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“How do you pay for debt without money? Just pay with your health.” Understanding the association between Legal Financial Obligations and Physical Health

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“How do you pay for debt without money? Just pay with your health.” Understanding the association between Legal Financial Obligations and Physical Health

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## Abstract

Millions of people in the United States are subjected to Legal Financial Obligations (LFOs), otherwise known as the fees and fines imposed by the criminal justice system. This debt can be a source of stress for individuals because of their limited ability to pay it off. But how does this debt affect their physical well-being? Currently, little is known about how LFOs acting as stressors affect physical health and if relief is found when the debt has been paid. To explore this, I used the Survey of Household Economics and Decisionmaking to examine four questions: 1) are those with lower income more likely to have an LFO? 2) Do individuals with LFOs report poorer physical health than those without LFOs? 3) Does a change in LFO status affect an individual's physical health? and 4) Does this effect change based on an individual's income? In my analysis, I found that those with lower income have a higher probability of having an LFO. I also found that having an LFO is associated with reporting worse physical health, while individuals who never had an LFO or paid off an LFO report better physical health. When income was used as a moderator, there were no significant differences between groups. These findings help us understand the negative impact of LFOs on an individual's health. We can see how LFOs act as a regressive tax where those with less income pay more and not having an LFO or paying off an LFO is better for your health than having one.

## **Introduction**

Two facets of social life have grown more intertwined: legal financial obligations (LFOs) and health. Most Western European countries instituted the use of LFOs as an alternative to traditional incarceration and supervision; you were either incarcerated or given LFOs (Harris, Evans, and Beckett 2010; Nagin 2008; O'Malley 2009; Ruback and Bergstrom 2006). The U.S., on the other hand, has supplemented incarceration and criminal justice supervision with LFOs (Harris et al. 2010).

While consumer debt is a widely observed way that people of lower incomes come into debt, another method of debt procurement often goes unnoticed. Debts related to the criminal justice system act similarly to debt acquired from loans, mortgages, and credit cards. Interactions with the criminal justice system can produce costs associated with using services and any fees and fines levied against someone. Virtually all states use the fees and fines associated with the criminal justice system to help provide funding for the criminal justice system and other government entities if applicable (Diller 2022; Menendez et al. 2019).

Research on LFOs has been gaining traction in recent years, and has looked into state agencies (Katzenstein and Waller 2015; Page and Soss 2017; Page and Soss 2021), the disproportionate number of sanctions given to poor and minority communities (Harris et al. 2011; Martin et al. 2018; Page and Soss 2021), and support from and for family (Comfort 2007; Harris 2016:52-73; Martin et al. 2023; Montes et al. 2021). Incarceration and monetary sanctions also make it difficult to find housing and work, placing individuals on a route to restricted income (Beckett, Harris, and Evans 2008; Martin, Smith, and Still 2017). Respondents from Beckett and colleague's (2008) work describe how they struggled to find stable housing because

they had poor credit scores while also having difficulty finding a full-time job because of their convictions. Lacking access to regular or full-time work limits income, and when only you make a small income, even small or minimum LFO payments are significant (Beckett et al. 2008). This coupling of low-income, minority groups, and LFOs creates a nexus of disproportionate inequality, burden, and poor mental and physical health outcomes.

The imposition of these sanctions has increased legal indebtedness and posed disadvantages to poor and minority groups that have the most contact with the criminal justice system “by reducing family income; by limiting access to opportunities and resources such as housing, credit, transportation, and employment; and by increasing the likelihood of ongoing criminal justice involvement” (Harris et al. 2010:1756). It stands to reason that stress and anxiety can be felt when individuals have a payment to make but lack the money to do so.

Though not a significant strain, I personally always felt anxious whenever I went with my mother to buy groceries, and she would leave the checkout line to pick up one thing she forgot. As I stood there waiting for her to return, the cashier seemed to scan and bag the items at an inhuman speed. What would I do when the cashier finished, and the payment was due? I had no money, or at least not on my person, but the payment needed to be made. Many who find themselves with legal debt are in similar stress and anxiety-inducing situations, though far more significant than my grocery trip strain. They experience the balancing act of making legal debt payments and covering the necessary expenses to survive.

An experience shared in Alexis Harris and Tyler Smiths' research on LFOs acting as a health stressor helps to shed light on the difficulties experienced when individuals have legal debt, and the payments are due:

There's times that I went without eating and without buying. . . . Up to this day I've never bought anything for myself. . . . I always sold my socks. My underwear I sold. I would buy those, but I'd wear them till they

were falling apart, and I'd still sell them. . . . Even getting in my car and how much gas am I gonna waste to go to this place, and should I walk to here and park here. I'd have to analyze every move, everything I did to cent amounts. From waking up till going to bed. Should I eat this? No, 'cause then I'm gonna have to buy this tomorrow. Or should I just eat half? When I was paying fines like that it was worse. It was like that's the first thing that you paid off, and then the next thing was like how am I gonna do it for next month? And it was constantly like that for a lot of years, man. Like I tell you, up to this day I still budget myself. I still stress . . . that extra bill killed us man. Killed me. (Harris and Smith 2022:45)

Legal debt puts already economically disadvantaged people under greater strain by forcing them to make compromising decisions about their already stretched finances. This constant need to calculate each day's decision and how much it would cost them, even down to the last penny, creates a “palpable sense of urgency, strain, and anxiety” (Harris and Smith 2022:46).

Given that the relationship between health and the criminal justice system has been a storied one, it is essential to understand how this facet (LFOs) of the system also plays a role in adverse health outcomes. Interactions with the criminal justice system have been shown to decrease the welfare of individuals, their families, and the communities where they live (Massoglia and Pridemore 2015). It also raises difficulties in finding housing (Bryan 2020; DeMarco, Dwyer, and Haynie 2021; Marcal and Maguire-Jack 2021; Warner and Remster 2021), employment (Cadigan and Kirk 2020; Fernandes 2020b; Kirk and Wakefield 2018; National Research Council 2014), and health (Esposito et al. 2017; Fernandes 2020a; Massoglia 2008; Massoglia and Pridemore 2015; Schnittker, Massoglia, and Uggen 2012; Turney, Wildeman, and Schnittker 2012).

When considering mental health outcomes and criminal justice contact, various points of the criminal justice journey act as stressors (Massoglia 2008). These criminal justice system contact points are police encounters, arrests, incarceration, probation, parole, and LFOs (Harris and Smith 2022; Sugie and Turney 2017). These contacts can cause psychological harm,



producing higher rates of hypertension and introducing or perpetuating stress and strain (Harris and Smith 2022; Hirschfield et al. 2006; Schnittker et al. 2015).

### *What are Legal Financial Obligations?*

But what are LFOs, where do they come from, why are they affecting people with low incomes, and why do they create feelings of strain and anxiety? LFOs are the fines, fees, costs, and restitution imposed by courts, either as the punishment alone or on top of a criminal sentence (Harris et al. 2010). These LFOs were made to bring retribution for crimes committed, as a deterrence away from committing a crime, compensation to victims, and revenue generation for various criminal justice operations (Harris 2016:74-98; Martin et al. 2018).

