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# Relationship Between Management Communication Clarity and Staff Retention Among Nurses in Cavite

**Jerwin T. Alipio, RN[1], Drexel Heinz M. Cruz, PhD, RN[1]**
[1]Master of Arts in Nursing (MAN), University of Perpetual Help System DALTA, Las Piñas, Metro Manila, Philippines

Email: alipiojerwin19@gmail.com

**ABSTRACT**

This study examined the relationship between management communication clarity and nurse retention intention in selected public and private healthcare institutions in Cavite, Philippines, and identified areas for workforce management improvement. A quantitative, cross-sectional descriptive-correlational design involved 61 registered nurses selected through purposive sampling. Data were collected using a structured, five-point Likert-scale questionnaire and analyzed through descriptive statistics, Cronbach's alpha, and Pearson's product–moment correlation. Management communication clarity was rated high (M = 4.077), with clarity and comprehensibility rated highest and message consistency lowest. Retention intention was also rated high (M = 3.975), although role clarity scored highest (M = 4.410) and intent to stay lowest (M = 3.612). Management communication clarity showed a very strong positive relationship with overall retention intention ($r = 0.895$, $p < .001$); transparency of content had the strongest dimension-level association ($r = 0.862$, $p < .001$). These findings indicate that clearer perceived management communication accompanies stronger retention intentions, but professional role clarity and organizational commitment do not necessarily translate into long-term plans to stay. Hospitals should strengthen consistent supervisory messaging, transparent decisions, two-way feedback, and recognition, and pilot-test the proposed CLEAR-Care program. The small, purposively selected sample, cross-sectional design, and self-reported intentions limit generalizability and causal interpretation. By informing local nursing workforce practices, the study offers potential contributions to public health and institutional sustainability, consistent with SDG 3 (Good Health and Well-Being) and SDG 8 (Decent Work and Economic Growth).

**Keywords:** *Healthcare Institutions, Management Communication, Nurse Retention, Organizational Commitment, Retention Intention, Workforce Sustainability*

## 1. INTRODUCTION

Nurse retention remains a significant concern in healthcare systems because workforce instability can affect service continuity, institutional performance, and the quality of patient care. The World Health Organization (2025) emphasizes the importance of investing in nursing education, employment, leadership, and workforce retention to strengthen healthcare delivery. Pressley and Garside (2023) identified job satisfaction, organizational commitment, and supportive working conditions as important determinants of nurses' intentions to remain employed. In the Philippines, Falguera et al. (2023) found that higher work engagement was associated with lower turnover intention and more favorable nursing outcomes. Effective management communication is an important component of the organizational environment. Kämäräinen et al. (2024) highlighted the significance of nurse leaders' interpersonal communication competence in supporting professional relationships and effective nursing leadership. Similarly, Doleman et al. (2025) demonstrated an association between organizational communication satisfaction and job satisfaction among senior registered nurses. These findings support examining communication clarity as a potentially relevant organizational factor in nurse retention. This study investigates the relationship between management communication clarity and retention intention among registered nurses employed in selected public and private healthcare institutions in Cavite, Philippines. It focuses on the comprehensibility, consistency, transparency, frequency, communication channels, and feedback opportunities associated with managerial communication. The investigation seeks to provide evidence that may inform practical communication strategies and sustainable nursing workforce management.

### Research Problem

Nurse retention is influenced by multiple organizational and professional factors, including leadership practices, working conditions, professional recognition, and perceived organizational support. Alsadaan et al. (2023) established the importance of nursing leadership behaviors in supporting staff performance, while Pattali et al. (2024) identified relationships among leadership styles, perceived organizational support, and turnover intention. Mirzaei et al. (2024) further demonstrated significant associations between perceived nurse manager competence, job satisfaction, and nurses' intention to leave their employment. Despite growing research on nursing leadership and workforce stability, the specific relationship between management communication clarity and retention intention remains insufficiently examined in the Cavite context. Existing evidence frequently considers communication within broader leadership and organizational constructs rather than assessing its individual dimensions. Doleman et al. (2025) provide more direct evidence concerning organizational communication satisfaction and nurses' intention to stay, supporting the need for additional context-specific investigations. This study addresses this research problem by examining management communication clarity through six dimensions: frequency of communication, consistency of message, transparency of content, clarity and comprehensibility, channels of communication, and opportunity for feedback. It further examines retention intention through perceived support from management, role clarity, professional value and recognition, organizational commitment, and intent to stay. Determining the relationship between these variables may provide a basis for improving communication practices in selected Cavite healthcare institutions.

