The ABC’s of Juice for Your Kids

Luanne Hughes, MS, RD: FCS Educator, Gloucester County

Does this sound familiar? You’re packing up the kids for a fast trip to the mall, the market or the park. Or, maybe they’re just playing in the house or the yard. They need the essentials…toys, diapers, stroller, baby wipes, snacks – and, last but certainly not least, a sippy cup or bottle filled with juice.

What’s wrong with this picture? Believe it or not, it may be the juice. More and more health professionals are re-thinking the value of juice in the diets of young children (ages 1-3 years). Many health professionals now recommend that parents cut back considerably on the amount of juice they give their children. Some question whether children need juice at all. Yet, some still value the contribution juice makes to a child’s diet. So, what’s a parent to do? Let’s take a look at some interesting facts and some rules of thumb that you can apply to ensure that you use juice wisely:

Cause for Concern

The growing popularity of fruit juice in children’s diets has prompted researchers to look at the effect that consuming large amounts of juice has on children’s weight and growth. Several small studies have shown that consumption of more than 12 ounces of fruit juice per day by young children is associated with short stature and obesity.

Not all health professionals agree that excessive juice consumption will have such immediate, detrimental effects.

Most do agree, however, that kids are drinking too much juice and not eating enough fruit and vegetables. Food industry reports indicate that fruit juice consumption by infants and toddlers has increased dramatically during the past decade. These reports are supported by data from the United States Department of Agriculture (USDA) that shows consumption of non-citrus juices (including grape and apple-based mixtures) rose by 280% between 1991 and 1996.

Fruit juice consumption by infants and toddlers has increased dramatically during the past decade. Meanwhile, children still fail to eat the five servings per day of fruits and vegetables recommended to help decrease the risk of chronic diseases such as heart disease and certain cancers. At a time when health officials are encouraging Americans to eat more fruits and vegetables, USDA surveys indicate that only 26% of American children eat the recommended five servings of fruits and vegetables a day. Fruit and vegetable intake among children ages 2-19 is reported to be up to four servings/day. However, 1/3 of the vegetables consumed by children is fried potatoes (French fries and potato chips) – less than ideal for reducing risk of chronic disease.

That’s cause for concern. It’s important to establish healthy eating habits early in life, for two reasons. First, children who eat more fruits and vegetables tend to grow into adults who eat more fruits and vegetables. Additionally, children who eat more fruits and vegetables tend to grow into healthier adults. This results in one important bottom line – living a healthier life by reducing risk for heart disease and cancer, two leading causes of death in the United States.

Food for Thought…

Depending on the fruits they’re made from, juices supply varying amounts of nutrients. Many juices contain little more than sugar and water. True, drinking a “good” juice is better than drinking soda and other sugar-based beverages. However, it’s no replacement for eating more fruits and vegetables.

Juices are more calorie-dense than fruit; they don’t have the fiber that is found in fruits or vegetables (important for fighting cancer and heart disease); and juices (continued on page 7.)
Top Ten Investing Lessons for the New Millennium

Patricia Q. Brennan, CFP, AFC, CHC, CFCS: FCS Educator, Morris County

In order to plan an investment strategy to fund your future, it is important to keep in mind what has worked in the past. Some of the lessons that history has taught us are clear:

Lesson 1: You must own stocks to build wealth over the long term. There has rarely been a 10-year period when stocks have not outperformed bonds and cash equivalents by a wide margin.

Lesson 2: Don’t keep too much money in cash. Cash has no place in a long-term investment program. The old thinking was to keep six months of income in the bank for emergencies. If your job is secure and/or you are a two pay-check family, consider keeping three months of expenses. Put part of it in a money market account and the rest in short term CD’s or a short-term bond fund.

Lesson 3: Rather than buying individual stocks, you might consider mutual funds. The advantages: you get professional management and instant diversification and you can get started in a broad investment program for as little as $25 per month. Your fund manager does the stock or bond picking.

Lesson 4: Diversify, Diversify, Diversify. That means not putting all your eggs in one basket. All stocks do not move in tandem. Different types of stocks (and bonds) perform differently under various conditions, so it is important to own some or all of them. When one investment zigs, the other may zag. We just never know when. Diversification is the best defense against market declines and provides stability over the short-term, while allowing the possibility of long-term growth.

