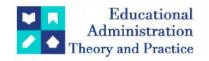
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Research Article



Understanding Consumption Motivation In Confinement Centres Through In-Depth Interviews And Nvivo Analysis

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ABSTRACT

The effectiveness and benefits of postpartum care centers, as a scientifically sound alternative to traditional postpartum confinement at home for mothers and newborns, have been demonstrated. Yet, the adoption and popularity of these centers differ widely among countries and even within diverse ethnic groups in the same country. Additionally, a notable lack of academic research in this area underscores a significant gap in scholarly exploration. The main objective of this study is to explore the motivations that drive women to consume the Confinement Centre services. This research employed semi-structured, indepth interviews with eight postpartum women who had previously lived in the Confinement Centre. Utilizing NVivo 20 as the research tool, conducted a series of analytical methods on interview data to ultimately identify the key themes related to consumption motivation. The findings revealed that the consumption motivation for Confinement Centre service usage can categorized into five subdimensions; innovative functional motivation, individual motivation, social motivation, expected eudaimonic well-being, and financial Keywords: Confinement Centre, Consumption Motivation, Motivation, Individual Motivation, Social Motivation, Expected Eudaimonic Well-being, Financial Well-being.

INTRODUCTION

The confinement centre (CC), also known as postpartum care centers, is a healthcare institution dedicated to providing high-quality postpartum care services associated with elevated consumption levels. With its roots in Taiwan, China, and boasts a rich history spanning over four decades (Hung et al., 2010a; LIR, 2018; Zheng, 2021). Evolving to meet market demands, this successful model has expanded beyond its origin, expanded its influence to various regions, including Mainland China, Hong Kong, Macau, and neighboring countries such as South Korea (Han et al., 2020), Thailand, Singapore, and Malaysia (Chou et al., 2022). Moreover, as online sources indicate, CC industries also exist in some Western countries, such as the United States, Canada, and France (iiMedia, 2019, 2021b). Nevertheless, the pace of CC industry development varies significantly among countries and regions. This diversity is particularly pronounced in Malaysia, a multi-ethnic society, where market acceptance reflects distinct ethnic preferences—Chinese, Malay, and Indian.

The CCs, an industry that scientifically supports postpartum women in confidently transitioning into the role of motherhood (Song et al., 2020; Tsai & Wang, 2019), has demonstrated its superior effectiveness over home confinement in preventing physical injuries and postpartum depression (Abdullah et al., 2021; Awang et al., 2021; Han et al., 2020; Huang et al., 2010a; Lee et al., 2022; Shao et al., 2018). Moreover, it has significantly averted the intergenerational and regional customary conflicts caused by confinement practices in modern families (Lin et al., 2021). An industry that holds the potential to offer numerous advantages to consumers has gained significant popularity in certain countries or specific ethnic groups,

while progressing at a slower pace in others. What factors motivate/obstacle postpartum mothers to use the CC services?

The self-determination theory (SDT) has revealed that humans possess three fundamental psychological needs (autonomy, competence, relatedness) that are essential for their motivations (Deci & Ryan, 1980a). These needs are not only driven by autonomous motivation, but also controlled and can be internalized by external factors (Ryan & Deci, 2022). Surprisingly, prior studies on motivations in the healthcare industry have mostly focused on functional aspects or barriers to service utilization (Adams & Smith, 2018), neglecting the high consumption-related factors. While existing research on consumption motivation tends to concentrate on the fame and fortune brought by luxury goods, overlooking the importance of service quality. As a result, neither the previous research on motivation nor consumption motivation in healthcare industry adequately addresses the complexities of the CC industry. This question remains largely unexplored to date. To address this issue, the main objective of this study is to explore the motivations that drive women to consume CC services. Research selected the Malaysian three major ethnic postpartum women who have either previously resided in or are currently staying in CC as research samples, employed a qualitative approach, using NVivo as data analysis tool to investigate the dimensions of consumption motivation on CC services usage via in-depth interview method. The findings are anticipated to be beneficial to academic researchers as well as practitioners in healthcare industry, who may need a deeper understanding of customer psychological needs to adjust their business models and operations for better consumer service. Meanwhile, promoting the governments to strengthen people's awareness of the importance of using professional postpartum healthcare services and providing appropriate support.

