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ANXIETY LEVEL IN FACE-TO-FACE COMMUNICATION BY AGE AND TYPE OF OCCUPATION DURING OMICRON VARIANT TRANSMISSION IN PETANGLONG CENTRAL JAVA

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Abstract

This study aims to examine anxiety level in face-to-face communication by age and type of occupation during Omicron variant transmission. The approach used in the research is quantitative. Data collection techniques using questionnaires were carried out in the Pekalongan City, Pekalongan Regency, and Batang Regency areas. The technique for analyzing data applied hypothesis testing using the contingency correlation method. This analysis tool through the contingency table is applied to determine the relationship between variables from data that includes qualitative aspects, including opinions, perceptions, or judgments about the characteristics of a situation. The transmission of the Omicron COVID-19 variant has a correlation with the level of anxiety in conducting face-to-face communication both according to age and job type criteria. Based on the criteria that apply to the research methodology, the correlation value in hypothesis testing according to age criteria is 45.53% and in hypothesis testing according to job type criteria, 45.42% is classified as moderate or sufficient. This research show that there is indeed a level of anxiety in the community in conducting face-to-face communication.

Keywords*: face-to-face communication, Petanglong, anxiety level, omicron variant*

1. INTRODUCTION

As a social being, everyone who lives in a community group, in carrying out their daily activities from the time he wakes up in the morning until he goes back to sleep at night is always involved in communication activities (Nurhadi & A.W, 2017). Communication has an important role in this world. Communication is even able to touch all aspects of life. Humans as social beings can only live and develop and act as humans by relating and cooperating with other humans by means of communication. Most of human activities are always related to communication. Everything requires communication (Kurniati, 2016).

Communication is a process in which two or more people form or exchange information with each other, which in turn will arrive at a deep mutual understanding (Rogers & Kincaid, 1981). In the communication process, the communicator conveys a message to the communicant with the aim that the communicant understands what is meant by the communicator (Ramadanty, 2014). What needs to be considered in the communication process is, the message received by the communicant must be in accordance with the message intended and conveyed by the communicator. In this process, of course, there are various aspects that influence the success of communication (Vardhani & A.S.P, 2018).

This communication problem certainly deserves more attention. A message/ information giver (communicator), must be able to communicate the information he brings to the recipient of the message well and can understand the meaning, so that there will be no difference in perception among the recipients of the message (Oktaviani, 2016).

Interpersonal communication is considered as one of the strategies to build and maintain effective relationships between organizations

and the public (Nurhadi & Kurniawan, 2017). Interpersonal communication has a function to help collect information about individuals so that they can predict responses that will arise. This is supported by (Wiryanto, 2006), interpersonal communication as communication that takes place in face-to-face situations between two or more people, both in an organized manner and in a crowd of people (Ramadanty, 2014).

Interpersonal communication is actually a procession in which the people involved in it influence each other. Effective communication can be achieved by seeking the highest degree of accuracy between the communicator and his communicator in the communication process, and effective communication can take place if the message can be received and also understood as what is meant by the communicator, the message conveyed can be received and replied to. by the communicant, and there are no obstacles in delivering the message (Ryandini & R. Destiwati, 2021).

Communication is a process. Everything in communication is always changing, for example, communication participants and the environment (Rumono, D. Setiabudi, & T. Pradekso, 2014). This process is very possible for the emergence of obstacles in conducting face-to-face communication and it is possible that these obstacles are caused by the emergence of public anxiety about the ongoing COVID-19 pandemic (Loupatty & Mayopu, 2022; Dewi, 2021; Putri, 2020).

Anxiety or in English "anxiety" comes from the Latin *"angustus"* which means stiff, and *"ango, anci"* which means to strangle. Anxiety is an unpleasant emotion, such as feeling uneasy, feeling confused, anxious and characterized by the terms worry, concern, and fear which are sometimes experienced in different levels and situations, Atkinson in Ardiyanto (2012). The opinion above explains that anxiety is a mood state characterized by negative affect and symptoms of physical tension in which a person anticipates possible danger or misfortune in the future with a feeling of worry. Anxiety may involve feelings, behaviors and physiological responses (Kumbara, Y. Metra, & Z. Ilham, 2018).

