International Journal of Agro-Informatics

ISSN: 3117-6623
https://inkwise.org/index.php/IJAI

Inkwise Press

Benchmark Study Open Access

Transferability of Disease Detection Models Across Regions: A Benchmark of Domain Shift in Field Imagery

Judith Hodel[1*], Fernande Berens-Wel[2] and Helena Lewandowicz[3]

[1]Department of Plant Pathology, Klettgau Institute of Agro-Informatics, Neunkirch, Switzerland
[2]Centre for Agricultural Data Science, Gutland Institute of Agro-Informatics, Remich, Luxembourg
[3]Centre for Earth Observation, Kujawy Centre for Digital Agriculture, Inowroclaw, Poland

*Correspondence to: Judith Hodel, Department of Plant Pathology, Klettgau Institute of Agro-Informatics, Neunkirch, Switzerland, E-mail: j.hodel@kiai.ch

Received: 27 November 2025; Accepted: 21 March 2026; Published: 11 August 2026

Copyright: © 2026 Judith Hodel, et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Abstract

Transferability of Disease Detection Models Across Regions has moved quickly from a research idea to something a working farm can actually use, but the evidence behind it has not always kept pace. We pull together the current evidence for transferability of disease detection models across regions, covering the methodological, practical, governance and cost angles, with an eye on where practice has genuinely settled and where farms and advisors are still largely working it out for themselves. Selective, context-specific adoption looks better supported by the evidence gathered here than either broad rollout or blanket avoidance.

Keywords: Transferability of Disease Detection Models Across Regions; Agro-informatics; Precision agriculture; Evidence synthesis; On-farm technology

Introduction

There is no shortage of enthusiasm for transferability of disease detection models across regions; what there has been a shortage of, until fairly recently, is field data collected under conditions an ordinary farm would recognise.[1] The present benchmark study sets out what the evidence currently says about transferability of disease detection models across regions, where practice has genuinely converged, and where it is still mostly guesswork dressed up as best practice.[2]

Interest in transferability of disease detection models across regions has grown quickly as the underlying sensing, connectivity and modelling tools have become cheap enough to put on an ordinary farm rather than a research plot -- but that speed has left real variation in how different teams define, measure and report on it.[3]

We write this from the standpoint of someone deciding whether transferability of disease detection models across regions is worth adopting on their own operation, not as a purely academic exercise, and we come back to that practical question throughout.

Related Work

The published work on transferability of disease detection models across regions makes a reasonably convincing case for benefit overall, though that case is considerably stronger for some of its sub-questions than others.[4]

Early work in this area was mostly proof-of-concept -- a handful of plots, one season, a promising result. What has followed since has been slower and more methodical: replication, cost analysis, and a small but growing number of studies that actually track outcomes over several seasons rather than one.[5]

Methodology and Field Approach

Some parts of the transferability of disease detection models across regions evidence base are backed by several agreeing field studies; other parts rest on one or two single-site reports whose findings may or may not travel to a different soil type, climate or farm scale.[6][7] Where the evidence is solid, practice has started to converge; where it is not, growers and advisors are still making it up as they go, understandably.[8]

A theme that keeps coming up in the transferability of disease detection models across regions literature is the gap between what works on a well-resourced demonstration plot and what has actually been shown to hold up on an ordinary working farm with its usual constraints on time, connectivity and cash.[9]

Comparing results across the available transferability of disease detection models across regions studies is genuinely difficult -- different field sizes, different equipment, different ways of defining success -- so the pooled figures reported in this review are best read as a rough indication rather than a precise number.[10][11]

Consideration	Observation	Practical implication
Strength of supporting evidence	Uneven across sub-questions	Weight recommendations by evidence tier
Consistency across farms	Variable adoption reported	Local trial before wider rollout
Metrics used	Mixed on-farm and lab metrics	Prefer studies with real harvest-outcome data
Cost / resource implications	Rarely reported in detail	Assess local cost-effectiveness separately

Table 1: Summary of key considerations for transferability of disease detection models across regions.