Some fees are related to court costs that are placed upon a defendant when they are convicted. These include costs for the services of judges, clerks, and other criminal justice actors. Additional fees can consist of acquiring witnesses (for Oklahoma, that includes mileage fees a witness travels), requesting juries and court reporters at preliminary hearings and trials, and receiving drug testing and treatment (OK Stat § 28-153, 2022).

Fines are set penalties that are applied to a conviction, some for certain types of offenses (Harris 2016:26). For Oklahoma, a felony conviction receives a fine not exceeding \$1,000, and a misdemeanor fine does not exceed \$500, though a stipulation of “except in cases where a different punishment is prescribed by this title, or by some existing provision of law” (OK Stat § 21-9, 2022; OK Stat § 21-10, 2022). While maximums are set, prior convictions can result in harsher sentences with some fines reaching \$500,000 (State of Oklahoma, 2023).

Surcharges can also be levied on people with legal debt. These surcharges can include surcharge interest on initially sentenced LFOs, such as Arizona imposing a surcharge on LFOs of

83 percent, or when an individual is not able to pay the full debt up front and a monthly payment plan is established (Harris 2016:42). Additionally, these surcharges can include fees for being on probation, using a public defender, or use of forensic science or laboratory services (Harris 2016:42; OK Stat § 20-1313.2(C) 2022).

Another way individuals pay for their involvement in the criminal justice system is through victim restitution. For Oklahoma, individuals convicted, pleading guilty to, or requesting a deferred judgment for a felony, including criminally injurious conduct, must pay between \$50 to \$10,000 as part of a victim compensation assessment to be forwarded to the Victims Compensation Revolving Fund (OK Stat § 21-142.18 2022).

While I have laid out a variety of ways that individuals are placed with legal debt and that that debt can be expounded upon by additional fees and fines as well as interest, this does not entirely capture the sheer number of fees, fines, and surcharges that individuals receive in the criminal justice system (For more information on the variety of LFOs in the U.S., see Harris 2016:26-47).

### *I'm a person, not an ATM*

With such an overwhelming number of LFO laws and statutes, how have LFOs risen in prominence over the years? Though fees and fines have been present in America since the Magna Carta in 1215, the number of laws reducing funds to courts and pressuring them to find other ways of bringing in revenue has risen in recent decades (Harris et al. 2010; Harris 2016; Harris, Pattillo, and Sykes 2022; Martin 2018).

For Oklahoma, it began in 1992 with State Question 640, a measure to amend the Oklahoma Constitution to restrict how a revenue bill can become a law. This requires a three-

fourths vote from both state legislative bodies and being signed by the governor or receiving a majority vote from the state citizens in the next general election (Perry 2019).

As budgets tightened, state politicians turned to the criminal justice system to help alleviate these constraints. Heavy fees started to be added to criminal justice sentences. Oklahoma State Senator Cal Hobson commented that it was an easy way to make revenue: “Who's going to give a rip if you have a higher drug court assessment, or a higher daily counseling rate because it's just a little fee, it's just a dollar or just five dollars, or whatever?” (Greer 2015). However, these “little” fees can have compounding effects, especially when considering all the additional surcharges placed on individuals already in a disadvantaged economic position. Individuals in the criminal justice system began to be looked at as ATMs, not as people (Greer 2015).

One of the effects seen by this shift in increasing fees has to do with the budgets that courts are given. District Judge Dwayne Steidley commented how their budget continued to be cut by the general revenue fund and was being replaced by money collected by the courts: “Today, we fund probably 90% or more of the operation of the courts actually out of the money that the court collects, which means that the legislature has progressively deleted the amount of money that they appropriate to the courts. And that’s just the way it is nowadays” (Greer 2015). Even though there is a shift to fees and fines helping to fund the operations of the criminal justice system, most people are unable to pay their LFOs, and more money is used to collect these monetary sanctions than the courts receive as revenue (Menendez et al 2019).

*Caught between a rock and a hard place*

Since courts have shifted to fees and fines as their source of revenue, the ones most burdened by this are the poor and indigent individuals in the criminal justice system. Whereas LFOs were seen as less restraining or an alternative punishment to imprisonment (Gordon and Glaser 1991, Hillsman 1990, Morris and Tonry 1990), they have evolved into being tacked on to criminal sentencing, and in many cases happen before the defendant makes it to the courthouse (Bannon et al. 2010, Harris et al. 2010). Sometimes, the payments may be easy for individuals to cover, but for most sentenced to them, they create a net over them, keeping them stuck within the criminal justice system (Cadigan and Kirk 2020, Harris 2016:52-73; Harris et al. 2010, Martin et al. 2022, Pattillo et al. 2022, Pattillo and Kirk 2021, Pattillo and Kirk 2020).

Poor individuals are not only more likely to engage with the criminal justice system and be incarcerated but they are particularly positioned to receive a “piling on” of punishment where they are punished beyond their sentence (Rabuy and Kopf 2015; Uggen and Stewart 2014). While they may be incarcerated as part of their punishment and experience stigma from having a criminal record, coupled with difficulties in finding any or quality employment, housing, or transportation (Pager 2003), they are also placed with the burden of legal debt, which increases their financial strain, resulting in more diffused effects on their ability to secure housing and employment, but also keeping them within the supervision of the criminal justice system. Not only does the individual with the legal debt feel this burden, but the family of those with the legal debt can feel these effects. The family of those connected with the legal debt can be compelled to help pay for the debt and increase experiences of emotional distress and financial strain while also straining the interpersonal relationship (Boches et al. 2022).

Pattillo and Kirk (2020) observed from interviews that respondents felt stuck in a “never-ending cycle” of struggling to find employment because of a criminal record and inability to pay

their fines. Additionally, failure to make payments and being seen as willfully not paying can result in additional sanctions being applied to the individual and threaten them with potential incarceration, furthering the effect of this never-ending cycle.

Pattillo and Kirk (2021) have additionally demonstrated how the courts “commodify freedom,” or allow freedom to be put on “layaway,” by extending the use of payment plans for individuals who are not able to make the whole payment towards their LFOs. While this is a helpful alternative for individuals who cannot make their payments immediately in full, it has additional pitfalls that can keep people with legal debt under the supervision of the criminal justice system for a long time. Their freedom is placed on layaway because they will not be free until their debt is paid. This also requires regular court appearances to give an accounting of willfully paying. Defendants are made to either “pay or display,” e.g., make the necessary payments toward their debt or display their conscious and good-faith efforts to pay (Martin et al. 2022). Not appearing to these court meetings or being seen as willfully not paying can result in more fines, fees, and incarceration.

