

Civil and Criminal Liability for Unsafe Food Donations in Bangladesh: Lessons from the United States, European Union, and Singapore

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Research Article

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Abstract

Food donation can alleviate immediate hunger while exposing recipients to avoidable harm when safety responsibilities are unclear or remedies are inaccessible. This article examines how Bangladesh should allocate civil and criminal liability for unsafe donated food without discouraging responsible assistance. It uses doctrinal analysis of legislation and a functional comparison with the United States, the European Union, and Singapore. The analysis challenges the proposition that gratuitous distribution falls outside Bangladeshi law. The Food Safety Act 2013 contains broad definitions, distribution duties, withdrawal obligations, and civil remedies; the Penal Code 1860 also provides potentially applicable offenses. Nevertheless, sale-oriented provisions, uncertainty over recipient standing, fragmented responsibility, and evidentiary barriers can weaken protection. Comparative analysis identifies distinct approaches: conditional immunity in US federal law, integration of redistribution into ordinary food regulation in the EU, and safety-conditioned protection in Singapore. None supports treating charitable intention as a sufficient defense. The article proposes an express statutory duty covering gratuitous supply, responsibility proportionate to operational control and foreseeable recipient needs, accessible civil compensation, and criminal sanctions differentiated by culpability. Limited protection for compliant volunteers should preserve the need for regulatory intervention and claims against responsible enterprises. The central contribution is to distinguish uncertainty about legal coverage from difficulties in proving and remedying harm, and to connect donor protection with the recipient's practical ability to obtain safe food and to obtain redress.

1 Introduction

A meal does not become less capable of causing injury because no money changes hands. Nevertheless, the legal organization of food assistance can make the injured recipient less visible than a paying customer. Food may pass from a manufacturer to a retailer, a volunteer transporter, a charitable kitchen, and finally to a person with little information about its origin or storage history. When illness follows, each participant may point to another stage of the chain. The recipient must then establish what went wrong, who controlled the relevant risk, and which legal route remains available. Charitable intention cannot answer these questions.

For Bangladesh, the appropriate starting point is the law already governing food and personal injury. The Food Safety Act 2013 defines a food business as any activity that includes production, storage, transport, distribution, and supply. It does not make a completed retail sale the universal regulatory condition. The Penal Code 1860 contains offenses addressing dangerous conduct and negligent injury, while consumer legislation provides a more transaction-dependent route. These overlapping regimes make it inaccurate to describe food donation as an area of complete legal immunity. They also make it necessary to examine the wording of particular provisions rather than assume that every donor, recipient, and transaction is treated identically.

The distinction matters for reform. If no law applied, a comprehensive new liability regime might be necessary. If substantial duties already exist but their application to charity is uncertain, clarification, procedural reform, and practical enforcement may be more useful. Excessively broad immunity could remove existing protection. Conversely, automatic criminal punishment whenever a recipient becomes ill would confuse a harmful outcome with proof of culpable conduct and causation. Neither approach adequately differentiates a volunteer distributing unopened packages from an enterprise concealing a known contamination problem.

Scholarship on redistribution supplies a further reason for caution. Arcuri (2019) questions the consensus that charitable redistribution simultaneously resolves food waste and poverty. Galli et al. (2019) identify vulnerabilities arising from the interaction of food surplus, welfare provision, and voluntary assistance. These analyses concern different national settings and do not establish how Bangladeshi recipients behave. They do, however, identify a conceptual difficulty relevant to legal design: success measured in food recovered may obscure whether assistance is safe, appropriate, dependable, and capable of being refused.

This article asks three questions. First, how far can existing Bangladeshi legislation and negligence principles reach unsafe food donated without payment? Second, what do contrasting donor-liability arrangements reveal about the relationship between encouragement, safety, and redress? Third, what reforms would protect recipients while allocating responsibility fairly among commercial suppliers, charities, volunteers, and public bodies? The argument is that liability should follow from control over foreseeable risks, supported by an express statutory right to a safe, gratuitous supply and an accessible civil remedy. Criminal liability should remain tied to clearly defined offenses and the required degree of fault.

Midgley (2014) further examines how the commercial qualities and economic pressures attached to surplus can continue to influence redistribution and access. Bazerghi et al. (2016), in a systematic review of food banks, distinguish their contribution to immediate relief from limitations in achieving broader food-security outcomes. Read together, these studies support examining the conditions of assistance and recipients' needs, rather than treating the transfer of food as a sufficient outcome. They do not establish the incidence of unsafe donation in Bangladesh.

The contribution is not the claim that charity requires regulation. It is a more precise account of three distinct deficits: uncertainty about coverage, difficulty attributing injury, and difficulty obtaining a remedy. The proposed framework addresses each separately. It also treats the recipient's circumstances as relevant to reasonable precautions without assuming that poverty itself establishes medical vulnerability. The analysis first explains its method and normative basis, then examines domestic law, compares selected foreign approaches, and develops a reform model for Bangladesh.

2 Research design and limits

This is a doctrinal and normative comparative legal study. It does not report interviews, surveys, laboratory testing, an outbreak database, or original quantitative findings. The material examined consists of legislation, published regulatory guidance, a foundational negligence judgment, and selected scholarly work concerning food redistribution and food-related liability. Hypothetical examples below test the implications of legal rules; they are not accounts of identified incidents.

The domestic analysis prioritizes the Food Safety Act 2013, the Consumer Rights Protection Act 2009, the Penal Code 1860, the Special Powers Act 1974, and the Constitution. The Food Safety Act is examined using the government-published authentic English text, with attention to the statutory rule that Bangla prevails when the versions conflict. Bangla consumer-law provisions are used to distinguish purchasers from permitted users and beneficiaries. Public reproductions of statutory texts supplement official sources where direct online access is incomplete. The analysis is provision-specific and does not purport to catalog every municipal, licensing, procurement, or technical food standard.