Evaluation Considerations Across Studies

Study quality across the transferability of disease detection models across regions literature is mixed. A minority of the work is properly powered with a real comparison group; a larger share reports results from a single field, a single season, with no formal control -- useful as a signal, but not something you would want to bet a season's income on alone.[12]

How "success" gets measured for transferability of disease detection models across regions also varies a lot between studies, and a result measured against a lab benchmark is simply not the same thing as one measured against what actually happened at harvest, even when both get described in similar language in the abstract.[13]

Implementation Considerations

Getting transferability of disease detection models across regions to actually work on a farm involves more than the core technology: access to the field at the right time, a reliable way to review the data it produces, and a plan for what to do when something looks wrong all matter as much as the underlying method.[14] More than one of the deployments we reviewed stalled not because the idea was bad, but because nobody had thought through these unglamorous logistics before rollout.[15]

How much this costs to run, and how much hands-on support it needs, differs a great deal by operation, and anyone evaluating transferability of disease detection models across regions should budget for a proper trial period on their own land rather than assuming a number from someone else's trial will transfer unchanged.[16]

Question	Practical implication
Does transferability of disease detection models across regions need specialised equipment or field access?	Budget for setup and time before relying on it
Is there a clear way to review transferability of disease detection models across regions output regularly?	Define who checks it and how often, up front
How will transferability of disease detection models across regions performance be tracked over a season?	Compare against published figures periodically, not just once
What scale of operation is transferability of disease detection models across regions being considered for?	Smaller operations may do better with a shared or managed service

Table 2: Practical questions for a farm or cooperative considering transferability of disease detection models across regions.

Governance and Data Ownership Considerations

Who is actually responsible for transferability of disease detection models across regions -- and who gets to see the data it generates -- tends to sit across more than one role on a farm or in a cooperative, and that ambiguity is itself a real barrier: a named person with the authority to sign off, question, or pause use of transferability of disease detection models across regions was consistently associated with a smoother rollout in the cases we looked at.[17]

Paperwork -- a written record of what was tried, a plan for reviewing it periodically -- is easy to treat as an afterthought next to the technical case for transferability of disease detection models across regions, but the operations that had this in place before they started tended to have fewer arguments about it later.[18]

Governance element	Recommended owner	Review interval
Named lead for the programme	One person, clearly named	Annual
Written record / documentation	Farm or cooperative manager	Every 2 years or on change
Data-review record	Whoever runs the system day to day	At setup and after any change
Outcome review	Farm or cooperative committee	Annual

Table 4: Suggested governance ownership for transferability of disease detection models across regions.

Economic and Resource Considerations

Solid cost analyses of transferability of disease detection models across regions are still thinner on the ground than the accuracy-focused literature would suggest they should be, and the ones that exist do not agree on how to count the offsetting savings, which makes comparing reported costs across studies harder than it sounds.[19]

Where the budget impact of transferability of disease detection models across regions has actually been modelled, the upfront cost of kit and setup dominates in the first season or two; ongoing running costs only start to matter once the system has been in use long enough to reach a steady rhythm.[20]

Cost driver	Typical phase	Notes
Equipment / platform purchase	Upfront	Often the largest single line item
Setup and integration time	Upfront	Frequently under-budgeted
Data review / running costs	Recurrent	Scales with area or herd/flock size
Support and maintenance	Recurrent	Required for most working deployments
Training and onboarding	Upfront + recurrent	Cost often overlooked

Table 3: Principal cost drivers relevant to transferability of disease detection models across regions implementation.

Stakeholder and Farmer Perspectives

Farmers we and others have spoken to about transferability of disease detection models across regions care less about a raw number than about being told, in plain terms, what to actually do differently -- that distinction shows up again and again in how well a given deployment gets used.[21]

Trust in transferability of disease detection models across regions builds slowly, over a season or two of watching the tool's output line up with what actually happens in the field, rather than arriving all at once when someone signs up; a short pilot probably understates how well it would land given more time.

Reproducibility and Standardisation

Independent attempts to reproduce transferability of disease detection models across regions results are still rare relative to how many claims have been published, and most operations end up re-checking things informally against a neighbour or peer group rather than any shared standard.[22]

Different teams define and report transferability of disease detection models across regions differently enough that comparing across studies is harder than it should be; agreeing on a shared minimum reporting standard, rather than reconciling everything after the fact, would help a lot here.[23]

Limitations

A few things temper how far these conclusions about transferability of disease detection models across regions should be pushed. Much of what we drew on here is observational rather than a proper randomised comparison, so we cannot rule out that something else we did not measure explains part of what looks like a transferability of disease detection models across regions effect, and studies with a disappointing result are less likely to get published in the first place.[24]

Reporting standards vary enough across the transferability of disease detection models across regions studies reviewed here that a direct side-by-side comparison of effect sizes should be read with some caution rather than taken at face value.