### *It's expensive to be poor*

Slavinski and Spencer-Suarez (2021) outlined three ways poor or indigent individuals are punished with LFOs. They observed that the criminal justice system was not adequately established to handle claims of indigency and consider individuals' complex lives when monetary sanctions are allocated. They highlight how many individuals were unaware that alternatives like waivers and reductions were available.

Some states do employ statutes that require courts to determine ability to pay (e.g., Oklahoma requires courts to access an individual's ability to pay) but lack set standards as to

what indigency looks like (Oklahoma does not have any standard for establishing indigency) (OK Stat § 22-983(D) 2022; Okla. Ct. Crim. App. R. 8.1; Shannon et al. 2020).

Additionally, lacking alternatives can cause individuals to make compromising decisions between legal debt and other necessary purchases, such as between LFOs, rent, and utility payments (Slavinski and Spencer-Suarez 2021). In some cases, individuals choose between feeding and housing their family and their legal debt, and many choose their family, risking additional fines and incarceration (Slavinski and Spencer-Suarez, 2021).

Even when there are alternatives, such as community service, these come at the cost of time, which many still need, since they are trying to find paying work for their other needs (Slavinski and Spencer-Suarez 2021). Additionally, alternatives like community service are either unavailable or prohibited by state statutes, with some that are available designating a “participant fee” to engage in community service (New York State 2005:2; Slavinski and Spencer-Suarez 2021). They may also be held on certain days and times that can interfere with an individual’s commitments to work, treatment programs, and family.

Individuals in this research explained how they felt their situation was stressful and a burden. They were caught between a rock and a hard place because paying for one thing (e.g., legal debt) can have negative consequences, such as not being able to pay for another (e.g., not paying rent, having late fees, being evicted) (Slavinski and Spencer-Suarez 2021).

We see strains like this because poor individuals lack adequate resources to pay for the debt and handle the strain they experience. Lacking resources is not the only way LFOs produce strain. Individuals with LFOs undergo public displays of shame (Cadigan and Smith 2021; Martin, Spencer-Suarez, and Kirk 2022; Paik 2020), suppression of voting rights (Morse 2021; Sebastian, Lang, and Short 2020) stigmatization (Harris et al. 2011), insecurities in employment,

housing, and transportation (Beckett et al. 2008; Daoud et al. 2016; Harris et al. 2010; Pleggenkuhle 2012), and being placed under the control of the criminal justice system (Pattillo and Kirk 2021; Harris 2016:156-59; Kohler-Hausmann 2018; Martin et al. 2017; Natapoff 2018). These experiences of strain from LFOs produce feelings of stress, strain, anxiety, and despair (Harris and Smith, 2022).

Harris and Smith (2022) highlight how legal debtors felt like their debt was a constant reminder of the control and power that the courts had over them. They felt powerless to provide necessities for themselves or their families, even when, as quoted previously, individuals sold their used clothing, including socks and underwear, to make some extra cash to pay for their legal debt.

## **Theory**

### *Stress Theories*

To help capture the effects of LFOs on adverse health outcomes, aspects of social stress theory and stress process theory will be utilized. Social stress theory, or social stress model, is used to understand how social factors and mental health interact (Horwitz 2013; Schwartz and Meyer 2010). This theory purports that socially disadvantaged individuals, particularly by status and income, are socially positioned to be at an increased risk for encountering stressful situations with insufficient resources to handle them (Mossakowski 2014; Pearlin 1989; Thoits 2010; Wheaton 1999).

This theory focuses on disparities in mental health. Disparity is crucial because it looks at the “inequality in health due to social factors or allocation of resources” (Miranda et al. 2008:1102). For example, a difference in health would be that older individuals have a higher

rate of cancer than younger people, while a disparity is that cancer mortality is higher among low-income groups in deprived areas compared to more affluent ones (Braveman 2006; Singh and Jemal 2017) This is why it is essential to look at how the inequality in an individual's income and ability to access coping resources play a role in their health.

To supplement this, stress process theory examines how the three domains, 1) sources of stress, 2) mediators of stress, and 3) manifestations of stress, intersect to show how life events and chronic life strain play a role in developing mental health issues (Pearlin et al. 1981). Life events can strain an individual, eventually degrading positive concepts of self and increasing a person's risk of adverse stress outcomes. Sources of strain are the life events that individuals experience every day. Some may be small and insignificant (e.g., driving through rush hour traffic), while others can create the strain that leads to stress (e.g., losing a job or getting a divorce). LFOs act as a source of stress that exacerbates this process. When poor individuals receive an LFO, they are generally already in a precarious financial situation related to their needs. Once a legal debt is added, with the chance of additional fines, fees, and surcharges, individuals must make difficult decisions about their finances and stretch their already thin income.

Mediators are essential to understand what coping resources and skills are available and used, such as an individual's income, ability to access medical care, or support from friends and family. If resources are minimal or not available, a person's ability to cope with the sources of stress will be compromised. Since those in the criminal justice system must deal with limited access to coping outlets, such as employment to make money and housing to have a place to live, coupled with the mark of a criminal record hindering the use of social support programs, they are



likely to lack appropriate coping mechanisms with which to mediate the level of stress they are experiencing.

Finally, the manifestation domain of stress attempts to gauge the level and meaning of the stress (Pearlin et al. 1981). The manifestation of stress allows us to look at the magnitude of the outcome of the stress, such as good or bad health, as well as what good or bad health indicates. Given that poor individuals are far less likely to have access to the necessary resources in almost every part of life, they would also be disadvantaged in the number of life stressors they experience and the means of remediation for them.

While these theories focus on mental health, their application to an individual's physical or overall health is also relevant. Research has shown that stress can result in mental health issues, which can have substantial effects on the physical health of an individual (Yaribeygi et al. 2017). The effects presented in this study's analysis will look at how stress brought on by legal debt can impact the individual's physical health while accounting for an individual's income and understanding how that income can change the effect.

*Money can't buy you good health, but it certainly wouldn't hurt*

This study aims to examine LFOs as one of the contributors to an individual's physical health. Due to limitations of my data, which I discuss below, I am assuming that the presence of an LFO in the household will produce similar negative effects to having an LFO as an individual, since the financial and psychological stressors will likely permeate the family as a whole. I began with the question: Does the presence of an LFO result in worse physical health, and does this effect change based on household income? This leads me to six hypotheses:

***Hypothesis 1:*** As income increases, the probability of having an LFO will decrease.

- Hypothesis 2:** People whose households have never had an LFO will report better physical health than people who have had one.
- Hypothesis 3:** Those whose households have paid off their LFO will report better physical health than those whose households have not paid off their LFO.
- Hypothesis 4:** Those whose households have never had an LFO will report better physical health than those whose household have not paid off their LFO.
- Hypothesis 5:** Those whose households have paid off their LFO will report poorer physical health than those whose households have never had an LFO.
- Hypothesis 6:** Income will have a significant moderating effect on LFO status.

