



Friendly Feet

Information about little feet



Infant and Child Development

An early start to a bright future

Why Strong, Straight Feet Matter

Strong, straight feet are important because they will help your child to crawl, stand, and walk correctly. Healthy foot development can prevent future problems in the feet, legs, and back. Common phase during foot development include flat feet, in/out toeing, and tip toeing.

Flat Feet

Most infants are born with flat feet. Arches form as children grow and begin to appear around 6 years of age.



Flexible flat feet typically are not a concern, and most children do not require special shoes or inserts. Shoes that fit well can help protect and support growing feet.

In-Toeing and Out-Toeing

When children first start standing and walking, their feet may turn inward (in-toeing) or outward (out-toeing). This may improve on its own after a few months of weight-bearing and as children's bones grow, rotate, and straighten into position.

Tiptoeing



Children may begin walking around 12 to 15 months of age. Sometimes children start walking on their tiptoes and may stop after 3–6 months of learning to walk. Tiptoeing tends to disappear by 5 years of age.

When to be Concerned

Around 18 months of age, if you notice the following with your child, speak to a health care professional:

- Primarily walks on their toes.
- Avoids touching different textures with their feet (grass or sand).
- Feet do not straighten after six months of practicing walking.
- Ankles seem tight, stiff, or hard to move.
- Motor skills concerns (running, climbing, or jumping).
- Falls often or seems clumsy.
- Has pain, limps, or one side of their legs or feet looks different from the other.

If you are worried about how your child walks or stands at any time, consult with a Health Care Provider.



Skip the Socks

If it is warm enough, let your child go barefoot. Socks can limit foot movement and make it harder for your child to balance when they are learning to walk. Socks can also be slippery on smooth floors. If your child wears footed sleepers, make sure they are not too tight so their feet can move freely and not too loose to avoid tripping.

Why Barefoot is Best

Learning to stand and walk while barefoot is great for your child because it:

- Gives their feet important sensory feedback when exposed to different textures such as sand, grass, and carpet.
- Strengthens foot muscles.
- Improves balance.



Encouraged barefoot play indoors and outdoors (when safe) because it supports natural foot development.

When are Shoes Necessary?

All children require shoes for foot protection when outdoors. Some children may need shoes for extra support and stability. If you are concerned about your child's stability, speak to a health care professional.

What Makes a Good Shoes?

When choosing shoes, look for these key features:

- **Shock-Absorbing** - Helps reduce stress on your joints by cushioning each step.
- **Supportive Arch** - Provides stability and helps prevent foot strain or injury.
- **Firm Heel Support** - Keeps your heel in place for better alignment and comfort.
- **Flexible Forefoot** - The toe portion of the shoe should be flexible.
- **No twisting** - You should not be able to “wring” the shoe (common with canvas shoes).
- **Correct size** - Leave about a finger’s width between the longest toe and the front of the shoe and check both length and width for a snug fit.
- **Avoid oversized shoes** - Extra space can make feet roll inside the shoe.
- **Try before buying** - Red marks, ridges, or blisters mean the shoe does not fit properly.



Shoe Inserts and Orthotics

Sometimes children need shoe inserts or orthotics. This helps position and align the foot properly and can prevent problems like foot deformities or overstretching. Speak to a health care professional before using inserts or orthotics in children's shoes.

Sitting Positions Support Standing

Children benefit from sitting in a variety of positions during play and daily routines. Changing how your child sits builds muscle, balance, and control that children need for crawling, standing, and walking.

Long Sitting

Legs straight out in front.



Criss-Cross

Legs crossed like a pretzel.



Ring Sitting

Legs bent in a circle with feet in front.





Bench Sitting

Sitting on a low stool with feet flat on the floor.

Side Sitting

Sitting on a low stool with feet flat on the floor.



W-Sitting

When a child sits on the floor with their knees bent in front and their feet behind.

If your child sits in the W-position only and avoids other positions like cross-legged or side-sitting, encourage different sitting positions often and speak to a health care provider.

Who Can Help?

- **Infant and Child Development**
<https://durham.ca/infantdevelopment>
- **Grandview Kids**
<https://grandviewkids.ca/about-us/>
- **Health Care Provider**
<https://www.ontario.ca/page/find-family-doctor-or-nurse-practitioner>
- **College of Physiotherapists Ontario**
<https://collegept.org/>
- **Orthotics Prosthetics Canada**
<https://opcanada.ca/search/custom.asp?id=7472>
- **Ontario Association of Osteopathic**
<https://osteopathyontario.org/site/findapractitioner>
- **Ontario Podiatric Medical Association**
<https://opma.wildapricot.org>

Please speak to an Infant and Child Development Consultant for further information.



HEALTH
DEPARTMENT

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Durham Health Connection Line
905-668-2020 or 1-800-841-2729

durham.ca/infantdevelopment

Dial 311 (within regional limits)

If you require this information in an accessible format, contact 1-800-841-2729

