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## THE ISSUES OF THE RELATIONSHIP OF GRANDPARENTS AND GRANDCHILDREN IN THE LIGHT OF PHYSICAL ACTIVITY

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This study focuses on the role of certain factors responsible for physical and mental health, paying particular attention to the relationship between the family – particularly the grandparents – and physical education. Nowadays, the involvement of grandparents into the education of grandchildren is of high importance for the families. Our research shows that today, when parents' work leads to a difficult and tough situation, the role of grandparents is very important in the life of the family. Our study clearly shows that the relationship of grandparents and grandchildren depends primarily on the quality of time spent together, i.e. on its content and emotional values.

**Keywords:** family, prevention, physical and mental health, value mediation, generations, protective factor

**Aspekte der Großeltern-Enkel-Beziehung im Spiegel körperlicher Aktivität:** Im Mittelpunkt unserer Studie stehen Schutzfaktoren für die körperlich-seelische Gesundheit, insbesondere der Zusammenhang zwischen der Familie – v.a. den Großeltern – und dem Sport. Die Einbeziehung der Großeltern in die Erziehung der Enkel ist heute für Familien von besonderer Bedeutung. Im Rahmen unserer Untersuchung konnte nachgewiesen werden, dass die Unterstützung durch die Großeltern im Leben der Familien eine wichtige Rolle spielt, da sich berufstätige Eltern heute in einer komplizierten und schwierigen Situation befinden. Unsere Ergebnisse belegen eindeutig, dass aus Sicht der Befragten der Schwerpunkt der Großeltern-Enkel-Beziehung auf der Qualität der gemeinsam verbrachten Zeit, d.h. auf inhaltlichen, emotionalen Werten liegt.

**Schlüsselbegriffe:** Familie, Vorbeugung, körperlich-seelische Gesundheit, Wertevermittlung, Generationen, Schutzfaktor

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## 1. Introduction

This study focuses on the role of certain factors responsible for physical and mental health, paying particular attention to the issues of physical exercise and body culture. During the theoretical and practical research of the topic we tried to map physical training and sport-related activities, characteristic features of the way of thinking, and the causal factors influencing these in the case of 509 families, *including three generations*, with the help of an empirical study.

Throughout the study, special attention was given to the exemplary and value-forming role of different generations within the family.

The examination of the connection between *grandchildren and grandparents* from the above-mentioned aspect was also important as this kind of connection has a lot of new content and formal specialities due to changes in our time. Below we provide a brief overview of this study, emphasising some experience and results from the empirical research that we deem noteworthy.

The topic was chosen because it concerns a *less studied subject*, not to mention the changes in grandparents' roles as a result of recent changes in our way of life and the characteristics of this modern age. Life expectancy becomes higher due to higher average age, and a more active grandparental age is becoming more common, which makes it possible for grandparents to *spend a growing amount of time usefully with their grandchildren*.

## 2. Life potentials and limits: contradictions of civilisation

Because of the accomplishments – and of the indisputable risks and hazards – of our modern age, the issue of preserving physical and mental health has different foci of interest in these days than in earlier times.

Due to the achievements of civilisation, the limits of active life have been extended, life expectancy has become higher, thus creating an encouraging reality for everyone. Besides the results and possibilities, we have to live together with the harmful effects of modern age, including the factors threatening our lives and health in many ways. New epidemics, diseases and pathogens, the menacing results of environment protection constitute only one group of the factors indicating danger. The way of life of the man of our time, often having a distorted ideal of man and life, the dead ends while escaping from a life full of stress and challenges can rush the realisation of their biological potentials into danger. It is a tragic fact that such harm and negative effects appear very often as early as in childhood and adolescence; more and more youngsters are concerned by the *delicate off-balance of physical and mental health*. We have statistics about the health state of the adult age group, showing rather alarming symptoms as well, thus jeopardising the possibility of a healthily lived old age and the realisation of one's biological potential.

Fortunately, science can help us to orientate in the multi-factorial cause group

which defines health, life expectancy and the quality of life, to be able to see more clearly the joint impact system of our genetic, social, environmental, and lifestyle characteristics, thus the relationships of our individual possibilities and responsibility. Modern technology and mass media have a significant role in this kind of orientation and in applying the available possibilities.

### **3. Health as a main value and physical education as the basic element of health-conscious behaviour**

The making of conscious choices and the protection of health as a main value can be realised only in a *coordinated system of tasks*, both on an *individual and social level*. Politics and economy, health politics, education and social politics, families, schools, cultural transmission and mass media institutions can only achieve real results together, sharing the same views and values.

Besides the genetic, environmental and social factors defining our health, our way of life has also a significant impact on our general state. The health-related style and way of life represent the ways and patterns of the health behaviour based on the choices made by the individuals between their life potentials and life situations (BENKŐ 2000).

The controversial effects of the micro- and macro-environments can be problematic when they extinguish the positive effects and aspirations of each other. This must be emphasised since *health-conscious life and behaviour* mean a really complex system of behavioural forms, related closely to each other. To meet these requirements, a fixed system of values, motivation and ambition is necessary, not to mention the personality traits to achieve the aims (self-discipline, persistence etc.).

Due to content reasons, this study details only one of the most important factors typical of the individual's lifestyle and of health-conscious behaviour: the importance of regular exercise and sports and their physical and mental functions.