Sources were located through targeted searches using the instrument names and combinations of food donation, gratuitous distribution, negligence, charitable redistribution, liability, traceability, and compensation. Selection depended on relevance to the legal questions and identifiable provenance. Operative legal propositions are anchored to named instruments and section or article numbers. Scholarly sources support conceptual arguments rather than substitute for statutory text. This is a purposive legal review, not a systematic literature review, and no claim is made that the search exhausts unpublished decisions or administrative practice. Online research was completed on 16 September 2026; the discussion distinguishes between enacted instruments, future application dates, and proposals.

The comparators are selected for contrasting regulatory functions. US federal legislation directly limits specified civil and criminal liability. EU legislation incorporates redistribution into food-business responsibilities, while leaving important liability questions to national law. Singapore combines protection against liability for death or personal injury with operational safety conditions. These are not equivalent legal units: a federal statute, a supranational framework, and a national statute operate within different institutional environments. The comparison, therefore, examines coverage, safety conditions, allocation of responsibility, exceptions, and the consequences for recipients. It does not rank entire legal systems or assume that institutional capacity can be transplanted with statutory language.

Three limits qualify the findings. First, statutory interpretation identifies plausible legal routes, not the likely result of a particular unlitigated claim. Second, no inference about the incidence of poisoning, the frequency of prosecution, or the prevalence of donor misconduct can be drawn from the legal materials. Third, the effects of alternative liability rules on donation volumes are not estimated. Assertions that immunity necessarily increases safe donations, or that stricter liability cannot deter assistance, would exceed the evidence. The reform proposals are instead evaluated against legal clarity, preventability of harm, evidentiary fairness, proportionality, and administrative feasibility.

3 Safe assistance and the position of the recipient

3.1 Food safety within the right to adequate food

Food assistance is valuable because people need food, not because surplus requires a destination. The Committee on Economic, Social and Cultural Rights (1999, paras. 6–13) defines adequate food in terms of availability, accessibility, dietary needs, freedom from harmful substances, and cultural acceptability. Its account of state obligations includes protection against interference by enterprises and individuals, and provision for those who cannot secure food themselves (paras. 15–16). Applied to donation, this supports the proposition that the absence of payment cannot justify knowingly exposing recipients to avoidable danger. It does not, by itself, create a privately enforceable damages action against every donor.

The Bangladesh Constitution provides related but legally distinct foundations. Article 15(a) identifies food as a basic necessity, and Article 18(1) addresses nutrition and public health. Article 8(2) makes these principles fundamental to governance and interpretation while specifying that they are not judicially enforceable. Articles 31 and 32 protect interests associated with lawful treatment and life. These provisions support protective legislation and scrutiny of public action; they should not be presented as automatically imposing strict civil liability on private charities. The distinction between constitutional justification and a complete private cause of action is essential (Constitution of the People's Republic of Bangladesh, 1972).

An additional distinction concerns safety and nutritional adequacy. A properly stored meal may still be inadequate as a person's repeated diet. An allergen-containing product may be safe for many consumers but dangerous for a known recipient. Conversely, cosmetic irregularity or commercial unattractiveness does not necessarily make food unsafe. The law should identify the relevant defect rather than lump spoilage, adulteration, poor nutrition, religious unsuitability, and unattractive presentation into a single category. Longer-term adequacy calls for welfare and institutional meal standards; acute contamination and avoidable allergen exposure call for safety controls and potentially personal-injury remedies.

3.2 Vulnerability as a relationship rather than a label

Economic need, medical susceptibility, and dependence on an institution are different sources of vulnerability. They can coincide, but should not be assumed to do so. A healthy adult receiving occasional assistance may have substantial ability to assess and prepare food. A child living in a residential institution has little control over procurement or menus. A displaced family may lack refrigeration, fuel, utensils, or safe water, even when the food supplied was safe at the time of dispatch. The relevant legal question is what the provider knew or reasonably should have considered about the intended use and the recipient's ability to meet necessary handling conditions.

This distinction affects the standard of care. Providing raw ingredients to a household known to have no cooking facilities can create a different risk from supplying the same ingredients to an equipped

communal kitchen. A printed refrigeration instruction does not solve a foreseeable absence of refrigeration. Nor should every informal donor be required to collect medical histories. Reasonable precautions should depend on the nature of the food, the identifiable recipient group, the duration of the relationship, and operational capacity. Institutional providers have opportunities to establish dietary procedures that an occasional street-level volunteer does not.

A significant qualification appears in the EFSA Panel on Biological Hazards et al. (2018) opinion on simplified food-safety management. Its stated scope addresses regular consumers and excludes specified immunocompromised groups, as well as vulnerabilities associated with illness, pregnancy, treatment, and age. The opinion supports simplified controls for appropriate settings; it cannot be treated as a complete safety protocol for every population receiving charity. The implication developed here is that institutions serving medically susceptible groups need additional expert guidance, not merely a generic donation checklist.

3.3 Refusal and dignity

A person dependent on assistance may have limited practical freedom to reject an unsuitable meal. This is an argument for designing a meaningful refusal mechanism, not an empirical finding that every recipient feels coerced. A satisfactory scheme would allow recipients to decline particular food, report suspected harm, and seek an alternative without losing future eligibility. Participation in publicity, photographs, or public expressions of gratitude should not be made the price of a safe meal. These are proposed safeguards against dependency being used to silence safety concerns.