Anxiety is a form of feeling worried, restless and other unpleasant feelings. Anxiety often appears in individuals when faced with unpleasant situations (Suratmi, Abdulla, & M. Taufik, 2017). Anxiety makes individuals feel uncomfortable and afraid of the surrounding environment (Amiman, 2019).

The COVID-19 pandemic which is getting wider with the emergence of many variants of Covid has resulted in confusing conditions for people in carrying out their daily life, work and school routines (Karim & M. Alam, 2021). COVID-19 is no stranger to the world community. This case has become an epidemic in Indonesia. Positive cases of COVID-19 in Indonesia started with an Indonesian citizen (WNI) domiciled in Depok who was found to have tested positive for the SARS Cov-2 virus (Mareta & N, 2021). The stigma against the transmission of COVID-19 was exacerbated by the discovery of cases of the Omicron variant in Indonesia (Rayani & Purqoti, 2020; Nurrahman, 2020; Musaffak & Setiawan, 2020).

The new variant of the Omicron coronavirus is spreading around the world at an unprecedented speed, Cases of this highly mutating variant have been confirmed in 77 countries. The first and most important note is the number of mutations exhibited by this version of the virus. Analysis of Omicron led to the finding that this new variant had 50 mutations. More than 30 of these mutations occur in the spike protein -- the part of the virus that determines how it interacts with the body's defenses (WHO, 2022).

Communication anxiety or communication apprehension is part of the theories about the trait. James McCroskey and colleagues (1996) in their research came to the conclusion that anxiety or even fear of communicating is a serious practical problem faced by many people. According to McCroskey and colleagues, communication anxiety is a variable that has a low to high level. And in its practical application, this problem of communication anxiety can be overcome with certain treatments (treatable) for individuals who experience it.

One of the alternative models offered regarding communication skills related to one's social involvement is the model made by Bell (Yanti, 2015). This model emphasizes that people who show a high level of social involvement indicate the possibility that the person is sociable and outgoing. Bell emphasized that there are 3 (three) behaviors that are especially important in communicating social engagement, namely perceptive, attentive, and responsive behavior. Perceptive behavior involves the integration of self-meaning (self) in relationships with others. After a person behaves perceptively, he continues his behavior attentively, namely selective attention to information that is relevant to the ongoing interaction. One needs to demonstrate socially responsive behavior, such as the ability to act appropriately with an awareness of one's interpersonal roles. From the description above, this study intends to look at the level of anxiety based on the type of work and age criteria.

This study intends to see anxiety level in face-to-face communication by age and type of occupation during Omicron variant transmission. Hypothesis testing is carried out using criteria according to age and criteria according to the type of work that exists in the community.

2. METHODS

This study aims to examine the effect of the transmission of the COVID-19 omicron variant on the level of anxiety in conducting face-to-face communication according to age criteria and job type criteria. The approach used in this research is quantitative. This research was conducted from February 2 to March 5 2022 covering the areas of Pekalongan Regency, Pekalongan City and Batang Regency. The sampling method used is non-random sampling with a cross sectional research design. The technique of collecting data is using a questionnaire, while for the technique of analyzing the data, it applies the hypothesis testing of the contingency correlation method (Lestari & Yudhanegara, 2017). This analysis tool through the contingency table is applied to determine the relationship between variables from data that includes qualitative aspects, including opinions, perceptions, or judgments about the characteristics of a situation. To ensure the acceptance status of the null hypothesis in the case illustration above, the khai-squared value is calculated. Previously, the expected frequency value in each cell had to be determined.

After that, we calculate the chi-squared value through the following calculations (Lestari & Yudhanegara, 2017). The values are:

$$x^2 = \sum_{I=1}^{n} \frac{(n_{ij} - e_{ij})^2}{e_{ij}}$$

Where x^2 is the khai-squared value calculated, nij is the frequency obtained from the observations in row I and column j (certain cells). While eij is the expected frequency of row I and column j.

