

Beyond Language Organizational Communication as a Driver of Retention among International Nurses in Germany: A Cross-Sectional Mixed-Methods Study

¹*Jale Yilmazer

¹University of Library Studies and Information Technologies, Faculty of Information Sciences, Department of National and International Security, Bulgaria.

Abstract

Background: Germany is facing a critical nursing shortage with statistics indicating a deficit of up to 690,000 nursing professionals by 2049. Since 2022, employment growth has been sustained almost exclusively by internationally educated nurses. However, these nurses face significant integration challenges including organizational communication influencing nurse retention.

Purpose: The goal of this study was to explore how organizational communication affects integration and retention of internationally educated nurses in Germany.

Methodology: Mixed method; cross sectional observational and interviews were used where survey was paper-based and was administered to 410 internationally educated nurses in ten hospitals in Germany, with the organizational communication (Communication Satisfaction Questionnaire) and retention intention (Nurse Turnover Intention Scale). The 10 interview participants were a purposively selected subset of the 410 survey respondents. Multiple linear regression analyses were performed to assess which factors were significant. Thematic analysis was used to analyze semi-structured interviews.

Findings: Communication climate ($\beta = .214, p = .001$), organizational integration ($\beta = .148, p = .032$) and personal feedback ($\beta = .187, p = .001$) were found to be significant positive predictors of retention intention while, a non-significant relationship with relationship with superiors. The three themes identified from the thematic analysis were navigating the unspoken rules and informal networks, supportive leadership and recognition as drivers of integration and transparent communication as drivers of retention.

Conclusion: Organizational communication particularly communication climate, organizational integration and personal feedback are significant determinants of retention among internationally educated nurses in Germany. Healthcare organizations should invest in structured onboarding, regular feedback, leadership training and mentorship programs to enhance integration and retention.

Keywords: Organizational communication, internationally educated nurses, retention, integration, Germany, mixed-methods.

Introduction

International migration was reported to be approximately 273 million as per the statistics of 2019 with a rise of 51 % since 2010, confirming a significant increase in the trend (Pressley et al., 2022). With the increase in migration, considerable proportion of human mobility comprises health workers including internationally-recruited nurses mainly from low and middle income countries to high-income countries with developed health care systems has been reported. Specifically, Philippines has been identified as world's primary sender

of internationally-recruited nurses for several decades, whereas India is recognized as a growing supplier of internationally certified nurses as well. Though there is considerable shortage of nurses in regions such as Africa, South-East Asia and Eastern Mediterranean regions however, the situation is also significant in developed countries where recent estimates suggests nine-million nurse and midwifery positions are vacant (Laari et al., 2024).

Considering the increasing shortage of nurses, developed countries have turned to international recruitment in order

Jale Yilmazer

University of Library Studies and Information Technologies, Faculty of Information Sciences, Department of National and International Security, Bulgaria.
Email: jaleyilmazer@googlegmail.com

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to fill nursing vacancies. As per the statistics of 2015, 26 % of nurses in New Zealand were qualified overseas which is an increase from 14.7 when compared to the reported statistics of 2002 (Pressley et al., 2022). In addition, a similar kind of increase in trend was also reported in the case of Australia, where 18 % of total nursing workforce were registered as foreign born. Moreover, nurses trained overseas amounted to 18 % of total nursing force of the United Kingdom as well. Similarly, within countries like Bahrain, Kuwait, Oman, Qatar, Saudi Arabia, and the United Arab Emirates, international nurses reached as high as 79 % of national nursing workforce when compared to the statistics of 2008.

Though overseas recruitment is considered successful in the short term by means of attracting large number of international nurses however, there is an evolving significant issue of retention. For instance, within the UK, 23,243 international recruits were recorded as leaving the Nursing and Midwifery Council register between April 2014 and March 2019. The aforementioned statistics confirm while countries have turned to international recruitment, an overemphasis on recruitment excludes from considering factors that support successful acculturation and retention of international nurses for longer periods of time. This dependency of international nurses recruitment has further strengthened by with the Covid-19 pandemic, thereby confirming intensified competition between countries and the urgency of enculturating and retaining this workforce. Importantly, as per the statistics of 2019, the United States reported as the largest distribution of internationally recruited nurses that is of 41 % followed by that of Germany reportedly had 15 %. Further, UK (11 %), Australia (7 %) and Canada (5 %) also reportedly had notable distribution of hosting international nurses (Pressley et al., 2023).