Such safeguards also improve information. A complaint system controlled exclusively by the donor can discourage reports or delay escalation. Confidential reporting through an independent public contact, with options for representatives, would separate gratitude from legal accountability. The effectiveness of these measures should be studied through recipient participation rather than presumed from donor satisfaction or the volume distributed. Redistribution literature's warning against equating surplus management with poverty alleviation reinforces the need for recipient-centered outcome measures (Arcuri, 2019; Galli et al., 2019).

4 Existing liability in Bangladesh

4.1 The Food Safety Act extends beyond retail sale

The Food Safety Act 2013 provides the strongest basis for rejecting a categorical exemption for donation. Section 2(8) defines a food business by reference to activities including production, processing, packaging, storage, transport, import, distribution, and sale. Its additional language includes supply, delivery, and services. Section 2(11) defines food establishments broadly enough to include vehicles, vans, tents, and open places associated with food activities. Section 2(28) includes organizations and associations within the definition of person. These provisions make organized

charitable kitchens and distribution chains plausible subjects of regulation, even where beneficiaries do not pay.

The interpretation still requires care. Section 2(9) addresses the operator of a food business, and individual offenses contain their own conduct and contextual requirements. Broad definitions cannot remove the element of an express sale from a particular prohibition. Nor do they finally resolve the position of every isolated household gift. The defensible conclusion is that charitable status is not a general statutory exclusion and that many relevant activities are already covered. Expressly identifying gratuitous supply would clarify this position and reduce disputes at the margins.

Several provisions are directly relevant. Section 32 addresses packaging and labeling and expressly includes distribution. Section 35 concerns harmful irresponsibility, negligence, or carelessness in food-serving or catering services in hotels, restaurants, or food premises, in deviation from prescribed standards. Section 43 provides for disclosure and withdrawal when supplied food is suspected of non-compliance or specified hazards. Section 44(2) addresses suppliers and storers, including supply after expiry, disregard of the producer's precautions, removal of safety information, inability to provide traceability information, and knowing receipt of unsafe food for storage or distribution. These duties contradict the proposition that a donor can necessarily escape regulation by changing a sale into a gift (Food Safety Act, 2013).

The Act also supplies investigative powers that are not wholly transaction-bound. Section 47 expressly permits sampling of food not offered for sale and permits access to relevant places and records. Section 46 allows a person to obtain testing of food collected or purchased, subject to prescribed procedures and fees. These provisions suggest that the problem is not simply the absence of legal authority to investigate donated food. More precise questions concern access to testing, rapid preservation of evidence, and whether recipients and frontline officials know which procedure to use.

The 2020 Food Business Operator Obligations Regulations demonstrate that the parent Act is supplemented by operational requirements (Bangladesh Food Safety Authority, 2020). Donation guidance should be integrated with applicable hygiene, labeling, and operator obligations, rather than creating an alternative set of weaker standards. Detailed licensing classifications and technical requirements require a separate implementation audit; this article does not imply that they are absent. Where clarification can be made within existing delegated powers, guidance and regulations can proceed. New civil causes of action, substantive immunity, and new offenses require an appropriate legislative basis rather than administrative invention.

4.2 Statutory compensation and its unresolved boundaries

Section 76 of the Food Safety Act deserves particular attention. Subsection (1) states that there is no legal bar to an affected person or food consumer bringing a civil claim against a person who is prosecuted and convicted of an offense under the Act. Subsections (2) and (3) address injury to a food consumer through a seller's anti-food-safety practice and permit claims and awards within a ceiling of

five times the assessed loss. The provision, therefore, defeats the assertion that the Act contains no civil remedy. It does not, however, establish that every donation recipient can obtain fivefold compensation from every donor.

Two interpretive issues remain. First, the language shifts from the affected person and the food consumer to the seller. A claim involving an upstream commercial seller may fit more readily than one against an informal donor. Second, the express reference to prosecution and conviction in subsection (1) sits beside the separately expressed monetary remedy in subsection (2). Without a controlling donation-specific judgment, the relationship should not be resolved by simply declaring criminal conviction either universally necessary or universally irrelevant. The uncertainty itself supplies a reason for legislation expressly permitting donation-related civil proceedings independently of criminal prosecution.

The ceiling is also not an automatic multiplier. The court must assess the claim and evidence, and the statutory maximum does not establish an entitlement to five times any amount demanded. Injury, monetary assessment, applicable defendant category, and procedural route all matter. For a recipient needing immediate treatment, a formally substantial remedy may have limited value if proving the underlying case requires resources the claimant lacks. The reform question must therefore address access and timing as well as the nominal size of compensation.

4.3 Consumer protection depends on the transaction chain

The Consumer Rights Protection Act 2009 creates a narrower but more nuanced position than a simple exclusion of all free recipients. Section 2(19)(a) includes qualifying purchasers, while section 2(19)(b) includes users of those goods with the purchaser's consent. Section 2(19)(e) similarly addresses beneficiaries of qualifying services. Where a donor buys food and authorizes another person to consume it, the recipient may have a stronger argument for consumer status against the commercial supplier than the absence of personal payment suggests. Eligibility remains dependent on the statutory conditions and the particular transaction.

A genuinely gratuitous transfer outside a qualifying purchase or paid-service relationship presents a different case. Section 2(22) excludes services supplied free of charge, and the definitions of goods and relevant prohibited practices retain commercial features. A privately prepared meal and a purchased catering service distributed at no charge should therefore not be treated as legally identical. The donor may be a purchaser; the recipient may be an authorized user; and the caterer may remain a commercial supplier. Whether the donor itself is liable under consumer legislation is a separate question from whether an upstream seller can be pursued (Consumer Rights Protection Act, 2009, ss. 2, 66–67).