The value of the contingency correlation coefficient denoted by C is known by applying the formula below (Lestari & Yudhanegara, 2017).

$$C = \sqrt{\frac{\div^2}{\div^2 + n}}$$

Testing steps to prove the truth of the hypothesis must be carried out. The steps to be taken for this are:

a) Formulate the null hypothesis and alternative hypothesis
b) Determine a certain level of significance
c) Formulate test criteria
d) Calculating the value of chi-squared
e) Formulating the final conclusion

The final conclusion is formulated by comparing the chi-square value in the table with the chi-square value calculated and then adjusted to the test criteria.

3. RESULTS AND DISCUSSION

Communication comes from the word communication in English, which comes from the Latin communis, which literally means the same thing. Communication activity is actually looking for one thing in common between one person and another. A person tries to bring out what is inside and looks for similarities with

other people, who are involved in the communication process. Ideas, beliefs, social values, and others, are recited to others with the aim of seeking common ground (Encyclopedia Malaysiana, 1996). According to Gordon in Encyclopaedia Britanica (2007), communication is the exchange of meanings between individuals through a common system of symbols, meaning that it is the exchange of meanings between individuals through a common system of symbols (Takari, 2019).

Usually humans interact with each other. For example, between one group and another or between one organization and another. They relate through sending and receiving messages verbally or non-verbally. Usually the basic ingredients in communication are messages in the form of spoken and non-verbal forms. In interpersonal communication there are several obstacles that exist. These barriers can damage a relationship if not avoided. These obstacles include physical distractions, namely obstacles caused by disturbances in the physical environment (Kurniati, 2016). The transmission of delta and omicron variance which is so frightening in the community is one of the obstacles to this disorder. This disorder makes a person's own anxiety in making face-to-face communication.

Anxiety is a signal that awakens, it warns of a threatening danger and allows a person to take action to overcome the threat (Erawan, 2013). Anxiety has a level Gail W. Stuart in (Annisa & Ifdil, 2016) suggests levels of anxiety, of them.

1) Mild anxiety

Associated with tension in everyday life, this anxiety causes the individual to be alert and increases his perceptual field. This anxiety can motivate learning and generate growth and creativity.

2) Moderate anxiety

Allows the individual to focus on what is important and to the exclusion of others. This anxiety narrows the field of individual perception. Thus, the individual experiences selective inattention but can focus on more areas if directed to do so.

3) Severe anxiety

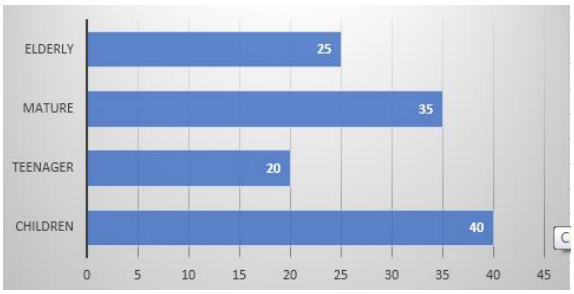
Greatly reduces the field of individual perception. Individuals tend to focus on something detailed and specific and don't think about anything else. All behavior is aimed at reducing tension. The individual needs a lot of direction to focus on other areas.

4) Panic level

Associated with amazement, fear, and terror. The details are broken out of proportion because of experiencing a loss of control, the individual experiencing panic is unable to do anything even with direction. Panic includes personality disorganization and causes increased motor activity, decreased ability to relate to others, distorted perceptions, and loss of rational thinking.