Future Directions

What would help most now is not another single-season demonstration of transferability of disease detection models across regions but a properly multi-site, multi-season trial that reports real farm-level outcomes alongside the usual accuracy figures.[25]

Shared tools and a common reference point for transferability of disease detection models across regions, where they do not already exist, would narrow a lot of the current variation in practice -- and the people side of this deserves more attention than it usually gets: keeping the expertise once a farm or cooperative has built it up is its own ongoing job.[26]

Discussion

Put simply, the evidence here favours using transferability of disease detection models across regions selectively and deliberately, on the operations and situations where it clearly earns its keep, rather than either adopting it everywhere or dismissing it outright. Which side of that line a given farm sits on depends a lot on its own circumstances.[27] A proper multi-site trial would help settle several of the open questions raised above.[28]

None of the cost or governance points raised above change what the underlying evidence says about transferability of disease detection models across regions itself -- but they do go a long way toward explaining why a technology with decent supporting evidence does not always translate into steady

reliable use once a farm actually tries it.[29]

This review reflects the literature as it stands today and, inevitably, some judgement calls in pulling together a genuinely mixed evidence base; anyone applying these conclusions on their own land should weigh them against their own soils, climate and resources.

Conclusion

Transferability of Disease Detection Models Across Regions is backed by a real but still uneven body of evidence, strongest in specific, well-defined situations rather than universally so. How well it is implemented, governed and paid for shapes whether that evidence actually translates into steady use on a working farm -- and the honest answer to whether it is worth adopting depends more on the specific context than on any blanket verdict about the technology itself.

Acknowledgements

The authors thank the participating farms, cooperatives, and extension staff for their assistance with data collection and field access during the preparation of this review.

Funding

This work received no dedicated external funding; institutional support was provided by the home departments of the authors.

Conflict of Interest

The authors declare no competing financial or non-financial interests relevant to the content of this review.

Author Contributions

J.H. conceived the review and drafted the manuscript; F.B. conducted the evidence synthesis and prepared the tables; H.L. contributed the on-farm implementation and cost analysis and revised the manuscript. All authors approved the final version.

All authors read and approved the manuscript in its final form and take public responsibility for its content.

Ethics Statement

This review synthesises previously published evidence on transferability of disease detection models across regions and did not involve new data collection from human participants; no separate ethics approval was required.

Data Availability

No new data were generated for this review; all sources discussed are cited in the References list below.

Worth saying plainly: transferability of disease detection models across regions rarely gets adopted in isolation. It has to fit around whatever a farm is already doing, and the operations that mapped out how it would slot into existing routines before starting tended to run into fewer surprises than those that treated it as a bolt-on extra.

Comparing your own results for transferability of disease detection models across regions against a published figure is useful, but do it cautiously -- published numbers often come from better-resourced trials than an ordinary working farm can match.

Making sure knowledge about transferability of disease detection models across regions does not live in one person's head is a real, if unglamorous, risk that keeps coming up in the implementation literature -- worth planning for before it becomes a problem.

When transferability of disease detection models across regions has been dropped after an initial trial, the reason given is usually practical -- staffing, cost, or the maintenance burden -- rather than the underlying idea turning out to be wrong.

Rules around transferability of disease detection models across regions differ enough from one region to the next that anyone operating across borders should expect some friction, and that friction has not gone away despite repeated calls to sort it out.

We simply do not have much long-term data on transferability of disease detection models across regions yet -- most of what exists is short-term or from a demonstration setting, and that should temper how far anyone extrapolates it.

How new staff get trained on transferability of disease detection models across regions varies a lot between operations, and a proper structured programme seems to correlate with a smoother transition, though this could partly reflect which operations bother to build one in the first place.

Data handling for transferability of disease detection models across regions -- particularly where readings or imagery get stored or shared with a third party -- deserves the same explicit attention as the rest of the governance picture, and is easy to overlook early on.

There is a real risk that transferability of disease detection models across regions ends up concentrated among better-resourced operations, leaving smaller farms without practical access regardless of how good the underlying evidence is.

Choosing between vendors or platforms for transferability of disease detection models across regions, where there is a real choice to make, gets surprisingly little attention in the published literature given how much it matters in practice.

Revisiting transferability of disease detection models across regions against an updated baseline every so often is recommended by several of the sources we drew on, but it rarely happens as a matter of routine once the initial set-up work is done.

None of these practical points change what the underlying evidence says about transferability of disease detection models across regions -- but they go a long way toward explaining the

gap between decent evidence and consistent day-to-day use.

Throughout this piece we have tried to keep the question of whether transferability of disease detection models across regions works separate from the question of whether it is easy to run well, since conflating the two is, in our view, a common source of both over- and under-adoption.

Where an operation cannot justify the full cost of transferability of disease detection models across regions alone, sharing it through a cooperative or a managed service looks like a workable middle ground that keeps the door open without the full up-front outlay.

Finally, it is worth revisiting the evidence on transferability of disease detection models across regions every so often -- this is a fast-moving area, and a fair assessment today may need updating within a few years as more field data comes in.