Lesson 5: Remember the KISS principle (keep it simple, stupid). Buying the biggest and best blue chips or a simple stock index fund that tracks the S&P 500, along with a broadly diversified bond index fund, can be a great choice. Another option, if you’re just beginning or you can only afford to purchase one fund, is to choose a good balanced fund. A balanced fund combines both stocks and bonds in a blend as defined by the prospectus.

Lesson 6: Buy and hold for the long term. Stock markets go up and stock markets go down, but over the long term they go up more than they go down. By “long term” we mean at least five years and preferably longer (10-20 years).

Lesson 7: Reinvest dividends. Albert Einstein once said that the greatest power on earth is the power of compounding (not E=MC²). This is how you create real wealth.

Lesson 8: Periodically re-balance your assets allocation. This is a concept that is hard to get across in a one direction (up) market. Perhaps you are comfortable with a 60/40% split between stocks and bonds. However, because of the bull market, your stock portion expands to 70%. What to do? Sell stocks and buy enough bonds to bring your portfolio to your target allocation. This strategy helps you “sell high, buy low.”

Lesson 9: Use dollar-cost-averaging. This strategy takes the emotions out of investing. Taking a fixed amount automatically from your paycheck or bank account on a regular schedule (e.g., $50 once a month) and buying mutual funds may not insure you a profit or that you will make more money than if you invested it all at one time. However, it will reduce your risk.

Lesson 10: Stay with your investment program and be patient. Time is your friend. Not all markets go straight up every year. There will be lots of ups and downs, so it is important not to get scared out of the market. Accept the challenge to remain committed to these time-tested investment principles.

So how do the above investment rules relate to how you should invest in the new millennium year? First, they make us realize that there are no easy ways to beat Wall Street and that it is important to seek investments that will match our specific goals—whether it be growth, income, or safety. Second, they also make us aware that we need to be realistic about our expectations. The fall ’98 market tumble and the fact that all segments of the market are not going up this year has had a positive aspect on investors. Too many people were thinking that the market goes up 25% a year. Now they know the danger of being too optimistic. Overestimating returns over the long term can be hazardous to your health.

Reference:
**Eat Soyfoods Once a Day**

*Rita T. Wood, CFCS: FCS Educator, Burlington County*

*William J. Bamka: County Agricultural Agent, Burlington County*

Remember the proverb: “An apple a day keeps the doctor away?” Today we are saying: “A soyfood a day will help keep the doctor away.”

Researchers worldwide report findings that show eating soyfoods may offer a number of health benefits related to heart disease, osteoporosis, relief of menopause symptoms and possibly cancer. To date, more than 500 scientific studies have reported on the disease-fighting potential of soyfoods.

**Looking Into Heart Disease**

Soybeans specifically have a favorable nutrient profile to promote heart health, as well as other properties that may help lower the risk for heart disease, one of this country’s most life-threatening diseases. Soybeans provide high-quality protein, are low in saturated fat, and contain no cholesterol. They can also easily take the place of other higher fat foods, helping to cut fat and cholesterol from favorite recipes. Most importantly for heart health, they are the only food known to contain significant amounts of phytochemicals called “isoflavones.”

Chemically similar in structure to estrogen, isoflavones are, in fact, weak estrogens. The two primary isoflavones in soybeans are daidzein and genistein. As scientists learn more about the many health-enhancing properties of isoflavones, it becomes more and more clear that adding soyfoods to the diet is a smart decision.

There is considerable evidence to indicate that soy protein helps lower “bad” blood cholesterol levels (LDL cholesterol). So much so that, in October 1999, the Food and Drug Administration will allow food manufacturers to use health claims on soyfood labels concerning the role that soy protein may have in reducing the risk of coronary heart disease.

As little as 25 grams of soy protein per day may be enough to lower blood cholesterol levels. You can easily satisfy this requirement by eating ½ cup of green vegetable soybeans (16.6 grams) and 1 cup of soy beverage (6 grams) or ½ cup of tofu (8.1 grams). Or, check the “Nutrition Facts” label on your favorite soyfood product to determine the number of grams of soy protein per serving.

**Jersey Fresh Soybeans**

While driving through New Jersey, you may be passing some of our 135,000 acres of soybean plants, especially in Salem, Burlington, and Cumberland counties. The total soybean crop value for New Jersey was $26 million in 1997. This figure represents a significant portion of the estimated $66.5 million in cash receipts for field crops in New Jersey.