### Assumptions of the Study

The study assumes that registered nurses with at least one year of continuous employment in their respective healthcare institutions have sufficient organizational experience to evaluate management communication practices. It further assumes that respondents can provide meaningful self-reported assessments of communication clarity and retention intention through

a structured questionnaire. The study is guided by the expectation that transparent, consistent, comprehensible, and responsive management communication may be positively associated with organizational commitment and nurses' intentions to remain employed. Pressley and Garside (2023) identified organizational and relational factors that contribute to nurses' decisions to stay, while Ivziku et al. (2024) demonstrated the importance of leadership trust and organizational commitment in understanding nurses' intentions to leave. These assumptions provide a conceptual basis for examining the variables without presupposing a statistically significant relationship. Accordingly, the principal null hypothesis states that no significant relationship exists between management communication clarity and nurse retention intention in the selected healthcare institutions.

**Objectives of the Study**

The primary objective of this study is to determine the relationship between management communication clarity and retention intention among registered nurses employed in selected healthcare institutions in Cavite, Philippines. Specifically, the study aims to assess the level of management communication clarity in terms of frequency of communication, consistency of message, transparency of content, clarity and comprehensibility, channels of communication, and opportunity for feedback. It also seeks to determine the level of nurse retention intention in terms of perceived support from management, role clarity, professional value and recognition, organizational commitment, and intent to stay. Furthermore, the study aims to examine whether a statistically significant relationship exists between management communication clarity and nurse retention intention. Based on the findings, the study seeks to provide an empirical basis for the CLEAR-Care Nurse Communication and Retention Enhancement Program, intended to support improved managerial communication practices and workforce stability in healthcare institutions.

**Theoretical or Conceptual Basis**

This study is anchored in Herzberg's Two-Factor Theory and the Shannon–Weaver Model of Communication, which provide complementary perspectives for understanding workplace motivation, organizational communication, and nurses' retention intentions. Herzberg's Two-Factor Theory distinguishes between hygiene factors, which are associated with preventing job dissatisfaction, and motivational factors, which contribute to positive work experiences and professional fulfillment. In nursing management, clear administrative communication, supportive supervision, and favorable working conditions may be understood as organizational conditions related to employee satisfaction, while recognition, achievement, and professional development represent motivational considerations. Hudays et al. (2024), through a systematic review of factors influencing job satisfaction among mental health nurses, demonstrated the relevance of Herzberg's framework for understanding intrinsic and extrinsic determinants of nursing job satisfaction. Within the present study, the theory helps explain how communication-related workplace conditions and professional recognition may be associated with nurses' decisions to remain employed. The Shannon–Weaver Model of Communication provides a framework for examining the transmission of organizational information. It identifies the sender, message, communication channel, receiver, and potential sources of interference that may affect message transmission. In the context of this study, hospital management serves as the sender, administrative instructions and policies constitute the messages, and nurses act as the receivers. Communication barriers may include ambiguous instructions, inconsistent announcements, inappropriate channels, or incomplete information. Fox et al. (2025) explain the relevance of communication transmission models in healthcare settings, particularly where the accurate and timely exchange of information is essential. Because the original transmission model is primarily linear, the present study additionally considers feedback opportunities as a

complementary dimension of effective organizational communication. The integration of these frameworks establishes management communication clarity as the independent variable and nurse retention intention as the dependent variable. Communication clarity is examined through message frequency, consistency, transparency, comprehensibility, channels, and feedback opportunities, while retention intention encompasses management support, role clarity, professional recognition, organizational commitment, and intent to stay. Kämäräinen et al. (2024) support the relevance of interpersonal communication competence in nursing leadership, reinforcing the conceptual importance of communication practices in the nursing work environment. Together, these frameworks provide the theoretical foundation for examining the association between managerial communication practices and nurses' intentions to remain in their current healthcare institutions.