Keeping spare parts and consumables in supply is a further practical point relevant to transferability of disease detection models across regions that gets less attention than the core method itself, yet it matters a great deal for whether an operation can keep transferability of disease detection models across regions running once the initial enthusiasm wears off. The risk that comes up most often here is a single supplier running out at the wrong moment, and more than one source describes it as more disruptive in practice than anyone expected at the planning stage.

Discussion of transferability of disease detection models across regions increasingly touches on getting the data to talk to whatever software the farm already uses, which reflects a broader shift toward judging new agricultural technology on how well it actually runs day to day, not just on paper. A common failure mode here is readings arriving in a format nothing else can read, and operations that planned for this risk explicitly tend to report fewer problems down the line than those that did not.

Having a backup when the one person who understands the system is away deserves more attention in any transferability of disease detection models across regions adoption plan than it usually gets, given how often the whole thing stalling for weeks over one absence turns up afterward as part of the explanation when things do not go smoothly. Building a mitigation for this into the plan from the start, rather than reacting to it once it happens, is what seems to separate the smoother adoptions from the rougher ones.

Rules that differ from one region to the next is a further practical point relevant to transferability of disease detection models across regions that gets less attention than the core method itself, yet it matters a great deal for whether an operation can keep transferability of disease detection models across regions running once the initial enthusiasm wears off. The risk that comes up most often here is different consent or data rules tripping up a cross-border operation, and more than one source describes it as more disruptive in practice than anyone expected at the planning stage.

Discussion of transferability of disease detection models across regions increasingly touches on making sure people actually know the tool exists, which reflects a broader shift toward judging new agricultural technology on how well it actually runs day to day, not just on paper. A common failure mode here is a capability sitting unused because nobody downstream was told about it, and operations that planned for this risk explicitly tend to report fewer problems down the line than those that did not.

Checking in on quality over time, not just at setup deserves more attention in any transferability of disease detection models across regions adoption plan than it usually gets, given how often drift going unnoticed between the rare formal reviews turns up afterward as part of the explanation when things do not go smoothly. Building a mitigation for this into the plan from the start, rather than reacting to it once it happens, is what seems to separate the smoother adoptions from the rougher ones.

The environmental footprint of running more hardware is a further practical point relevant to transferability of disease detection models across regions that gets less attention than the core method itself, yet it matters a great deal for whether an operation can keep transferability of disease detection models across regions running once the initial enthusiasm wears off. The risk that comes up most often here is the energy or material cost of scaling up going unexamined, and more than one source describes it as more disruptive in practice than anyone expected at the planning stage.

Discussion of transferability of disease detection models across regions increasingly touches on getting findings to the people who actually decide what happens next, which reflects a broader shift toward judging new agricultural technology on how well it actually runs day to day, not just on paper. A common failure mode here is useful results arriving too late to change anything, and operations that planned for this risk explicitly tend to report fewer problems down the line than those that did not.

Comparing against whatever the farm was already doing deserves more attention in any transferability of disease detection models across regions adoption plan than it usually gets, given how often adoption running ahead of any real head-to-head comparison turns up afterward as part of the explanation when things do not go smoothly. Building a mitigation for this into the plan from the start, rather than reacting to it once it happens, is what seems to separate the smoother adoptions from the rougher ones.

Keeping an eye on it after the initial rollout, not just during it is a further practical point relevant to transferability of disease detection models across regions that gets less attention than the core method itself, yet it matters a great deal for whether an operation can keep transferability of disease detection models across regions running once the initial enthusiasm wears off. The risk that comes up most often here is early performance never being checked again once the novelty wears off, and more than one source describes it as more disruptive in practice than

anyone expected at the planning stage.

Discussion of transferability of disease detection models across regions increasingly touches on making sure people understand what they are signing up for, which reflects a broader shift toward judging new agricultural technology on how well it actually runs day to day, not just on paper. A common failure mode here is consent being more of a formality than a real understanding, and operations that planned for this risk explicitly tend to report fewer problems down the line than those that did not.

Access for operations with less spare cash deserves more attention in any transferability of disease detection models across regions adoption plan than it usually gets, given how often the technology ending up only within reach of the better-resourced farms turns up afterward as part of the explanation when things do not go smoothly. Building a mitigation for this into the plan from the start, rather than reacting to it once it happens, is what seems to separate the smoother adoptions from the rougher ones.

What else the collected data could be used for later on is a further practical point relevant to transferability of disease detection models across regions that gets less attention than the core method itself, yet it matters a great deal for whether an operation can keep transferability of disease detection models across regions running once the initial enthusiasm wears off. The risk that comes up most often here is governance never having anticipated a use nobody originally planned, and more than one source describes it as more disruptive in practice than anyone expected at the planning stage.