The situation of nursing shortage has been a long standing issue in Germany's healthcare system. Federal Statistical Office estimates between 280,000 and 690,000 nursing workers will be in short supply by 2049 (Francois, 2025). In 2023, an average of 35,000 nursing positions were registered while these staffing shortages are linked to higher overtime usage, higher absenteeism and a deteriorating working climate in hospitals (Wilde, 2021). In 1999, Germany had 2 million elderly with care needs, whereas in 2019, this number was 4.1 million (Tönnies et al., 2019). This indicates Germany's younger population is decreasing eventually reducing the pool of prospective care takers. International healthcare workers are the ones who

have contributed to the increase in the number of nurses in Germany since 2022. However, international recruitment brings new challenges, particularly language barriers, cultural differences and bureaucratic issues ultimately impacting the retention of international nurses.

By 2049, Germany is expected to have between 520,000 and 690,000 fewer nurses than it needs (Francois, 2025). The nursing sector in Germany has been the only sector to create new jobs since 2022 where the nursing sector particularly international nurses, is paramount. While recruiting from abroad is one way of meeting the need for staffing, such nurses also have to deal with integration issues such as language barriers, differences in culture and administrative obstacles. These are not just developmental challenges, however, they are directly related to whether or not these nurses are retained, as retention is a key element of workforce sustainability of this sector. However, research suggests that organizational factors are important to successful cooperation and retention and that communication strategies and onboarding processes are key areas for influence on employee turnover. While there is increasing attention on international recruitment, the exact role of organizational communication in determining integration and retention outcomes of international nurses working in Germany has been under-researched. This study therefore aimed to investigate organizational communication as a determinant of retention among internationally educated nurses in Germany.

Literature Review

Characteristics of culturally and linguistically diverse Workforce

Nurses with a migrant background are often classified as being culturally and linguistically diverse due to their different country of birth and language (Pham et al., 2021). Previous research has indicated that migrant nurses experience many challenges in health-care settings including racial and ethnic issues, bullying, discrimination, limited career mobility and cultural and language issues (Guillari et al., 2026; Likupe, 2015). These challenges have been shown to impact their effective integration in healthcare organizations, delivery of care and wellbeing (Ramji et al., 2018). For instance, Covell and Rolle Sands (2021), found that in some cases, nurses from culturally and linguistically diverse backgrounds experienced reduced employment opportunities due to linguistic and professional barriers and failure to achieve licensure. Previous research showed that the linguistic competence

of culturally and linguistically diverse nurses was below the expected level and hence they were employed as lower cadre nurses or engaged in non-nursing jobs (Kamau et al., 2023).

Recruitment of culturally and linguistically diverse nurses can be understood as a strategy to solve the nursing shortages and to bring diverse backgrounds, experiences and skills that can help to fill the gaps in the nursing workforce (Kamau et al., 2025). However, this has created emerging challenges for the healthcare organizations where the host nurses who are responsible for the workplace entry of such nurses and support them to integrate into the health workforce (Joensuu et al., 2024).

Challenges for International Nurses

Limited understanding of the healthcare system, organization and planning of care has been found to affect migrant nurses' delivery of quality and safe care (Sherwood & Shaffer, 2014). Negative experiences with patients and colleagues as well as social challenges have been shown to affect negatively their work wellbeing (Nortvedt et al., 2020). The inability to integrate and fear of strangeness in the host country of culturally and linguistically diverse nurses has been demonstrated to impact their work satisfaction and retention (Gea-Caballero et al., 2019). Migrant nurses are diverse and have different experiences in host countries, thus necessitating both universal and

individualized interventions for effective organizational integration (Likupe, 2015).

Further, challenges include learning a new language, differences in nursing practices and cultural values, discrimination and racism or recognition (Montayre et al., 2018). Nurses in multicultural work communities are often required to adapt and learn, while representatives of the majority population are generally not required to change (Alexis, 2015). A reputed nurse with a foreign background has assimilated into the majority population as much as possible. In this case, the work community support towards international nurses appears to be conditional, therefore, if the new international nurse is perceived as active and positive, the community may support them better (Vartiainen et al., 2017).