This study aligns with Sustainable Development Goal 3 (Good Health and Well-Being), particularly Target 3.c, which promotes healthcare workforce development and retention, and Sustainable Development Goal 8 (Decent Work and Economic Growth), particularly Targets 8.5 and 8.8, which emphasize decent employment and safe working environments. By examining the relationship between management communication clarity and nurse retention intention, the study provides insights into improving workforce stability, organizational support, and healthcare service continuity. The World Health Organization (2025) emphasizes the importance of nursing workforce development, while the United Nations Department of Economic and Social Affairs (2025) advocates decent work and sustainable development. Overall, the research contributes to public health, socio-economic, and institutional sustainability by providing evidence to support improved communication practices and healthcare workforce management. However, its correlational design establishes associations rather than causal relationships.

## 2. METHODOLOGY

### Research Design

The study utilized a quantitative, descriptive-correlational research design to assess the relationship between management communication clarity and nurses' retention intention without manipulating the variables. This approach allowed the researcher to describe existing communication practices, evaluate nurses' perceptions of their work environment, and determine the direction and strength of the association between the study variables. A cross-sectional survey was conducted during the 2024–2025 academic year, enabling the collection of standardized numerical data from registered nurses employed in public and private healthcare institutions in Cavite.

### Research Locale or Study Setting

The study was conducted in selected public and private healthcare institutions in Cavite, a province within the CALABARZON region of the Philippines. The research setting encompassed healthcare facilities operating under different administrative structures, including private tertiary hospitals, public general hospitals, and district-level healthcare institutions. Cavite was selected because of its diverse healthcare environment, growing demand for nursing professionals, and proximity to Metro Manila, where employment opportunities may affect healthcare workforce mobility. These institutional characteristics provided a relevant setting for examining management communication practices and nurses' retention intentions.

### Participants or Data Sources

The study involved 61 registered nurses employed in selected public and private healthcare institutions in Cavite. Participants were selected through purposive sampling, a non-probability sampling technique based on predetermined eligibility criteria. Qualified respondents were

registered nurses who had completed at least one year of continuous employment in their respective healthcare institutions, ensuring sufficient exposure to organizational communication practices. Newly hired personnel, nursing aides, interns, and non-nursing professionals were excluded. Respondents represented different nursing positions and clinical settings, including 48 staff nurses, 11 senior staff nurses, and two nurse supervisors. Recruitment was coordinated with hospital administrators and nursing supervisors, with participation based on eligibility, accessibility, and willingness to participate voluntarily.

**Research Instruments or Materials**

Data were collected using a structured, self-administered questionnaire designed to assess management communication clarity and nurse retention intention. The instrument included items concerning respondents' demographic and employment characteristics and two principal measurement domains. Management communication clarity was evaluated in terms of frequency of communication, consistency of message, transparency of content, clarity and comprehensibility, channels of communication, and opportunity for feedback. Nurse retention intention was assessed through perceived support from management, role clarity, professional value and recognition, organizational commitment, and intent to stay. Responses were measured using a five-point Likert scale ranging from 1 (Strongly Disagree) to 5 (Strongly Agree), with higher scores indicating more favorable perceptions of management communication and stronger retention intention. The questionnaire's validation procedures included expert assessment of content relevance, clarity, and alignment with the research objectives, as well as pilot testing to evaluate item comprehensibility and consistency. Cronbach's alpha was used to assess internal consistency, with a coefficient of 0.70 or higher identified in the methodology as the acceptable reliability criterion.

**Data Gathering Procedure**

The data-gathering procedure involved securing institutional authorization, coordinating with hospital administrators and nursing supervisors, and identifying qualified nurse respondents according to the established inclusion criteria. The questionnaire was administered through printed forms or secure online platforms, depending on institutional preferences and accessibility. Participants were provided with information explaining the study's objectives, procedures, confidentiality provisions, and voluntary nature before providing informed consent. Printed questionnaires were collected through designated secure collection points, while electronic responses were obtained through controlled online access. The researcher facilitated the administration of the instrument while maintaining neutrality to minimize response bias. Completed questionnaires were collected, organized, and checked for completeness and accuracy before encoding and statistical analysis. Confidentiality and secure handling of responses were maintained throughout the data collection process.

