responses received, four students (2.7%) from DEBESMSCAT Cawayan Campus reported being diagnosed with COVID-19, while 146 students (97.3%) stated they had not been diagnosed. The results demonstrated a downward trend in the proportion of confirmed COVID-19 cases. It might be a reason that prevents students from being immunized. Caple et al. (2021) discovered that Filipinos' tolerance to the COVID-19 vaccine led to brand preference. They had little interest in immunizations for personal reasons, claiming ineffectiveness and severe side effects. In the

words of Fisher et al. (2020), refusal to receive vaccines can be linked to anti-vaccine views, beliefs, feelings, dislikeness, desire, or faith. Additional immunization difficulties led some to assume that the COVID-19 vaccine had been ineffective.

Regarding the symptoms experienced by the students diagnosed with COVID-19, the table reveals that 18.0% reported having a fever, 10.7% experienced a loss of taste and smell, and 3.3% had shortness of breath. These symptoms align with typical manifestations of COVID-19 infection reported in various studies and highlight the importance of identifying and monitoring such symptoms for early detection and appropriate management. The COVID-19 pandemic remains a significant global concern, with an enormous impact on various aspects of life. To effectively reduce the transmission of COVID-19, it is crucial to develop efficient treatments, and vaccination has been proven to be a routine and practical approach to controlling infectious diseases (Hajj et al., 2015).

According to Santos et al. (2021), COVID-19 patients may have a quick loss of smell, usually accompanied by a loss of taste. These symptoms may occur without a runny or stuffy nose. Among individuals who tested positive for COVID-19, 68% lost fragrance and 71% lost taste. Other self-reported symptoms associated with a positive COVID-19 test were fatigue (81%), fever (70%), fatigue or arthritis (63%), diarrhea (48%), and nausea (27%). The most common symptoms in the initial patients were fever, cough, myalgia, and difficulty breathing (Jotz et al., 2020). However, when the pandemic subsided, additional signs and symptoms became accepted as normal clinical presentations of the disease, prompting the community to discontinue vaccination. However, one unique symptom began to occur in a growing percentage of patients: smell and taste dysfunction, characterized by a loss of responsiveness to taste and smell.

Most learners, a unique group of young individuals, were unwilling to get vaccinated owing to concerns about the security and effectiveness of vaccinations, considering their speed and technology of manufacture (Mant et al., 2021). As a consequence, an individual under the age of 25 was determined as a super transmitter of the COVID-19 virus: well-educated, unvaccinated, and unwilling to follow physical distance and protective mask guidelines. Finally, students, the study's respondents, although being a more wellinformed demographic group, may still have health literacy gaps, which is concerning as students assume greater responsibility for their well-being and make autonomous health decisions.

The most commonly cited reason was that their parents would not allow them to get the vaccine, accounting for 28.0% of the respondents. Other reasons included concerns about their immune system not being ready (27.3%), potential adverse side effects (24.0%), fear of death (8.0%), allergies (8.7%), and being diabetic (0.7%). Vaccine reluctance has hampered COVID-19 adult immunization initiatives in numerous countries. According to this survey, data on reluctance among children and adolescents is mainly limited to the parental perspective (28.0%). Vaccination reluctance trends are continually changing, even within countries, and are impacted by vaccination safety reports, the variation of coronavirus that may be circulating, and current infection rates. Understandably, investigations of COVID-19 vaccination reluctance have primarily focused on adults, with few data on children and adolescents. This suggested that the reasons for avoiding immunization were due to students' misinformation regarding the advantageous effects of the COVID-19 vaccine.

Others believe that mistrust of authorities, political interests, and pharmaceutical business lobbyists played a significant influence. Users expressed concerns about the authenticity and integrity of information and the objectives of certain persons, organizations, or institutions in advocating vaccination, citing prior wrongdoing. Individuals, for example, believed that the pharmaceutical industry's sole motivation for promoting COVID-19 immunization was financial benefit. Furthermore, several students stated that their immune systems were insufficient for dealing with a potential infection and did not require vaccination. Users were also concerned about probable adverse effects and vaccine-related