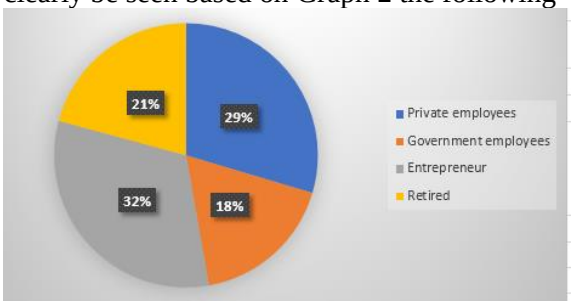
Each individual has a different level of anxiety depending on how the individual adjusts to the situation that triggers anxiety. If the adjustment is good then the anxiety can be overcome but it is different if on the contrary, anxiety can inhibit daily activities (Anissa et al, 2018). This study was conducted in order to analyze the level of public anxiety due to the increasingly massive transmission of the COVID-19 variant. The description of the respondents involved in this research is as follows:

The composition of respondents with a total of 120 respondents based on age criteria includes 33% of child respondents, 17% of adolescent respondents, 29% of adult respondents, and 21% of elderly respondents. Respondents were taken by non-random sampling in the three areas of Pekalongan City, Pekalongan Regency and Batang Regency. The description of the respondents can clearly be seen based on Graph 1 the following



Graph 1 Distribution of Respondents by Age Criteria

The composition of respondents from a total of 125 respondents based on profession includes 37 private employees, 22 civil servants, 40 entrepreneurs, and 26 retired respondents who were taken in Pekalongan City, Pekalongan Regency, and Batang Regency. The description of the respondent can clearly be seen based on Graph 2 the following



Graph 2 Distribution of Respondents by Profession

An overview of the research data is shown in Table 1 and Table 2 below.

Table 1 Respondents' Assessment According to Age Criteria on Anxiety Levels

Anxiety	Age Group				Total
	Child-ren	Teen-ager	Mature	Elderly	
Mild	15	5	13	2	35
Moderate	10	10	10	3	33
Severe	10	2	7	5	24
Panic	5	3	5	15	28
Total	40	20	35	25	120

In accordance with this case study on correlation testing according to age criteria, the null hypothesis which was formulated essentially stated that there was no correlation between transmission of the Omicron COVID-19 variant and the level of anxiety during face-to-face communication according to age criteria. While the alternative hypothesis states that there is a correlation between the transmission of the Omicron COVID-19 variant and the level of anxiety in conducting face-to-face communication according to age criteria. When displayed symbolically, the formulations of the two hypotheses are:

Ho : There is no correlation between the transmission of the Omicron COVID-19 variant and the level of anxiety during face-to-face communication according to age criteria.

H1 : There is a correlation between the transmission of the Omicron COVID-19 variant and the level of anxiety in conducting face-to-face communication according to age criteria.

Table 2. Respondents' Assessment by Type of Work on Anxiety Levels

Anxiety	Type of Work				Total
	Private employees	Government employees	Entrepreneur	Retired	
Mild	19	5	14	3	41
Moderate	8	12	12	5	37
Severe	7	1	10	6	24
Panic	3	4	4	12	23
Total	37	22	40	26	125

As for the correlation test by type of work, the null hypothesis which was formulated in essence stated that there was no correlation between the transmission of the Omicron COVID-19 variant and the level of anxiety in conducting face-to-face communication by type of work. While the alternative hypothesis states that there is a correlation between the transmission of the Omicron COVID-19 variant and the level of anxiety in conducting face-to-face communication according to the type of work. When displayed symbolically, the formulations of the two hypotheses are:

Ho : There is no correlation between the transmission of the Omicron COVID-19 variant and the level of anxiety in

conducting face-to-face communication by type of work

H1 : There is a correlation between the transmission of the Omicron COVID-19 variant and the level of anxiety in conducting face-to-face communication according to the type of work

In connection with this case study, the significance level was determined at 1%. Meanwhile, the degree of freedom is 9. The value of the degree of freedom is derived from the product of the multiplication of the degrees of freedom row 3 (4 – 1) with the degrees of freedom column 3 (4 – 1). Based on the search results in the table, the khai-squared value for the 1% significance level and 9 degrees of freedom is 21,666. The chi-square value in the table is the basis for the formulation of the test criteria and the final conclusion.