It has been stated in several studies that physical activity correlates positively with certain health indicators (psychic general well-being index, self-assessment of health state, life satisfaction, frequency of depressive and psychosomatic symptom formation) (AARINO et al. 2002; BIDDLE et al. 2000, 3–35; KULL 2002; OKANGO 2003; PIKÓ 2002; SACKER 2006; STEPTOE & BUTLER 1996). Studies verify that sport can increase confidence, and prevent depression. The curative effects of regular physical training can be seen during risk behaviours and symptom formation as well (BOWKER 2006; BURKE et al. 1997; GLEESON 2007; PÁL et al. 2005; PASTOR et al. 2003; ROBERT & FRANKLIN 2002). In addition to this, doing sports can save us from the harmful effects of mental stress, and it helps preserve and maintain mental health (PETRUZZELLO et al. 1991; NORTH et al. 1990). Other studies prove that physical activity is especially efficient in preserving and generating health in any age, but mostly among the old and the young (BIDDLE et al. 2004; GÉMES 2008; SALBE et al. 2002; TWISK et al. 2002; PLUHÁR et al. 2003).

It is regrettable that despite the above-mentioned advantages more and more people choose a *sedentary lifestyle*, although the young people who regularly do some kind of sport report a sense of greater well-being and fewer psychosomatic symptoms (PLUHÁR et al. 2003).

We have a lot of knowledge and experience in connection with the preventive, developmental and rehabilitative functions of sports and physical activities. The *preventive function* of the preceding problems has been in the foreground for a time. In the case of physical activities, there might be differences in the priorities. It is the joint effect of several factors that reveal the most important decision- and action-making motivations (peer groups, values, ideals of given age groups, families, etc.). In the combined 'battle' of *objective and subjective factors* it becomes manifest what sport- and exercise-related aims are targeted: external ones (physical, aesthetic, appearance, fashion-like) and those inner or personality values which can be measured and developed with the help of sport and physical exercises related to physical and mental health (self-discipline, success, stamina, ability to fight, willpower, attention, etc.).

The formal and informal impact systems must be especially highlighted since with their direct and indirect effects they educate, form, and direct the evolution of the individual's values in different fields of socialisation (family, nursery school, school, workplace, smaller communities). The family is the main place of education, and informal learning has a strong influence on the emergence of the child's health-conscious behaviour and on the attitude towards physical culture, physical exercise.

#### **4. The role of the family in the educational process related to body culture, physical culture**

The family as a definitive community in transmitting values has a decisive role in creating and forming a health-conscious lifestyle as well. Undoubtedly, the family is a biological, social and emotional community uniting several generations, and it provides examples and patterns whose effects are difficult to complement or cannot be corrected at all.

Despite the negative changes, the smallest community of society still *plays a basic role in the formation of habits, ways of life and values*. The behavioural, consumption and lifestyle habits experienced in the family have a decisive influence on the sensitivity, the attitude to the world and the value judgement of the children brought up there. The family has several psychic and physical health-preserving functions in the forming of youngsters' attitude to health.

The family has a primary role in helping to make choices as it provides a spiritual, moral, mental and physical environment for our body, soul and spirit to be able to develop both in short and long terms. Recently, the role of the family has undergone major changes which affect not only the operation of the family but also its values (KUIJSTEN 1996; RÁCZ 2005; SZRETYKÓ 2002). The transformation of the family has an impact on the individual's relationship to the family, its strength,

intensity, socialisation, sense of security, and social support (KOPP & SKRABSKI 2001; POORTINGA 2006). The quality of our life depends largely on the relationship with ourselves and others and on our connection with the environment. Knowledge *brought from home*, the unperceived, hidden way of acquisition and learning without teaching forms most of our adult knowledge, the significant part of which is acquired *outside institutional learning places*.

Parental social support and the quality of the relationship with parents can change in adolescence, yet the importance of bonding remains. The acceptance of the values represented by parents can be a measure of family cohesion, which can also contribute to the successful social adaptation, apparent in the attitude to healthy and harmful addictions (PAMPEL & AGUILAR 2008; UNGER et al. 2002). The motivation for regular physical activity can evolve as a result of attractive family patterns and proper school education at a rather early stage in life. It is mostly the family and the school that decide where we can find the healthy lifestyle and physical activity in the values of the child.

The child can acquire different behavioural forms during the social learning started within the family, with the help of the educational activity of parents or other relations, or by miming them (FÖLDESINÉ et al. 2010, 36–37). This way the child can learn, acquire the elements of those activities and lifestyle which are necessary for a healthy physical and mental life. These health-preserving factors can stay with the child throughout their life. Such *healthcare activity* is, among others, regular physical training, doing some kind of sport, very often taken up because of family examples. According to Földesiné, *sport socialisation* is very often *not a one-way process*, the child may also be the one who involves the parents – in some cases even the grandparents – in sporting activities. This way can be gradual, starting from the adult's role of escort through common support and may lead to the sporting activity being done together. It can happen that the above-mentioned activities appear simultaneously in the life of the family.

Above, we emphasised that health-conscious behaviour can only evolve as a coordinated result of different formal and informal impact systems. The family has a primary, prioritised role in this educational progress too.

The *significance and role of grandparents* – whose educational activity we must not ignore – must be mentioned here. In every field of educational activity – such as in the fields of values related to a healthy lifestyle and body culture as well – there is a grandparent in the background who has a totally different relationship with the grandchildren, thus being able to form them in a completely different way. Education within the family is definitely not a one-way process, although the upbringing of children is in the centre. Yet *grandchildren also shape the views, attitudes, and personalities of parents and grandparents*, thus their attitude to body culture.

In our empirical study, some partial results of which will be shown in the last part of this essay, special attention was paid to the role of grandparents within the family, the effects of the grandparents' body culture and sport-related values on the parents and grandchildren.