I ran a series of logistic and ordered logistic regressions to answer this question and support my hypotheses. My first analysis was a logistic regression examining the effect of household income and having an LFO. Much of the literature points to poorer individuals having more legal debt, and if this relationship is true. Next, I ran an ordered logistic regression to understand if those whose households have never had an LFO during the years of my panel data reported better physical health than those who did have an LFO. I then run an ordered logistic regression to observe how a change in LFO status (e.g., having paid it off) results in different physical health outcomes compared to those who have not paid off their debt and those who never had any during the panel. I then look at how household income moderates the effect of change in LFO status on physical health. I presume that having a higher income will mitigate the negative effects of LFOs on health. I outline more of this analysis plan and variables used in the methods section.

## **Methods**

## *Data*

This study uses data from the Survey of Household Economics and Decision-making (SHED) dataset, sponsored and conducted by the Federal Reserve Board. This nationally representative survey of adults ages 18 and older living in the United States uses an online consumer research panel<sup>1</sup> recruited using address-based sampling. This survey measures expenses and potential risks U.S. adults and their families face. Topics include income, savings, credit, debt, insurance, employment, and health outcomes. From 2019 to 2021, individuals were asked about legal debts that they or someone in their immediate family has. Additionally, because the Federal Reserve used a research panel, some respondents were randomly selected to perform the survey in each of the three years that the LFO question was asked. When a respondent responds to a survey, they are given a survey ID for that year. The dataset also includes survey IDs from the two previous survey years and if the current respondent had taken a previous survey. I combined each of these three cross-sectional surveys and parsed out those individuals who had responded to the survey in all three years (2019-2021) using their survey ID to create this three-wave panel. This is a large-scale, nationally representative dataset that includes variables about legal financial obligations and other variables about the individual's physical health and crime victimization. I use all three waves of this panel: 2019, 2020, and 2021, and apply weights for this study's analysis to allow for generalizability. The sample size of this study is 1,614.

## *Variables of interest*

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<sup>1</sup> This panel is the Ipsos's nationally representative, probability-based KnowledgePanel.

The variables of interest for this study include *Poor Physical Health*, *Legal Financial Obligations (LFOs)*, *Having an LFO*, and *LFO Status*. *Poor Physical Health* was measured in 2019 and 2021. Respondents were asked: 1) In general, would you say your physical health is. . .? Responses included “excellent,” “very good,” “good,” “fair,” or “poor.” *Poor Physical Health* in 2019 will be a control for analysis models, and I treat it as a continuous measure. *Poor Physical Health* in 2021 is treated as a five-category, endogenous measure, where I reverse coded the measure where excellent health is coded as a “0” and Poor is coded as a “4”. Table 1 shows the mean of poor physical health in 2019 is 1.54, roughly the “very good” physical health range, with a standard deviation of 0.937. Table 1 also shows that about 9 percent of respondents reported that they had “excellent” health, 38 percent reported “very good” health, 39 percent reported “good” health, 12 percent reported “fair” health, and 3 percent reported “poor” health.

I treat *Legal Financial Obligations (LFOs)* as a dichotomous, endogenous variable where respondents were asked: 1) Do you or someone in your immediate family currently have any unpaid legal expenses, fines, fees, or court costs? Response categories include “yes” (coded 1) or “no” (coded 0). Table 1 shows that about 4 percent of respondents reported that they or someone in their immediate family has an LFO.

I created the variable *Having an LFO* as a dichotomous, exogenous variable to capture if an individual’s household had an LFO during the three years of the panel. Categories include “Never had LFO” (coded 1) or “Had an LFO” (coded 0). Table 1 shows that about 7 percent of respondents reported that they or someone in their immediate family had an LFO during the three years.

Finally, I created the variable *LFO Status* as a three-category, exogenous variable. Categories include “Paid off LFO” (coded 1), “Never had LFO” (coded 2), or “Has not paid off

LFO” (coded 0). “Paid off LFO” means that the household had an LFO in either or both 2019 and 2020 and paid off the LFO by 2021, capturing how no longer having a household LFO will affect an individual’s physical health. Table 1 shows that about 2 percent of respondents reported that they or someone in their immediate family had not yet paid off their LFO by 2021, and about 5 percent of respondents reported that they or someone in their immediate family had paid off their LFO by 2021.

(Table 1 of descriptive statistics here)

*Income* was collected in 2019 as a 21-category variable. Respondents were asked what their household income was and what category they would fall in. Given the number of possible categories, ranging from less than \$5,000 to \$250,000 or more, I treat this variable as a continuous measure. I use *Income* as a key independent variable to test its effect on *having an LFO* to understand if those with lower incomes are more likely to have an LFO, as well as a separate analysis to see if it exerts a moderating effect in my analysis of *Poor Physical Health*. Table 1 shows respondents' mean income is 13.86, roughly the \$60,000 to \$74,999 income range, with a standard deviation of 4.9.

### *Control Variables*

In my models, I control for demographic characteristics of *Sex*, *Race*, *Age*, and the respondent’s *Household Size*. These variables were each measured in 2019. *Sex* will be treated as a dichotomous variable, with categories of “Female” (coded 0) or “Male” (coded 1). The term “Gender” was how the dataset described this variable. However, I use the term *Sex* to denote this variable given that male and female are signifiers more of biology rather than identity. *Race* was presented as a multicategory variable with categories including “White”, “Black”, “Hispanic”,

“Asian”, and “Other race” with “White” being the reference category. I include *Household Size* to help control the effect of income since this dataset contains many individuals who make over \$100,000. I treat this as a continuous measure, with household sizes ranging from 1 to 13 people.

### *Analytic approach*

I used logistic and ordered logistic regressions for this study's analysis to estimate the effects of income on having an LFO and how poor physical health is affected by having an LFO and changes in LFO status. To address hypothesis 1, Models 1 and 2 use a logistic regression to observe the effect of income on an individual's household having an LFO, without and with controls, respectively. To address hypothesis 2, Models 3 and 4 use an ordered logistic regression to observe the effect of having an LFO on poor physical health, without and with controls, respectively.

The final three models for this analysis (Models 5-7) address hypotheses 3-6. I use an ordered logistic regression to examine how the change in LFO status (paying off an LFO or never having an LFO compared to not paying off LFOs) and income affect poor physical health in 2021. I first present the Change in LFO Status and Income without covariates, then add covariates, including controlling for physical health in 2019 (hypothesis 3-5), and then an interaction between LFO status change and Income is included (hypothesis 6). I use STATA 18/SE for the data manipulations of this analysis and employ listwise deletion to handle missing data.

## **Results**

(TABLE 2)

Table 2 shows the logistic regression results of income predicting having an LFO. Model 1 shows the key independent variable of income. This model indicates that income negatively and significantly affects having an LFO. We can see that for each unit increase in income results in 0.126 lower log odds of having an LFO. Model 2 introduces covariates to help isolate the effect of income on LFO status. Here, we can see that income is negatively and significantly associated with having an LFO. We can observe that for each standard deviation increase in income results in 0.128 lower log odds of having an LFO.

