



Requirements

Longfonds Junior Investigator Grant 2026

Criteria for pre-applications

This document is valid until 31 December 2026.

Should you have any questions about the conditions listed below, please feel free to contact us via [email](#). If you consider your project a good fit for Longfonds, however it does not meet one or more of the criteria below, please include a justification in your application.

In 2026, LONGFONDS aims to provide three personal Junior Investigator Grants (including one CPBT Grant) of up to €250,000.

Longfonds applies the following criteria to determine whether your research proposal is suitable for submission

1. The target group for a personal grant from the Longfonds consists of excellent researchers who belong to the top 20% of their peers, as assessed by the Scientific Advisory Committee (WAR). This committee includes representatives from various scientific disciplines as well as patients. Grant applicants are expected to convincingly demonstrate the originality and potential of their ideas to others. The researcher must have published (or had accepted for publication) at least three articles as the lead author in leading international peer-reviewed scientific journals.
2. Applicants must be affiliated with an academic institution (a university—including the associated academic medical center—NKI, or KNAW institute) or with hospitals affiliated with the Cooperating Top Clinical Hospitals, STZ.
3. Candidates are free to choose the institution where they will conduct their research. It is recommended that at least part of the research be carried out abroad. While this is encouraged, it does not play a decisive role in the evaluation. A proposal will not be unconditionally rejected if an international research stay is not feasible. For researchers who already have proven international experience, this criterion will be weighed less heavily.
4. Candidates can apply within five years after obtaining their PhD. Delays due to pregnancy, parental leave and/or (medical specialist) training will be considered. Longfonds follows the NWO regulation, allowing an 18-month extension per pregnancy. Applications can be submitted by researchers both with and without a permanent employment contract.

5. The maximum duration of a Junior Investigator project is generally three years. Exceptions are possible if well-justified and approved by the Scientific Advisory Committee (WAR).
6. Your research project should focus on chronic diseases that primarily originate in the lungs. Please note: lung cancer and cystic fibrosis do not fall within the scope of this grant. To be eligible for one of the Junior Investigator Grants 2026, your research project must align with the themes outlined below*. Our themes are aligned with the priorities of the National Program for Lung Research 2.0 (NPL2.0) of NRS, as well as with the knowledge gaps identified in care evaluations and knowledge agendas of scientific associations focused on chronic lung disease (NVALT, NVK, SKL and NHG).

More information via: [Knowledge gaps and knowledge agenda](#).

**Please note that for the CPBT Grant, other themes apply.*

Theme's

a. Who develops a lung disease?

Early detection of chronic lung diseases is a societal challenge. Increased knowledge in (early) diagnosis and phenotyping of asthma and COPD is therefore crucial.

b. How can we prevent chronic lung diseases?

Preventing lung diseases is of great importance to society.

c. How can we prevent, recognize, and treat lung attacks?

Understanding and solving issues related to lung attacks is vital for people with chronic lung disease.

d. Better treatment

Finding (medical) solutions to major societal challenges regarding improved, (personalized, innovative) treatment methods for adults and children with lung diseases.

e. Overall public health impact and chronic lung diseases

Chronic lung diseases exert a substantial and measurable burden on population health. Their cumulative impact extends beyond individual patients, influencing healthcare resource allocation and workforce participation. Systematic investigation into the biological, environmental, and socioeconomic determinants of chronic lung disease is therefore critical for developing evidence-based prevention strategies, optimizing clinical management, and mitigating the overall public health impact.

Examples

Improved diagnostics for asthma patients, both for children and in later life (in primary and secondary care) | Better treatment for children with asthma | Mechanisms of asthma development in early childhood | Role of air pollution in the onset and exacerbation of lung diseases | Better understanding of the molecular (immunological) mechanisms of lung attacks (focused on developing medication) and of the recovery phase after a lung attack | Improved understanding of the issues surrounding lung attacks: phenotyping (clinical/psychosocial), linked to more personalized treatment and identifying predictive markers for lung attacks | Insight into the impact of stress/psychosocial issues on lung attacks and the underlying mechanisms, and the availability of a personalized psychosocial treatment | Personalized treatment based on pathogenic mechanisms | More knowledge about the effects of physical therapy, psycho-social support, and dietary guidance on the quality of life for people with lung diseases (or integrative medicine) | Use of artificial intelligence and e-Health tools for

7. Patient Participation Requirements

Longfunds sets minimum standards for patient participation to qualify for funding.

Patient participation involves engaging people with lung disease in your research—not as subjects but as discussion partners. Before submitting your application, please review the information on patient participation available on [our website](#). The Participation Compass website also offers a kickstart for researchers.

Our conditions are listed below. These requirements are based on the article by De Wit et al. (2016). This article, as well as the websites mentioned above, provides extensive background information on patient participation in research. This information will help you clarify and apply the following requirements.

1. Patient participation occurs in multiple phases of the research, ideally starting as early as possible. Longfunds places high value on research that considers the needs and views of people with lung disease. It is therefore advisable to involve people from your research's target group as early as possible. Patients and/or experts-by-experience can be involved at various stages and can take on different roles depending on the phase of the research.

2. A variety of forms of patient participation are used as much as possible, allowing patient experts to take on various roles.

An expert by experience is a patient who reflects on their own experiences, complements these with the experiences of others, can think beyond their personal illness, and has the skills to communicate this effectively. They may assume different roles in scientific research. Examples of roles include co-thinker, advisor, partner, and director. Forms of patient participation include patient panels, advisory boards, patient councils, steering committees, or focus groups.

3. Patient experts receive information and support at the start of the project as well as throughout the research.

The researcher's approach is crucial for successful collaboration. For instance, it is important for researchers and patient experts to discuss expectations and agree on what is needed to meet these expectations. Researchers should communicate the research progress and details in accessible language.

4. Patient experts are reimbursed for expenses.

At a minimum, patient participation involves reimbursing expenses for participating patient experts. Consider thank-you gestures such as gift cards. Be sure to include these costs in the budget.

5. The researcher must complete a 'patient participation in scientific research' training within the first year after approval or have done so recently.

Insufficient knowledge of effective patient participation can hinder collaboration with patient experts. Training helps address this. INVOLV and the School for Participation offer training for researchers and patients. These courses teach you how to incorporate patient participation in

your research and provide a practical action plan. Up to €1,000 can be allocated for this course in the funding request.