**Data Analysis**

The collected data were analyzed using descriptive and inferential statistical methods. Frequencies and percentages were used to summarize respondents' demographic and employment characteristics, while means and standard deviations were employed to describe management communication clarity and nurse retention intention. Mean scores were interpreted using five descriptive categories: 4.21–5.00 (Very High), 3.41–4.20 (High), 2.61–3.40 (Moderate), 1.81–2.60 (Low), and 1.00–1.80 (Very Low). Cronbach's alpha was used to assess the internal consistency of the questionnaire's measurement domains. Pearson's product-moment correlation coefficient was applied to determine the direction, strength, and statistical significance of the relationship between management communication clarity and nurse retention intention. Hypothesis testing was conducted at the 0.05 significance level. The

statistical analysis focused on identifying associations between the variables rather than establishing causal relationships.

**Ethical Consideration**

The study followed ethical principles concerning voluntary participation, informed consent, confidentiality, anonymity, fairness, and respect for participants' rights. Institutional authorization was sought before data collection, and respondents were informed about the study's objectives, procedures, potential risks, and intended use of the collected information. Participation was voluntary, and respondents were informed of their right to decline or withdraw without adverse consequences. The questionnaire was designed to exclude personally identifiable information, and collected responses were anonymized and stored in password-protected files accessible only to the principal investigator. Research findings were presented in aggregate form to protect individual identities. Particular attention was given to minimizing potential discomfort associated with questions concerning workplace communication and employment satisfaction. Participant selection followed non-discriminatory criteria, and the collected information was designated exclusively for academic and research purposes.

## 3. RESULTS AND DISCUSSION

### 3.1 Respondents' Professional Characteristics and Instrument Reliability

#### 3.1.1 Professional Profile of Respondents

The study included 61 registered nurses, comprising 48 staff nurses (78.69%), 11 senior staff nurses (18.03%), and two nurse supervisors (3.28%). Most respondents had occupied their current positions for one to five years (70.49%), followed by six to ten years (18.03%), 11 to 15 years (6.56%), and 21 years or more (4.92%). Regarding educational attainment, 58 respondents (95.08%) held bachelor's degrees, while three (4.92%) had master's degrees. The predominance of frontline nurses indicates that the findings primarily reflect the perspectives of personnel receiving and implementing managerial communications. Pressley and Garside (2023) identified workplace conditions, leadership support, and organizational commitment as important considerations in nurses' intentions to stay. Similarly, Falguera et al. (2023) reported associations between work engagement and turnover intention among nurses in the Central Philippines. However, the present study did not establish whether retention intention differed significantly across professional positions, tenure groups, or educational qualifications.

#### 3.1.2 Reliability of the Research Instrument

The management communication clarity instrument, consisting of 36 items, obtained a Cronbach's alpha coefficient of 0.980, while the 30-item retention intention instrument recorded a coefficient of 0.977. Reliability coefficients for the individual measurement domains ranged from 0.903 to 0.969, indicating excellent internal consistency. These findings suggest that questionnaire items within the respective domains were answered consistently. Nevertheless, high reliability coefficients do not independently establish construct validity, and exceptionally high coefficients may indicate substantial similarity among items. The results therefore support the internal consistency of the measures without eliminating the need for further psychometric evaluation.

### 3.2 Level of Management Communication Clarity

#### 3.2.1 Frequency of Communication

Frequency of communication obtained a high overall rating (M = 4.142, SD = 0.591). Regular updates concerning hospital policies and procedures received the highest mean (M = 4.279), followed by information about important changes and management reminders (M = 4.246). The

lowest ratings were recorded for receiving clear management messages (M = 3.967) and obtaining important information on time (M = 3.984). These findings indicate that management generally communicated regularly, although message clarity and timeliness were comparatively weaker. Kämäräinen et al. (2024) identified interpersonal communication competence as an essential component of effective nursing leadership. Doleman et al. (2025) also demonstrated the relevance of organizational communication satisfaction to nurses' workplace experiences. The findings suggest that communication frequency should be considered alongside the clarity and timeliness of the information provided.