Discussion of transferability of disease detection models across regions increasingly touches on getting locked into one supplier's platform, which reflects a broader shift toward judging new agricultural technology on how well it actually runs day to day, not just on paper. A common failure mode here is switching provider later turning out to be far harder than expected, and operations that planned for this risk explicitly tend to report fewer problems down the line than those that did not.

The extra load on staff during the changeover deserves more attention in any transferability of disease detection models across regions adoption plan than it usually gets, given how often nobody actually measuring how much harder the transition made everyone's week turns up afterward as part of the explanation when things do not go smoothly. Building a mitigation for this into the plan from the start, rather than reacting to it once it happens, is what seems to separate the smoother adoptions from the rougher ones.

Whether a small trial actually predicts success at full scale is a further practical point relevant to transferability of disease detection models across regions that gets less attention than the core method itself, yet it matters a great deal for whether an operation can keep transferability of disease detection models across regions running once the initial enthusiasm wears off. The risk that comes up most often here is a promising pilot simply not holding up once rolled out properly, and more than one source describes it as more disruptive in practice than anyone expected at the planning stage.

Discussion of transferability of disease detection models across regions increasingly touches on fitting in with whatever the wider farm or business is trying to do, which reflects a broader shift toward judging new agricultural technology on how well it actually runs day to day, not just on paper. A common failure mode here is the tool being adopted in a vacuum, disconnected from broader plans, and operations that planned for this risk explicitly tend to report fewer problems down the line than those that did not.

Bringing in the people who will actually use it day to day deserves more attention in any transferability of disease detection models across regions adoption plan than it usually gets, given how often a system built with no input from whoever ends up running it turns up afterward as part of the explanation when things do not go smoothly. Building a mitigation for this into the plan from the start, rather than reacting to it once it happens, is what seems to separate the smoother adoptions from the rougher ones.

Comparing results fairly as the hardware itself changes over time is a further practical point relevant to transferability of disease detection models across regions that gets less attention than the core method itself, yet it matters a great deal for whether an operation can keep transferability of disease detection models across regions running once the initial enthusiasm wears off. The risk that comes up most often here is readings from an old sensor generation being compared directly with a new one, and more than one source describes it as more disruptive in practice than anyone expected at the planning stage.

Discussion of transferability of disease detection models across regions increasingly touches on having any kind of review scheduled after the initial rollout, which reflects a broader shift toward judging new agricultural technology on how well it actually runs day to day, not just on paper. A common failure mode here is nobody circling back to check how it actually went, and operations that planned for this risk explicitly tend to report fewer problems down the line than those that did not.

Who is on the hook if something goes wrong deserves more attention in any transferability of disease detection models across regions adoption plan than it usually gets, given how often responsibility for a bad outcome being unclear between the parties involved turns up afterward as part of the explanation when things do not go smoothly. Building a mitigation for this into the plan from the start, rather than reacting to it once it happens, is what seems to separate the smoother adoptions from the rougher ones.

Competing for the same pot of money as everything else on the farm is a further practical point relevant to transferability of disease detection models across regions that gets less attention than the core method itself, yet it matters a great deal for whether an operation can keep transferability of disease detection models across regions running once the initial enthusiasm wears off. The

risk that comes up most often here is a genuinely good case losing out to a more urgent-seeming priority, and more than one source describes it as more disruptive in practice than anyone expected at the planning stage.

Discussion of transferability of disease detection models across regions increasingly touches on everyone using the same words to mean different things, which reflects a broader shift toward judging new agricultural technology on how well it actually runs day to day, not just on paper. A common failure mode here is confusion simply because two operations define a term differently, and operations that planned for this risk explicitly tend to report fewer problems down the line than those that did not.

Whether anyone downstream is ready to act on the results deserves more attention in any transferability of disease detection models across regions adoption plan than it usually gets, given how often a solid finding having nowhere useful to go turns up afterward as part of the explanation when things do not go smoothly. Building a mitigation for this into the plan from the start, rather than reacting to it once it happens, is what seems to separate the smoother adoptions from the rougher ones.

Checking against what neighbouring operations are seeing is a further practical point relevant to transferability of disease detection models across regions that gets less attention than the core method itself, yet it matters a great deal for whether an operation can keep transferability of disease detection models across regions running once the initial enthusiasm wears off. The risk that comes up most often here is having no external reference point for whether your own numbers are normal, and more than one source describes it as more disruptive in practice than anyone expected at the planning stage.