(FIGURE 1)

Figure 1 shows the predicted probability of income on having an LFO. From this, we can see that the predicted probability of having an LFO decreases as income increases. Those with an income of less than \$5,000 have a 14.3 percent predicted probability of having a household with LFO, while those who make \$250,000 or more have a 1.4 percent predicted probability of having an LFO.

(TABLE 3)

Table 3 shows the results of an ordered logistic regression of having an LFO predicting poor physical health in 2021. Model 3 shows the key independent variable of having an LFO during the three-year panel. This model indicates that those whose households have never had an LFO report significantly better physical health compared to those who had an LFO. Those who never had an LFO report 1.188 lower log odds of having poor physical health. Model 4 introduces covariates to help isolate the effect of having an LFO on poor physical health. Here, we can see that never having an LFO predicts significantly better physical health compared to having an LFO. We can see that never having an LFO predicts 0.775 lower log odds of having poor health compared to having an LFO.

(FIGURE 2)

Figure 2 shows the predicted probabilities of having an LFO on poor physical health in 2021. We can observe the predicted probabilities of those whose households have had an LFO and those who have not. Regarding hypothesis 2, I ran a linear combination test for each health category to test the difference between having an LFO and not; all health categories were significantly different. Those who had an LFO have a 5.9 percent predicted probability of having excellent health compared to 9.8 percent for those who never had an LFO, a significant difference of 3.9 percent. Those with an LFO have a 30.9 percent predicted probability of having very good health compared to 36.7 percent for those who never had an LFO, a difference of 5.8 percent, which is significant. Those who have had an LFO have a 42.5 percent predicted probability of having good health compared to 38.7 percent for those who never had an LFO, a significant difference of 3.8 percent. Those who have had an LFO have a 15.8 percent predicted probability of having fair health compared to 11.8 percent for those who never had an LFO, a difference of about 4.0 percent, and this difference is significant. Those who have had an LFO have a 4.9 percent predicted probability of having poor health compared to 3.0 percent for those who never had an LFO, a difference of 1.9 percent, which is significant.

(TABLE 4)

Table 4 shows the results of an ordered logistic regression of LFO status and income on physical health in 2021. Model 5 shows the key independent variables of LFO status and income. We can see that those who have paid off their LFOs report significantly better physical health than those who have not paid off their LFOs. Those who have paid off their LFO have 1.482 lower log odds of reporting poor physical health than those who have not paid off their legal debt. Those who have never had an LFO report significantly better physical health compared to



those who have not paid off their LFOs, where we can see that those who never had an LFO have 1.958 lower log odds of reporting poor physical health. As income increases, it is significantly associated with poor physical health, where for each unit increase in income results in 0.104 lower log odds of reporting poor physical health.

With covariates added in Model 6, we can see that those who have paid off their LFOs report significantly better physical health compared to those who have not paid off their LFOs. Those who have paid off their LFO have 1.267 lower log odds of reporting poor physical health compared to those who have not paid off their legal debt. Those who have never had an LFO report significantly better physical health compared to those who have not paid off their LFO, where we can see that those who never had an LFO have 1.687 lower log odds of reporting poor physical health. Also, as Income increases, it is significantly associated with better physical health, where for each unit increase in income results in 0.030 lower log odds of reporting poor physical health.

(FIGURE 3)

Figure 3 shows the predicted probabilities of LFO status on physical health in 2021. In Figure 3.A, we can observe the predicted probabilities of those who have not paid off their LFOs and those who have. Regarding hypothesis 3, I ran a linear combination test for each health category to test the difference between those who have not paid off their LFOs and those who have paid off their LFOs; the health categories of excellent, very good, good, and fair health were significantly different. Those who have not paid off their LFOs have a 2.9 percent predicted probability of having excellent health compared to 7.5 percent for those who have paid off their LFOs for a difference of 4.6 percent, which is significant. Those who have not paid off their LFOs have a 22.9 percent predicted probability of having very good health compared to 33.6

percent for those who have paid off their LFOs, a difference of 10.7 percent, which is significant. Those who have not paid off their LFOs have a 44.6 percent predicted probability of having good health compared to 41.1 percent for those who have paid off their LFOs, a significant difference of 3.6 percent. Those who have not paid off their LFOs have a 21.6 percent predicted probability of having fair health compared to 14 percent for those who have paid off their LFOs, a difference of 7.6 percent, which is significant. The difference between the two groups for poor health was marginally significant.

We can next observe in Figure 3.B the predicted probabilities of those who have not paid off their LFOs and those who have never had an LFO. Regarding hypothesis 4, I ran a linear combination test for each health category to test the difference between those who have not paid off LFOs and those whose households have never had LFOs, and all the health categories were significantly different. Those who have not paid off their LFOs have a 2.9 percent predicted probability of having excellent health compared to 9.8 percent for those who have never had an LFO, a difference of 6.9 percent, which is significant. Those who have not paid off their LFOs have a 22.9 percent predicted probability of having very good health compared to 36.6 percent for those who have never had an LFO, a significant difference of 13.7 percent. Those who have not paid off their LFOs have a 44.6 percent predicted probability of having good health compared to 38.8 percent for those who have never had an LFO, a difference of 5.8 percent, which is significant. Those who have not paid off their LFOs have a 21.6 percent predicted probability of having fair health compared to 11.8 percent for those who have never had an LFO, a significant difference of 9.8 percent. Those who have not paid off their LFOs have an 8 percent predicted probability of having poor health compared to 2.9 percent for those who have paid off their LFOs, a difference of 5.1 percent, which is significant.

Regarding hypothesis 5, I also ran a linear combination test to compare the predicted probabilities for those who paid off their LFOs and those who never had an LFO. There were no statistical differences among health categories between the two groups.

From Table 4, Model 6 introduces an interaction between LFO status and income and its effect on poor physical health in 2021. Regarding hypothesis 6, this effect is insignificant for those who have paid off LFOs and those who never had an LFO. This means that income does not have a moderating effect on physical health for those who had paid off LFOs and those who never had an LFO. In both cases, not having an LFO or paying it off is associated with better physical health, regardless of the individual's income.

## **Discussion and Conclusion**

Much of the research on LFOs has been produced qualitatively, with great enthusiasm and care, but we lack quantitative backing to support these arguments. This study aimed to understand who receives LFOs and how LFOs act as stressors and potentially affect individual's physical health. Using logistic and ordered logistic regressions, I have found that LFOs act as a regressive tax, paying off an LFO or never having one is better for your health, and that LFOs can be detrimental for all that have them.

My first question for this paper was about the individuals/families most likely to receive an LFO. Much of the literature points to poorer individuals being placed with the burden of legal debt; it is a mechanism of control, keeping people within reach of the criminal justice system because they are unable to pay for their freedom (Pattillo and Kirk 2021). I hypothesized that households would be less likely to have LFOs as income increases. My findings support this hypothesis that those with the lowest income are most likely to have legal debt.