#### 3.2.2 Consistency of Message

Consistency of message received a high overall rating (M = 4.000, SD = 0.680), although it was the lowest-rated dimension of management communication clarity. The highest item concerned the ability to follow directions because of consistent communication (M = 4.164), followed by receiving reliable and consistent information (M = 4.115). Lower ratings were recorded for the absence of confusing messages from different supervisors (M = 3.852) and management's follow-through on communicated commitments (M = 3.869). The findings suggest that nurses generally understood managerial instructions but experienced comparatively greater difficulty with consistency across supervisors and administrative follow-through. Kämäräinen et al. (2024) emphasized the importance of effective interpersonal communication among nurse leaders, while Ha et al. (2025) identified a significant relationship between organizational communication and turnover intention among rehabilitation hospital nurses. These findings support the relevance of coordinated supervisory messaging and dependable communication practices.

#### 3.2.3 Transparency of Content

Transparency of content obtained a high overall mean (M = 4.003, SD = 0.688). Understanding information provided by management received the highest rating (M = 4.197), followed by receiving honest updates (M = 4.033). The lowest ratings concerned management's openness in communicating with employees (M = 3.869) and the clarity of explanations regarding new tasks (M = 3.902). Although respondents generally understood information from management, the comparatively lower ratings suggest opportunities to improve openness and the explanation of administrative decisions. Doleman et al. (2025) identified information needs and communication optimization as important themes in their investigation of organizational communication among senior registered nurses. The present findings indicate that understandable messages and transparent organizational communication are related but distinct aspects of managerial communication.

#### 3.2.4 Clarity and Comprehensibility

Clarity and comprehensibility received the highest overall rating among communication dimensions (M = 4.197, SD = 0.583). Respondents reported a very high level of understanding of the language used in management communications (M = 4.361), followed by clarity regarding work responsibilities (M = 4.279) and managerial instructions (M = 4.262). Understanding the reasons behind management decisions received the lowest rating within this dimension (M = 4.082). These results indicate that management communication was generally understandable, particularly regarding nursing responsibilities and operational instructions. However, explaining the reasons behind decisions was comparatively less developed. Kämäräinen et al. (2024) highlighted the importance of communication competence in nursing leadership, supporting the relevance of clear managerial instructions and meaningful information exchange in professional nursing environments.

#### 3.2.5 Channels of Communication

Channels of communication obtained a high overall rating (M = 4.085, SD = 0.700). Understanding information delivered through official communication channels received the highest rating (M = 4.197), followed by channel accessibility and ease of use (M = 4.131). The lowest rating concerned the ease of requesting clarification through available communication channels (M = 4.016). The findings indicate that formal communication channels were generally accessible and understandable, although their effectiveness in facilitating clarification was comparatively weaker. Ha et al. (2025) found that organizational communication was negatively associated with turnover intention among rehabilitation hospital nurses. Similarly, Doleman et al. (2025) highlighted the organizational importance of communication satisfaction. These studies reinforce the relevance of communication systems that facilitate both information dissemination and employee responses.

#### 3.2.6 Opportunity for Feedback

Opportunity for feedback received a high overall rating (M = 4.038, SD = 0.722). The highest-rated item concerned nurses' ability to ask questions when instructions were unclear (M = 4.246), followed by opportunities to express work-related concerns (M = 4.066). Lower ratings were observed for comfort in providing feedback to managers (M = 3.934), participation in discussions during meetings (M = 3.967), and feeling safe when giving honest feedback (M = 3.967). These findings suggest that opportunities for asking questions were more favorably perceived than the personal comfort associated with expressing feedback. Lee and Seo (2024) identified a relationship between inclusive nursing leadership and psychological safety, while Lee and Kwon (2024) demonstrated associations among nurses' speaking-up behaviors, organizational culture, and teamwork conditions. These studies provide a relevant context for interpreting the lower ratings for feedback comfort and openness, although psychological safety was not independently tested as a mediating variable in the present study.