Since the chi-square value in the table is known to be 21,666, the test criteria can be formulated. Thus, the applicable test criteria is that the null hypothesis can be accepted if $x^2 \leq$ 21,666. And the null hypothesis is rejected if x^2 > 21,666.

Before the chi-square value of the calculation results is known, the expected frequency value of each cell must be calculated first. According to the formula, the values for each cell are as follows:

In testing the hypothesis according to age criteria

$e_{11} = \frac{(35x40)}{120} = 11.67$	$e_{12} = \frac{(35x20)}{120} = 5.83$	$e_{13} = \frac{(35x35)}{120} = 10.21$	$e_{14} = \frac{(35x25)}{120} = 7.29$
$e_{21} = \frac{(33x40)}{120} = 11$	$e_{22} = \frac{(33x20)}{120} = 5.5$	$e_{23} = \frac{(33x34)}{120} = 9.62$	$e_{24} = \frac{(33x25)}{120} = 6.88$
$e_{31} = \frac{(24x40)}{120} = 8$	$e_{32} = \frac{(24x20)}{120} = 4$	$e_{33} = \frac{(24x34)}{120} = 7$	$e_{34} = \frac{(24x25)}{120} = 5$
$e_{41} = \frac{(28x40)}{120} = 9.33$	$e_{42} = \frac{(28x20)}{120} = 4.67$ Type equation here.	$e_{43} = \frac{(28x34)}{120} = 8.17$	$e_{44} = \frac{(28x25)}{120} = 5.83$

In testing the hypothesis according to the criteria for the type of work

$e_{11} = \frac{(41x37)}{125} = 12.14$	$e_{12} = \frac{(41x22)}{125} = 7.22$	$e_{13} = \frac{(41x40)}{125} = 13.12$	$e_{14} = \frac{(41x26)}{125} = 8.53$
$e_{21} = \frac{(37x37)}{125} = 10.95$	$e_{22} = \frac{(37x22)}{125} = 6.51$	$e_{23} = \frac{(37x40)}{125} 11.84$	$e_{24} = \frac{(37x26)}{125} = 7.70$
$e_{31} = \frac{(24x37)}{125} = 7.10$	$e_{32} = \frac{(24x22)}{125} = 4.22$	$e_{33} = \frac{(24x40)}{125} = 7.68$	$e_{34} = \frac{(24x26)}{125} = 4.99$
$e_{41} = \frac{(23x37)}{125} = 6.81$	$e_{42} = \frac{(23x22)}{125} = 4.05$ Type equation here.	$e_{43} = \frac{(23x40)}{125} = 7.36$	$e_{44} = \frac{(23x26)}{125} = 4.78$

With the aim of facilitating understanding, the results of the calculation of the expected frequency in each cell need to be displayed together with the actual frequency. This is shown through the following table:

Table 3 Hypothesis Testing Work Table According to Age Criteria

Anxiety	Age Group				Total
	Children	Teenager	Mature	Elderly	
Mild	15(11.67)	5(5.83)	13(10.21)	2(7.29)	35
Moderate	10(11)	10(5.5)	10(9.62)	3(6.88)	33
Severe	10(8)	2(4)	7(7)	5(5)	24
Panic	5(9.33)	3(4.67)	5(8.17)	15(5.83)	28
Total	40	20	35	25	120

Table 4 Hypothesis Testing Work Table by Type of Work Criteria

Anxiety	Type of Work				Total
	Private employees	Government employees	Entrepreneur	Retired	
Mild	19(12.14)	5(7.22)	14(13.12)	3(8.53)	41
Moderate	8(10.95)	12(6.51)	12(11.84)	5(7.70)	37
Severe	7(7.10)	1(4.22)	10(7.68)	6(4.99)	24
Panic	3(6.81)	4(4.05)	4(7.36)	12(4.78)	23
Total	37	22	40	26	125