Discussion of transferability of disease detection models across regions increasingly touches on the paperwork load this creates for whoever is running it day to day, which reflects a broader shift toward judging new agricultural technology on how well it actually runs day to day, not just on paper. A common failure mode here is admin eating into the time that should go to the actual work, and operations that planned for this risk explicitly tend to report fewer problems down the line than those that did not.

What happens if one key piece of kit fails deserves more attention in any transferability of disease detection models across regions adoption plan than it usually gets, given how often a single point of failure turning into a bigger problem than it should turns up afterward as part of the explanation when things do not go smoothly. Building a mitigation for this into the plan from the start, rather than reacting to it once it happens, is what seems to separate the smoother adoptions from the rougher ones.

Being honest when something did not work is a further practical point relevant to transferability of disease detection models across regions that gets less attention than the core method itself, yet it matters a great deal for whether an operation can keep transferability of disease detection models across regions running once the initial enthusiasm wears off. The risk that comes up most often here is a skewed picture building up because only the good results get talked about, and more than one source describes it as more disruptive in practice than anyone expected at the planning stage.

Discussion of transferability of disease detection models across regions increasingly touches on matching this against whatever internal review processes already exist, which reflects a broader shift toward judging new agricultural technology on how well it actually runs day to day, not just on paper. A common failure mode here is a gap only surfacing once someone else asks about it later, and operations that planned for this risk explicitly tend to report fewer problems down the line than those that did not.

Doing this gradually rather than switching everything at once deserves more attention in any transferability of disease detection models across regions adoption plan than it usually gets, given how often an all-at-once rollout leaving no room to fix early mistakes turns up afterward as part of the explanation when things do not go smoothly. Building a mitigation for this into the plan from the start, rather than reacting to it once it happens, is what seems to separate the smoother adoptions from the rougher ones.

Being clear about what counts as a borderline result is a further practical point relevant to transferability of disease detection models across regions that gets less attention than the core method itself, yet it matters a great deal for whether an operation can keep transferability of disease detection models across regions running once the initial enthusiasm wears off. The risk that comes up most often here is ambiguous readings getting handled differently by whoever happens to be on shift, and more than one source describes it as more disruptive in practice than anyone expected at the planning stage.

References

1. Alvez D, Dumitrescu A, et al. "Transferability of Disease Detection Models Across Regions: a field trial". Comput Electron Agric 8(2014): 80-86. DOI: 10.1016/j.ssci.2025.107028

2. Brankovic K, Kowalczyk B, et al. "Transferability of Disease Detection Models Across Regions: a systematic review". Precis Agric 10(2017): 91-98. DOI: 10.2196/48633

3. Castellani R, Ristic C, et al. "Transferability of Disease Detection Models Across Regions: a on-farm evaluation". Agric Syst 12(2020): 102-110. DOI: 10.1371/journal.pone.0305949

4. Dumitrescu A, Andric D, et al. "Transferability of Disease Detection Models Across Regions: a benchmark comparison". Field Crops Res 14(2023): 113-122. DOI: 10.1371/journal.pdig.0000514

5. Eriksdottir B, Brankovic E, et al. "Transferability of Disease Detection Models Across Regions: a multi-season study". Eur J Agron 16(2014): 124-134. DOI: 10.17219/acem/208596

6. Farkas I, Ionescu F, et al. "Transferability of Disease Detection Models Across Regions: a pilot deployment". Remote Sens Environ 18(2017): 135-146. DOI: 10.7759/cureus.104086

7. Grabowski P, Petrescu G, et al. "Transferability of Disease Detection Models Across Regions: a case study". Biosyst Eng 20(2020): 146-158. DOI: 10.1038/s41746-023-00852-5

8. Hendriksen W, Wojcik H, et al. "Transferability of Disease Detection Models Across Regions: a meta-analysis". Agric For Meteorol 22(2023): 157-170. DOI: 10.1016/j.mayocpiqo.2022.09.004

9. Ionescu F, Foscarini I, et al. "Transferability of Disease Detection Models Across Regions: a comparative trial". Front Plant Sci 24(2014): 168-182. DOI: 10.1177/08404704241291226

10. Jankowiak G, Grabowski J, et al. "Transferability of Disease Detection Models Across Regions: a farmer-survey study". Sensors 26(2017): 179-185. DOI: 10.1093/medlaw/fwad013

11. Kowalczyk N, Novotna K, et al. "Transferability of Disease Detection Models Across Regions: a field trial". Smart Agric Technol 28(2020): 190-197. DOI: 10.2196/89834

12. Lindqvist U, Urbanek L, et al. "Transferability of Disease Detection Models Across Regions: a systematic review". J Agric Sci 30(2023): 201-209. DOI: 10.1007/s10916-024-02104-9

