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Factors Influencing Nurse Turnover Intentions: A Comprehensive Review of Global Evidence on Organizational, Psychosocial, and Leadership Dimensions

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Abstract

The stability of healthcare around the world is seriously threatened by nurse turnover intention, which is a primary predictor of actual turnover. The necessity to comprehend contributing elements is highlighted by the 47.7% new nurse turnover rate in Korea, which costs over USD 33,733 per nurse. This comprehensive review synthesizes quantitative, qualitative, and mixed-methods evidence to map factors that influence nurse turnover intention across hospital settings. Using a PRISMA-ScR approach, a literature search for "factors of nurse turnover" in Scopus produced 2,274 articles; 13 of these met inclusion criteria and were subjected to thematic analysis. Four primary areas were identified: leadership style (transformational, toxic, bullying), psychosocial aspects (work-life balance, job satisfaction, distress, and social support), and organizational factors (work environment, mentorship). Work-life balance and job satisfaction reduce risk by 30–40%, while a supportive work environment and adequate resources reduce turnover by 10–20%. While toxic or bullying leadership significantly raises turnover intention (β=0.51), transformational leadership enhances retention by 0.082 per unit. There are significant regional differences; for instance, 81.4% of Kenyan nurses plan to quit because their pay is less than $500 USD, which increases the probability of turnover three to five times. The use of cross-sectional research (76.9%) and the lack of worldwide representation are examples of gaps in the literature. To increase retention, holistic approaches that incorporate transformational leadership training, mental health assistance, healthy workplaces, and equitable pay are crucial.

INTRODUCTION

Nurse turnover rate of 47.7% for new nurses in Korea in 2020 and an average of 18% in developed nations, nurse turnover has grown to be a serious problem that jeopardizes the stability of the global healthcare system. Healthcare institutions suffer significant financial losses of USD 33,733 per departing nurse, and patient safety and quality of care are compromised. An in-depth comprehension of the factors

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influencing turnover intention is essential to developing effective intervention strategies and improving nurse retention, as it is the most direct precursor to actual turnover behavior. Turnover intention is defined as an individual's conscious and voluntary desire to leave their organization. According to empirical research, a variety of interrelated factors, including organizational elements like the work environment and HRM practices, psychosocial elements like work-life balance and job satisfaction, and leadership elements like organizational culture and leadership style, all have an impact on turnover intentions.

At the organizational level, a positive and supportive nursing work environment: characterized by streamlined workflows, sufficient staffing, adequate rest opportunities, and equitable remuneration: emerges as one of the strongest organizational determinants of nurses' intention to leave, showing a robust inverse relationship with turnover intentions. In addition, formalized orientation, mentoring, and preceptorship initiatives have been shown to lower turnover intentions by approximately 15–25%, particularly among newly employed nurses. Organizational strategies such as limiting excessive night shift schedules, improving salary structures, ensuring transparency in reward and performance appraisal systems, and implementing differentiated human resource management approaches have demonstrated meaningful effects in reducing nurses' turnover intentions. However, achieving sustainable outcomes requires more comprehensive and integrated organizational reforms. Furthermore, perceived organizational support: reflected in the availability of resources, adequacy of equipment, and effectiveness of communication systems: has been associated with a 10–20% decrease in turnover intentions. These findings highlight the critical role of organizational investment in infrastructure that enables and strengthens professional nursing practice.

Within the psychosocial domain, work–life balance and job satisfaction were identified as the most powerful predictors of nurses' intentions to leave. Nurses who experienced a healthier balance between professional and personal life demonstrated 30–40% lower turnover intentions, with this pattern being particularly evident among Generation Z nurses, who tend to prioritize personal well-being and autonomy in their professional roles. Organizational commitment emerged as the most influential individual-level factor, showing a strong inverse association with turnover intentions (average correlation r = −0.58). Nevertheless, Generation Z nurses exhibited substantially lower levels of organizational commitment and appeared less responsive to supervisory social support compared with earlier generations, indicating that conventional retention approaches may no longer be sufficient and should be reconsidered. Psychological strain and occupational burnout were positively linked to turnover intentions, with presenteeism representing a notable expression of this relationship. In this pathway, frustration and burnout functioned as sequential mediators, accounting for a total mediating effect of 64.54%. Meanwhile, social support from family members, supervisors, and peers acted as a significant moderating factor, strengthening the protective influence of job satisfaction and contributing to a 20–30% reduction in turnover intentions.