This demonstrates that LFOs act as a regressive tax for the criminal justice system. While LFOs are essentially flat taxes, which, when applied uniformly, are regressive in their outcomes. We see from regressive taxes that as income increases, the weight of the tax decreases. This leaves poorer individuals feeling a more significant burden because they engage with the criminal justice system more and lack the financial freedom that those with more income can afford (Rabuy and Kopf 2015).

As stated previously, in Oklahoma, as state budgets began to tighten and laws constraining how revenue bills could be passed, politicians began looking to the criminal justice system as a way to generate revenue. They claimed that a little fee here or there would not make any difference. The criminal justice system saw a shift away from state budgets funding their operations and turned to legal fees, fines, and surcharges as a way of increasing funds.

Poorer individuals are more likely to be involved with the criminal justice system, but I have also shown that they and their households are more likely to have legal debt. Because the criminal justice system implements these regressive taxes and because poorer individuals are in contact with the criminal justice system, they are disproportionately saddled with legal debt.

For hypothesis two, I found support that people whose households have never had an LFO have better physical health than those who have had one. This shows that having an LFO was associated with poorer physical health and that it is preferable for individuals' physical health not to have an LFO.

This study's third hypothesis looked at how the effect of paying off legal debt during the three-year panel period affects physical health. I found support for this hypothesis in that those whose households paid off their debt reported better physical health than those who did not pay off their debt. Though it may not have been a surprise, my fourth hypothesis was supported – that

those whose households never had an LFO reported better health than those who had not paid off their legal debt. We can see that not having an LFO is associated with having better health than those who continue to have an LFO. When observing LFOs as a source of stress (Harris and Smith 2022), alleviating the legal debt and not having it was associated with better health. Though this study's sample only captured this effect over three years, and we cannot know how long they had this debt before the panels started, we can see that when individuals and/or their households no longer have such debt, they report better physical health. Future research should look at the effect of having an LFO over more years and in shorter intervals. It would be important to look at these effects over more years to understand if these effects are greater when an individual has the debt for longer. Additionally, it would be useful to understand these effects in shorter intervals, such as on a bi-monthly basis, to capture more of the short-term effects and to see if someone did get an LFO and paid it off within a short time that might not have been captured in a year-to-year survey.

For my fifth hypothesis, I believed that there would be a difference between the physical health outcomes of those whose households never had an LFO during the panel and those who paid off their LFO, with those who never had an LFO having better physical health, but this hypothesis was not supported. I ran a linear combination test to see the difference between those who paid off their legal debt and those who never had a legal debt, and they were not statistically different across any of the health categories. From this test, we can see that having this legal debt negatively affects an individual's health, and paying off the debt or not having it to begin with has no difference in positively impacting an individual's physical health. This is a surprising finding because I assumed that this effect would have levels to it where those whose households have not paid off an LFO would report worse physical health, followed by those who have it

during the panel but paid it off, and finally those who did not report having an LFO during the panel would report the best physical health.

My analysis did not support hypothesis six, as the moderating effect of income on LFO status was insignificant for either those who have paid off the LFO or have never had an LFO. From this, we can understand that though those with lower incomes are disproportionately disadvantaged from having an LFO, income does not moderate that effect. Income acts more like an exposure effect where poor people are more likely to experience them, but the ill effects on their physical health are not stronger.

To put this into a theoretical perspective, we can see how income and LFOs act as a form of social stress. An individual's social position or status due to income places them at an increased risk of the health stressor of LFOs, whether it is their own LFO or someone in their immediate family. Additional research should look at the factors that put individuals at increased risk of the health stressors of having an LFO.

As for stress process theory, we see how income acts as an exposure effect, showing that poorer individuals are exposed more to the criminal justice system and to LFOs, but the effect does not moderate the effect of poor physical health. While this study did not find evidence of income acting as a coping mechanism for individuals, future research should observe how individuals are able to cope with the stress or their legal debt and if these coping strategies mediate the effect the LFOs have on mental and physical health. Using Harris and Smith's (2022) Stress Universe Process and Criminal Legal Contact outline can help to inform the use of potential mechanisms that can mediate the effect of LFOs on mental and physical health, such as employment, social networks, and incarceration.

These findings do come with several limitations. The use of secondary data comes with drawbacks. The LFO variable for this study was worded so that we cannot completely parse out if the individual who responded to the survey has the legal debt or if an immediate family member has it. However, this can demonstrate how monetary sanctions act as a form of “symbiotic harm,” where the detrimental effects of the LFO affect the family of those connected to the legal debt (Boches et al. 2022).

Additionally, this panel had a small number of respondents who reported either they or someone in their immediate family has an LFO. This study only had the statistical power to capture large effects. Future research needs to ensure that samples contain a larger number of individuals with LFOs. Running this same analysis through a larger sample could show more substantial effects between LFOs and health and allow us to capture finer distinctions in the data.

This study would have benefitted from understanding, statistically, the effect of LFOs on mental health and how this effect can translate into issues with an individual’s physical health. However, no mental health variables were included in this dataset. Future research should look at the pathways between LFOs, mental, and physical health, how the stressor of legal debt can express itself as poor mental and physical health, and how those may be interrelated.

Future research should also examine the effect of LFO status and incarceration on health. I say health to mean the impact of LFOs on mental and physical health. I presume that the effect of incarceration on health, moderated by having an LFO, could explain more of the impact of the criminal justice system on health. I believe that the effect of incarceration on an individual’s health, which has been shown to be detrimental to health, will be even stronger when for those with an LFO. Re-entry post-incarceration is challenging – adding the burden of an LFO seems likely to make this transition even more difficult.

Understanding the monetary amounts that individuals owe can also help understand the effect of LFOs on mental and physical health. Similar to the call of Harris and Smith (2022), is there an effect for stress an individual experiences depending on the amount they owe? Are those with higher amounts of debt more prone to the impact of stress from the LFO? Is there a point when the debt becomes so large that individuals no longer stress because of its sheer size?

This study adds to the growing body of literature on the adverse effects of criminal legal debt. Those who are already placed at a disadvantage because of their income are receiving more LFOs than those who have higher incomes. Courts use these legal debts in predatory ways by imposing LFOs on those already in compromised financial situations and then punishing them with additional fines for failing to pay their fines and fees, not being able to appear for regular court appointments, or being deemed as willfully not paying their fines, as well as making it increasingly difficult to find housing, work, and transportation; with the latter two, in particular, negatively impacting ability to make income, furthering the difficulty of paying off LFOs (Beckett et al. 2008; Ferguson Commission 2015; Friedmen et al. 2022).

This exacerbates existing inequality and reproduces a stratification system where those with the highest incomes are protected from most of the adverse effects of the criminal justice system, and those with the least take the brunt of the negative consequences (Ferguson Commission 2015). The relief of these debts is shown to be correlated with having better health. The continuation of legal financial obligations means the continuation of negatively impacting individuals.