Literature Gap

Although there is an increasing research literature on international nurses in Germany, notable gaps still exist. Research has been conducted on issues including language barriers, cultural differences and bureaucratic issues however, it has tended to explore the individual migrant experience or institutional views. There is limited research on the potential influence of organizational factors such as communication on team-level dynamics and on how receiving teams deal with diversity in day-to-day practice. Moreover, conflicts that arise in day-to-day care team work

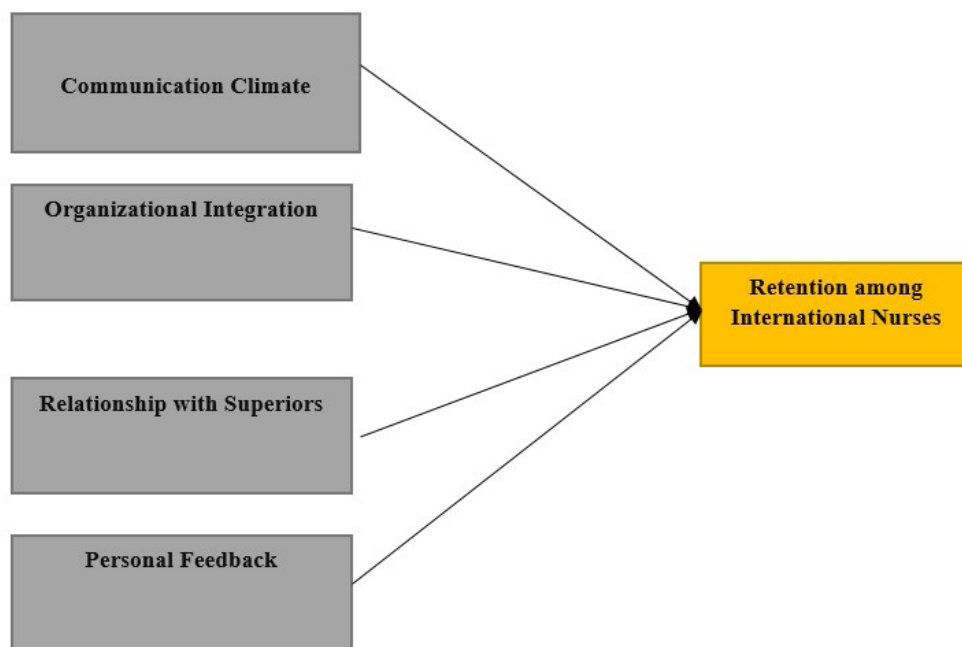


Figure 1: Conceptual Framework: Source: Author

need to be examined, but organizational communication approaches which enable effective teamwork and sustained retention are rarely studied.

Theoretical Framework

Organizational socialization theories such as institutional versus the individualized integration tactics by Van Maanen (1977), Feldman (1976) anticipatory socialization model and BUCHANAN II (1972) three-stage early career model, define the process by which a newcomer assumes a new role, learns, adapts and integrates to the organization. While organizational socialization perceives integration as a long-term process, the early stages of integration have proven to be highly important to the newcomers' sense of belonging, integration and long-term intention to stay in an organization (Aderiyi, 2021). Organizational socialization theory assumes that socialization takes place on a group level as well as on an individual level to help a newcomer learn the particular needs and orientation to complex tasks (Bauer et al., 2025). The socialization process is more structured in the case where a newcomer is expected to reach some professional aspects. The lack of structure can make the process random and unclear. Newcomers also go through a timed process with a fixed period of time when certain events occur, such as promotion to new roles. The newcomer is given clear expectations of when certain events may occur through the timed socialization process. More experienced members of the organization are involved in the socializing process of newcomers and serve as role models.

On the other hand, socialization can also occur without the participation of experienced members. In such circumstances, the newcomer might face challenges and lack role models. During the socialization process, the newcomers may face a situation where the organization tries to improve the existing skills. On the other hand, where the organization may want a newcomer to create a new professional image of him/herself, a change in the individual thinking and self-image is expected (Kamau et al., 2022).

Methodology

Study Design and Setting

A cross-sectional study based on a survey and interviews between October 2025- May 2026 where a total of 10 institutions comprising hospitals, rehabilitation centers, elderly care institutions, and long-term care facilities employing internationally educated nurses across

Germany were included. The internal mail system was used to distribute a survey to all eligible nurses, which included an information leaflet to explain the purpose of the study a hard copy questionnaire. Completed questionnaires were returned in a sealed envelope on hospital wards through internal hospital mail. Four and six weeks after initial mailing, reminders were mailed to the nursing management of each hospital. Further, ward managers were encouraged to encourage participation at their team meetings.

Inclusion and Exclusion Criteria

Internationally trained nurses were eligible if they had a recognized nursing qualification from a country other than Germany, worked as a nurse in Germany, spoken and written German well and had reached the age of 18. Healthcare professionals other than nurses such as student nurses, physicians and physiotherapists and those unable or unwilling to give consent were excluded. There was no minimum number of working hours provided for eligibility.

