Q27 — Define ‘competitive market’ (Extract F, line 17) [3 marks]

A competitive market is one in which there are many buyers and sellers, firms compete on price and quality, and consumers can easily switch between providers. This competition limits firms’ ability to charge high prices and encourages efficiency.

Q28 — Number of children admitted to hospital because of tooth decay (4 marks)

Extract F states that about 60,000 people are admitted to hospital each year because of tooth decay.
Three-quarters of these are children.

Number of children currently admitted =
60,000 × 0.75 = 45,000

If the population increases by 2.25%:
45,000 × 1.0225 = 46,012.5

To the nearest child: **46,013 children**

Q29 — Two significant features of courses of dental treatment (4 marks)

The North region has the highest number of courses of dental treatment per 100,000 population at around 85,000, while London has the lowest at approximately 55,000, showing significant regional inequality in access or usage of dental services.

England as a whole has a higher number of courses of dental treatment per 100,000 population than London but lower than the North, Midlands and East, suggesting Londoners receive fewer NHS dental treatments relative to other regions.

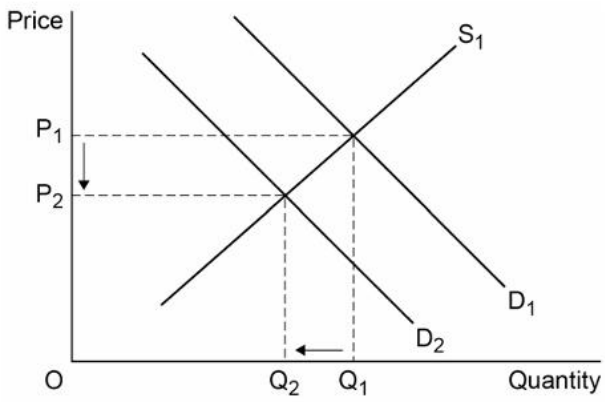
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3 0 ***Extract F*** *(lines 13–14) states: 'Prices for many dental treatments in Hungary, for example, are about half those of the UK'.*

Draw a supply and demand diagram showing the effects on the market for UK dental care of a fall in the price of dental care abroad.

[4 marks]

The correct diagram involves a decrease in demand/shift to the left of the demand curve resulting in a decrease in quantity sold and price.



Q31 — Explain how increasing demand for dental care is likely to affect the market for dentists (10 marks, chain-of-analysis)

First factor:
Extract E states that a growing population is increasing demand for dental care → higher demand for dental services shifts demand for dentists to the right → existing dentists experience higher workloads → shortages of dentists increase → dentists gain greater bargaining power → wages for dentists rise → this may attract more people into the profession over time.

Second factor:
Rising demand for dental care increases pressure on NHS dental services → limited NHS funding restricts supply → waiting times increase → some patients turn to private dental care → demand for private dentists rises → private dentists can charge higher prices → this increases income inequality in access to dental care.

Q32 — Should the UK government take more action to improve dental health in the UK? (25 marks)

Introduction:
Extracts E and F raise concerns about access to dental care, rising demand and preventable dental disease. With large regional differences and many people unable

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to access NHS dentists, the question is whether the UK government should take further action to improve dental health.

Point 1:
The government should take more action to improve dental health → Extract F states that over 90% of dental disease is preventable → increased government spending on education and prevention improves awareness → supervised tooth-brushing programmes reduce childhood tooth decay → fewer hospital admissions reduce NHS costs → overall social costs of poor dental health fall → improving welfare and long-term health outcomes.

Evaluation of point 1:
However, increased government intervention requires funding → higher spending may increase opportunity cost → resources could be diverted from other NHS services → effectiveness depends on parental behaviour and compliance → meaning benefits may be limited if education does not change habits.

Point 2:
Government action could improve access to NHS dentists → Extract E highlights shortages of dentists and unequal access → better funding and incentives attract more dentists to underserved areas → supply of NHS dental care increases → waiting times fall → reliance on expensive private care decreases → improving equity in healthcare access.

Evaluation of point 2:
However, Extract F notes that dental tourism is increasing → cheaper foreign dental care increases competition → UK dentists may struggle to remain competitive → increased government support could reduce incentives for efficiency → suggesting market forces may play a role in improving outcomes without heavy intervention.

Conclusion:
Overall, there is a strong case for the UK government to take more action to improve dental health, particularly through prevention and improving access to NHS dentists. However, intervention should be targeted and cost-effective, alongside allowing competition and personal responsibility to play a role. A balanced approach is most likely to improve dental health outcomes in the long run.

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