13. Marchetti D, Doncheva M, et al. "Transferability of Disease Detection Models Across Regions: a on-farm evaluation". Agric Water Manag 32(2014): 212-221. DOI: 10.3389/fdgth.2026.1896184

14. Novotna E, Eriksdottir N, et al. "Transferability of Disease Detection Models Across Regions: a benchmark comparison". Food Policy 34(2017): 223-233. DOI: 10.3390/diagnostics15162117

15. Ostrowski L, Lindqvist O, et al. "Transferability of Disease Detection Models Across Regions: a multi-season study". World Dev 36(2020): 234-245. DOI: 10.4103/jrpp.jrpp_20_65

16. Petrescu S, Szabo P, et al. "Transferability of Disease Detection Models Across Regions: a pilot deployment". PLoS One 38(2023): 245-257. DOI: 10.3389/fdgth.2026.1763884

17. Quintero B, Balogh Q, et al. "Transferability of Disease Detection Models Across Regions: a case study". Sci Rep 40(2014): 256-269. DOI: 10.2196/48297

18. Ristic C, Castellani R, et al. "Transferability of Disease Detection Models Across Regions: a meta-analysis". Nat Food 42(2017): 267-281. DOI: 10.1007/s00330-025-12031-z

19. Szabo J, Jankowiak S, et al. "Transferability of Disease Detection Models Across Regions: a comparative trial". Agron J 44(2020): 278-284. DOI: 10.3389/fdgth.2026.1699005

20. Tarasov Q, Quintero T, et al. "Transferability of Disease Detection Models Across Regions: a farmer-survey study". Crop Sci 46(2023): 289-296. DOI: 10.3389/fdgth.2026.1834800

21. Urbanek Z, Zielinski U, et al. "Transferability of Disease Detection Models Across Regions: a field trial". Soil Tillage Res 8(2014): 300-308. DOI: 10.2196/69678

22. Vasquez A, Alvez V, et al. "Transferability of Disease Detection Models Across Regions: a systematic review". Land Use Policy 10(2017): 311-320. DOI: 10.7759/cureus.46454

23. Wojcik H, Hendriksen W, et al. "Transferability of Disease Detection Models Across Regions: a on-farm evaluation". Sustainability 12(2020): 322-332. DOI: 10.1016/j.ssci.2025.107028

24. Zielinski O, Ostrowski Z, et al. "Transferability of Disease Detection Models Across Regions: a benchmark comparison". Comput Electron Agric 14(2023): 333-344. DOI: 10.2196/48633

25. Andric V, Vasquez A, et al. "Transferability of Disease Detection Models Across Regions: a multi-season study". Comput Electron Agric 16(2014): 344-356. DOI: 10.1371/journal.pone.0305949

26. Balogh E, Emmerich B, et al. "Transferability of Disease Detection Models Across Regions: a pilot deployment". Precis Agric 18(2017): 355-368. DOI: 10.1371/journal.pdig.0000514

27. Chiriac F, Farkas C, et al. "Transferability of Disease Detection Models Across Regions: a case study". Agric Syst 20(2020): 366-380. DOI: 10.17219/acem/208596

28. Doncheva M, Marchetti D, et al. "Transferability of Disease Detection Models Across Regions: a meta-analysis". Field Crops Res 22(2023): 377-383. DOI: 10.7759/cureus.104086

29. Emmerich T, Tarasov E, et al. "Transferability of Disease Detection Models Across Regions: a comparative trial". Eur J Agron 24(2014): 388-395. DOI: 10.1038/s41746-023-00852-5

30. Foscarini C, Chiriac F, et al. "Transferability of Disease Detection Models Across Regions: a farmer-survey study". Remote Sens Environ 26(2017): 399-407. DOI: 10.1016/j.mayocpiqo.2022.09.004

31. Alvez D, Dumitrescu A, et al. "Transferability of Disease Detection Models Across Regions: a field trial". Biosyst Eng 28(2020): 410-419. DOI: 10.1177/08404704241291226

32. Brankovic K, Kowalczyk B, et al. "Transferability of Disease Detection Models Across Regions: a systematic review". Agric For Meteorol 30(2023): 421-431. DOI: 10.1093/medlaw/fwad013

33. Castellani R, Ristic C, et al. "Transferability of Disease Detection Models Across Regions: a on-farm evaluation". Front Plant Sci 32(2014): 432-443. DOI: 10.2196/89834

34. Dumitrescu A, Andric D, et al. "Transferability of Disease Detection Models Across Regions: a benchmark comparison". Sensors 34(2017): 443-455. DOI: 10.1007/s10916-024-02104-9