Sections 66 and 67 provide civil remedies, including compensation within a statutory ceiling. Section 76 provides a complaint-related share of recovered fines in specified circumstances. That share is not a substitute for individualized damages and should not be described as compensation proportionate to injury. These distinctions show why an express donation remedy would be useful: access to redress

should not turn primarily on whether the food was purchased upstream, prepared privately, or passed through a particular form of intermediary.

4.4 Criminal offenses and the limits of commercial wording

The Penal Code must be read offense by offense. Section 272 addresses adulteration, making food or drink noxious, accompanied by the intention to sell or knowledge that a sale is likely. Section 273 addresses the sale, offer, or exposure for sale of noxious or unfit food or drink with the specified knowledge or reason to believe. Gratuitous distribution alone does not establish those sale-related elements. Nevertheless, an earlier commercial offense is not necessarily erased because the adulterated food is later donated (Penal Code, 1860, ss. 272–273).

Other provisions do not depend on the sale. Section 336 concerns rash or negligent conduct that endangers human life or personal safety, and sections 337 and 338 address hurt and grievous hurt caused by such conduct. Section 304A addresses causing death through a rash or negligent act not amounting to culpable homicide. A food-donation incident may engage these provisions if the required conduct, fault, injury, and causal connection are proved. Their existence prevents equating the absence of a donation-specific offense with the absence of criminal responsibility.

Sections 269 and 270 address conduct likely to spread infection of a disease dangerous to life, subject to their respective fault requirements. They are not generic provisions covering every instance of spoiled food or every chemical contaminant. A prosecution must establish the statutory infection-related elements rather than treat the label food poisoning as sufficient. The distinction is especially important where illness results from a toxin or allergen rather than the spread of infection. Solaiman's (2022) comparative analysis of food-related manslaughter illustrates the wider need to differentiate criminal negligence from broad claims about the seriousness of unsafe food.

The Special Powers Act 1974, section 25C, also addresses adulteration and the sale of adulterated food and drink. Its commercial elements and severe penal consequences require separate examination; it cannot be converted into a general donation offense by analogy. The Food Safety Act's section 61 recognizes interaction with more serious offenses under other legislation. A sound charging approach should identify the applicable provision and avoid treating overlapping statutory labels as permission for indiscriminate punishment. The existence of severe sanctions does not establish that a particular defendant committed the required offense.

Section 59 of the Food Safety Act already addresses offences by companies and defines company broadly to include organizations, societies, clubs, and associations. It attributes responsibility to specified office-holders and directly concerned personnel, subject to the statutory knowledge and due-diligence qualifications, and permits proceedings against the body corporate itself. Charitable incorporation therefore cannot be assumed to prevent organizational liability. The breadth of the provision also makes it necessary to examine the position of nominal office-holders and operational

volunteers rather than infer that everyone associated with an event is equally responsible. The narrower attribution approach proposed below is a reform recommendation, not a description of section 59.

4.5 Good faith is not immunity for carelessness

Section 52 of the Penal Code links good faith to due care and attention. A donor's benevolent motive therefore cannot, by itself, establish the Code's good-faith standard. More fundamentally, section 52 is a definition, not a universal defence. A defendant must identify an applicable exception or other legal basis before its requirements become decisive. The relevant inquiry includes conduct and precautions, not merely whether the donation was socially admired (Penal Code, 1860, s. 52).

Sections 81 and 88 similarly require disciplined analysis. Section 81 concerns conduct undertaken without criminal intent to prevent or avoid other harm and includes a good-faith requirement. Section 88 concerns certain acts intended for a person's benefit and undertaken with consent, subject to its statutory conditions. They do not establish a general license to distribute unsafe food during emergencies or to infer consent to hidden contamination from acceptance of a meal. A genuine emergency may affect reasonable options; it does not automatically convert avoidable exposure into lawful rescue.

Civil negligence also distinguishes intention from care. A person can sincerely wish to help while failing to take reasonable precautions. Conversely, illness alone does not prove negligence. Food may contain an undiscoverable upstream defect, or contamination may occur after a donor relinquishes control. The law must investigate what the defendant did, what risks were reasonably foreseeable, and how that conduct relates to the injury. Collapsing these questions into either charitable immunity or automatic guilt obscures rather than strengthens accountability.

4.6 Tort and contractual allocation

Donoghue v. Stevenson (1932) supports the foundational proposition that a duty concerning physical injury need not depend on a contract between the injured consumer and the manufacturer. It was not a food-donation decision and does not determine the outcome of a Bangladeshi claim. Used cautiously, its reasoning supports an argument that a person undertaking the preparation, handling, or distribution of food should consider foreseeable injury to intended recipients. The local recognition and scope of the particular duty would still require adjudication.

A negligence claim should identify the duty, the allegedly omitted precaution, the resulting injury, and causation. Relevant conduct might include ignoring credible recall information, concealing a known temperature failure, or failing to pass on material allergen information available to the distributor. Compliance with a general checklist is evidence of care, but may not address a known special risk. Equally, a precaution should not be invented retrospectively merely because an adverse outcome occurred. The standard must be capable of guiding conduct before distribution.

Contracts remain important among donors, caterers, transporters, and charities, even when the final recipient pays nothing. They can allocate inspection, transport, storage, record retention, incident reporting, insurance, and contribution between the parties. They do not automatically confer enforceable contractual rights on every beneficiary. Nor should a privately negotiated indemnity be assumed to extinguish public duties or a recipient's otherwise available claim. The source of a beneficiary's right must be established, not inferred from the existence of an agreement elsewhere in the chain.