Data Collection and Instrument

A key contact was designated in each hospital to help communicate between hospital staff and ward managers and facilitate communication. The purpose of the study and the process of recruitment was explained to ward managers either at a special meeting arranged by the key contact person. Ward managers then sent information resources (information leaflet, paper-based survey and reply envelope) to all potential participants using the internal mail service.

The organizational communication was assessed by Downs and Hazen's (1977) Communication Satisfaction Questionnaire (CSQ) (Rubin et al., 2020). The CSQ is a multi-dimensional questionnaire with 40 items distributed among eight dimensions. In the current modified scale comprising 24 items (Appendix A) of the CSQ scale for dimensions, such as communication climate, organizational integration, relationship with superiors and personal feedback, the responses were rated on a five-point Likert scale ranging from 1 (very Unsatisfied) to 5 (very Satisfied). The Nurse Turnover Intention Scale (NTIS) (Appendix B) of Yeun and Kim (2013) was used to measure retention intention. NTIS consists of 10 items that are rated on a five-point Likert scale.

After conducting the quantitative survey, 10 participants were selected through purposive sampling to ensure diversity in some key demographic and professional

characteristics, to have semi-structured interviews. Interviews addressed organizational communication experiences, integration experiences in the workplace, professional relationships, leadership support experiences, and retention intentions. Interviews were done in English or German, either in person or by video (30–45 minutes). They were audio-recorded, verbatim, anonymized and securely deleted at the end of each use, with participants' consent. Data analysis involved thematic analysis to determine the main patterns in the participants' responses.

Sampling and Sample Size

The survey targeted a sample of 384 as this specific number is usually referred to for larger populations/samples relevant to current context considering total number of nurses within Germany. According to Chuan and Penyelidikan (2006), for a population exceeding 100,000, a sample of 384 is considered adequate at a 95% confidence level and 5% margin of error. The targeted sample of 384 was statistically sufficient for a large population. The expression below demonstrates how the figure of 384 was derived at what confidence level. A 95% confidence level, i.e., a margin of 5 % error, is considered for such social science research and thus was also followed in the present research. The expression is as follows:

$$n=(z^2 \times p \times (1-p))/e^2$$

In the above expression, z demonstrates the critical value at 95 % confidence, which gives z as 1.96. Also, the variability proportion, which is denoted by p , is assumed to be 50% (0.5) to maximize the required sample size and ensure representativeness. An error of 5 %, comprising a 0.05 value, is also considered when solving. Upon placing and solving, the expression yields the figure of 384.

$$n=(1.96)^2 \times 0.5 \times (1-0.5)/(0.05)^2=384$$

Hence, meeting the targeted sample of 384, greater number of survey were distributed to nearly 500 respondents considering the response factor. However, in response total 410 completely filled and adequate responses were obtained, leaving the final response rate of 82%. The obtained response rate is considered sufficient for organizational survey research, where typical response rates are observed between 30-50% (Chuan & Penyelidikan, 2006).

Data Analysis

Thematic analysis was employed to analyze the interview data and followed the six-phase thematic analysis framework proposed by Braun and Clarke (2006). The analysis was done manually where transcripts were read to extract key insights, coded the initial data, identified and grouped codes into potential themes.

IBM SPSS Statistics (version 20.0) software was used to analyses quantitative data. Means, standard deviations, and medians were used to summarize the participant demographics and key variables in the form of gathered survey responses. Multiple linear regression were used as inferential analyses to examine the relationships between organizational communication variables retention. A $p < 0.05$ was considered statistically significant.

Ethical Considerations

The study was approved by the relevant institutional review board and was performed following the 1964 Helsinki Declaration. In addition, STROBE guidelines for cross-sectional studies was followed. Informed consent was given and participants were informed that they could withdraw from the study at any time with no repercussions. All data were anonymized and kept securely while the audio recordings of interviews were deleted once transcribed.

Results

Survey Findings

Table 1 illustrates reliability statistics for the utilized instrument. The Communication Climate ($\alpha = .856$) and the Relationship with Superiors ($\alpha = .730$) subscales had high internal consistency. The lower values of alpha for Organizational Integration ($\alpha = .617$), Personal Feedback ($\alpha = .466$) and the Nurse Turnover Intention Scale ($\alpha = .608$) are theoretically appropriate as they explore multidimensional constructs meanwhile alpha is sensitive to the number of items and assumes unidimensionality.