One way we can combat the effect of LFOs on physical health is to either eliminate the use of legal fees and fines or provide waivers for an individual's fees, fines, and surcharges. If we see that those who can pay off their LFOs can experience better physical health, we could



also see more significant health effects when we allow individuals to be cleared of their legal debt. Waiving these sanctions would not only limit the stress experienced by LFOs but would also restrict the supervision of the criminal justice system, which brings additional stresses and anxieties (Pager et al. 2022).

Additionally, a way to curb the detrimental effects of fees and fines imposed on an individual would be to instate bail reform, limiting when and how a judge may impose monetary bail on individuals. Similar to New York's bail reform, we could eliminate monetary bail for misdemeanor and nonviolent felonies. Doing so would lead to fewer individuals being held in jails, allowing them to be either released without restriction or under a specific condition such as electronic monitoring, though with an understanding that they are to appear in court to resolve their case. Electronic monitoring is a slippery slope, given that many individuals must still pay for the use of the monitor, but it would allow for freedom from incarceration. Individuals could still work and engage with their family and friends by not being incarcerated. Continuing to work would help those with a low income to provide for their basic needs and those of others they may care for. This can help to alleviate the stress they experience from financial problems and improve health while being able to engage with family and friends, which could provide individuals with a greater sense of belonging and feeling cared for, so long as these relations are not strained. Bail reform would allow for freedom not to be decided by an individual's wealth (Grawert and Kim 2024; New York Civil Liberties Union 2023).

We can see, not only from this study but from the broader work on legal debt, that LFOs have detrimental effects on those who have them. Whether understanding this phenomenon from the lens of politicians and criminal justice actors seeing people as ATMs or sources of revenue; to the individuals themselves who feel as though they will be trapped forever in their debt, we can

see nothing but inequality. When we observe this through the lens of health, we see these same detrimental effects. It truly is a perilous time when we quite literally make people pay for their debt with their health.

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## Appendix A. Tables and Figures

Table 1. Summary Statistics ( $N = 1,614$ )

Theoretical Variables	Mean/Proportion	SD	Min	Max
<b>Poor Physical Health in 2021</b>				
Excellent	0.09	(0.285)	0	1
Very Good	0.38	(0.485)	0	1
Good	0.39	(0.487)	0	1
Fair	0.12	(0.325)	0	1
Poor	0.03	(0.166)	0	1
<b>Poor Physical Health in 2019</b>				
LFO in 2019	1.54	(0.937)	0	4
No LFO	0.96	(0.195)	0	1
Has LFO	0.04	(0.195)	0	1
<b>Having an LFO during panel</b>				
Has LFO during panel	0.07	(0.248)	0	1
Never had LFO during panel	0.93	(0.248)	0	1
<b>LFO Status during panel</b>				
Has not paid off LFO	0.02	(0.137)	0	1
Paid off LFO	0.05	(0.211)	0	1
Never had LFO	0.93	(0.248)	0	1
<b>Income</b>	13.86	(4.913)	1	21
<b>Control Variables</b>				
<b>Sex</b>				
Female	0.36	(0.481)	0	1
Male	0.64	(0.481)	0	1
<b>Race</b>				
White	0.66	(0.475)	0	1
Black	0.11	(0.309)	0	1
Hispanic	0.12	(0.330)	0	1
Asian	0.07	(0.252)	0	1
Other	0.05	(0.208)	0	1
<b>Age</b>				
18-24	0.08	(0.264)	0	1
25-34	0.19	(0.396)	0	1
35-44	0.17	(0.374)	0	1
45-54	0.16	(0.366)	0	1
55-64	0.21	(0.406)	0	1
65-74	0.13	(0.341)	0	1
75+	0.06	(0.237)	0	1
<b>Household Size</b>	2.68	(1.425)	1	13

*Abbreviations:* Min = Minimum; Max = Maximum; SD = standard deviation.

Source: Survey of Household Economics and Decisionmaking

<sup>a</sup> unless noted in the table, income and control variables were observed in 2019

<sup>b</sup> the variables having an LFO and LFO status capture effects across all three waves of panel

Table 2. Logistic regression of having a Legal Financial Obligation

	Model 1		Model 2	
	$\beta$	SE	$\beta$	SE
<u>Key Independent Variables</u>				
Income	-0.126***	(0.025)	-0.128***	(0.028)
<u>Control Variables</u>				
Male			-0.019	(0.325)
Race				
Black			-0.733	(0.528)
Hispanic			-0.031	(0.446)
Asian			-1.311	(1.031)
Other Race			1.364*	(0.560)
Age				
25-34			-0.771	(0.588)
35-44			0.008	(0.564)
45-54			0.026	(0.552)
55-64			-0.203	(0.592)
65-74			-0.476	(0.666)
75+			-1.181	(1.061)
Household Size			0.138	(0.078)
Intercept	-1.641***	(0.322)	-1.703**	(0.423)
<i>N</i>	1,614		1,614	
<i>AIC</i>	1.36e+07		1.29e+07	
<i>BIC</i>	1.36e+07		1.29e+07	