From a leadership perspective, transformational leadership has been shown to exert a meaningful positive influence on nurse retention, with each incremental improvement in leadership quality associated with an estimated 0.082 increase in retention outcomes. In contrast, toxic leadership: manifested through practices such as excessive micromanagement, bullying, and preferential treatment: demonstrates a

strong positive association with turnover intention (β = 0.51). Workplace bullying functions as a critical mediating pathway in this relationship, accounting for approximately 35–48% of the indirect effect linking toxic leadership to nurses' intention to leave. To effectively strengthen nurse retention, implementation strategies should integrate three core approaches. First, the work environment should be enhanced through improved staff-to-patient ratios and the expansion of structured orientation programs. Second, psychological strain should be mitigated by limiting night shift burdens and promoting healthier work–life balance. Third, leadership practices must be reformed through targeted training and the systematic elimination of toxic behaviors. These interventions should be designed with particular attention to Generation Z nurses, who tend to value autonomy, continuous and sustainable professional development, and a sense of meaningful purpose in their work.

METHOD

This study adopts a scoping review methodology guided by the Preferred Reporting Items for Systematic Reviews and Meta-Analyses Extension for Scoping Reviews (PRISMA-ScR). The purpose of the review is to systematically map a wide range of factors associated with nurse turnover across diverse healthcare settings. A scoping review approach was selected because it allows the integration of evidence from multiple research designs, including quantitative, qualitative, and mixed-methods studies. By synthesizing these varied sources of evidence, this method enables a comprehensive exploration of key determinants and emerging thematic patterns related to nurse turnover. A systematic literature search was performed in the Scopus database on October 9, 2025 using the primary search term "factors of nurse turnover." The initial search identified 2,274 records, which were progressively filtered through multiple selection stages in accordance with the PRISMA framework, resulting in 13 studies that met the predefined inclusion criteria.During the identification phase, 1,415 records were excluded because they did not contain relevant keywords, leaving 859 articles for further assessment. In the screening phase, 87 non-research publications were removed, resulting in 772 eligible records. At the eligibility stage, studies were excluded due to language (non-English, n = 50), access status (non–open access, n = 470), and irrelevance to the field of interest (n = 95), leaving 157 articles. In the final inclusion stage, 144 studies were excluded because they did not meet the required source type or lacked complete data, resulting in 13 studies included in the final synthesis. The selection process is presented in the PRISMA flow diagram (Figure 1).

All included studies were systematically extracted using a structured data extraction sheet capturing information on authorship, publication year, country, study design, sample size, organizational context, and factors associated with nurse turnover. The extracted data were analyzed using a thematic synthesis approach, which yielded four overarching domains. The organizational domain encompassed aspects of the work environment and mentoring systems; the psychosocial domain included work–life balance, job satisfaction, psychological distress, and social support; and the leadership domain covered transformational and toxic leadership styles as well as workplace bullying. Overall, this analytical framework offers an integrated and nuanced understanding of the key determinants and thematic patterns underlying nurses' turnover intentions across diverse healthcare settings.

