

本期企劃

醫事人員跨境流動 之國際規範與 我國醫護人力開放政策簡析 —以護理人力為中心

International Regulatory Framework on Cross-border
Mobility of Health Personnel and Taiwan's Health Workforce
Liberalization Policy: A Focus on the Nursing Workforce

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摘要

全球醫護人力短缺使跨境醫事人員流動成為國際社會共同關注之議題，其涉及國際貿易、勞動權益及全球健康治理等多重面向。本文分析世界貿易組織、世界衛生組織及國際勞工組織關於醫事人員跨境流動之規範架構與治理理念，比較三者於服務貿易、倫理招募及勞動保障之制度功能與相互關係，並探討其對各國醫護人力政策之影響。後進一步以我國護理人力不足

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關鍵詞：世界貿易組織 (World Trade Organization, WTO)、世界衛生組織 (World Health Organization, WHO)、國際勞工組織 (International Labour Organization, ILO)、醫事人員跨境流動 (cross-border mobility of health personnel)、護理人力 (nursing workforce)

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及引進外國護理人員之政策討論為例，檢視現行制度面臨之法制與治理課題。本文認為，我國未來應將此作為備位性醫護人力補充政策，並於規劃開放政策時，兼顧國際規範、公平勞動及公共利益等國際規範要求。

The global shortage of health personnel has made the cross-border mobility of health personnel an issue of increasing international concern, encompassing international trade, labor rights, and global health governance. This article examines the regulatory frameworks and governance approaches of the World Trade Organization (WTO), the World Health Organization (WHO), and the International Labour Organization (ILO) regarding the cross-border mobility of health personnel. It compares their respective roles in the liberalization of trade in services, the ethical recruitment of health personnel, and the protection of labor rights, and analyzes their implications for national health workforce policies. Using Taiwan's nursing workforce shortage and the policy debate on recruiting foreign nursing personnel as a case study, the article further explores the legal and governance challenges facing the current system. It argues that the recruitment of foreign nursing personnel should be regarded as a supplementary measure to address workforce shortages rather than a primary policy response. In developing such a policy, Taiwan should ensure compliance with international norms while balancing fair labor standards, patient safety, and the public interest.

壹、前言

近年來，全球皆面臨人口高齡化、慢性疾病盛行，致使各國醫療照護需求持續增加，而此亦使護理人力不足逐漸成為全球醫療體系共同面臨的重要挑戰。世界衛生組織（World Health Organization, WHO）於其《世界護理現況報告》（State of the World's Nursing Report）¹指出，充足的醫護人力是全民健康覆蓋（universal health coverage, UHC）、健康安全（health security）以及健康相關永續發展目標（sustainable development goals, SDGs）的基礎。但《2025年世界衛生統計》（World health statistics 2025）顯示，雖然全球護理人力總數持續增加，但其分部高度不均——全世界約78%的護士集中在僅占全球人口49%的已開發國家，此乃因已開發國家以相對開發中國家優渥的薪資，吸收來自開發中國家的護理人力所致。此種健康人力取得上的巨大落差，反映出全球醫療資源分配存在顯著的不平等，也使全球及各國重新檢視護理勞動市場及國際醫療人力流動政策。

我國亦面臨護理人力不足的問題，且近年來此問題持續擴大，尤其自COVID-19疫情後更為明顯。衛生福利部、各大醫院及護理專業團體近年均多次指出，護理人員不足已成為我國醫療體系最迫切的結構性問題之一，甚而導致醫院不得不關閉病房或限制病床開放。然我國所面臨的問題並非單純「護理師數量不足」，而是「執業人力不足」與「留任困難」。根據我國護理師工會的調查研究，2024年時我國護理人員領證人數約30.4萬人，執業數約18.9萬人，此表示我國護理人員執業率僅

1 World Health Organization, *State of the World'S Nursing 2025: Investing in Education, Jobs, Leadership and Service Delivery*, May 12, 2025, <https://www.who.int/publications/i/item/9789240110236> (last visited Jul. 20, 2026).