Promissory estoppel is not used here as a general solution to personal injury from donated food. Foreign decisions addressing reliance in different contractual settings cannot establish a new Bangladeshi damages action without an analysis of local doctrine. Similarly, an assurance that food is safe may be relevant evidence without making estoppel the appropriate cause of action. An express statutory duty would address the central problem more directly than stretching contractual concepts to cover every gratuitous meal.

5 Comparative approaches to donor protection

5.1 The United States and conditional federal immunity

The Bill Emerson Good Samaritan Food Donation Act, codified at 42 U.S.C. § 1791, limits specified civil and criminal liability associated with qualifying food donations. Its current text must be read in light of the Food Donation Improvement Act of 2021, enacted on 5 January 2023. The latter's short title should not be mistaken for its enactment year. It expanded protection to specified direct donors and certain reduced-price distributions (Food Donation Improvement Act of 2021, 2023).

For persons and gleaners donating through nonprofit organizations, and qualifying nonprofits receiving donations, the protection concerns liability arising from the nature, age, packaging, or condition of apparently wholesome food or apparently fit grocery products. Ultimate distribution can occur at zero cost or at a statutorily defined good Samaritan reduced price. Direct donation is protected by a separately defined class of qualified direct donors and incurs no cost to the needy individual. A private household donor is not automatically within that defined direct-donor class merely because its purpose is benevolent (Bill Emerson Good Samaritan Food Donation Act, 42 U.S.C. § 1791(b)–(c)).

Apparently, wholesome food is not simply food that looks acceptable. The statutory definition connects it to applicable quality and labeling standards, notwithstanding commercial unattractiveness arising from factors such as appearance, age, freshness, size, or surplus. Section 1791(e) separately addresses partial compliance when the donor informs the nonprofit of the deficiency, the nonprofit agrees to recondition the food to comply, and the nonprofit knows the relevant standards. This structured route should not be converted into permission to supply unsafe food directly to uninformed recipients.

The principal exception concerns injury or death resulting from gross negligence or intentional misconduct. Gross negligence has a specific statutory definition involving voluntary and conscious conduct, including omission, with knowledge of likely harm. It should not be automatically equated with

the ordinary negligence test used elsewhere. Section 1791(f) also preserves the authority of state and local health regulations. Protection against specified liability therefore coexists with safety regulation; the statute is neither an unconditional guarantee against suit nor a repeal of food law.

For Bangladesh, the US model demonstrates the importance of defining covered actors, distribution channels, qualifying food, protected claims, and exceptions. It also raises a normative concern: requiring proof of a donor's knowledge of likely harm can create a substantial obstacle where the injured person lacks access to internal records. Whether that trade-off is justified cannot be answered solely by invoking the social value of donation. The domestic baseline, procedural resources, and availability of compensation from other responsible parties must be considered.

5.2 The European Union and continuity of food responsibilities

The EU framework begins from a different premise. Regulation (EC) No 178/2002 covers undertakings, whether or not operated for profit, and includes the transfer, free of charge, of food to the market. Articles 14, 17, 18, and 19, respectively, address food safety, operator responsibilities, traceability, and withdrawal or recall. Organized redistribution is thus connected to the ordinary food chain. The European Commission's (2017) guidelines explain these responsibilities for food-donation activities while recognizing limits associated with occasional private activity and the organization and continuity of an undertaking.

Article 14 is particularly relevant to recipient vulnerability. Safety assessment includes normal conditions of use, information supplied, and the specific health sensitivities of the category of consumers for whom the food is intended. This is not a requirement that every donor guarantee suitability for every conceivable medical condition. It is a legal basis for considering the intended consumer group rather than measuring safety solely against an abstract average adult (Regulation (EC) No 178/2002, 2002, art. 14).

Commission Regulation (EU) 2021/382 introduced an express chapter on redistribution into Annex II of Regulation (EC) No 853/2004. It distinguishes food with a use-by date from food bearing a best-before date and requires consideration of factors such as remaining shelf life, packaging integrity, storage and transport conditions, freezing information where relevant, sensory condition, and traceability. These are operational checks, not a general civil immunity. Date marking must be understood legally and scientifically: passing a quality date does not necessarily establish unsafe food, whereas passing a use-by date is treated differently within the EU framework.

Bangladesh cannot import the EU date distinction as an informal exception to its own law. Section 44(2) (a) of the Food Safety Act addresses supply after expiry. Any domestic clarification allowing specified food beyond a quality-related date would need to be consistent with the applicable statutory and labeling framework. A donor should not be told that a foreign rule overrides a domestic expiry prohibition. Scientific reassessment and legal authorization are separate requirements.

The EU guidelines further distinguish food-business responsibility from the allocation of civil and criminal liability under national law (European Commission, 2017). EU product liability rules provide a separate framework, with its own definitions, categories of defendants, proof requirements, and exclusions (Council Directive 85/374/EEC, 1985). Directive (EU) 2024/2853 reforms that framework, with a transposition deadline of 9 December 2026 and transitional rules linked to when products are placed on the market or put into service. It should not be presented, as of this article's research date, as a fully implemented uniform replacement throughout the EU. Neither the old nor the new directive makes every volunteer a producer merely by passing on food.

The relevant lesson is the continuity of responsibility across redistribution, combined with proportionate compliance methods. EFSA's work supports simplification where appropriate, rather than abandoning controls because an organization is small (EFSA Panel on Biological Hazards et al., 2018). The EU does not supply a single criminal code or a universal charitable immunity. National variation remains material, and any claim about a particular member state would require separate analysis.