**A Long Reading List**

Reading the “Nutrition Facts” label on soyfoods at your local grocery store may prove to be a time-consuming task! Today, more than ever, the educated consumer recognizes the link between proper diet and healthy living. In addition, the soyfoods industry is responding enthusiastically to consumers’ hunger by creating better tasting, yet healthful foods that are more widely distributed to local groceries and markets than ever before. Soybeans, soy beverages, and tofu are just the beginning of what you’ll find when you begin looking for soyfoods to use in meal planning.

A wide array of soyfoods is available from supermarkets, natural food stores and mail order sources. It is now much easier for consumers to purchase and use soyfoods in meal planning. According to the Soyfoods Association of North America, public awareness of soyfoods has never been greater. Soyfood consumption is increasing 30% or more per year.

**Still skeptical? Don’t be!**

When many people think of soyfoods, they traditionally think of tofu or the unpleasant tasting foods of the ‘70s. Between 1970 and 1990, however, consumers’ perception of soyfoods changed considerably. What has given rise to this shift in attitude towards soyfoods? It is undoubtedly the variety of new and updated soyfoods that exist today – specialties like soy veggie burgers and hot dogs, soy yogurt and cheese, soy ice cream and soy milkshakes, to name a few.

It is important for consumers to understand exactly what they’re buying and read the “Nutrition Facts” label to assure that they purchase soyfoods with as many isoflavones as possible. Whole soybeans, tofu, soy beverage, tempeh, miso, soy flour, and textured soy protein are excellent sources of isoflavones. Soy products such as soy oil, soy sauce, and soy protein concentrate have few or no isoflavones. “Second-generation” products, such as soy hot dogs and soybased ice cream, can have much lower levels of isoflavones because they frequently contain considerable amounts of non-soy ingredients. So, whole soyfood is preferred over supplements that isolate the component of isoflavones.

**Family & Consumer Sciences Soy Program**

To further educate consumers on the health benefits of soyfoods and to show them how to incorporate soyfoods into their meal planning on a daily basis, the Family and Consumer Sciences Department of Burlington County developed a workshop called “The Soy Connection – Eating Healthy: The Benefits of Soyfoods.” As a result of attending these workshops, 95% of the 121 participants

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Introduction to Managed Care

Sylvia Ridlen, Ph.D., Extension Specialist, Human Development

Managed care represents an important change in the way health costs are covered. The funding structure has always affected how, what, to whom, and who delivers health care services. When most of us were young, health insurance paid the bills for most services doctors and other providers submitted (called fee for service). Frankly, this provided incentive for providers to provide more, rather than fewer services, especially when there was any doubt about what was needed. The possibility of malpractice lawsuits was a further inducement to be very thorough. Since few people were aware of being harmed by unnecessary tests or procedures (though some WERE no doubt harmed), fee for service did not pose an obvious conflict between patients’ and doctors’ interests. Consensus on what constitutes the most effective treatment is largely lacking in the field of medicine, so considerable variability in practice was (and is) accepted.

The basic agreement between managed care companies and primary care doctors and other providers is that managed care companies pay doctors a lump sum for most services doctors and other providers submitted (called fee for service). Frankly, this provided incentive for providers to provide more, rather than fewer services, especially when there was any doubt about what was needed. The possibility of malpractice lawsuits was a further inducement to be very thorough. Since few people were aware of being harmed by unnecessary tests or procedures (though some WERE no doubt harmed), fee for service did not pose an obvious conflict between patients’ and doctors’ interests. Consensus on what constitutes the most effective treatment is largely lacking in the field of medicine, so considerable variability in practice was (and is) accepted.

The basic agreement between managed care companies and primary care doctors and other providers is that managed care companies pay doctors a lump sum for each person’s basic care, no matter how much care is provided. Since all care costs something, doctors’ income decreases if they provide more than a minimal level of services. Providers who are perceived to practice in “too costly” a manner may be punished with loss of income via fewer contracts with managed care companies, and/or fewer hospital affiliations. In contrast, doctors who provide less care may get bonuses.

While the harm of too much medical care was not obvious, the harm resulting from too little care can be both obvious and catastrophic for the individuals affected. Subterfuge is the fact that the incentives of managed care are changing how medicine is practiced for all of us. Doctors must bill for services, and adjust their practice patterns (what tests or referrals they routinely order, how tightly they schedule patients, etc) to the lowest common denominator. Patients with fee for service coverage are treated the same as those covered by managed care. For example, say that Company A is the lowest-paying managed care company that the doctor bills. Company A’s per person payment to the doctor is based on a calculation that most appointments will last 7 minutes. Patients of Company B are likely to be scheduled for the same length of appointment, even though Company B’s payment is based on a 10-minute average appointment.

