

PEDIATRIC/BIG-KID BELT CANE

Eligibility & Use-Case Guide

This guide is intended to help professionals recognize situations in which a learner with blindness or a mobility visual impairment may benefit from evaluation for getting a Belt Cane. It is not a substitute for individualized assessment. The Belt Cane is a wearable cane that provides MVI/B learners with body-centered extended touch feedback essential to balanced, protected and informed motor skills.

Who should be considered for a Belt Cane evaluation?

The Pediatric/Big-kid Belt Cane is designed for **learners with a mobility visual impairment or blindness (MVI/B) – a visual impairment so severe it impedes visual anticipatory control needed for safe, self-reliant walking.**

It may be particularly appropriate when an MVI/B learner needs more effective tactile information during movement but has **limited to no ability to use a handheld mobility tool effectively or consistently most of the day.**

CONSIDER A BELT CANE EVALUATION WHEN A LEARNER WITH BLINDNESS OR A MOBILITY VISUAL IMPAIRMENT WHO:

Is developing walking skills

- Is learning to stand, take steps, or walk independently
- Has begun walking but remains largely idle unless an adult provides motivation or guidance
- Walks only in familiar or highly supported environments
- Is not progressing toward independent walking despite opportunities and encouragement to practice

Relies on physical guidance

- Frequently holds an adult's hand to walk
- Reaches for an adult, wall, furniture, or other support
- Pulls toward or turns into the person guiding them
- Becomes hesitant, upset, or reluctant when encouraged to walk independently

Has difficulty getting useful information from the environment

- Frequently contacts furniture, walls, people, or other obstacles
- Stops before taking the next step
- Changes direction unexpectedly or repeatedly
- Has difficulty knowing where to step or continue moving
- Appears more confident when in contact with objects/people

Is not yet an effective handheld-mobility tool user

A handheld mobility tool is a mismatch for any learner who, after a one-hour O&M session, cannot consistently:

- Maintain an effective grip
- Keep the cane positioned appropriately while walking
- Coordinate cane movement with stepping
- Maintain an effective cane arc
- Use the cane without continuous verbal or physical prompting

Unable to use their hands for employing mobility tools effectively

Consider a Belt Cane when a child with an MVI/B needs to walk while also limited in using their hands for engaging in protective cane skills:

- Needs hands for balance, playing, carrying or manipulating objects
- Participating in physical activities
- Using playground equipment
- Using a walker or other mobility equipment
- Because both hands are impaired and unable to grasp or swing a mobility equipment tool.

BEHAVIOR CAN BE INFORMATION

refusing to walk • crying • becoming upset • pulling away but not letting go • turning sideways • turning toward the guide • flapping • jumping • repeatedly stopping

- These behaviors should not automatically be interpreted as a lack of readiness, motivation, or willingness to walk.

Consider whether the MVI/B child has **enough effective tactile information to know what is ahead and where to place the next step.**

A Belt Cane evaluation may help determine whether additional body-centered tactile feedback changes the MVI/B child's ability or willingness to move.

THE EVALUATION QUESTION

“Does this blind/MVI child have an effective mobility tool to use while moving?”

If the answer is not yet, a Belt Cane evaluation may be appropriate.

CONSIDER A BELT CANE EVALUATION

Safe Toddles can help the clinical team determine:

Belt Cane size • configuration • fitting • introduction • use • ongoing support

PROFESSIONAL USE

This guide is intended to support clinical consideration and does not replace individualized evaluation by qualified professionals.

Safe Toddles

Pediatric Belt Cane

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Safe Toddles is committed to outfitting children with blindness or a mobility visual impairment with the mobility tools they need to develop safe, self-reliant mobility.