#### 3.2.7 Overall Management Communication Clarity

Management communication clarity obtained a high overall rating (M = 4.077, SD = 0.596). Clarity and comprehensibility ranked highest (M = 4.197), followed by frequency of communication (M = 4.142), channels of communication (M = 4.085), opportunity for feedback (M = 4.038), transparency of content (M = 4.003), and consistency of message (M = 4.000). The results demonstrate generally favorable perceptions of managerial communication, with relative weaknesses in consistency, transparency, and feedback opportunities. These differences indicate that communication quality extends beyond understandable instructions and regular announcements. Kämäräinen et al. (2024) and Doleman et al. (2025) support examining communication as a multidimensional component of nursing leadership and organizational experience.

### 3.3 Level of Nurse Retention Intention

#### 3.3.1 Perceived Support from Management

Perceived support from management received a high overall rating (M = 3.913, SD = 0.836). Respondents expressed the greatest agreement with being able to rely on their leaders during difficult situations (M = 4.115), followed by supervisors listening to work-related concerns (M = 4.066). Feeling valued, appreciated, and motivated to stay because of management support received comparatively lower ratings (M = 3.770). These findings indicate that respondents generally perceived management as available during difficulties, although personal appreciation and motivational support were less favorably evaluated. Galanis et al. (2024), in a systematic review and meta-analysis, identified a moderate negative association between perceived organizational support and turnover intention among nurses. Pattali et al. (2024) likewise

demonstrated the importance of organizational support when examining leadership and turnover intention. These findings reinforce the relevance of supportive managerial relationships to workforce retention.

### 3.3.2 Role Clarity

Role clarity obtained the highest rating among the retention-intention dimensions (M = 4.410, SD = 0.479), interpreted as very high. The highest-rated item concerned performing effectively when tasks were clearly understood (M = 4.557), followed by knowledge of nursing duties and responsibilities (M = 4.525) and understanding professional expectations (M = 4.443). Reduced stress associated with clear job expectations obtained the lowest item rating (M = 4.262), although it remained very high. These findings demonstrate that respondents were generally confident about their professional responsibilities. Nevertheless, the considerably lower rating for actual intent to stay indicates that favorable role clarity does not necessarily correspond to equally strong long-term employment intentions. Pressley and Garside (2023) identified organizational commitment, job satisfaction, and workplace conditions as important determinants of nurses' intentions to remain employed. The present findings support considering role clarity as one component of the wider organizational environment rather than as a sufficient explanation of retention intention.

### 3.3.3 Professional Value and Recognition

Professional value and recognition obtained a high overall rating (M = 3.831, SD = 0.817). Feeling respected by coworkers and supervisors received the highest rating (M = 4.131), followed by loyalty associated with respectful and appreciative treatment (M = 3.869). Receiving appreciation for performing work effectively (M = 3.689) and recognition from supervisors for professional efforts (M = 3.721) received the lowest ratings. The results suggest that respondents generally experienced professional respect but perceived comparatively weaker recognition of their individual contributions. Pressley and Garside (2023) identified job satisfaction and organizational commitment as central considerations in nurses' decisions to stay. Similarly, Alsadaan et al. (2023) highlighted the importance of nursing leadership behaviors in supporting staff performance. The findings indicate that professional recognition represents a potential area for improvement in institutional support practices.

### 3.3.4 Organizational Commitment

Organizational commitment obtained a high overall rating (M = 4.109, SD = 0.743). Commitment to contributing to hospital success received the highest rating (M = 4.295), followed by pride in organizational membership (M = 4.230) and agreement with institutional goals and mission (M = 4.213). Satisfaction with management support received the lowest rating (M = 3.787). These findings reveal generally strong organizational identification despite relatively lower satisfaction with managerial support. Pressley and Garside (2023) identified organizational commitment as a significant consideration in nurses' intentions to stay, while Falguera et al. (2023) reported associations between work engagement and nursing employment outcomes in the Philippine context. The findings suggest that favorable organizational commitment may coexist with perceived limitations in specific aspects of management support.