Questions	Frequency	Percentage		
1. Are you diagnosed with COVID-19?				
Yes	4	2.7		
No	146	97.3		
2. What were the symptoms you experience	ed?			
Fever	27	18.0		
Loss of taste and smell	16	10.7		
Shortness of breath	5	3.3		
3. What are your reasons for not getting the COVID-19 vaccine?				
Might have negative side effect	36	24.0		
My immune system might not be ready	41	27.3		
I might die	12	8.0		
My parents will not allow me to get the vaccine	42	28.0		
Allergy	13	8.7		
Diabetic	1	0.7		
4. What are your reasons for not getting the COVID-19 vaccine?				
Travel pass	36	24.0		
Health immunization	41	27.3		
Mandated by the LGU office	12	8.0		
To attend face-to-face classes	42	28.0		
For my safety	1	0.7		
5. Who influenced you to be vaccinated?				
Neighbor	9	6.0		
Family	58	38.7		
News from TV/Radio	20	13.3		
Health personnel	34	22.7		
Friends	1	0.7		
Self-motivation	3	2.0		
Church mate	3	2.0		
Teachers	1	0.7		
6. What are your perceptions on the COVID-19 vaccine before getting vaccinated?				
It contains microchip	13	6.0		
Not safe and can cause death	62	41.3		
It is still on the test because it was developed quickly	55	36.7		
Can create variant or mutant	14	9.3		
Can cause people to be magnetic	8	5.3		
Vaccine is safe	1	0.7		

Table 2. Diagnosis, Symptoms, Vaccine Hesitancy, Influences, Perceptions, and RealizationsQuestionsFrequencyPercentage

7. What are your realizations on the COVID-19 vaccine after getting vaccinated?				
It prevents me from getting the COVID-19	48	32.0		
Helps me to boost my immune system	39	26.0		
Helps not to be afraid to go to places with lots of people	51	34.0		
It is not good for those who have not felt good about their health	1	0.7		
None	24	16.0		

harm, leading to declining immunization.

In general, parents were opposed to their children's COVID-19 vaccine. Thus, concerted education to reassure concerned parents about the vaccine's safety is critical to increasing immunization coverage. The most straightforward predictors of parents' COVID-19 vaccine rejection for children are a lack of assurance regarding the vaccine's safety and effectiveness, followed by a lack of trust in the government, beliefs that children are immune to the illness, and a lack of family and community backing for COVID-19 vaccination (Karlsson et al., 2021). Positive sentiments regarding vaccination experiences or results may also influence parents' desire to immunize their children. Demographic factors have also been linked to parental COVID-19 vaccination uptake. These include better parental financial status, educational attainment, and whether the parent has gotten the COVID-19 immunization (Szilagyi et al., 2021).

The findings indicated that many parents are unwilling to immunize their young ones, even if they have taken it. Parents' rejection of their children's vaccinations significantly impacted their vaccine reluctance. As a result of gender, moms had a statistically significant impact on vaccination hesitation compared to dads. As a result, moms should increase their attitude toward their children's COVID-19 vaccinations. On the other hand, causes of vaccine hesitancy include disinformation about vaccine side effects. 24.0% of students expressed more dread of potential vaccine side effects than contracting COVID-19, which can be explained by social media and personal experiences from social circle members that bolstered these fears.

The finding that parents' permission plays a significant role in the decision not to

get vaccinated highlights the importance of parental influence on the vaccination choices of students. It suggested that interventions and educational campaigns should target the students and engage parents in discussions to address their concerns and provide accurate information about the vaccine's safety and Efficacy. Interestingly, the concern about the readiness of the immune system was another prevalent reason among the participants. This suggests a need for targeted educational efforts to dispel misconceptions and provide evidence-based information about the vaccine's ability to protect individuals with different immune statuses. A notable proportion of the participants expressed the fear of potential adverse side effects and the fear of death. These concerns may arise from misinformation or sensationalized reports on social media or other sources. Efforts to enhance vaccine literacy and provide clear, accessible information about the vaccine's safety profile can help alleviate such fears and promote informed decision-making.

It is worth noting that a small percentage of participants mentioned allergies and being diabetic as reasons for not getting vaccinated. This highlights the importance of addressing specific health concerns and providing tailored guidance for individuals with preexisting conditions. Healthcare professionals and vaccination campaigns should emphasize the importance of consulting with medical experts to assess individual risk factors and address concerns related to allergies or other medical conditions. Comparing these findings with previous studies, a study titled "College Students' COVID-19 Vaccine Hesitancy" reported that 23.5% of respondents responded negatively to vaccinating (Jain et al., 2021). The higher proportion of vaccine hesitancy observed in our study (44.0% comprising negative responses) suggests that specific factors, such as parental influence and concerns about immune readiness, play a significant role among the student population at the DEBESMSCAT Cawayan Campus.