It is very difficult or impossible for a sick person to assess the quality of care received, or the factors driving recommendations or decisions. When providing care negatively affects doctors’ incomes and managed care companies’ profits, we may be asking too much to expect even the most professional and dedicated of them to make decisions that are purely based on patients’ needs.

I believe that sick people need family or friends who will serve as personal health care advocates. Such advocates should accompany patients, ask questions, inform themselves about relevant issues and options, and provide an assertive presence at every opportunity.

Most doctors care about their patients, and many try to minimize the effect of managed care incentives on their practice. However, they are human, and subject to influence by rewards and punishments like the rest of us. Managed care companies have designed their incentives and disincentives with full knowledge of doctors’ human nature.

Eat Soy Foods Once a Day

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Gained knowledge about the nutritional value of soyfoods. A follow-up survey indicated that 92% of the respondents are now purchasing soyfoods; 74% are including soyfoods in their diets on a regular basis; and 44% have increased their original soyfood intake. According to our survey, the most commonly used soyfoods are tofu and soymilk.

So enjoy soy! With the huge variety of soyfoods available, it is easy to obtain a daily serving of soy and reap the many health benefits. One serving of soyfood equals:

◆ 2 tablespoons of soynut butter or miso
◆ ½ cup of soynuts or soy flour
◆ ½ cup of green vegetable (or dried) soybeans, tempeh, tofu, or textured soy protein (TSP)
◆ 1 cup of soy beverage (soymilk)

At breakfast, pour soymilk over hot or cold cereal, or create your own delicious soyshake. A veggie burger or grilled soy cheese on soy bread makes a great lunch. Sweet green vegetable soybeans (a.k.a. edamame) may be eaten as a side dish, added to a salad or soup, or mixed with other vegetables. Try tempeh stir-fry for dinner and tofu cheesecake for dessert. Many traditional comfort foods, such as chili, hot chocolate and lasagna can be made by substituting with soyfoods. You will soon discover that soy can fit easily into your meal plans, from appetizers to desserts!

For more information, contact your county FCS educator or call 1-800-TALKSOY.

References:


Community Gardening: An Old-time Solution That Still Works

Laura M. McCullough, CPM, MA: FCS Program Associate, Atlantic County

Let’s start with a scenario: you’re hungry and there’s no grocery store in town. You don’t know where your next meal’s coming from. Let’s look at the other end of this picture: A gourmet dinner is on the table; you have a fully stocked kitchen; you have a good job and plenty of money. The first part could be called “food insecurity” and the second sounds like “food security,” doesn’t it?

But it’s not that simple. It’s not just the poor who don’t have access to fresh food. It may be all of us. Many families who do have money don’t eat enough fresh fruits and vegetables, which contributes to a growing number of problems from overweight kids to heart disease, cancer, and diabetes. And, there’s another thing to consider. Predictions about shifting global economics and demographics suggest that, in the future, America will need to sell large quantities of food to other countries (such as China). This could cause food costs in the US to rise.

At the same time, farmland and small farm families are being lost (in New Jersey and throughout the country) at a shocking rate. In addition, as farming comes more and more under the control of big corporations, we’re losing the homegrown knowledge of how to work the land, how to plant, and when to harvest. Think about it. How far are you away from the agricultural and farming roots we all share? One generation? Two? Three? If, tomorrow, you needed to support your family by producing your own food, could you?

The Community Gardening Movement

What can be done? Twice in this century, Americans have dealt with major food crises and people responded with community gardening movements: the Liberty Gardens and Victory gardens of the two World Wars. Community gardens feed people, and eating more fresh vegetables is important for a healthy diet. However, community gardens do much more: they preserve open spaces while also getting people to work together outdoors. They’re beautiful, and they increase pride in the neighborhood and have been shown to reduce crime. They can also be used as “outdoor classrooms” to teach kids – not just how to grow food, but also in leadership skills and civic pride. They’re a place where elders in the community transmit knowledge to the next generation, too. Finally, they can also bring in money through sales of produce or flowers.

Rutgers Cooperative Extension has the resources to support all of the above activities. They can help a group or a community find land, test the soil, develop a plan to start a community or market garden, and work with the community through the whole process. RCE has professionals and the expertise to help with all aspects of gardening, while also understanding human potential and how to harness it.