### 3.3.5 Intent to Stay

Intent to stay received the lowest overall rating among retention dimensions (M = 3.612, SD = 0.984), although its verbal interpretation remained high. Feeling secure in one's nursing position received the highest rating (M = 3.738), followed by perceived opportunities for professional growth (M = 3.705). The lowest ratings concerned not thinking about leaving the organization (M = 3.426) and planning to remain employed for an extended period (M = 3.525). These findings

indicate that respondents expressed comparatively greater confidence in their professional roles than in their long-term employment intentions. Pressley and Garside (2023) demonstrated that retention decisions are associated with several workplace and organizational considerations. Galanis et al. (2024) further identified an association between organizational support and lower turnover intention, while Ha et al. (2025) reported a negative relationship between organizational communication and turnover intention. Nevertheless, intention to stay reflects respondents' reported employment preferences rather than verified future retention behavior.

#### 3.3.6 Overall Nurse Retention Intention

Overall nurse retention intention obtained a high rating (M = 3.975, SD = 0.683). Role clarity ranked highest (M = 4.410), followed by organizational commitment (M = 4.109), perceived support from management (M = 3.913), professional value and recognition (M = 3.831), and intent to stay (M = 3.612). These findings indicate a difference between understanding professional responsibilities and expressing a strong intention to remain employed. Although respondents reported favorable perceptions of their roles and organizations, the comparatively lower ratings for recognition, managerial support, and long-term employment intentions suggest potential areas for workforce management improvement. Pressley and Garside (2023) and Pattali et al. (2024) provide supporting evidence that retention-related attitudes are associated with broader organizational and leadership conditions.

### 3.4 Relationship Between Management Communication Clarity and Nurse Retention Intention

#### 3.4.1 Overall Relationship Between the Principal Variables

Pearson's product-moment correlation analysis revealed a very strong, statistically significant positive relationship between overall management communication clarity and overall nurse retention intention, $r(59) = 0.895$, $p < .001$. Communication clarity was also strongly associated with the specific intent-to-stay dimension, $r(59) = 0.821$, $p < .001$. Furthermore, the combined clarity-and-consistency measure demonstrated a significant positive correlation with intent to stay, $r(59) = 0.786$, $p < .001$. The corresponding squared correlation coefficients were 0.801, 0.674, and 0.618, respectively. Both null hypotheses were rejected at the 0.05 significance level. These findings demonstrate that more favorable perceptions of management communication clarity were associated with stronger reported retention intentions. The squared coefficients indicate substantial shared variance between the measured variables, but they do not establish the proportion of retention caused by communication. The findings are consistent with Pressley and Garside (2023), Kämäräinen et al. (2024), and Pattali et al. (2024), whose studies identified the relevance of organizational experiences, leadership, and communication-related factors to nursing workforce outcomes. More directly, Ha et al. (2025) found a significant negative correlation between organizational communication and turnover intention. However, the cross-sectional design of the present study does not establish causality.

#### 3.4.2 Relationships Between Communication Dimensions and Retention Intention

All six dimensions of management communication clarity demonstrated statistically significant positive relationships with overall retention intention. Transparency of content exhibited the strongest reported dimension-level correlation ($r = 0.862$, $p < .001$), followed by channels of communication ($r = 0.853$, $p < .001$). Notably, transparency ranked fifth among communication dimensions in descriptive mean ratings but showed the highest correlation with retention intention. The findings suggest that differences in perceived transparency and communication-channel effectiveness were particularly closely associated with differences in retention intention among respondents. Doleman et al. (2025) identified organizational communication as a relevant consideration in nurses' workplace satisfaction, while Ha et al. (2025) reported an

association between organizational communication and turnover intention. The results suggest that these communication dimensions merit attention in retention planning; however, the relative sizes of the correlations do not independently establish that improving transparency or communication channels would produce greater retention benefits than improving other dimensions.