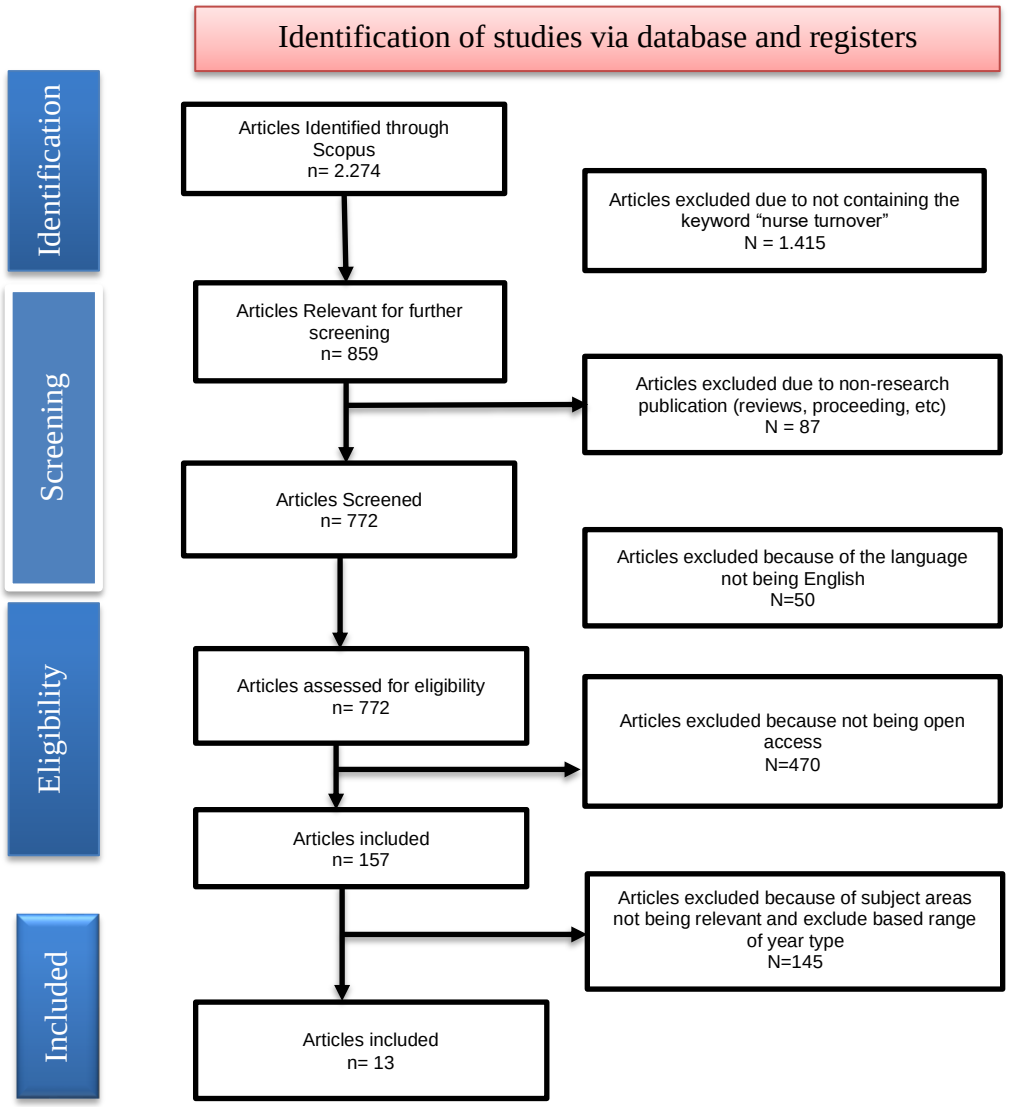

Figure 1.
PRISMA Flow Diagram

RESULT

Table 1
Summary of Included Papers

No	Title of Article/Author	Year	Country	Objectives and Methods	Main Finding
1	Factors affecting the turnover intention of newly graduated Generation Z nurses in Korea: multilevel analysisLee & Shin	2025	South Korea	Investigate the demographic and occupational factors influencing turnover intentions in new nurses Generation Z with multilevel analysis; Cross-sectional quantitative design	Computer-related environmental efficiency (β=0.251, p<0.05), recognition and respect (β=0.564, p<0.05), and organizational resource support were significantly associated with lower turnover intentions; organizational commitment is the most powerful individual factor, while Generation Z is not as