In testing the hypothesis according to age criteria. Based on the display in table 3 above, the khai-squared value is then calculated. Calculations are performed on each cell and then everything is added up. The khai-squared values in this study are:

$$\frac{(15\text{-}11.67)^2}{11.67}+\frac{(5\text{-}5.83)^2}{5.83}+\frac{(13\text{-}10.21)^2}{10.21}+\frac{(2\text{-}7.29)^2}{7.29}+$$
$$\frac{(10\text{-}11)^2}{11}+\frac{(10\text{-}5.5)^2}{5.5}+\frac{(10\text{-}9.62)^2}{9.62}+\frac{(3\text{-}6.88)^2}{6.88}+$$
$$\frac{(10\text{-}8)^2}{8}+\frac{(2\text{-}4)^2}{4}+\frac{(7\text{-}7)^2}{7}+\frac{(5\text{-}5)^2}{5}+$$
$$\frac{(5\text{-}9.33)^2}{9.33}+\frac{(3\text{-}4.67)^2}{4.67}+\frac{(5\text{-}8.17)^2}{8.17}+\frac{(15\text{-}5.83)^2}{5.83}=$$

0,9524 + 0,1190 + 0,7634 + 3,8402 + 0,0909 + 3,6818 + 0,0146 + 2,1841 + 0,5 + 1 + 0 + 0 + 2,0119 + 0,5952 + 1,2279 + 14,4048 = 31,3863

In testing the hypothesis according to the criteria for the type of work. Based on the display in table 4 above, the khai-squared value is then calculated. Calculations are performed on each cell and then everything is added up. The khai-squared values in this study are:

$$\frac{(19\text{-}12.14)^2}{12.14}+\frac{(5\text{-}7.22)^2}{7.22}+\frac{(14\text{-}13.12)^2}{13.12}+\frac{(3\text{-}8.53)^2}{8.53}+$$
$$\frac{(8\text{-}10.95)^2}{10.95}+\frac{(12\text{-}6.51)^2}{6.51}+\frac{(12\text{-}11.84)^2}{11.84}+\frac{(5\text{-}7.70)^2}{7.70}+$$
$$\frac{(7\text{-}7.10)^2}{7.10}+\frac{(1\text{-}4.22)^2}{4.22}+\frac{(10\text{-}7.68)^2}{7.68}+\frac{(6\text{-}4.99)^2}{4.99}+$$
$$\frac{(5\text{-}9.33)^2}{9.33}+\frac{(3\text{-}4.67)^2}{4.67}+\frac{(5\text{-}8.17)^2}{8.17}+\frac{(15\text{-}5.83)^2}{5.83}=$$

3,8822 + 0,6805 + 0,0590 + 3,5833 + 0,7957 + 4,68250 + 0,0022 + 0,9444 + 0,0015 + 2,4607 + 0,7008 + 0,2035 + 2,1299 + 0,0006 + 1,5339 + 10,8843 = 32,4878

Through the calculations that have been carried out in the previous stage, the khai-square value for hypothesis testing according to age criteria is 31.3863 while the khai-square value for hypothesis testing according to job type criteria is 32.4878. This value exceeds or is greater than the khai-square value in the table of 21,666. Thus, based on the testing criteria that apply to hypothesis testing according to age criteria, the null hypothesis which states that there is no correlation between transmission of the Omicron COVID-19 variant and the level of anxiety in conducting face-to-face communication according to age criteria is declared rejected. Meanwhile, the alternative hypothesis which states that there is a correlation between the transmission of the Omicron COVID-19 variant and the level of anxiety during face-to-face communication according to age criteria is acceptable. Likewise for testing the hypothesis according to the criteria for the type of work, the null hypothesis which states that there is no correlation between transmission of the Omicron COVID-19 variant and the level of anxiety in conducting face-to-face communication according to the type of work is rejected and accepts the alternative hypothesis which states that there is a correlation between transmission the Omicron COVID-19 variant on the level of anxiety in conducting face-to-face communication by type of work.