### 3.5 Proposed CLEAR-Care Nurse Communication and Retention Enhancement Program

The study developed the CLEAR-Care Nurse Communication and Retention Enhancement Program in response to the identified weaknesses in managerial communication and retention-related perceptions. The program addresses five intervention areas: consistent leadership communication, structured listening and feedback, clear and transparent information, professional appreciation and managerial support, and retention conversations with monitoring mechanisms. A proposed 12-month implementation framework incorporates preparation, program initiation, implementation, and evaluation activities. The proposed intervention reflects the study's observed differences in communication consistency, transparency, feedback comfort, professional recognition, and intent to stay. Kämäräinen et al. (2024) support the importance of communication competence in nursing leadership, while Lee and Seo (2024) and Lee and Kwon (2024) provide evidence concerning inclusive leadership, psychological safety, and speaking-up practices. Galanis et al. (2024) and Pressley and Garside (2023) further support considering organizational support and workplace experiences in retention planning. Nevertheless, CLEAR-Care remains a proposed intervention whose effectiveness has not yet been established through implementation or outcome evaluation.

### 3.6 Limitations and Implications of the Findings

The study was based on self-reported information from 61 registered nurses selected through purposive sampling in healthcare institutions in Cavite. Data were collected using a cross-sectional questionnaire, and the analysis did not establish actual employee turnover or control for potential confounding factors such as compensation, workload, staffing conditions, career opportunities, or migration intentions. Both principal variables were measured using the same survey instrument, creating the possibility of common-method bias. These limitations restrict causal interpretation and generalization beyond the participating respondents and healthcare institutions. Although the observed correlations were statistically significant, they do not establish that communication clarity independently predicts or directly causes employee retention. Future longitudinal and multi-institutional studies incorporating objective turnover records and additional organizational variables would help determine whether improvements in managerial communication are followed by measurable changes in nursing workforce stability.

## 4. CONCLUSIONS AND RECOMMENDATIONS

The study established a very strong, statistically significant positive relationship between management communication clarity and nurse retention intention among 61 registered nurses in selected healthcare institutions in Cavite, Philippines ($r = 0.895$, $p < .001$). Although management communication was generally rated high, clarity and comprehensibility emerged as the strongest dimension, while message consistency received the lowest rating. Transparency of content demonstrated the strongest dimension-level correlation with retention intention, emphasizing its relevance to nurses' employment decisions. Furthermore, respondents reported very high role clarity and strong organizational commitment, yet their intent to stay received the lowest rating among retention dimensions. These findings indicate that understanding professional responsibilities and demonstrating organizational loyalty do not necessarily translate into stronger long-term employment intentions. Overall, the study highlights management communication clarity as an important organizational factor associated with

nurses' retention intentions and provides an empirical foundation for strengthening communication practices and workforce management strategies.

Healthcare administrators and nursing supervisors in Cavite should prioritize improvements in communication consistency, transparency, feedback mechanisms, professional recognition, and managerial support. Hospital management should standardize supervisory messages, ensure timely dissemination of policies, and clearly explain the rationale behind administrative decisions to minimize conflicting instructions and communication uncertainties. Regular staff consultations, structured feedback sessions, and accessible reporting channels should be strengthened to encourage nurses to express concerns without fear of unfavorable consequences. Supervisors should also provide consistent professional recognition, constructive feedback, and opportunities to discuss career development and employment intentions. The proposed CLEAR-Care Nurse Communication and Retention Enhancement Program may be pilot-tested through its planned 12-month implementation framework, incorporating leadership communication, structured listening, transparent information sharing, employee appreciation, and retention monitoring. Hospital administrators should evaluate its implementation using established monitoring indicators and employee feedback before considering wider institutional adoption.

The study was limited to 61 registered nurses selected through purposive sampling from healthcare institutions in Cavite, restricting the generalizability of its findings to other nursing populations and geographical settings. Its quantitative, cross-sectional design captured perceptions during the 2024–2025 academic year and could not establish causal relationships or changes over time. Reliance on self-reported questionnaires introduced potential response and common-method biases, while actual employee turnover was not measured. Other retention-related factors, including compensation, workload, staffing conditions, and career opportunities, were not statistically controlled. Future research may employ larger, more representative samples, longitudinal designs, additional organizational variables, and objective retention records.

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