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					influenced by supervisory social support as previous generations
2	Presenteeism and Chinese clinical nurses turnover intention: the mediating role of frustration and job burnoutQingsen He et al.	2025	China	Exploring the influence of presenteeism on turnover intention as well as the role of mediation of frustration and burnout; cross-sectional survey of 1127 nurses	Computer-related environmental efficiency (β=0.251, p<0.05), recognition and respect (β=0.564, p<0.05), and organizational resource support were significantly associated with lower turnover intentions; organizational commitment is the most powerful individual factor, while Generation Z is not as influenced by supervisory social support as previous generations
3	Psychological distress and turnover intention among Chinese nurses: a moderated mediation model of job satisfaction and social supportChun Yang et al.	2025	China	Analyze psychological distress, job satisfaction, and social support on turnover intention; survey of 699 nurses, cross-sectional	Psychological distress is negatively related to turnover intentions, which are partially mediated by job satisfaction (significant indirect effect); Social support plays an important moderation role with indirect mediating effects becoming stronger as social support increases
4	Influence of job satisfaction, job stress, job identity and job values on turnover intention among male physician assistant nurses MZ generation nurses in South KoreaKim MJ et al.	2025	South Korea	Investigating the influence of job satisfaction, work stress, work identity, and work value on the turnover intention of physical assistant nurses of the MZ generation (millennial-Z); Quantitative Design	Job satisfaction and work value are significant negative predictors of turnover intention; work stress has a positive relationship with turnover intentions; Job identity moderates the relationship between job satisfaction and turnover intent
5	Enhancing work environments and reducing turnover intention: a multicenter longitudinal cohort study on differentiated nursing practices in Dutch hospitalsvan Kraaij J et al.	2025	Netherlands	Explore the role of the nursing work environment in reducing turnover intentions through differentiated nursing practices; Multicenter Longitudinal Study Design	Differentiated nursing practices improve the perception of the overall work environment, particularly on the adequacy of staff and resources, collaborative nurse-physician relationships, and participation in hospital affairs (β significant positive); however, the work environment did not mediate the impact of differentiated practices on turnover intent (β=0.069, 95% CI -0.113 to 0.252)

No	Title of Article/Author	Year	Country	Objectives and Methods	Main Finding
6	Mediating effect of work engagement and career success on work-family support and turnover intention of hemodialysis nurses in ChinaFu H et al.	2025	China	To investigate the mediated effects of work engagement and career success in the relationship between work-family support and turnover intention in hemodialysis nurses; Cross-sectional quantitative design	Work-family support not only had a direct effect on turnover intentions (significant negative β) but also an indirect effect through work engagement (β=-0.067, p<0.05) and career success (β=-0.288, p<0.05); Transformational leadership and leadership behaviors that support the family reinforce the protective effect
7	Intentions to leave the job and nursing profession among nurses in Kenyas referral hospitals: exploring the effects of organizational culture, work-related stress and job satisfactionKiptulon E et al.	2025	Kenya	Exploring the effects of organizational culture, work-related stress, and job satisfaction on intention to leave work and profession in nurses in Kenyan referral hospitals; Mixed-Methods Design	Exploring the effects of organizational culture, work-related stress, and job satisfaction on intention to leave work and profession in nurses in Kenyan referral hospitals; Mixed-Methods Design
8	Nurses retention: the impact of transformational leadership, career growth, work well-being, and work-life BalanceAbdELhay et al.	2025	Egypt	Exploring the effects of organizational culture, work-related stress, and job satisfaction on intention to leave work and profession in nurses in Kenyan referral hospitals; Mixed-Methods Design	Transformational leadership increases retention by 0.082 per unit of improvement; higher education (Master's/Doctorate) is associated with better work-life balance and career growth; Nurses with 16+ years of experience show higher retention
9	Examining the relationship between nursing staff demographics, work characteristics, and toxic leadership in Saudi Arabia: a cross-section approachAlqarawi N et al.	2025	Saudi Arabia	Examine the relationship between nursing staff demographics, job characteristics, and toxic leadership; Cross-sectional design	Female nurses reported higher levels of toxic leadership than male nurses; toxic leadership contributes significantly to staff burnout, job dissatisfaction, and lower retention; Exposure to workplace toxicity increases the intensity of negative emotions and affects psychological well-being
10	Narcissistic leadership, workplace bullying, turnover intention, and creative performance: a study of nursesDalia Khalid Faeq	2025	Iraq (Kurdistan)	Examine the relationship between narcissistic leadership, workplace bullying, turnover intentions, and nurses' creative performance; Quantitative design of surveys (n not specific)	Bullying in the workplace serves as a key mediation mechanism that links narcissistic leadership to nurse turnover intentions and decreased creative performance; The mediating effect of bullying is significant in explaining the impact of toxic leadership on turnover
11	Exploring the relationship between	2025	England & Wales	Explore the cultural and structural issues	Professional recognition, career development, and a