Another study titled "COVID-19 Knowledge, attitude, and Practice among Medical Undergraduate Students in Baghdad City" found that students had a high level of overall awareness (91.8%) regarding COVID-19, with social media being the primary source of knowledge (Singh et al., 2020). These findings highlight the need to utilize social media platforms effectively to provide accurate and reliable information about the COVID-19 vaccine, address concerns, and counter misinformation. The findings emphasize the influence of parental permission, concerns about immune readiness, potential side effects, fear of death, allergies, and pre-existing medical conditions. Future interventions and educational campaigns should address these concerns and provide accurate information to increase student vaccine acceptance. Additionally, leveraging social media to disseminate reliable information can be crucial in promoting vaccine literacy and combating vaccine hesitancy. The table presents the various reasons reported by the respondents for getting vaccinated. The most commonly cited reason was "health immunization," accounting for 45.3% of the responses. A significant proportion, 24.7%, mentioned that obtaining a travel pass was their primary motivation for vaccination. Additionally, 12.7% indicated that they perceived it as a requirement mandated by the LGU office. A smaller percentage of respondents, 4.7%, expressed their desire to be vaccinated in preparation for attending faceto-face classes. Lastly, only 2.7% mentioned their safety as the driving factor behind their decision to receive the COVID-19 vaccine.

Comparing these findings with a study conducted by Mant et al. (2021) on the perceptions of the COVID-19 vaccine among students in some Canadian universities, it is evident that most students in both contexts express an intention to get vaccinated. However, it is essential to note that there may be nuanced concerns regarding the Efficacy and safety of the vaccine among this student population, which public health authorities should consider as they facilitate vaccine distribution and education. Among the participants, nine individuals (6.0%) stated that their neighbors influenced them, while the majority, 58 participants (38.7%), mentioned that their families played a significant role in their decision to get vaccinated. Approximately 13.3% of respondents reported being influenced by news from TV or radio, while 22.7% mentioned that health personnel influenced their vaccination decision. Some respondents indicated being influenced by their selfmotivation, churchmates (2.0%), friends, and teachers (0.7%).

The findings highlight the diverse range of sources individuals rely on for information regarding COVID-19, including television, radio, newspapers, social media, friends, coworkers, healthcare practitioners, scientists, and governments. These sources of information hold the power to shape individuals' acceptance or rejection of COVID-19 vaccines. Therefore, it is crucial to effectively communicate transparent and trustworthy information about vaccine safety and Efficacy to build public trust, especially among those who may harbor concerns or hesitations towards vaccines (Siegrist & Zingg, 2014). The influence of family members emerges as a significant factor in the decision-making process, with 38.7% of respondents attributing their vaccination decision to their families. This underscores the role of interpersonal relationships and support networks in influencing individuals' attitudes toward vaccination. Future efforts to promote vaccine acceptance should consider targeting family units and engaging with family members to address concerns or misinformation.

The influence of health personnel is also noteworthy, as 22.7% of respondents cited them as influencers. This finding highlights the importance of healthcare professionals in providing accurate and reliable information about COVID-19 vaccines. Strengthening communication channels between health personnel and the public can enhance vaccine acceptance and dispel misconceptions. It is worth noting that other sources of influence, such as friends, self-motivation, churchmates, and teachers, had a minor impact on the decision to get vaccinated. However, regardless of its magnitude, every influence contributes to the overall landscape of vaccine acceptance.

The table showcases the frequencies and percentages of different perceptions among the respondents. Before getting vaccinated, many respondents held various concerns and misconceptions about the COVID-19 vaccine. Among the respondents, 6.0% believed that the vaccine contains a microchip, 41.3% perceived it as unsafe and potentially causing death, 36.7% thought that the vaccine was still being tested due to its rapid development, 9.3% believed it could create variants or mutants, 5.3% said it could cause people to become magnetic, and only 0.7% considered the vaccine to be safe.

These findings align with previous research conducted by Nurul Azmawati Mohamed et al., which revealed that respondents with positive perceptions about the protective nature of vaccines were nine times less likely to refuse vaccination for their children due to negative media exposure. This suggests that addressing misconceptions and providing accurate information about the COVID-19 vaccine can positively influence vaccination decisions. After receiving the COVID-19 vaccine, respondents reported a shift in their perceptions. Among those who responded, 32.0% stated that the vaccine prevented them from contracting COVID-19, 26.0% believed that it helped boost their immune system, 34.0% felt less fearful about going to crowded places, and only 0.7% expressed concerns about its effects on individuals not feeling well health-wise. Cristie (2021) has highlighted the effectiveness of vaccines in strengthening the body's natural defenses and reducing the risk of severe illness and death. While it is important to note that no vaccine provides 100% immunity, vaccinated individuals are more protected and are likely to experience milder symptoms if they contract the disease. It aligns with the WHO's statement that vaccination is a simple, safe, and effective strategy to defend against hazardous diseases before contracting them.

Conclusion

The study revealed that many students

have not yet received the COVID-19 vaccine. It is a cause for concern, as vaccination is one of the most effective ways to prevent the spread of the virus. There are many reasons why students may have yet to be vaccinated, including concerns about parental permission, immune system readiness, and potential side effects. However, some motivations for vaccination include health immunization, travel pass acquisition, and compliance with LGU office requirements.

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