Higher average age also results in the grandparents' being active workers for a longer period of time. The disadvantage of this is that on account of their work activities, grandparents can provide less help for their children and grandchildren. The advantage at the same time is that besides mental and physical help, grandparents can also contribute financially to the younger generation's starting of life (HABLICSEK 1997).

The changes in the structure and position of the family have created new challenges for grandparents. Nowadays women's position in the labour market has also changed; achieving professional success and building a career have become a priority for many. Others have taken over the role of the breadwinner as very often husbands cannot find any employment. The number of single-parent families is increasing year by year, which results in a lot of single mothers and fathers needing help and support. The instability of families, the increasing number of divorces, the uncertainty of cohabitation and unemployment altogether raise insecurity. The role of grandparents is appreciated in these hard times, as besides giving mental aid, they can support their children and grandchildren in everyday problems, they represent a safe background in their lives.

In today's accelerated world, in the everyday rush they provide great help as they can be mobilised, activated; *grandparents are always there to help, they can be relied on*. Grandparents help out in situations when there is a need to pick up grandchildren from kindergarten or school, they also help with the housework, and in some less fortunate situations, they even have to play some elements of the role of the mother, unburdening their children by doing so. Nowadays, besides the physical and mental help, families need the grandparents' financial support as well, as numerous families live below the poverty line. There are almost 500,000 unemployed in Hungary, many of whom have families, sometimes with three or more children (Központi Statisztikai Hivatal 2013). Those families where both parents work cannot be totally secure either, as in most cases workplace requirements can be met only by doing unpaid overtime, which again happens at the expense of family life.

Grandparents perform these tasks to help and support their children and grandchildren, not because they are forced to do so. They think it is their duty. *Being useful and important gives their everyday life a kind of prospect and sense* to forget about their problems, hardships and illnesses. The joy of altruistic help and the fact that they can be present actively in their children's and grandchildren's life gives them new strength in everyday life. Grandchildren can gain special experience during the common activities, programmes and conversations with their grandparents. Parents would not be able to provide them with these because of their age, the different educational role they play in their children's lives, and even because of their philosophy of life.

The changes in the structure, function, and roles of the family, the syndromes of the crisis and its reasons are one of the most important and complex questions in the fields of sociology, education, religion, and other disciplines, as they concern the whole society, each generation. Problems in the operation of the family can have consequences which are not easy to rectify. A more detailed analysis of this issue was

elaborated as a part of our empirical study, focusing on the relationship of grandparents and grandchildren.

To study the interrelationship of grandparents and grandchildren, forming each other, is an exciting task: in every field of education and value mediation, and also regarding all aspects of a healthy lifestyle. Being teachers of physical education and culture mediators ourselves, the issues related to sport and physical activity are especially important and inspiring for us.

## **5. Characteristics of the way of thinking related to physical activity of grandparents and grandchildren in the light of an empirical study**

### **5.1. Objectives of the study**

The importance of a healthy lifestyle, body culture, recreation and sport should be a basic need for a civilised, cultivated person throughout his life. The objective of our study is to reveal those *characteristics and tendencies* which appear in the lifestyles of families, paying particular attention to *body culture*, including sports. In addition, we studied *how different generations affect each other* with their behaviour and attitude, *what values* they mediate, how they influence each other's views in connection with a healthy lifestyle and physical exercise. We wanted to answer the question how the formal and informal possibilities of life-long learning appear in the life of the family members, what main *motives* it has, what knowledge and values children, parents and grandparents transmit to each other in the field of body culture.

### **5.2. Sample and method**

The study was carried out in Hungary, in the North Hungarian region, among 10 to 14-year-old children, their parents and grandparents. There was a questionnaire survey for *509 children, 509–509 parents (mothers and fathers) and 509 grandparents. 50 children, 50 parents and 50 grandparents were interviewed in structured forms.* We found it important to know the family connections in the questionnaires of the three generations, to be able to reveal the correlations, thus the coherent questionnaires were given the same number when coding, and the four interviewees were distinguished by different letters.

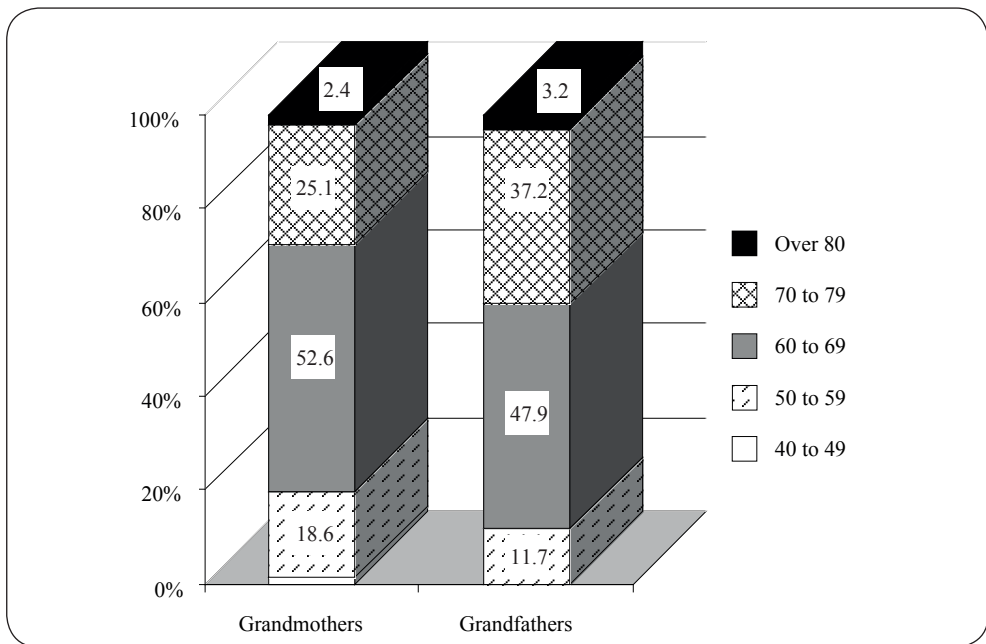
The lifestyle, values, characteristics of way of life, leisure activities, the relation of children, parents and grandparents to physical training, the affecting factors of environment and education were examined with the questionnaire survey. Within the framework of structured interviews, we had the possibility of completing the above-mentioned aspects with personal opinions, views and thoughts. Since the study concerned a lot of fields and issues, in this particular essay we wish to intro-