How strong the correlation between the two variables must be calculated by the formula for the value of the contingent correlation coefficient. The value of the contingency correlation coefficient is:

In testing the hypothesis according to age criteria

$$\sqrt{\frac{31.38633}{31.38633+120}}=\sqrt{0.207326}=0.455331$$

In testing the hypothesis according to the criteria for the type of work

$$\sqrt{\frac{32.48784}{32.48784+125}}=\sqrt{0.206288}=0.454189$$

From the results of statistical testing using the contingency correlation method both based on age criteria and type of work, it shows that there is indeed a correlation between the spread of the COVID-19 omicron variant and the level of anxiety in conducting face-to-face communication. When someone enters a new environment that has never been faced before, such as a situation where omicron appears as a variant of COVID-19. The new situation and environment faced requires individuals to adapt to the environment. Adaptation requires individual skills to consider what he will do to be well received. Adaptation also requires the ability of individuals to understand behavior that is different from other individuals. An individual's ability to consider something to do and an individual's ability to understand different behaviors cannot be separated from one's type of work and one's age.

This statement was reinforced by psychiatrist Eric Berne who told it in the book games people play. The analysis came to be known as transactional analysis. In this model, people engage in various games. Underlying these games are the three parts of human personality–parent, adult, and child (parent, adult, child). Parents are aspects of personality which are assumptions and behaviors received from parents or people who are considered parents. Adults are the part of personality that manages information rationally, according to the situation and is usually concerned with important issues that require conscious decision making. Children are elements of personality drawn from childhood feelings and experiences and contain the potential for intuition, spontaneity, creativity and fun. Both individuals based on the type of work and age type assess the emergence of the omicron variant of Covid 19 as a threat factor. This corresponds to the factor of the emergence of the level of anxiety according to Collins who argues that anxiety

arises due to threats, both threats to the body, soul or psyche (such as loss of independence, loss of meaning in life) or threats to one's existence (such as loss of rights) (Berne, 1964).

Furthermore, if we refer to McMahon in Nakayama, it is stated that anxiety can arise as a result of the anticipation of hope for a situation that is frightening and has caused a situation that causes pain (Nakayama, 2003), so when he is faced with the same event he will feel anxiety as a reaction. over the danger. Meanwhile, according to Slavson, one of the causes of anxiety is from relationships and is directly determined by conditions, customs, and values in society (Nakayama, 2003). Anxiety at the heaviest level is felt as a result of very fast social change, where without adequate preparation, a person is suddenly hit by change and immersed in new situations that are constantly changing. Where this change is an event that affects the entire environment of life (McMahon, 2002), it will be difficult for someone to free himself from this worrying experience. Individuals from both the type of work and the type of age cannot be separated from what was stated by McMahon and Slavson in face-to-face communication.

Anxiety in conducting face-to-face meetings when the spread of omicrons is manifested in cognitive factors and environmental factors as stated by McMahon and Slavson. The ability to communicate in human interaction can be understood from the perspective of individual experience (field of experience) and frame of reference. Penman stated, the ability to communicate is seen as a form of interpersonal relationship so that communication activities are carried out in the form of exchanging ideas or understanding between individuals. communication in general and in particular in interpersonal communication there are disturbances in communication known as communication apprehension, namely negative reactions in the form of anxiety experienced by someone in their communication experience. The individual is unable to anticipate his negative feelings and tries to avoid communication as much as possible. According to Shannon and Weaver, communication disorders occur when there is an intervention that disrupts one of the elements of communication so that the communication process cannot take place effectively.

4. CONCLUSION

In accordance with the context of this study, indeed the transmission of the Omicron COVID-19 variant has a correlation with the level of anxiety in conducting face-to-face communication both according to age criteria and according to criteria for type of work. Based on the criteria that apply to the research methodology, the correlation value in hypothesis testing according to age criteria is 45.53% and in hypothesis testing according to job type criteria, 45.42% is classified as moderate or sufficient. This research has a contribution that the results obtained can be used as an analytical tool that there is indeed a level of anxiety in the community in conducting face-to-face communication. While the advice given to other researchers, research needs to be done on what other factors might be an influence on the level of anxiety for the public in conducting face-to-face communication because of the transmission of the COVID-19 omicron variant in Indonesia.

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