A community garden is a great way to build on a community’s strengths — the people and the knowledge those people already have — while also feeding people and promoting individual and community food security.

Keep in mind that community gardening is only a temporary measure and has limited effect unless a concerted, collaborative effort is made. An effort that connects the community to its educational, governmental, non-profit, and faith-based agencies and entities, as well as to the private sector. In other words, we need to institutionalize the notion of community gardening and urban farming.

Creating an ACRES Approach

In Atlantic County, we are attempting to do this by evaluating our inter-agency, cross-sector assets and by leveraging resources. The process began when Rutgers received a Food Stamp Nutrition Education Program (FS-NEP) grant. We decided to address nutrition from a food systems approach and to work on community food security issues, as well as other issues like community empowerment, environmental issues, and youth leadership training.

Our program evolved into ACRES (Atlantic Community Resource Endeavors for Sustainability). ACRES flourishes on cross-sector collaborations with non-profits, municipal, and county governments, K-12 schools, various public and private housing agencies, public authorities, local colleges, and private industry which is largely casinos and agriculture.

The “budget” for anything not covered in the main grant is spread around through the various partners, and much of the staffing comes either from college interns or from portions of time allocated from employees of the various partnering organizations. It’s a large project to manage because it is collaboration-based and the normal lines of hierarchy-based accountability do not exist.

Key ACRES projects and activities include nutrition education, youth leadership development, urban greening, open space and farmland preservation, eco-psychology, intergenerational and multigenerational programming, increased food access, horticultural therapy, and job skills. Also, we do them all on the “green stage” of community gardening and urban farming. The only way we’ve been able to do this (because it requires multiple expertise) is through collaborative efforts.

For example, one of our 20 projects is a community garden at a community food bank. A quarter acre is being developed and multiple groups will experience this garden as an “outdoor classroom.” We are training incarcerated youth in basic horticulture who are then training persons with Down’s syndrome, head trauma and mental illness. To train these youths (while making the nutrition education transparent) requires case workers from several sending agencies, Cooperative Extension’s 4-H youth leadership people, and the Herb and Botanical Alliance. The soil and labor to build the deep-dug bed garden system came from the Atlantic County Utilities Authority; the seeds from a non-profit; a greenhouse was donated by another agency; the tools were purchased by another group because some of their clientele participate. Everybody who steps into the “outdoor classroom” gets nutrition education in one form or another (including the staff, which we see as a major

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The Second Time Around: When Grandparents Become Parents

Marilou Rochford, MA: FCS Educator, Cape May County
Elizabeth Kaminsky, MA: FCS Program Associate, Cape May County

One of life’s greatest joys is that of becoming a grandparent. Ask around and you will hear countless stories about the pleasure grandparents receive from loving, caring for and even spoiling their grandchildren. Listen carefully, and you may hear more stories about how grandparents’ roles have changed. Many grandparents today find that they must step in and serve as parents for their grandchildren when the child’s parent is unable or unwilling to do so.

Why are grandparents acting as parents? Most resume a parenting role as a result of problems related to the child’s parent. Divorce, substance abuse, child abuse and/or neglect, teenage pregnancy, abandonment, HIV/AIDS, unemployment, incarceration and mental health problems are just some of the reasons why grandparents are stepping in to care for their grandchildren. Grandparents have added pressures, as they continue to be concerned for their own child while trying to make a good life for their grandchildren, as well.

Grandparents as Parents

This role of parenting “the second time around” brings with it a unique set of challenges and joys that are facing today’s grandparents with increased frequency. For example, in 1980, 2.3 million, or 4% of children under 18, were living in a grandparents’ home. By 1996, that number had almost doubled to four million, or 6% of children who are living in this situation. Over one-third of these children, or 1.4 million, are being raised solely by their grandparents.

These increased numbers bring challenges not only to more and more grandparents, but also to professionals in social service agencies, schools, and other organizations. To shed some light on this important and growing issue, five sites in New Jersey participated in a national satellite video conference, Grandparents Raising Grandchildren: Implications for Professionals, held on January 12th, Rutgers Cooperative Extension, Department of Family and Consumer Sciences faculty hosted and facilitated these sites in Warren, Passaic, Monmouth, Atlantic, and Cape May Counties. The videoconference originated from the University of Wisconsin. There were almost 300 sites participating across the country.

Getting Personal

At some sites, grandparents who attended shared their personal stories, which helped others to further understand the impact of this issue. Their comments included:

“My friends are all going on a bus trip to a show at the casinos. I can’t go, because I have to get my grandchildren off the school bus in the afternoon.”