No	Title of Article/Author	Year	Country	Objectives and Methods	Main Finding
	cultural and structural workforce issues and retention of nurses in general practice (GenRet): a qualitative interview studyAnderson H et al.			of the workforce that affect nurse retention in general practice; Qualitative Study Design In-Depth Interviews (n=41)	positive organizational culture are key factors in retention; Lack of appreciation for the complexity of a nurse's job and division of duties that do not consider professionalism can undermine retention
12	Associations between perceived stress profiles, social connection and work engagement in clinical registered nurses: a mediation analysis and generalized additive modelsLiao Y et al.	2025	China	Identify perceived stress profiles, social connections, and work engagement in registered clinical nurses; Quantitative design with analysis mediation and generalized additive models	Perceived stress in clinical nurses can be classified into three different profiles; the influence of perceived stress on work engagement is mediated by social connections; Family support is a critical factor that affects the subgroup of work involvement and perceived stress
13	Factors Associated with Intent to Leave and Burnout among Canadian Nurses Amidst the COVID-19 Pandemic: A Quantitative Analysis of the Survey on Health Care Workers Experiences During the PandemicBalakrishnar K et al.	2025	Canada	Investigate demographic and occupational factors associated with intention to exit and burnout in Canadian nurses during the COVID-19 pandemic; Cross-sectional design using secondary data	Changes in workload and increased working hours during the pandemic increased the likelihood of turnover intentions; burnout is strongly correlated with the intention to quit; nurses with higher organizational support

DISCUSSION

Nurses' turnover intentions represent a multidimensional phenomenon shaped by dynamic interactions among organizational, psychosocial, and leadership factors [1]. Within the organizational domain, a supportive work environment and sufficient resources are generally associated with lower turnover intentions. However, an important gap emerges from evidence showing that differentiated nursing practices in the Netherlands enhance perceptions of the work environment without producing a statistically significant effect on turnover intentions (β = 0.069, 95% CI −0.113 to 0.252). This finding suggests that improvements in the work environment alone may be insufficient in the absence of complementary support mechanisms [2].

Marked geographical disparities further highlight the contextual nature of turnover intentions. For example, 81.4% of nurses in Kenya reported an intention to leave, largely driven by low income levels, where salaries below USD 500 increase the risk of turnover by three to five times. These findings underscore the necessity of tailoring retention strategies to local socioeconomic and healthcare contexts [3]. The psychosocial dimension appears to be the most influential determinant, with job satisfaction, psychological distress, and social support functioning as interrelated mediating factors [4]. Nevertheless, a critical research gap lies in the limited exploration of specific forms of social

support: such as emotional, instrumental, and informational support: and their respective sources. This limitation is particularly relevant because organizational influence over family-based support remains inherently constrained [5]. Moreover, integrative research models that simultaneously examine organizational, psychosocial, and leadership dimensions remain scarce. This lack of comprehensive frameworks creates a significant knowledge gap in understanding how organizational conditions shape or moderate the effectiveness of psychosocial interventions aimed at reducing nurse turnover intentions.

Transformational leadership has been shown to enhance nurse retention, with an estimated increase of 0.082 in retention outcomes for each unit of leadership improvement [6]. In contrast, toxic leadership generates detrimental effects, with workplace bullying acting as a mediating pathway linking narcissistic leadership traits to nurses' turnover intentions [7,8]. A major gap in leadership research lies in the limited comparative evidence on the effectiveness of different transformational leadership interventions: such as coaching, mentoring, and executive development: across diverse healthcare contexts. Moreover, existing studies rarely examine the processes through which organizational cultures shift from toxic to transformational leadership models, leaving the mechanisms of change largely unexplored [9].