5.3 Singapore and safety-conditioned protection

Singapore's Good Samaritan Food Donation Act 2024 provides a third design. According to the Singapore Food Agency (2025), it took effect on 1 January 2025 and protects qualifying donors and intermediaries against criminal or civil liability for death or personal injury resulting from consumption of donated food when four conditions are met. The food must not be unsafe or unsuitable when it leaves the donor's possession or control; necessary handling requirements must be communicated; applicable safe-consumption time limits must be communicated; and the donor must have taken all reasonably practicable measures to comply with applicable food-safety and hygiene law before donation.

These conditions direct attention to the transfer of control and information. A donor cannot rely solely on moral intention, and a recipient organization cannot assume that an upstream donation eliminates its own responsibilities when it subsequently distributes food. The statutory focus on death or personal injury also matters: it should not be paraphrased as immunity from every possible legal consequence associated with food handling. The Act's protection and underlying regulatory obligations require separate examination (Good Samaritan Food Donation Act, 2024, s. 4).

A further distinction is indispensable. Failure to meet an immunity condition removes access to that protection; it does not, by itself, prove all elements of negligence or a criminal offense. If a donor fails to communicate a handling instruction, a court must still identify the relevant cause of action or offense and its requirements. Bangladesh should preserve this distinction when considering a conditional defense. Otherwise, a proposal described as limited protection could unintentionally become an automatic liability rule for every paperwork omission.

Singapore's model is informative because it specifies actionable conduct. It does not establish that the same legal protection would have the same effects in Bangladesh. Moreover, Singapore's broader Food Safety and Security Act 2025 is being implemented in stages; references in older material to a merely

forthcoming bill are outdated (Singapore Food Agency, n.d.). The comparison here concerns the donation-protection mechanism and the regulator's published guidance, not a claim that all provisions of the broader reform commenced together.

5.4 Implications of the comparison

The three approaches cannot be placed on a simple scale from strict to lenient. US protection depends partly on donor and channel eligibility and a demanding culpability exception. The EU foregrounds continuing operator duties, leaving important liability questions to national law. Singapore links specified immunity to the condition of food, information transfer, and reasonable compliance measures. Each separates at least some aspects of safety regulation from compensatory liability. None warrants an inference that charity alone extinguishes responsibility.

For Bangladesh, the most useful combination is express coverage, workable safety obligations, and a carefully bounded defense that does not remove regulatory intervention or the recipient's realistic route to compensation. This is a normative synthesis, not an assertion that the comparators already implement the precise model proposed below. Its justification depends on the domestic legal gaps identified earlier and on the distribution of control, information, and loss within the donation chain.

6 Causation and responsibility across the donation chain

6.1 An injury does not identify its source

Liability requires more than a temporal sequence in which donation precedes illness. Symptoms, clinical findings, exposure histories, testing, and information about preparation and distribution can all matter. The timing of illness must be evaluated against the suspected hazard rather than a universal assumption about the onset of food poisoning. Scientific uncertainty does not justify refusing all claims, but neither does the charitable context justify presuming that every subsequent illness came from the donated meal.

The practical difficulty is that evidence may disappear quickly. Meals are consumed, packages discarded, leftovers mixed, and recipients dispersed. An upstream business may retain invoices and batch records, whereas the injured person has only a recollection of when and where the food was collected. Responsibility for maintaining necessary information should therefore attach before injury occurs. Traceability and documentation are not simply compliance costs; they preserve the possibility of distinguishing a careful donor from a careless handler and of identifying a responsible commercial source.

Consider a hypothetical chain in which a restaurant supplies correctly chilled food to a charity, but a transporter leaves it unrefrigerated, and the charity then serves it despite evidence of unsafe delay. The restaurant's role does not by itself establish responsibility for subsequent mishandling. Conversely, transferring possession should not erase its liability for an undisclosed earlier contamination or an

unrealistic handling instruction. The transporters' and charities' duties depend on their own control and knowledge. Where several failures combine, the law should permit contribution among responsible actors without requiring the recipient to resolve their contractual allocation before obtaining relief.

6.2 Evidentiary reform without presumed criminal guilt

A statutory civil remedy should permit courts to order the disclosure of relevant records on sourcing, temperature, training, transfer, and incidents. The disclosure power should protect legitimate confidentiality while preventing a blanket commercial-secrecy objection from defeating a safety claim. Records should be proportionate: an event organizer may need batch and timing information, while an occasional donor of sealed shelf-stable food should not need a complex digital system.

Where a defendant breaches an applicable recordkeeping duty and thereby makes a material fact difficult to prove, legislation could authorize a rebuttable civil inference concerning that fact. This is narrower than presuming liability whenever records are incomplete. The claimant should first identify a plausible connection among the food, the injury, and the missing information. The defendant should be able to explain the loss and present contrary evidence. Such a rule addresses information asymmetry while preserving a meaningful opportunity to contest causation.

Criminal proceedings require different treatment. Proposed civil presumptions must not become shortcuts to proving a person's culpability or guilt. The prosecution should establish the elements of the charged offense to the applicable criminal standard, subject only to lawful and constitutionally defensible evidentiary rules. A genuine documentation failure can attract its own proportionate regulatory response without being treated automatically as proof that the defendant caused a death. Differentiating these routes protects both effective enforcement and procedural fairness.

6.3 Institutional and public responsibilities

A school, residential institution, or organized feeding program has continuing control over procurement and service. It should assess whether the food can be safely received and used, rather than regard its donated status as grounds to relax acceptance criteria. A regular institutional relationship also makes it more feasible to provide suitable alternatives and manage known allergies. The donor's responsibility does not displace the institution's responsibility, and the institution's duty does not erase an upstream defect.