duce only a part of the research, detailing the issues of the *relationship of two generations: that of grandparents and grandchildren.*

**5.3. Results**

The age distribution of the responding grandparents is the following (sorted according to gender): 1.3% of grandmothers (5 out of 371 persons) are between 40 and 49, 18.6% of them (69 persons) are between 50 and 59, 52.6% (195 persons) between 60 and 69, 25.1% of them (93 persons) are between 70 and 79, while 2.4% of them (9 persons) are over 80. This means that more than half of the grandmothers are in their sixties, and more than a quarter of the sample is made up by grandmothers older than 70.

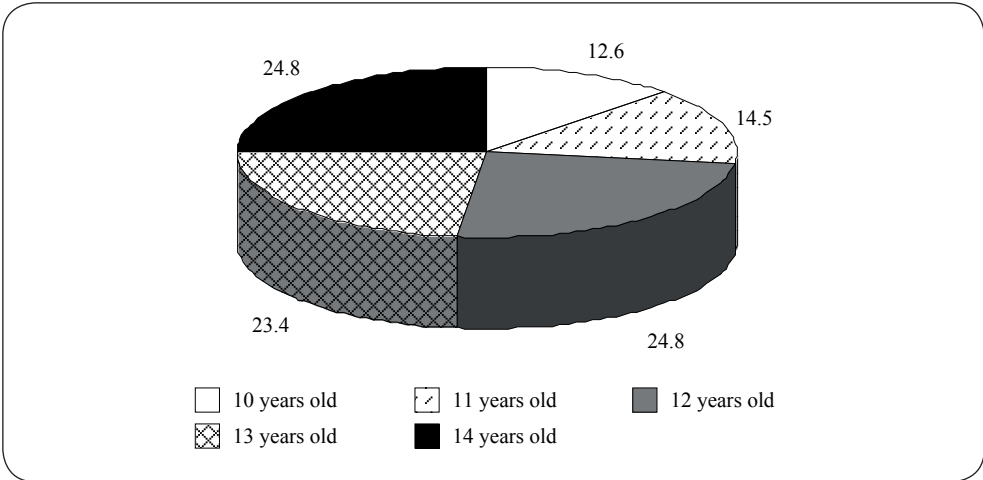
In the case of grandfathers (115 persons), the age distribution is as follows: 11.7% of them (32 persons) are between 50 and 59, 47.9% (45 persons) between 60 and 69, 37.2% (35 persons) are between 70 and 79, and 3.2% (3 persons) are over 80 years old. It can be stated that almost 50% of them are sexagenarians and more than 40% of them are older. 23 persons did not answer the question (*Figure 1*).



*Figure 1*  
Age distribution of grandmothers and grandfathers (%)



58.3% of the interviewed grandchildren are girls (294) and 41.7% of them are boys (210). 5 persons did not answer the question. The responding grandchildren are primary school pupils between 5<sup>th</sup> and 8<sup>th</sup> grade. 12.6% of them are 10 years old, 14.5% are 11, 24.8% are 12 years old, while 23.4% of them are 13 and 24.8% are 14-year-old pupils (*Figure 2*).



*Figure 2*  
Age distribution of grandchildren (%)

16.6% of grandmothers, i.e. 61 persons do a certain type of physical training or hobby requiring regular physical activity while the same is true of almost every third grandfather (26.9%; 25 persons). A similar tendency can be observed in the case of grandfathers, as most of those who do regular physical activity now did some kind of sport when they were at school (83.3%; 15 persons). This ratio is 71.4% (10 persons) among those who do physical activity only occasionally, yet 41.4% (12 persons) among those not pursuing any kind of sport. In the case of grandfathers doing regular physical activity, there is significant correlation between their doing sports in their school days or not and the persons for whom they consider it important to do exercise ( $p < 0.05$ ) (*Figure 3*).

55.2% of those not doing sport, 28.6% of those doing sport occasionally (4 persons), and 16.7% of those doing sport regularly (3 persons) did not pursue any sport at school. Those who did sport at school yet now do not do regular physical activity are four times as many (12 persons) as those who did not pursue any sport at school yet now do some kind of physical activity (3 persons). These figures point to the fact that it is more characteristic to change a way of life rich in physical exercise established in childhood to a less active lifestyle than the other way around.

