

Best Practices Session: Research, Extension and training. Plant Health Clinic - summary

Introduction

The Australian Centre for Agriculture Research (ACIAR) project “*Strengthening integrated crop management research in the Pacific Islands in support of sustainable intensification of high value crop production*” introduced Plant Health Clinic (PHC) to the region in 2012. Dr Jeffrey Bentley, an Agricultural Anthropologist of Bolivia, founder of the PHC concept.

Objective

1. To look for ways to access pest and diseases diagnoses and information on their management
2. To pilot PHC in Solomon Island
3. To roll PHC into Fiji, Samoa and Tonga and rest of the Pacific Island Countries and Territories. (PICTs).

Plant Health Clinic concept is a new extension innovation in the region. It has been widely practiced in Africa and proven very successful in providing practical answers to pest and diseased crop samples brought by farmers to a common public place.

The PHC is different from ordinary extension role whereby action happens after message reaches national plant protection agencies. However, for PHC, advisory services prescribed at the site and a reference copy given to the farmer. The time saving from the onset of symptom sighting until the management recommendation answer makes the difference.

Plant Health Clinic features

PHC consist of plant health doctors, farmers, infested pest and diseased crop samples, manual fact sheets, electronic fact sheets (Pacific pest and pathogen APP) , record sheets, selected site, a banner and disposal bins.

Plant Health Doctors (PHD) holds the key to a successful PHC session for having the ability to accurately diagnose the problem concerning a given sample and providing a practical management solution that satisfies the farmer after application of the recommendation given.

Following In-house training on symptom identification, correct diagnoses of the given pest and diseases, appropriate provision of management practices at PHC sessions, more involvement and frequent practice is what makes an effective PHD.

PHD usually from Government agencies, NGOs, Universities, colleges and retail stores. Our pacific context, PHD could come from Research and Extension officers and supported by international agencies such as SPC, PestNet and CABI Plantwise.

Effective PHC will require good planning. This involves ample time for awareness on the venue, inform locality farmers, ensure the entire features checklist above are available prior actual day. Failing the checklist could be counterproductive.

Extension services earmarked to take charge of this role and become main beneficiaries.

PHC pilot in Solomon Islands

PHC initiated in 2012 in Guadalcanal and Malaita. Review conducted in 2013 by Dr Jeffery Bentley on PHC suggested the following:-

1. PHC to run through extension division
2. Train extension staff
3. PHC to be included in officers ToR
4. Write more factsheets of local pest & diseases
5. Appoint a country champion to spearhead the PHC
6. Share results of PHC widely

PHC meant to be a regular and permanent service owned by partners who operates them unlike a project that has a definite endpoint.

PHC introduced in both Samoa and Fiji in 2015 and 2016 respectively and slowly getting momentum. The PHC concept will continue with full exploration in a new project commencing early 2018.