Public relief presents an additional problem. Food purchased with public resources and distributed to beneficiaries without payment is not simply a private gift. Procurement, storage, official supervision, and public-law duties may all be relevant. Section 81 of the Food Safety Act provides for departmental consequences for specified failures by government officers or employees, subject to its terms. That does not amount to a comprehensive personal-injury remedy against the state. Reform should identify the responsible public entity and the applicable compensation route rather than leave recipients to pursue an individual frontline worker whose conduct may have been constrained by institutional decisions.

7 A proportionate reform framework for Bangladesh

7.1 Clarify coverage and preserve the safety baseline

The preferred first step is an amendment or coordinated statutory package that expressly covers free supply for human consumption, including food prepared for donation, surplus redistribution, organized religious or community feeding, and public relief. It should identify commercial donors, recipient organizations, transporters, and final-serving institutions according to function. An organization should not avoid coverage by describing distribution as informal while repeatedly operating a large food service. Equally, a neighbor sharing an ordinary household meal should not automatically face the registration obligations of a commercial kitchen.

The reform should state that gratuity alone neither reduces applicable safety standards nor establishes liability. Existing duties under the Food Safety Act should continue unless expressly and lawfully modified. Donated food should not become a disposal route for goods already subject to a safety withdrawal. Clarification should cover the necessary information, traceability, and responses to newly discovered hazards, including whether the original handover was lawful. A statutory saving clause should preserve more protective rights available under other laws while preventing double recovery for the same loss.

7.2 Allocate care according to control and foreseeable use

The proposed duty should require reasonable precautions within each participant's area of control, assessed against the type of food, scale, and continuity of distribution, available safety information, and foreseeable needs of intended recipients. Commercial suppliers and professional caterers should ordinarily meet the standards associated with their expertise. Volunteers should receive clear instructions and should not be made guarantors of latent manufacturing defects they could not reasonably identify.

For organized programs, a basic handover record should identify the source, food or batch, relevant dates, transfer time, necessary storage conditions, and the receiving organization. Information must remain useful after repackaging. A label stating only the donor's name does not communicate allergens or handling requirements. Where safe use depends on facilities that the recipient plainly lacks, the provider should arrange a feasible alternative, redirect the food to an equipped intermediary, or refrain from that particular supply. Disclaimers cannot substitute for practicable precautions.

Additional requirements should apply to institutions serving identified medically susceptible groups. These may include professionally designed menus, approved sourcing, controls for high-risk foods, and procedures for known allergies. The objective is enhanced institutional care, not universal screening of poor people as a condition of assistance. The collection of health information should be limited to what is necessary for safety, protected from publicity, and kept separate from donor recognition or fundraising.

7.3 Provide a direct and independent civil remedy

A new statutory remedy should expressly include every person foreseeably injured by unsafe donated food, regardless of payment, contractual privity, or the existence of an upstream purchaser. It should permit recovery of proven loss under a clearly specified standard without requiring a criminal conviction. Courts should retain the power to obtain evidence and to determine contribution among defendants. Relevant losses may include treatment, necessary care, lost earnings, disability-related costs, and other legally recognized injuries, subject to proof and safeguards against duplicate awards.

Ordinary negligence should remain the default standard for actors whose liability concerns their own handling or distribution. For commercial producers, importers, and entities presenting food as their own product, a carefully defined defect-based civil liability provision merits consideration. Such liability would remove the need to prove negligent manufacture, while retaining the requirements of a qualifying defect, injury, and causation, together with specified defenses. It should not be extended indiscriminately to every person who carries a sealed packet.

This distinction resolves a weakness in calls for universal strict or absolute liability. A rule can impose compensation without proof of fault while still requiring a causal defect and recognizing defined defenses. That is different from automatically attributing any adverse outcome to the donor. Insisting on absolute liability throughout the chain could place an uninsurable risk on volunteers while leaving the better-resourced source of a defect insufficiently examined. The justification for stricter enterprise liability lies in control over production and the capacity to distribute risk, not in mere generosity.

7.4 Limit donor protection without extinguishing redress

A limited defense could protect an occasional non-commercial donor or volunteer against ordinary-negligence liability arising solely from a latent defect in food supplied by an identifiable source, where the defendant followed applicable instructions, preserved material information, had no reasonable grounds to suspect danger, and did not introduce or aggravate the hazard. This proposed defense is deliberately narrower than blanket immunity. It would not protect concealment, deliberate adulteration, reckless distribution, refusal to cooperate with a recall, or failure to take precautions within the defendant's control.

The defense should not extinguish claims against an upstream producer, a commercial supplier, or a negligent institutional organizer. It should also leave inspection, sampling, withdrawal, and proportionate regulatory orders intact. The person invoking the civil defense should establish its qualifying conditions, but failure to do so would return the case to the applicable liability rule rather than automatically establishing fault. The law should specify which actors and claims are covered so that donor reassurance does not depend on vague promises of good faith.

A recipient should not be required to sign away personal-injury rights as a condition of receiving essential assistance. Private agreements between organizations may allocate indemnities, but should

not reduce the statutory rights of beneficiaries. Enterprise insurance and pooled coverage for participating charities could support these arrangements. Insurance design would need actuarial and market assessment; it should not be assumed that adequate low-cost cover is already available.

7.5 Match criminal sanctions to culpability

Criminal reform should distinguish deliberate harmful supply, conscious disregard of danger, and other clearly defined safety violations. Ordinary breach of a handling rule should not automatically be treated as criminally negligent homicide if a death occurs. Equally, a donor who knowingly conceals contamination should not obtain protection merely by claiming that the food was intended for charity. Existing Penal Code and food law offenses should be coordinated with any new donation provision to enable the prosecution to identify the appropriate elements and forum.