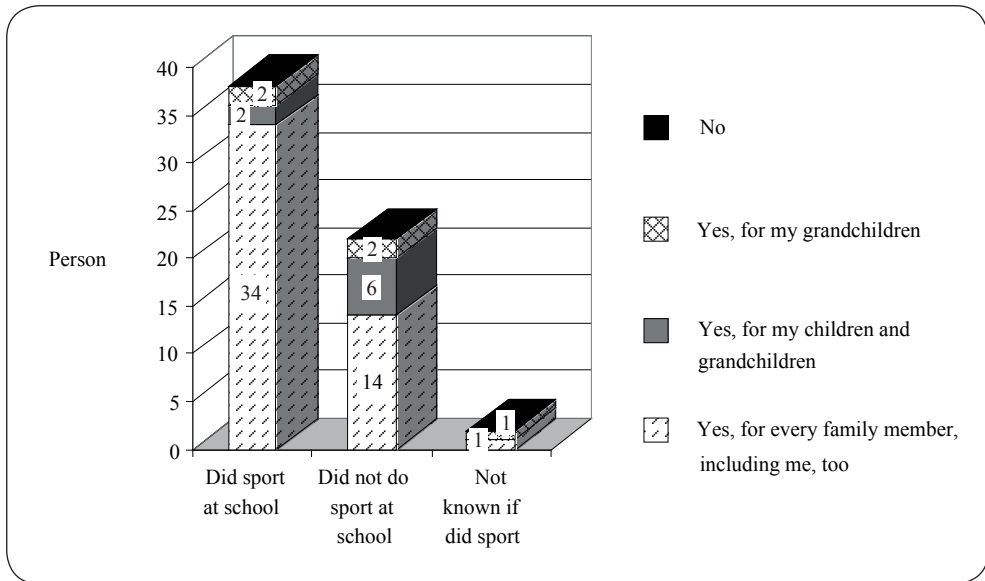


Figure 3

Sports habits of grandfathers and the way they judge the importance of physical training (%)

In the light of the results, the hypothesis that the number of all our habits created and activities pursued during our lifetime does not increase in old age, on the contrary, in most cases, certain activities are done less frequently, has been proven. Such occurrences as serious illnesses in the life of the individual may help to realise what health-protecting activities had been neglected earlier in life. This realisation can generate a change in our lifestyle, even in old age. The significance of the habits we developed in our child- and adulthood can be appreciated and it explains why those who had not done regular physical activity in their former periods of life find it difficult to change the old habits and take up something new. However, it is good news that there are a few among the respondents who have changed their habits of child- and adulthood and *integrated regular physical activity into their way of life*. They justified it with the following:

*'I did not do a lot of sport in my childhood since family circumstances did not allow me to do so. But later, at the age of 25, after a recovery from an accident, I realised the beneficial effect of swimming and I have come to like it by now and do it whenever I have time for it'* (grandfather respondent 257/D).

*'I grew up in the country, where we ran, played, rode our bicycles in the fields, sometimes even instead of learning, which was fun, really. Then I got married and we had our children, I spent a lot of time doing the housework rather than doing any sport, I watched sports on TV at most. When the children started school, I started to work*

*because we needed the money for the children's education and we started building our house. The people I was working with at the time got me to go with them to the swimming pool. First I did not want to go, but then I talked to my GP and he suggested it, too. As I always did office work, very soon I had problems with my back and spine, I developed scoliosis. This is how I started swimming. I tried doing yoga as well, but I did not like it so I gave it up soon. Because of my build it is rather exhausting for me to do exercise. After my husband's death I exchanged the flat and moved to Miskolc. I did not give up swimming, I go to the swimming pool with my friends several times a week, it is not so far. Besides, when my grandchildren come to me for the weekend and the weather is nice, we often go hiking to the Bükk mountains'* (grandmother respondent 391/D).

From the data shown above it can be seen that in the case of the interviewed older family members, regular physical or sporting activities have not been incorporated into their lives, for even 50 to 60 years ago, in their childhood, they were not preferred activities. Furthermore, the economic, social and technological changes that have occurred since then have generated the possibility of complementing a sedentary way of life with physical training. It does not mean that the elderly would not need regular physical activity, as it can be a significant factor of improving the quality of their lives, starting at any age, but it is a lot more difficult for them to create a kind of inner demand since among the activities of their childhood and youth, regular physical training had a less dominant role.

On the other hand, grandchildren do regular physical training not only within the framework of everyday PE lessons but they can also choose from several leisure and competitive sport activities. Nowadays, as a result of our sedentary way of life, pursuing sports has become more appreciated. We use a certain type of technical equipment for almost every task, which makes it easier to complete it but at the same time we can lose the possibility of activating our body using our physical strength. The issue of physical inactivity is one of the most problematic ones and it is difficult to cure since the sedentary way of life has a negative influence on other factors of our quality of life, besides the physical-mental problems.

22.3% (113 persons) of the interviewed grandchildren of our survey claimed not to do any regular physical training, yet 77.7% of the respondents (396 persons) go to sports clubs to do some sports as members or with their families and friends. Concerning the frequency of the activity, it can be stated that only 204 persons (40%) do regular exercise (at least three times a week) of those declaring themselves to be sportsmen. It is welcome that nearly 78% of the respondents do exercise on a weekly basis, but on the other hand, it is a bit disappointing that only 40% of them do sport activities regularly enough. If one does exercise every day, later it may become a fundamental part of their lifestyle. Yet if physical activity is not regular and intensive enough in childhood, there is not much to expect when getting older.

The frequency of children, parents, and grandparents doing sport was examined by a three-dimensional cross table. Respondents were divided into three categories on the basis of the frequency of doing sport (both for mothers and fathers) and the data of more than 400 families were compared this way.