Table 2 illustrates the demographic information of survey participants, where the age distribution of the sample is even, with 30.7 % above 55 years, 25.4 % aged 41-55 years and 17.1% aged 31-40 years. There was a relatively even gender distribution with males accounting for 41.5% and females 40.2% and 18.3% did not reveal their gender. Most of the participants were married (57.8%). Southeast Asian participants were the largest group (35.6%), followed by Europeans (31.7%), East Asians (17.3%), and West Asians (15.4%) in terms of racial/ethnic

Table 1: Reliability Statistics

Scales	Cronbach's Alpha	N of Items
Communication Climate	.856	7
Organizational Integration	.617	6
Relationship with Superiors	.730	7
Personal Feedback	.466	4
Nurse Turnover Intention Scale	.608	10

Table 2: Baseline characteristics of Participants

Demographics	Characteristics	Frequency	Percent
Age	18-25	87	21.2
	26-40	93	22.7
	41-55	104	25.4
	Above 55 Years	126	30.7
Gender	Male	170	41.5
	Female	165	40.2
	Prefer not to Say	75	18.3
Marital Status	Married	237	57.8
	Unmarried	87	21.2
	Other	86	21.0
Racial/Ethnic Group	East Asian	71	17.3
	West Asian	63	15.4
	Southeast Asian	146	35.6
	European	130	31.7
Years of International Nursing Experience	<1 Year	100	24.4
	1-2 Years	93	22.7
	3-5 Years	116	28.3
	More than 5 Years	101	24.6
	Total	410	100.0

background. The distribution was relatively even between the years of international nursing experience (28.3% for 3–5 years, 24.6% for more than 5 years, 24.4% for less than 1 year, and 22.7% for 1–2 years). The sample across all countries were varied in terms of age, type of contract and time in Germany increasing the generalizability of the study findings.

Table 3 demonstrates item-level descriptive statistics for SCR Subscale- Communication Climate. The median scores for all seven items were 4.00 indicating most participants were satisfied with the different aspects

of organizational communications. The mean scores ranged from 3.49 to 3.83, the highest satisfaction was for The organization's communication is adequate for meeting organization's goals ($M = 3.83$, $SD = 0.94$) while the lowest was for The organization's communication makes me identify with it or feel a vital part of it ($M = 3.49$, $SD = 1.13$). The standard deviations was between 0.94 and 1.13 indicating moderate variability in responses.

Table 4 indicates the descriptive statistics for the Organizational Integration subscale items. The six items had median scores of 4.00 reflecting a moderate satisfaction

Table 3: Descriptive Statistics for SCR Subscale- Communication Climate

	Median	Mean	Std. Deviation
Extent to which the organization's communication motivates and stimulates an enthusiasm for meeting its goals	4.00	3.7854	.93964
Extent to which the people in my organization have great ability as communicators	4.00	3.5610	1.04539
Extent to which the organization's communication makes me identify with it or feel a vital part of it	4.00	3.4854	1.13233
Extent to which the organization's communications are interesting and helpful	4.00	3.6195	1.07726
Extent to which the organization keeps employees informed about matters affecting them	4.00	3.6244	1.04677
Extent to which the organization's communication helps me to do my job better	4.00	3.6707	.96205
Extent to which the organization's communication is adequate for meeting organizational goals	4.00	3.8341	.94173

Table 4: Descriptive Statistics for SCR Subscale- Organizational Integration

Items	Median	Mean	Std. Deviation
Personnel (staff) news within the organization	4	3.8293	0.85365
Information about the organization's policies and goals	4	3.7463	0.98599
Information about how my job compares with other jobs in the organization	4	3.6439	1.06742
Information about departmental policies and goals	4	3.9073	0.89344
Information about the requirements of my work	4	3.9341	0.8496
Information about employee benefits and salaries	4	3.6537	0.98748

Table 5: Descriptive Statistics for SCR Subscale- Relationship with Superiors

Items	Median	Mean	Std. Deviation
Extent to which my superior / managers understand the problems faced by staff	4.00	3.5220	1.11261
Extent to which my supervisor listens and pays attention to me	4.00	3.6610	1.02996
Extent to which my supervisor offers guidance for solving job-related problems	4.00	3.6146	1.05255
Extent to which my supervisor trusts me	4.00	3.6634	.97343
Extent to which my supervisor is open and receptive to idea	4.00	3.8049	.93085
Extent to which my supervisor offers praise for a job well done	4.00	3.8195	.91262
Extent to which the amount of communication from my supervisor is about right	4.00	3.8024	.87200

with the information participants receive on organizational integration. The range of mean scores was 3.65 to 3.93, the highest being for Information about the requirements

of my work ($M = 3.93$, $SD = 0.85$) and the lowest for Information about employee benefits and salaries ($M = 3.65$, $SD = 0.99$). The standard deviations were within the

range of 0.85 - 1.07 confirming some moderate variability in responses.