Organizations should be accountable for their own culpable systems and decisions under a clearly drafted attribution rule. Personal liability of officers should require an identified basis, such as their own conduct, authorization, consent, or legally defined culpable failure to act. Merely holding an honorary position should not establish responsibility for an event that the person neither controlled nor knew about. These safeguards direct enforcement toward the actors capable of preventing the hazard and reduce incentives to blame the least powerful volunteer.

Administrative measures can address many preventable risks before injury: improvement requirements, temporary restrictions on unsafe activities, corrective training, and targeted inspection. The availability of each measure must rest on existing or amended statutory authority. Escalation should reflect seriousness, repetition, concealment, and responsiveness. A minor first documentation error and deliberate donation of known hazardous food should not receive the same legal response.

7.6 Make remedies and safe compliance practically available

Recipients need a reporting route that accepts complaints without a purchase receipt. A record of the distribution place, date, organizer, and suspected illness should be sufficient to initiate preliminary assessment, though not sufficient by itself to prove liability. Authorized representatives should be able to assist children and others needing support. Complaint channels should be accessible through in-person and telephone routes as well as online systems, and public information should make clear that reporting suspected harm does not require accusing a donor of deliberate poisoning.

The responsible agencies should agree on prompt referral, sharing of clinical information within lawful limits, food sampling, and the preservation of records. Publicly supported testing and legal assistance would address the gap between a formal cause of action and a usable remedy. A claims process should allow related injuries from a single distribution event to be managed efficiently, subject to procedural legislation and individual differences in harm. Settlement must not become a condition for emergency treatment or a device for suppressing information necessary to protect others.

A limited medical-assistance mechanism could provide initial help after a credible cluster of suspected food-related injuries without waiting for final allocation of fault. Eligibility, funding, review, and recovery from the responsible parties would need explicit design. This proposal is not a claim that Bangladesh already operates such a fund or that all alleged cases should be compensated automatically. Its purpose is to prevent the cost and delay of attribution from falling entirely on people requiring treatment.

Compliance support is equally necessary. Shared refrigeration, clean transport, practical training, accessible labels, and regulator-approved instructions can reduce risk more directly than increasing penalty maxima. Registration or notification requirements should be proportionate to organized scale, risk, and frequency and should be coordinated with any applicable general licensing scheme. Blanket prior authorization for every household gift would be difficult to administer and could divert attention from high-risk operations. Emergency arrangements should permit rapid assistance under workable controls while preserving prohibitions on knowingly unsafe supply.

8 Discussion and evaluation

The strongest objection to increased accountability is that it might reduce donations. That possibility should be taken seriously, but it cannot justify treating recipients as the default bearers of preventable injury. Nor can the contrary response assume that religious or social motivations will keep donation levels unchanged. The appropriate question is whether a particular rule improves safe assistance at an acceptable administrative and participation cost. Clear duties and narrow protection can reduce uncertainty, while infrastructure support can reduce the underlying risk that makes donors fear liability.

A second objection concerns regulatory capacity. If oversight is limited, adding obligations may create paperwork without prevention. The proposed response is to prioritize a small number of observable controls and traceable responsibilities, particularly for repeated institutional feeding and high-risk operations. Existing powers should be used before creating parallel institutions. Where agencies lack resources, legal reform should identify funding and coordination requirements rather than assume that a new prohibition enforces itself.

A third objection is that recipient-sensitive duties might encourage organizations to exclude people with additional needs. This risk argues for supportive institutional standards and funded alternatives, not abandonment of those duties. A program should not be rewarded for becoming safer only by refusing assistance to more vulnerable people. Evaluation must therefore consider exclusion, substitution, complaint handling, and continuity of support alongside recorded safety incidents. Recipient participation is necessary to identify whether formally compliant programs remain usable and dignified.

A pilot should measure incidents and near misses relative to meals or distribution events, rather than merely counting complaints. Increased reporting after reform may indicate improved access rather than worsening safety. Other useful measures include traceability completeness, response time, availability of suitable alternatives, time to treatment support, donor retention, and the burden placed on small organizations. Independent evaluation should distinguish compliance paperwork from actual hazard

control. These are proposed research measures; the present article provides no empirical estimates of their likely values.

The framework also has limits beyond safety. Donation law cannot ensure an adequate long-term diet if households lack income, secure access to food, or reliable public support. Galli et al. (2019) show why assistance systems must be understood in relation to wider welfare and food-system dynamics. The legal aim developed here is narrower: when food is supplied as assistance, the act of giving should not weaken the recipient's protection against avoidable harm. Safe redistribution can complement social protection without becoming a legal excuse for its absence.

9 Conclusion

Unsafe food donation in Bangladesh should not be analyzed as conduct occurring in a complete legal vacuum. Existing food legislation, consumer-law provisions, and general criminal offenses supply significant, although differently conditioned, bases of responsibility. The more defensible concern is that their application to gratuitous supply is expressed unevenly and that recipients may face serious difficulties in identifying defendants, preserving evidence, and obtaining civil redress. Good intention neither establishes reasonable care nor supply a general defense.

The comparative analysis supports a precise design rather than wholesale transplantation. US federal law offers channel-specific conditional immunity; the EU maintains food-business responsibilities across redistribution; and Singapore ties specified protections to safety and information conditions. Bangladesh should clarify free-supply coverage, allocate duties according to control and foreseeable use, provide a direct civil remedy independent of criminal conviction, and differentiate sanctions by culpability. Limited protection for compliant volunteers should preserve claims against responsible enterprises and public regulatory powers. The legal value of a donation ultimately depends on both the assistance provided and the protection afforded to the person who receives it.

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