Regarding the three generations, it can be stated that in the case of 10 children out of 443 the mother and the respondent grandparent do physical exercise regularly. Examining the responses of fathers, this number is 9 out of 405.

Significant correlation can be found only in the case of parents not doing sport, as among them the number of grandparents and children not doing regular or occasional exercise is significantly higher.

*'Doing sports in the family definitely strengthens the feeling of belonging in children. Common experience is necessary for each child, as they spend most of their day apart from their family. Children are at school or in kindergarten, and their parents work'* (grandmother respondent 172/D).

*'I think our body and mind needs sport, mostly regular sport. I don't know how my daughter thinks about it, she says doing sport is simply about vanity. Rubbish! It is crucial and vital for our life. If we want to live a healthy, active life for a long time, we should exercise'* (grandmother respondent 320/D).

*'When I'm at my grandparents' in the summer, we often go to the fields by bike, and very often we compete with granddad. He taught me how to swim, and we walk a lot in the village. He knows everybody there and proudly tells people how good I am at volleyball. I really like that, and I have shown him several times how to use the volleyball itself'* (12-year-old girl respondent 538/A).

Our study focuses on the relationship of grandparents and grandchildren to sport and what value-transmitting role it can have for them. The question might arise how those grandparents think about the role and place of sport and the function it has in the lives of their families, their children and grandchildren and in their own who are inactive in terms of physical training.

Similarly to parents, there is significant difference in the case of grandparents in terms of how regularly they do sport and for whom they find doing regular exercise to be important: for each family member, children and grandchildren, only grandchildren or none of them.

Among grandmothers and grandfathers, the highest rate is of those who consider regular physical exercise crucial for all three generations. However, among grandmothers, those who think that doing sport is necessary only for their children and grandchildren represent a higher ratio.

We also wanted to answer the question how sport influenced the grandchildren's performance and characteristics according to grandparents involved in the survey. In the categories of healthy lifestyle (77.7%), performance, achievement, respect of work (69.9%), honesty and respectability (68.4%), confidence, proper self-assessment (68.4%), nearly 70% of the respondents said that the sport activity had a significant or very strong effect on their grandchildren.

When examining the influence of sports on cooperation with peers (67.7%), values (64.3%), and behaviour (62.8%), the ratio of such respondents is over 60%. According to more than half of the respondents, the diligence of their grandchildren in learning (53.1%) and their time management (52.5%) were significantly or very strongly influenced by sport (*Figure 4*).

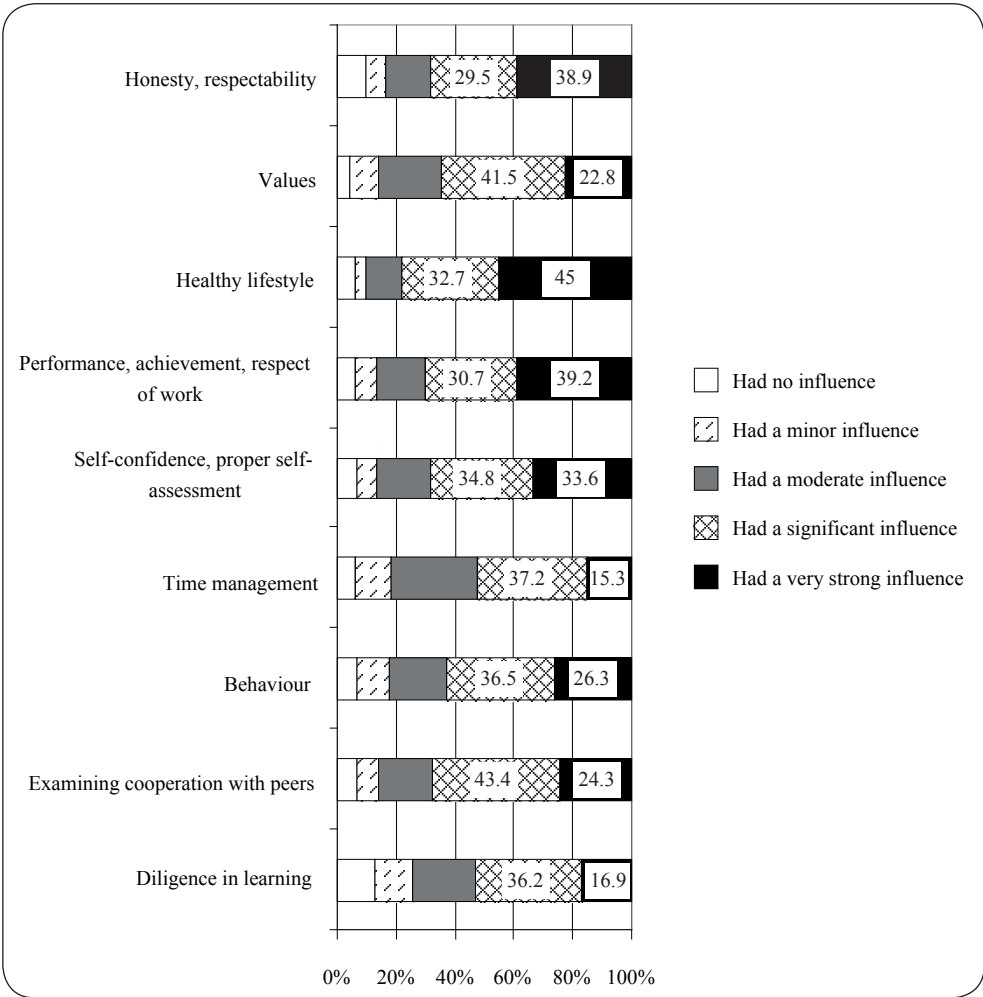


Figure 4  
The effect of sport on grandchildren's performance according to grandparents

In the light of the results it can be stated that most grandparents attribute a distinguished role to their grandchildren's relationship to sport, and even if they cannot do sports together with their grandchildren, they can give verbal support and behave in a supportive, affectionate way.