Robust standard errors are in parentheses; all variables recorded in 2019

\*  $p < 0.05$ , \*\*  $p < 0.01$ , \*\*\*  $p < 0.001$

Figure 1. Predictive Probabilities for income on having an LFO

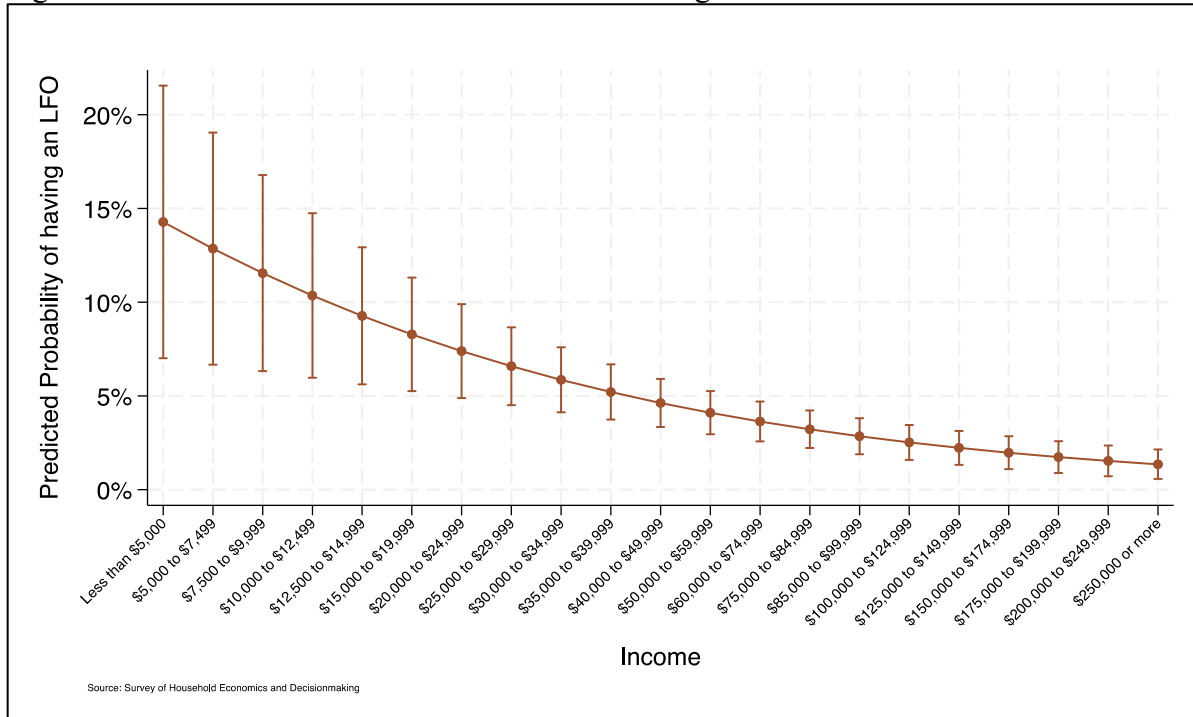


Table 3. Ordered Logistic regression of having an LFO on Poor Physical Health in 2021



	Model 3		Model 4	
	$\beta$	SE	$\beta$	SE
<u>Key Independent Variables</u>				
Never had LFO	-1.188***	(0.201)	-0.775***	(0.290)
<u>Control Variables</u>				
Male			0.019	(0.122)
Race				
Black			0.019	(0.184)
Hispanic			0.052	(0.191)
Asian			-0.150	(0.226)
Other Race			0.174	(0.423)
Income			-0.030*	(0.014)
Age				
25-34			-0.002	(0.299)
35-44			0.229	(0.302)
45-54			0.267	(0.295)
55-64			0.211	(0.287)
65-74			0.100	(0.298)
75+			0.732*	(0.335)
Household Size			-0.007	(0.045)
Poor Health in 2019			2.611***	(0.124)
/				
Intercept 1	-3.391***	(0.218)	-0.932	(0.669)
Intercept 2	-1.274***	(0.196)	2.672***	(0.679)
Intercept 3	-0.651***	(0.194)	6.333***	(0.705)
Intercept 4	1.366***	(0.236)	9.202***	(0.760)
<i>N</i>	1,614		1,614	
<i>AIC</i>	1.13e+08		7.37e+07	
<i>BIC</i>	1.13e+08		7.37e+07	

Robust standard

errors are in parentheses; all variables recorded in 2019

\*  $p < 0.05$ , \*\*  $p < 0.01$ , \*\*\*  $p < 0.001$

Figure 2. Predictive Probabilities for having an LFO on Poor Physical Health in 2021

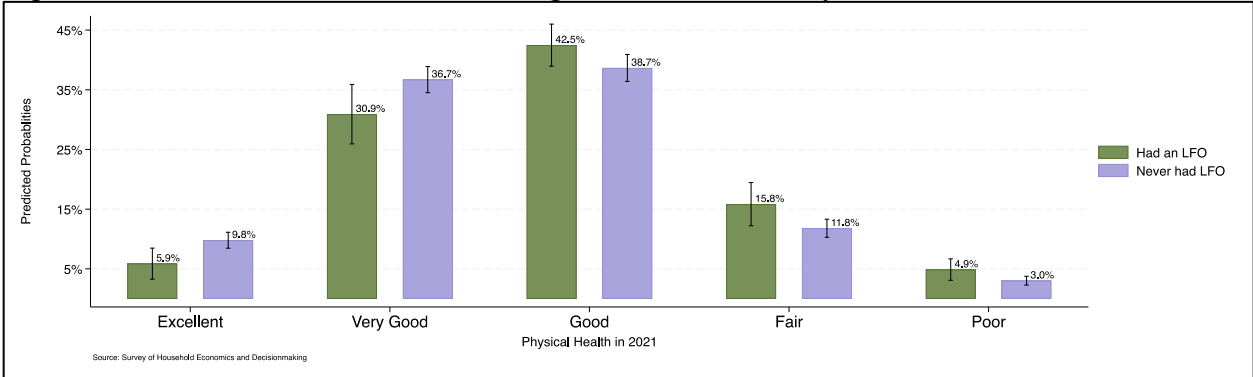


Table 4. Ordered Logistic regression of LFO status and Income on Poor Physical Health in 2021

	Model 5		Model 6		Model 7	
	$\beta$	SE	$\beta$	SE	$\beta$	SE
<u>Key Independent Variables</u>						
Paid off LFO <sup>a</sup>	-1.482**	(0.521)	-1.267*	(0.606)	-1.215	(1.283)
Never had LFO <sup>a</sup>	-1.958***	(0.500)	-1.687**	(0.526)	-1.213	(1.027)
Income	-0.104***	(0.012)	-0.030*	(0.014)	0.009	(0.084)
<u>Interaction</u>						
Paid off LFO X Income					-0.004	(0.103)
Never had LFO X Income					-0.043	(0.085)
<u>Control</u>						
Male			0.016	(0.122)	-0.016	(0.122)
Race						
Black			0.004	(0.184)	0.002	(0.186)
Hispanic			0.047	(0.191)	0.041	(0.192)
Asian			-0.161	(0.227)	-0.162	(0.227)
Other			0.231	(0.418)	0.232	(0.418)
Age						
25-34			-0.024	(0.300)	-0.028	(0.299)
35-44			0.223	(0.304)	0.233	(0.307)
45-54			0.238	(0.296)	0.244	(0.299)
55-64			0.189	(0.288)	0.190	(0.290)
65-74			0.068	(0.299)	0.071	(0.300)
75+			0.686*	(0.336)	0.687*	(0.337)
Household Size			-0.010	(0.045)	-0.008	(0.045)
Poor Health in 2019			2.612***	(0.125)	2.611***	(0.125)
/						
Intercept 1	-5.742***	(0.530)	-1.885**	(0.669)	-1.456	(1.068)
Intercept 2	-3.552***	(0.512)	1.714*	(0.679)	2.146*	(1.079)
Intercept 3	-1.507**	(0.501)	5.391***	(0.705)	5.822***	(1.097)
Intercept 4	0.288	(0.508)	8.306***	(0.760)	8.742***	(1.134)
<i>N</i>	1,614		1,614		1,614	
<i>AIC</i>	1.10e+08		7.35e+07		7.35e+07	
<i>BIC</i>	1.10e+08		7.35e+07		7.35e+07	

Robust standard errors are in parentheses; all independent variables recorded in 2019

<sup>a</sup> Paid off LFO and Never had LFO capture whether, during the three-year panel, they had an LFO but paid it off or if they never reported having an LFO

\*  $p < 0.05$ , \*\*  $p < 0.01$ , \*\*\*  $p < 0.001$

Figure 3. Predicted Probabilities of LFO Status on Physical Health in 2021