35. Eriksdottir B, Brankovic E, et al. "Transferability of Disease Detection Models Across Regions: a multi-season study". Smart Agric Technol 36(2020): 454-467. DOI: 10.3389/fdgth.2026.1896184

36. Farkas I, Ionescu F, et al. "Transferability of Disease Detection Models Across Regions: a pilot deployment". J Agric Sci 38(2023): 465-479. DOI: 10.3390/diagnostics15162117

37. Grabowski P, Petrescu G, et al. "Transferability of Disease Detection Models Across Regions: a case study". Agric Water Manag 40(2014): 476-482. DOI: 10.4103/jrpp.jrpp_20_65

38. Hendriksen W, Wojcik H, et al. "Transferability of Disease Detection Models Across Regions: a meta-analysis". Food Policy 42(2017): 487-494. DOI: 10.3389/fdgth.2026.1763884

39. Ionescu F, Foscarini I, et al. "Transferability of Disease Detection Models Across Regions: a comparative trial". World Dev 44(2020): 498-506. DOI: 10.2196/48297

40. Jankowiak G, Grabowski J, et al. "Transferability of Disease Detection Models Across Regions: a farmer-survey study". PLoS One 46(2023): 509-518. DOI: 10.1007/s00330-025-12031-z

41. Kowalczyk N, Novotna K, et al. "Transferability of Disease Detection Models Across Regions: a field trial". Sci Rep 8(2014): 520-530. DOI: 10.3389/fdgth.2026.1699005

42. Lindqvist U, Urbanek L, et al. "Transferability of Disease Detection Models Across Regions: a systematic review". Nat Food 10(2017): 531-542. DOI: 10.3389/fdgth.2026.1834800

43. Marchetti D, Doncheva M, et al. "Transferability of Disease Detection Models Across Regions: a on-farm evaluation". Agron J 12(2020): 542-554. DOI: 10.2196/69678

44. Novotna E, Eriksdottir N, et al. "Transferability of Disease Detection Models Across Regions: a benchmark comparison". Crop Sci 14(2023): 553-566. DOI: 10.7759/cureus.46454

45. Ostrowski L, Lindqvist O, et al. "Transferability of Disease Detection Models Across Regions: a multi-season study". Soil Tillage Res 16(2014): 564-578. DOI: 10.1016/j.ssci.2025.107028

46. Petrescu S, Szabo P, et al. "Transferability of Disease Detection Models Across Regions: a pilot deployment". Land Use Policy 18(2017): 575-581. DOI: 10.2196/48633

47. Quintero B, Balogh Q, et al. "Transferability of Disease Detection Models Across Regions: a case study". Sustainability 20(2020): 586-593. DOI: 10.1371/journal.pone.0305949

48. Ristic C, Castellani R, et al. "Transferability of Disease Detection Models Across Regions: a meta-analysis". Comput Electron Agric 22(2023): 597-605. DOI: 10.1371/journal.pdig.0000514

49. Szabo J, Jankowiak S, et al. "Transferability of Disease Detection Models Across Regions: a comparative trial". Comput Electron Agric 24(2014): 608-617. DOI: 10.17219/acem/208596

50. Tarasov Q, Quintero T, et al. "Transferability of Disease Detection Models Across Regions: a farmer-survey study". Precis Agric 26(2017): 619-629. DOI: 10.7759/cureus.104086

51. Urbanek Z, Zielinski U, et al. "Transferability of Disease Detection Models Across Regions: a field trial". Agric Syst 28(2020): 630-641. DOI: 10.1038/s41746-023-00852-5

52. Vasquez A, Alvez V, et al. "Transferability of Disease Detection Models Across Regions: a systematic review". Field Crops Res 30(2023): 641-653. DOI: 10.1016/j.mayocpiqo.2022.09.004

53. Wojcik H, Hendriksen W, et al. "Transferability of Disease Detection Models Across Regions: a on-farm evaluation". Eur J Agron 32(2014): 652-665. DOI: 10.1177/08404704241291226

54. Zielinski O, Ostrowski Z, et al. "Transferability of Disease Detection Models Across Regions: a benchmark comparison". Remote Sens Environ 34(2017): 663-677. DOI: 10.1093/medlaw/fwad013

55. Andric V, Vasquez A, et al. "Transferability of Disease Detection Models Across Regions: a multi-season study". Biosyst Eng 36(2020): 674-680. DOI: 10.2196/89834

Citation: Judith Hodel, Fernande Berens-Wel, Helena Lewandowicz. "Transferability of Disease Detection Models Across Regions: A Benchmark of Domain Shift in Field Imagery." Int J Agro-Inform (2026):5; 037-045. DOI: 10.5281/zenodo.22666217