*'Though we couldn't do sport together with them, in other fields of life we have always tried to encourage them to be honest, to respect work and behave properly'* (grandmother respondent 53/D).

*I don't interfere in my grandchildren's lives or sport activities any longer. If they do it with pleasure and I can see how much they enjoy dancing, I am as happy as they are. We are zealous to clap for them. I think it's mostly the parents who have the possibility to interfere' (grandmother respondent 308/D).*

*I think that besides material well-being they need the sense of achievement to become healthy and satisfied adults. The struggle for achievements and success can teach children really well how to respect work' (grandmother respondent 172/D).*

*I think everybody should pursue a sport as long as they are able to do it and like it. To my mind it can be really difficult for adults to find time for regular exercise besides their work. My grandmother says she has pain all over her body, she finds it good if she doesn't have to do any exercise, but she always encourages me to do sports as often as I can, so that I wouldn't be like her' (12-year-old girl respondent 391/A).*

Another form of sport-related support from grandparents is when they cheer at grandchildren's competitions or help the parents to go with grandchildren to trainings. This kind of assistance can provide several opportunities for grandparents to help form their grandchildren's personality, talk about the events of everyday life, pass on the values of their own life.

Most often it is the grandmother (the mother of the child's mother) who goes with the grandchild to the trainings and competitions (40.5%, 60 persons), with granies from the father's side this ratio is 16.2% (24 persons). From the aspect of the interaction of value mediation it is a crucial factor. 14.2% (21 persons) of the learners doing sport regularly or occasionally are escorted by the parents of their mother, whereas 10.8% (16 persons) by the parents of their father. The number of grandfathers from the mother's side who escort their grandchildren to trainings or competitions is 18 persons (12.2%), from the father's side, 7 persons (4.7%). Two respondents (1.4%) marked other answers, i.e., they are escorted by maternal and paternal grandparents together. It can be stated that this kind of assistance of the grandparents is a communications area, a certain interaction necessary for both parties which can strengthen the commitment to physical exercise.

*The most important would be to live closer to my grandchildren. Then I could take part in their everyday life more actively. For example, I could go with them to trainings, competitions to have more shared experience' (grandmother respondent 172/D).*

*I think the personal example that grandmother does regular physical exercise and whenever they ask her she's ready to be in Eger within the shortest time to be there when she's needed, that can be an example to be followed' (grandmother respondent 308/D).*

*My grandfather is rather old now, he is not able to do sport, but we go together to the trainings, whenever he can, he comes with me. I like it because this is the time we can talk about sport, friends, school. It's good to be with him' (10-year-old boy respondent 511/A).*

## 6. Summary

The novelty of the study is that the assistance and role of grandparents in education has not been examined before. We were able to prove an impact system according to which grandparents have a crucial role in today's Hungarian family structure and in the complicated and difficult employment scheme of the parents.

Our study proves it evidently that according to the respondents in the relationship of grandparents and grandchildren, the stress is on the quality of time spent together, i.e. on its content and emotional values. The key drivers of their relationship are love and respect.

Besides being together, the activities and games done together, the grandparents can pass on a lot of activities and thoughts to their grandchildren, ones they may not encounter at home or at school. The child can become familiar with the past, the family events and the lives of the elders genuinely only from this source. On the basis of these activities they can create a strong spiritual connection which is a real support for both of them.

Setting an example is important in almost every field of life, including the issues of a healthy lifestyle and the attitude to physical training. Our study reveals that supportive grandparental behaviour can be the basis of activity and activating. If the members of the old generation do not pursue sport any longer, the revival of old memories, family sport activities or escorting grandchildren to trainings and competitions can be supportive for the child, too. The leisure activities done together – hiking, cycling, swimming – can become an unforgettable experience for the younger generation, the aim of which is not only to maintain the body but also to form the soul. Today's younger generations also need the unconditional love given only by grandparents to their grandchildren.

## References

- AARNIO, M., T. WINTER, U. KUJALA & J. KAPRIO (2002) 'Associations of Health Related Behaviour, Social Relationships, and Health Status with Persistent Physical Activity and Inactivity: A Study of Finnish Adolescent Twins', *British Journal of Sports Medicine* 36, 360–64.
- BENKŐ, ZS. (2000) 'A családok életmódját meghatározó tényezők', *Szenvedélybetegségek* 8:1 (Jan) 54–57.
- BIDDLE, S.H., K.R. FOX & S.H. BOUTCHER, eds. (2000) *Physical Activity and Psychological Well-being* (London: Routledge).
- BIDDLE, S.J.H., T. GORELY & D.J. STENSEL (2004) 'Health-Enhancing Physical Activity and Sedentary Behaviour in Children and Adolescents', *Journal of Sports Sciences* 22, 679–701.
- BOWKER, A. (2006) 'The Relationship between Sports Participation and Self-Esteem During Early Adolescence', *Canadian Journal of Behavioural Science* 38:3 (July) 214–29.
- BURKE, V., R.A.K. MILLIGAN, L.J. BEILIN, D. DUNBAR, M. SPENCER, E. BALDE & M.P. GRACEY (1997) 'Clustering of Health-Related Behaviors Among 18-Year-Old Australians', *Preventive Medicine* 26, 724–33.