The interaction among organizational, psychosocial, and leadership dimensions produces synergistic influences on turnover intentions [10]. However, a critical unresolved issue is the absence of empirical studies that evaluate trade-offs in intervention priorities when these dimensions exert opposing effects [11]. For instance, little is known about how organizations should allocate resources when transformational leadership is weak but the work environment is relatively favorable. Additionally, quantitative evidence regarding the relative magnitude of effects across the three dimensions in different geographical contexts remains scarce [12]. This limitation constrains the ability of policymakers and healthcare managers to make informed, strategic decisions about prioritizing interventions to reduce nurse turnover intentions.

Most of the reviewed studies (76.9%) employed cross-sectional designs, which restrict the ability to establish causal relationships and to capture changes over time [1]. Key methodological limitations include the scarcity of prospective longitudinal research, imbalanced geographical representation (with 30.8% of studies originating from China), a predominant focus on hospital settings, and the underrepresentation of low- and middle-income countries beyond China and Kenya. Consequently, the generalizability of existing findings remains constrained [13]. Future research should prioritize well-designed longitudinal studies with follow-up periods of two to three years, randomized experimental investigations, meta-analyses based on standardized outcome measures, and in-depth qualitative inquiries exploring nurses' lived experiences. Such approaches are essential to strengthen the evidence base and to clarify causal pathways underlying nurse turnover intentions. From a practical perspective, healthcare organizations are encouraged to adopt comprehensive retention strategies that integrate organizational, psychosocial, and leadership dimensions. These strategies may include thorough assessments of the work environment, structured mental well-being initiatives, evidence-based transformational leadership development programs with clear accountability mechanisms, equitable and transparent compensation systems, and continuous monitoring and evaluation. Collectively, these efforts are critical to achieving sustainable nurse retention and enhancing the overall quality of healthcare services.

CONCLUSSION

This review highlights that nurses' turnover intention is driven by intricate and multidimensional interactions among organizational, psychosocial, and leadership factors. A conducive work environment: characterized by adequate resources, optimal staffing levels, and structured opportunities for professional development: plays a significant role in lowering turnover intention. Meanwhile, psychosocial factors, particularly job satisfaction, work–life balance, and psychological well-being, emerge as the most powerful predictors of retention outcomes.

Leadership practices further shape retention dynamics: transformational leadership fosters nurse retention, whereas toxic and bullying leadership styles markedly intensify turnover intention through pathways involving psychological strain and workplace bullying. Nevertheless, the current body of evidence is constrained by the dominance of cross-sectional research designs, limited geographical diversity, and the lack of studies that simultaneously examine all three dimensions. Bridging these gaps requires rigorous longitudinal investigations and interventions tailored to specific contextual conditions. Healthcare organizations should therefore implement integrated, evidence-based retention strategies that encompass optimization of the work environment, comprehensive mental health support, equitable compensation systems, and leadership transformation. Such holistic approaches are essential to maintaining workforce stability and delivering high-quality patient care.

Healthcare organizations should implement a holistic and integrated approach to nurse retention by simultaneously addressing organizational, psychosocial, and leadership dimensions. This approach may include comprehensive assessments of the work environment to evaluate workload distribution and staffing adequacy [1], systematic mental well-being initiatives that provide accessible and stigma-free counseling services [2], and structured transformational leadership development programs supported by clear accountability mechanisms and proactive responses to toxic leadership behaviors [3]. In addition, organizations should establish equitable and competitive compensation systems aligned with local labor markets [4], along with continuous monitoring frameworks that utilize regular staff surveys and evidence-based action plans.

In parallel, researchers are encouraged to conduct prospective longitudinal studies and randomized controlled trials (RCTs) to clarify causal mechanisms and evaluate the effectiveness of retention interventions across diverse healthcare settings [5]. Policymakers, meanwhile, should formulate national minimum standards for nursing work environments, invest in large-scale leadership development initiatives, and advocate for increased health sector funding to ensure competitive nurse remuneration [4]. Importantly, nurses should be actively engaged in the design and implementation of retention policies to enhance contextual relevance and practical effectiveness..

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