The Relationship with Superiors subscale item-level descriptive statistics are presented in Table 5. The median score for all seven items was 4.00 which indicated satisfaction with supervisors' relationships. The highest satisfaction scores ($M = 3.52$ to 3.82 , $SD = 0.91$ to 0.93) were for My supervisor is open and receptive to ideas, My supervisor offers praise for a job well done, My supervisor provides positive feedback on my work, and My supervisor suggests improvements that enhance my work. The lowest satisfaction was noted in the category My superior understands the problems faced by staff ($M = 3.52$, $SD = 1.11$). The standard deviations were between 0.87 and 1.11 indicating moderate variability in responses.

The participants typically reported moderate levels of satisfaction on each of the four Communication Climate sub-scales (median = 4.00 for each item) (Table 6). The mean scores for the items ranged from 3.49 to 3.93 with the lowest satisfaction being for organizational identification and the highest being for clarity about job requirements

and constructive feedback. In general, participants appreciated performance-based communication, but less knowledgeable about its integration and evaluation into the organization.

Table 7 provides item-level descriptive statistics of the Nurse Turnover Intention Scale. The median score for all items was 4.00 (moderate retention intention). The highest satisfaction was found with I have good relationships with other healthcare professionals ($M = 3.86$, $SD = 0.77$) and the lowest satisfaction was reported for I am satisfied with my current job ($M = 3.48$, $SD = 1.12$). The standard deviations indicate moderate variability on all items.

Multiple linear regression analysis was used to investigate the influence of factors on retention intention among internationally educated nurses (Table 8). This overall model was statistically significant with $F(4, 405) = 34.08$, $p < .001$ and $R^2 = .252$, which accounted for 25.2% of the variance in the retention intention. Communication Climate ($\beta = .214$, $p = .001$), Organizational Integration ($\beta = -.148$, $p = .032$) and Personal Feedback ($\beta = .187$,

Table 6: Descriptive Statistics for SCR Subscale- Personal Feedback

Items	Range	Mean	Std. Deviation
Information I receive about the progress I make with my work	4.00	3.7659	.95308
Information about how I am being evaluated	4.00	3.5976	1.10632
Recognition of my efforts	4.00	3.9098	.89506
Feedback about how I handle problems in my work	4.00	3.9171	.95007

Table 7: Descriptive Statistics for Nurse Turnover Intention Scale - Retention among International Nurses

Items	Median	Mean	Std. Deviation
I am satisfied with my current job	4.00	3.4829	1.12363
I am satisfied with the recognition I receive for my work	4.00	3.5488	1.10955
I am satisfied with the opportunities for advancement in my current job	4.00	3.6000	1.08828
I am satisfied with my current salary and benefits	4.00	3.5659	.97740
I have good relationships with my colleagues	4.00	3.7683	.99754
I have good relationships with my supervisors	4.00	3.8293	.83629
I have good relationships with other healthcare professionals	4.00	3.8610	.77092
I am able to perform my work to the best of my ability	4.00	3.7488	.89978
I am able to provide high-quality care to my patients	4.00	3.4756	1.11256
I feel that my work is meaningful and valuable	4.00	3.5561	1.08469

$p = .001$) were found to be significant positive predictors of retention intention. The relationship with Supers was not a significant predictor ($\beta = .077$, $p = .177$). The results indicate that developing positive climate for communication

and giving personal meaningful feedback are essential organizational practices to improving retention among internationally educated nurses.

Table 8: Multiple Regression Analysis for Determining Determinants

	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
(Constant)	3.376	.211		15.981	.000
Communication Climate	.143	.044	.214	3.239	.001
Organizational Integration	.129	.060	.148	-2.156	.032
Relationship with Superiors	.055	.040	.077	-1.351	.177
Personal Feedback	.151	.044	.187	3.433	.001
R=.528, R Square= 0.252, F (4, 405) = 34.08, $p < .001$					

Interview Findings

Theme 1: Understanding implicit and informal norms.