“We had a small retirement savings, but our granddaughter needed braces.”

“My grandchild has no friends and neither do I.”

“I’m 70 years old and I’m sorry, but body piercing is out of the question. My granddaughter needs to change.”

“Caring for my grandkids is expensive and nothing that I ever planned for.”

“My wife and I have totally different ideas of handling this grandchild. This makes more trouble.”

The issue impacts grandchildren, as well. One site facilitator reached out to some children being raised by their grandparents. These children shared the following comments:

“I am so embarrassed because I live with my grandmother. I feel alone and depressed. The TV is too loud and she always watches Jeopardy. Her music is so old-fashioned. It’s so gross when she leaves her teeth out on the counter.”

“I don’t have any friends.”

“At night, I check to see if my grandfather is still breathing.”

With all of the difficulties, both grandparents and grandchildren stated great love and appreciation for each other, and a willingness to do whatever was necessary to make a good life together.

While no one has all the answers, the videoconference served as a vehicle to bring people together to begin to ask the right questions. Sharing ideas about community resources, available information, and educational opportunities have
emerged as positive first steps for providing support for grandparents raising grandchildren. Core groups of people who are interested in the topic are working together to address legal, financial, and public policy issues. Rutgers Cooperative Extension, along with the other conference sponsors, will stay involved in the issue, bringing research, education, and information to support grandparents in their role as parents the second time around.

Call your county Family and Consumer Sciences Department to find out more on this emerging topic, or to get information and support if you are a grandparent raising a grandchild.

References:


The ABC’s of Juice for Your Kids

(continued from page 1.)

can be more costly per serving than fruits and vegetables. Use the apple as an example. One apple has 81 calories and 4 grams of fiber. An 8-ounce glass of apple juice has 117 calories and 0 grams of fiber.

Some juices — like grape or cranberry — are good sources of phytochemicals. Phytochemicals appear to be important in our battles against heart disease and cancer or, in the cranberry’s case, fighting urinary tract infections. But...you’ll find the same phytochemicals in fruits and vegetables — along with less sugar, fewer calories and some fiber. Pound-for-pound, dollar-for-dollar, fruits and vegetables pack more of a nutrition a “punch” than juices.

Juice’s Strongest Point

Many juices are good sources of vitamin C, and many infants and young children rely on juice as their main source of this valuable nutrient. Vitamin C is important for growing children; it helps strengthen their developing immune systems. Experts advise that you include vitamin C-rich fruits and vegetables in your child’s diet and, if you buy juice, choose one that supplies vitamin C. The best choices include orange, grapefruit, and other citrus juices. Or, read labels and select a non-citrus juice that’s fortified with vitamin C.

The Bottom Line – Choosing Juice for Your Child

After age one, your child should be eating five or more servings of fruits and vegetables each day. It’s not as difficult as you may think. Children 1-3 years of age need the same variety of foods as older children and adults, but with fewer calories — and smaller servings. A good estimate of a serving for a 1- to 3-year old is about 2/3 of what counts as a regular Food Guide Pyramid serving (or about one tablespoon of fruit or vegetables for each year of your child’s life).

Regular Food Guide Pyramid Serving Sizes

Fruit:
· 1 piece of fruit or a melon wedge
· 6 ounces of juice
· ½ cup of canned fruit
· ¼ cup of dried fruit

Vegetables:
· ½ cup chopped raw or cooked vegetables
· 1 cup raw, leafy vegetables

While all fruits and vegetables are nutritious, a few have something extra — more vitamins, minerals or fiber — that’s worth recommending. And some juices are more nutritious than others, too. Use this list of “top picks” to guide your choices.

Vegetables: broccoli, brussels sprouts, carrots, dark green lettuce, green peas, green peppers, lima beans, potato, with skin, spinach, sweet potato, tomato, winter squash

Fruits: apricots, blueberries, cantaloupe, grapefruit, kiwi mango, orange, papaya, peaches, strawberries, watermelon

Juices: calcium-fortified orange juice, orange juice, grapefruit juice, prune juice, pineapple juice

Ultimately, one serving of juice each day is more than enough for your child. (Remember, for 1- to 3-year olds, that’s 4 ounces.) Instead of more juice, offer your children more fruits and vegetables. If they taste really want is a cool drink, offer children more milk or water instead of more juice. Kids today need more of these, too, along with their fruits and veggies.