

How to get PPI payments to excluded groups



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Summary

Health research should be coproduced with people who have lived experience and nonsalaried Public Contributors should be offered a payment in recognition of their contribution¹. This paper investigates how these payments can reach two groups of citizens who are at risk of being excluded from the process – asylum seekers and prisoners. Further groups may be added as this exploration continues.

There are many other issues that arise in conducting research with these two groups of citizens, who may have difficulties in receiving the usual advertising², live in such straitened circumstances that their ability to give free and informed consent may be doubted, and who may find staff acting as gatekeepers while opposing the principles of coproduction and payment. This paper focuses narrowly on the practice of making payments for coproducing research.

Asylum seekers

Govt guidance on what is included in the ‘no recourse to public funds’ list does not mention research³, so there appears to be no justification here for refusing to offer payments to people in the immigration system.

Prisoners

A systematic review of peer-reviewed literature⁴ found a few examples where payment was made. For example, Public Contribution was counted as a work or education programme within one prison in the USA⁵ and in another programme in Canada⁶, meaning that participants were paid for this role at prison work rates. Dilemmas around payment for prisoners have been explored by Ward & Bailey⁷. UK examples are rare⁸, although Patient and Public Involvement (PPI) is sometimes considered in UK prison research⁹.

UK prisoners' earnings are limited to £4 per week except on rare occasions when higher rates can be negotiated. Payments to prisoners may be perceived as making prison more pleasant or enabling offenders to profit from their crimes, and so they are regulated by the Incentives and Earned Privileges Scheme¹⁰. Prisoners who engage in approved work or learning in the prison start at a basic pay rate of 50p per day and can only spend a proportion of their savings. This may include payments from an outside body¹¹.

Conclusion

Payment to these two groups of citizens appears possible, albeit in limited and restrictive circumstances. There appear to be few pioneers willing to try.

How this paper is being written

The investigation that generated this paper is driven by simple curiosity. The work is unfunded and is conducted as a piece of citizen science rather than under the control of any organisation. Accountability is achieved by following the *Writing in Public* framework¹². I am grateful to the people¹³ who have contributed to this evolving resource. Please send me your suggestions for further improvements.

¹ [Payment guidance for researchers and professionals | NIHR](#)

² [Home - People in Research](#)

³ [Public funds](#)

⁴ Treacy, S., Martin, S., Samarutlake, N. *et al.* Patient and public involvement (PPI) in prisons: the involvement of people living in prison in the research process – a systematic scoping review. *Health Justice* 9, 30 (2021). <https://doi.org/10.1186/s40352-021-00154-6>

⁵ Fields, J., González, I., Hentz, K., Rhee, M., & White, C. (2008). Learning from and with incarcerated women: Emerging lessons from a participatory action study of sexuality education. *Sexuality Research & Social Policy*, 5(2), 71–84. <https://doi.org/10.1525/srsp.2008.5.2.71>

⁶ Martin, R. E., Adamson, S., Korchinski, M., Granger-Brown, A., Ramsden, V. R., Buxton, J. A., ... Hislop, T. G. (2013). Incarcerated women develop a nutrition and fitness program: Participatory research. *International Journal of Prisoner Health*, 9(3), 142–150. <https://doi.org/10.1108/IJPH-03-2013-0015>. The same work is also reported in Martin, R. E., Korchinski, M., Fels, L., & Leggo, C. (2017). Arresting hope: Women taking action in prison health inside out. *Cogent Arts & Humanities*, 4(1). <https://doi.org/10.1080/23311983.2017.1352156>. Also in Martin, R. E., Murphy, K., Hanson, D., Hemingway, C., Ramsden, V., Buxton, J., ... Hislop, T. G. (2009). The development of participatory health research among incarcerated women in a Canadian prison. *International Journal of Prisoner Health*, 5(2), 95–107. <https://doi.org/10.1080/17449200902884021>. Also Ramsden, V., Martin, R., McMillan, J., Granger-Brown, A., & Tole, B. (2015). Participatory health research within a prison setting: A qualitative analysis of 'Paragraphs of Passion'. *Global Health Promotion*, 22(4), 48–55. <https://doi.org/10.1177/1757975914547922>.

⁷ Ward, J., & Bailey, D. (2012). Consent, confidentiality and the ethics of PAR in the context of prison research. *Studies in Qualitative Methodology*, 12, 149–169. [https://doi.org/10.1108/S1042-3192\(2012\)0000012011](https://doi.org/10.1108/S1042-3192(2012)0000012011).

⁸ Rutherford, R., Bowes, N., Cornwell, R., Heggs, D., & Pashley, S. (2024). A systematic scoping review exploring how people with lived experience have been involved in prison and forensic mental health research. *Criminal Behaviour & Mental Health*, 34(1), 94–114. <https://doi.org/10.1002/cbm.2324>

⁹ Treacy S, Haggith A, Wickramasinghe ND, *et al* Dementia-friendly prisons: a mixed-methods evaluation of the application of dementia-friendly community principles to two prisons in England *BMJ Open* 2019; 9:e030087. doi: 10.1136/bmjopen-2019-030087.

¹⁰ [\[Insert title of document\]](#)

¹¹ [pso-4460-prisoners-pay](#)

¹² Bates P (2024) [How-to-write-in-public.pdf \(peterbates.org.uk\)](#).

¹³ Inquiries have been sent to the following people – posted to LinkedIn 22/08/2025, John McDaniel, Samantha Treacy. No feedback has been received as yet. All remaining errors and omissions are the sole responsibility of the author. The information is provided in good faith and so readers engage with the contents at their own risk and undertake not to hold the author liable for any injury, loss, or damage arising through reading or acting on its contents.