Communication problems were consistently discussed by participants beyond language proficiency. These included moving through informal communication systems, the norms and rules of hierarchy, and the unclear rules of the workplace. When asked What other communication issues did you have besides speaking German?, one respondent replied:

"The most difficult aspect of working in German was the informal and unwritten rules and procedures that are often used." (Nurse-03)

Another reply to the same question was:

"There are times when information is disseminated informally, and if you are not in that circle, you don't get the information." (Nurse-07)

One participant commented regarding the question What was your first communication experience upon joining your organization in Germany? the response was as:

"Sometimes I couldn't tell when to talk and when to listen. The order of things here's different to my home country, and no one's given me any information about it." (Nurse-05)

The above responses indicate that there are communication challenges for internationally educated nurses beyond language that are significant and specifically include understanding the unspoken rules of the workplace culture, hierarchy and informal communication networks. These

challenges can impede their assimilation into and feeling of belongingness within the organization.

Theme 2: Supportive leadership and recognition as motivators for integration

Participants highlighted the importance of supportive leadership, positive feedback and recognition in their sense of belonging, motivation and professional worth. A supportive management style by being involved and appreciative of them helped to boost their confidence and motivation towards the organization. One participant replied:

"The managers and colleagues supported me in some ways to clear some of my communication issues" (Nurse-02)

It was also replied:

"My supervisor regularly visits me to check on my progress and asks what is going on with me, just how I am doing. I felt this way because my supervisor was always checking in, asking me what's happening, asking me just being there for me and not just as a worker." (Nurse-02)

A different response to this question was:

Not all feedback was necessarily provided on the spot, but I had to learn to seek it out so I could better understand expectations and develop. (Nurse-08)

In response to the question How do you get feedback and recognition for your work and what impact does this have on your motivation and feelings of value?, one respondent shared:

Specific feedback regarding progress made increased my confidence, *'when I was given feedback about my progress I felt more driven to do more well'* (Nurse-04).

Another participant responded against How did your communication practices affect your sense of belonging, motivation and value to your organization?

When my manager recognized the contribution I made in team meetings this made me feel like I was part of the team (Nurse-06).

From the above responses it is clear that supportive leadership, frequent feedback and recognition are key factors in promoting integration and belonging for internationally educated nurses. Active involvement and recognition from managers has a positive impact on their motivation, confidence and commitment to the organization.

Theme 3: Transparent communication and supportive practices as drivers towards retention.

It was expressed effective communication practices that helped them stay within their organizations were effective communication from leadership, frequent feedback, inclusive meeting, and supportive relationships with colleagues. It was asked, What are some ways of communication/practices that have helped you to remain in your current job, one respondent replied:

"Oh, a lot of ways of communication, a lot of practices that have helped me remain in my job. Clear communication about career progression and opportunities from my supervisor, helped me to consider staying" (Nurse-09)

Another reply to the same question was:

I felt valued and heard with regular feedback and communication; I wasn't just a number (Nurse-10)

Another participant expressed as:

I felt respected when leadership was open with us about changes in the organization and solicited our opinions. (Nurse-01)

Another person who answered the question said:

I felt supported when I discussed problems openly in team meetings, as there was always somebody who was there for me to discuss challenges with, which helped me stay. (Nurse-06)

Participants provided a number of suggestions on ways in which the integration and retention of internationally educated nurses could be improved. When asked, What additional communication practices would improve the integration and retention of internationally educated nurses? One of the reply was:

The need for more structured induction programmes and an explanation of the informal communication norms and hierarchy. (Nurse-03)

Another reply to the same question was:

Regular feedback sessions must be made obligatory, a lot of us don't know if we are doing alright till we get a formal feedback. (Nurse-08)

Nurse 1 also expressed as:

Leadership should be more open about changes in the organization and involve us in decision making processes; it would make us feel valued and included. (Nurse-01)

Another key recommendation was:

It would be very beneficial to have experienced nurses who would show us the ropes with clinical and cultural aspects; mentorship programs would be most beneficial. (Nurse-05)

The responses provided above indicate that clear communication, team meetings, information about career development, orientation and induction, feedback and mentoring programs are important contributors to nurse retention among internationally educated nurses. Nurses feel better if they are listened to, appreciated and told what will happen to them in the future.