- FÖLDESINÉ SZABÓ, GY., A. GÁL & T. DÓCZI (2010) *Sportszociológia* (Budapest: Semmelweis Egyetem).
- GÉMES, K. (2008) 'Sport mint esély' in M. KOPP, ed., *Magyar lelkiállapot 2008* (Budapest: Semmelweis Kiadó) 529–37.
- GLEESON, M. (2007) 'Immune Function in Sport and Exercise', *Journal of Applied Physiology* 103, 693–99.
- HABLICSEK, L. (1997) 'A család kialakulása, a családformák történeti változásai' in I. TARSOLY, ed., *Magyarország a XX. században*, 5 vols. (Szekszárd: Babits) 2:187–204.
- KOPP, M. & Á. SKRABSKI (2001) 'Magatartás és család', *Magyar Bioetikai Szemle* 7:4 (Oct) 1–25.
- Központi Statisztikai Hivatal (2013) 'Munkaerő-piaci folyamatok, 2013. I. félév', *Statisztikai Tükör* 7:64 (11 Sept) retrieved 19 Nov 2013 from <http://www.ksh.hu/docs/hun/xftp/idoszaki/mpf/mpf1306.pdf>.
- KUIJSTEN, A.C. (1996) 'Changing Family Patterns in Europe: A Case of Divergence?' *European Journal of Population* 12:2 (June) 115–43.
- KULL, M. (2002) 'The Relationships between Physical Activity, Health Status and Psychological Well-Being of Fertility Aged Women', *Scandinavian Journal of Medicine and Science in Sports* 12:4 (Aug) 241–47.
- NORTH, T.C., P. MCCULLAGH & Z.V. TRAN (1990) 'Effect of Exercise on Depression', *Exercise and Sport Sciences Reviews* 18, 379–415.
- OKANO, G. (2003) 'Leisure Time Physical Activity as a Determinant of Self-Perceived Health and Fitness in Middle Aged Male Employees', *Journal of Occupational Health* 45, 286–92.
- PÁL, K., K. CSÁSZÁR, A. HUSZÁR & J. BOGNÁR (2005) 'A testnevelés szerepe az egészségtudatos magatartás kialakításában', *Új Pedagógiai Szemle* 6, 25–32.
- PAMPEL, F.C. & J. AGUILAR (2008) 'Changes in Youth Smoking, 1976–2002: A Time-Series Analysis', *Youth & Society* 39, 453–80.
- PASTOR, Y., I. BALAGUER, D. PONS & M. GARCÍA-MERITA (2003) 'Testing Direct and Indirect Effects of Sports Participation on Perceived Health in Spanish Adolescents between 15 and 18 Years of Age', *Journal of Adolescence* 26, 717–30.
- PETRUZZELLO, S.J., D.M. LANDERS, B.D. HATFIELD, K.A. KUBITZ & W. SALAZAR (1991) 'A Metaanalysis on the Anxiety-Reducing Effects of Acute and Chronic Exercise: Outcomes and Mechanisms', *Sports Medicine* 11, 143–82.
- PIKÓ, B. (2002) *A deviáns magatartás szociológiai alapjai és megjelenési formái a modern társadalomban* (Szeged: JATEPress).
- PLUHÁR, ZS., N. KERESZTES & B. PIKÓ (2003) 'A rendszeres fizikai aktivitás és a pszichoszomatikus tünetek kapcsolata általános iskolások körében', *Sportorvosi Szemle* 4, 43–47.
- POORTINGA, W. (2006) 'Social Relations or Social Capital? Individual and Community Health Effects of Bonding Social Capital', *Social Science & Medicine* 63, 255–70.
- RÁCZ, L. (2005) 'Érték és ifjúság' in B. PIKÓ, ed., *Ifjúság, káros szenvedélyek és egészség a modern társadalomban* (Budapest: L'Harmattan) 58–86.
- ROBERT, J.N. & B. FRANKLIN (2002) 'Promoting and Prescribing Exercise for the Elderly', *American Family Physician* 65, 419–27.
- SACKER, A. (2006) 'Do Adolescent Leisure-Time Physical Activities Foster Health and Well-Being in Adulthood? Evidence from Two British Birth Cohorts', *European Journal of Public Health* 16, 331–35.
- SALBE, A.D., WEYER, C. & I. HARPER (2002) 'Assessing Risk Factors for Obesity between Childhood and Adolescence II.: Energy Metabolism and Physical Activity', *Pediatrics* 110, 307–14.



- STEPTOE, A. & N. BUTLER (1996) 'Sports Participation and Emotional Well-Being in Adolescents', *Lancet* 347, 1789–92.
- SZRETYKÓ, GY. (2002) 'Válságban van-e a jelenlegi családmodell? Esettanulmányok' in Gy. SZRETYKÓ, ed., *Globalizáció és család: A családpszichológia új kihívásai* (Pécs: Comenius) 38–52.
- TWISK, J.W.R., H.C.G. KEMPER & W. van MECHELEN (2002) 'Prediction of Cardiovascular Disease Risk Factors Later in Life by Physical Activity and Physical Fitness in Youth: General Comments and Conclusions', *International Journal of Sports Medicine* 23, 44–49.
- UNGER, J.B., A. RITT-OLSON, L. TERAN, T. HUANG, B.R. HOFFMAN & P. PALMER (2002) 'Cultural Values and Substance Use in a Multiethnic Sample of California Adolescents', *Addiction Research & Theory* 10, 257–79.