

From Commitment to Action: EFHOH Welcomes the UN Resolution on Access to Assistive Technology

EFHOH welcomes the [landmark resolution](#) adopted by the United Nations General Assembly on access to assistive technology on 2 September 2026. The resolution was led by Pakistan and co-sponsored by over 40 Member States. It builds on existing international commitments and frameworks, including the [United Nations Convention on the Rights of Persons with Disabilities](#), the [Sustainable Development Goals](#), and the [World Health Assembly resolution 71.8 on Improving Access to Assistive Technology](#).

For EFHOH, the adoption of the resolution marks an important international milestone, recognising the potential of assistive technology to support the exercise of human rights, independent living, inclusion and full and meaningful participation in society. For many hard of hearing people, access to appropriate hearing assistive technology, including hearing aids, cochlear implants and assistive listening devices and systems, enables communication, access to information and equal participation in education, employment, healthcare, independent living and community life.

Meaningful access requires more than making hearing technology available. Provision must be affordable, responsive to individual needs, and accompanied by quality professional hearing care, rehabilitation and continuity of care and support throughout the life course. This approach is consistent with Article 26 of the UN Convention on the Rights of Persons with Disabilities, which calls on States Parties to promote the availability, knowledge and use of assistive technologies.

Since the [2015 Essen Declaration](#), **"Access to Hearing Aids is Access to Opportunity"**, EFHOH has been calling for access to affordable, good-quality hearing aids, assistive listening devices, and the training and support needed to use them effectively. This remains central to enabling independence, staying connected with others, and increasing opportunities in education, employment and participation in everyday life.

Around 59 million people in the European Union, Norway, Switzerland and the United Kingdom have self-reported experiencing hearing loss, making equitable access to hearing assistive technologies a major policy concern. The [2024 Getting the Numbers Right](#) illustrates how eligibility and affordability are associated with hearing-aid uptake: across 30 European countries, estimated uptake was 25% where eligibility was more restrictive, compared with 51% where people with mild hearing loss were eligible. Uptake was higher in countries providing greater levels of public financial support.

This shows that access to hearing aids is strongly shaped by national rules, funding levels and affordability. EFHOH's [2022 State of Provision of Hearing Aids in Europe](#) report showed wide variation between countries: public coverage ranged from partial reimbursement to full provision through national health programmes. It found that upfront payment requirements, renewal rules, low reimbursement levels, procurement procedures and administrative barriers



largely reduce access and limit users' choice of suitable hearing aids, with adults and older people often receiving weaker support than children.

EFHOH's forthcoming 2026 *State of Hearing Aids and Cochlear Implants Provision in Europe* shows that many of these barriers persist. Across all 26 national and regional systems examined, national health or reimbursement schemes exist for hearing aids at different levels of coverage starting from 100% to just 20%. At the same time, cochlear implants are funded from national health or reimbursement schemes for eligible candidates, but with large disparities among national systems and fragmented funding, in addition to long waiting times of more than one year in 11 of the 26 systems examined. Access to hearing assistive technology still depends on where a person lives, eligibility rules, affordability, age, rehabilitation services, renewal and repair arrangements, and whether assistive listening devices are covered through national health or reimbursement schemes.

The persistence of these gaps underlines the urgency of implementing the commitments set out in this resolution, which calls for action in several areas for Member States and the United Nations. Namely, the resolution calls:

- To ensure access to assistive technology, mobilising the necessary resources and support. For hard of hearing users, this means being able to access affordable hearing aids, cochlear implants and assistive listening devices that fit their needs, along with support services throughout their life.
- To improve the collection of disaggregated data to identify the gaps between needs and access to assistive technologies.
- To ensure the participation of representative organisations of persons with disabilities, including organisations of hard of hearing people, in the implementation of policies and measures to expand equitable access to assistive technology.

For EFHOH, effective implementation must result in affordable, equitable and sustained access to hearing aids, cochlear implants and assistive listening devices, supported by quality professional hearing care and rehabilitation throughout the life course. It must also be shaped by the meaningful participation of hard of hearing people and their representative organisations throughout policy and technology development, implementation and evaluation.

EFHOH is already contributing to these objectives through its research, advocacy and engagement at European and international level. By bringing together evidence from across Europe with the lived experience of hard of hearing people, EFHOH works to identify persistent barriers and advocate for equitable policies and health systems. We will continue to engage with Member States, the United Nations and other relevant stakeholders to support the implementation of this landmark resolution and ensure that the voices of hard of hearing people shape the actions that follow.

"Assistive technology is essential for hard of hearing people to exercise our rights and personal independence, but we cannot just be part of the conversation: we must lead it." – Lidia Best, President of EFHOH