Discussion

The nursing shortage is a global issue where the World Health Organization has projected a shortage of 5.9 million nurses globally (Sharplin et al., 2025). As per Haakenstad et al. (2022), International nurses have become an important human resource for the health care systems where 1 out of every 8 nurses now work in a different country. Germany has shown greater dependency on foreign workers to fill its nursing shortage where foreign workers have been the sole drivers of growth in the nursing sector since 2022 (Tasdemir, 2022). International nurses are critical but struggle to stay within the host country due to a number of challenges, such as the inability to fit in culturally and limited career development opportunities (Reiff et al., 2020). In recent years, organizational

communication has been found to significantly affect nurse's retention. Doleman et al. (2025) found a positive relationship between communication satisfaction and job satisfaction and intention to stay. Based on this evidence, the aim of the present study was to explore organizational communication as a determinant retention, specifically communication climate, integration with the organization, relationship with the superior and personal feedback for internationally educated nurses in Germany.

The present study has found that communication climate is a significant positive predictor of retention intention ($\beta = .214, p = .001$). This is consistent with earlier studies such as Reiff et al. (2020) that showed that the overall climate and the way of communicating in an organization make a significant difference to nurses' retention. Job satisfaction and reduced nurse burnout are closely linked to nurse retention and were associated with higher levels of communication satisfaction among nurses (Doleman et al., 2025). Likewise, Rodríguez-Fernández et al. (2024) found that enhancing communication was a practical implication to improve nurse retention. The qualitative results corroborated this evidence, as participants reported the motivation and sense of belonging they felt in relation to the communication climate. One participant commented on the feeling of being valued by the leaders when they were open about changes in the organization and another participant expressed that the communication culture in the organization had an impact on their relationship with the organization. These results indicate that the provision of a positive communication climate is critical to keeping internationally educated nurses.

Finally, personal feedback was found to be another important positive predictor of retention intention ($\beta = .187, p = .001$). This finding is aligned with recent literature emphasizing the need for recognition and positive feedback for nurse retention. For instance, (Rodríguez-Fernández et al., 2024) identified that recognition from supervisors had a positive impact on the outcomes of the nurses. Buckley et al. (2025) showed that constructive feedback was another factor associated with nurse retention. These findings are aligned with the qualitative responses collected where participants reported on the positive effects of receiving feedback on their progress. One participant expressed that getting acknowledged by their team leader encouraged them to do more, while another explained that feedback enabled them to understand expectations and develop professionally. This is further evidence that good, frequent feedback is important to retention efforts for internationally

educated nurses.

Interestingly, the intention to stay was not significantly related to relationship with superiors in the regression model ($\beta = -.077, p = .177$) whereas supportive leadership has been shown previously to have a positive relationship with nurses' intention to stay. Pattali et al. (2024) concluded that transformational leadership and authentic leadership negatively influenced the turnover intention in the nurses. Likewise, Rodríguez-Fernández et al. (2024) highlighted that nurse outcomes are better when they are recognized by their supervisors. The qualitative results validate this interpretation as participants repeatedly referred to supervisor support as being essential for receiving feedback and having a positive climate of communication. The effect between organizational integration and retention intention ($\beta = .148, p = .032$) was also reported. This is consistent with the research that found inequalities in advancement and occupational downward mobility for Asian international nurses to be important challenges. This interpretation was verified by the qualitative results, which revealed problems with access to informal communication circuits and with the norms of hierarchy which were not explicitly communicated.

The qualitative findings offered contextual understanding of the quantitative findings. Specifically, communication issues were consistently reported beyond language barriers from negotiating unclear working rules, knowing which way to walk for the best chances of understanding, to understanding the social networks at formal and informal work gatherings. This study confirms earlier research, which has shown that international nurses are typically associated with different nurse/physician relationships and responsibilities.

Conclusion

The study highlights that the organizational communication, especially communication climate, organizational Integration and personal feedback, is a basic element in retention of internationally educated nurses in Germany. However, language is not the only barrier that nurses encounter when trying to communicate within the workplace; there are also other unspoken norms and informal networks to navigate in the workplace that need to be addressed by the organization. In practice, healthcare organizations should implement systematic initiation training, regular feedback meetings, leadership communication skills training and mentoring programs. The measures are vital to maintain the international

nursing workforce, as well as to counteract the nursing shortage in Germany by establishing positive working and living conditions which enable all staff to feel at home and develop professionally.

Strengths and Limitations

The mixed methods used in this study enabled extensive understanding of the part of organizational communication for nurse retention that was validated by the statistics and complemented by the interview responses of the participants. The wide variety of samples increased the generalizability of the data along demographic variables. Nevertheless, there are several limitations such as the cross-sectional design which does not allow causal inferences, the self-reported measures that may be biased, the relatively low reliability of two subscales (Organizational Integration, Personal Feedback), and the data being collected from only one region which limits generalizability. Longitudinal studies across sites that have good measures are warranted.

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