SDT in Healthcare Study

In the area of healthcare, SDT is broadly used to predict, understand, and change health-related motivation and behavioral intention in multiple contexts (Abildsnes et al., 2021; Greene et al., 2021; Hagger & Protogerou, 2020; Stephens et al., 2021). SDT is an empirically based theory of human motivation that has shown promise in explaining the behavioral change process required to become autonomous in health-related self-management (Stephens et al., 2021). Research suggests that autonomously motivated subjects engage in healthy behaviors because they are voluntary, chosen, and internalized (Hagger & Protogerou, 2020). In the exploratory study of personal health behavior motivation, individuals scored very high on both autonomous and controlled motivation. Autonomy, or the reasons people do or don't engage in healthy behaviors, can be either self-motivated reasons to engage or behaviors based on pleasing or avoiding disappointing others (Stephens et al., 2021). In addition, SDT interventions are highly attractive to promote behavioral change in healthcare settings (Hagger & Protogerou, 2020; Stephens et al., 2021), and have proven effective in changing behavior in healthcare settings across multiple behaviors and populations (Hagger & Protogerou, 2020), and has been studied during developmental periods and in many cultural contexts (Yu et al., 2017). Healthcare professionals can promote patients' self-motivation for health behaviors by supporting their autonomy, competence, and relatedness (Hagger & Protogerou, 2020; Ryan et al., 2008).

Consumption Motivations

Consumption motivation is the aggregated reaction of consumer values and motivations. Tauber (1972) is the first researcher on consumption motivation, developed and categorized this concept behind consumer behavior, and pointed out that the purpose of consumption is not only to purchase products or services, but also to satisfy personal and social motives. Researchers should combine the concepts of motivations, goals, and values into meaningful success orientations (Jolibert & Baumgartner, 1997). Value is inextricably linked to motivation (Parks & Guay, 2009). Therefore, consumption motivation is the psychological process that drives people to purchase and consume goods or services to satisfy their intrinsic and extrinsic needs based on inner beliefs, which are hoped to achieve their expected results. It is a complex phenomenon that involves a variety of factors.

Academic research on motivation factors in CC service usage indicates that the major reasons cause women to use the CC service are high-quality services, refuse to trouble others, lack of helper (Hung et al., 2010b), associated with the subjective health status cognition, and the presence of social support, including both spousal and nursing assistance (Choi & Jung, 2017), some individuals may be unwilling to accept interference by elders (Özcan et al., 2017). Nevertheless, these findings still leave much to ponder. Studies indicate that individuals highly responsive to intrinsic or well- internalized extrinsic factors may exhibit higher levels of interest, excitement, energy, and confidence, which leads to better performance, creativity, perseverance, and overall well-being. (Ryan & Deci, 2017, 2022).

METHODOLOGY

This study utilized a qualitative methodology, employed purposive and snowball sampling techniques to select participants for in-depth interviews. Data analysis was conducted using NVivo 20. The participants are postpartum mothers from the three major ethnic groups in Malaysia (Malay,

Chinese, Indian) who had prior experience with CCs. As individuals who have already utilized CC services undoubtedly exhibit ample consumption motivations, they were deemed ideal interview subjects for the

study. To maximize the inclusivity of research findings, we strive to engage with incredibly rare and underrepresented audience groups beside the Chinese group, such as Malay Muslims and Malay-Indian communities as research sample.

The study employed a semi-structured interview approach using six questions adapted from Sharma et al. (2021) and Park et al. (2020), see Appendix A. These questions progressed from surface- level to more profound inquiries. Respondents were explicitly instructed to categorize their motives for choosing CC services into "professional services" and "other reasons". The researcher has prepared recording devices, paper-based interview questionnaires, neutral pens, and thoughtful gifts in advance. Interview durations varied individually, typically lasting between half an hour to one hour.

ANALYSIS

Respondents' Demographic Profiles

Over a span of five months (Apr 6, 2023 - Sep 6, 2023), eight participants were successfully selected to participate in the face-to-face interviews. Two Chinese mothers had lived in CC four to five years ago, while the remaining six had either recently been discharged or had been out of the CC for less than six months. The breakdown of respondents is as follows in Table 1.

Table 1 Profile of Respondents (N = 8)

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No	Name	Age	Ethnicity	Edu	Job	City	Baby's Age	Parity	Household Income (MYR/M)	CC Costs (MYR)	Duration in CC
1	Fi**	32	Chinese	SPM	Office lady	JB	1 month	3	5,000-15,000	28,000	42
2	An**	43	Chinese	Master	Lecturer	JB	4 years	4	10,000-20,000	7,000	26
3	Sa**	35	Indian	Degree	Flight attendant	JB	4 months	2	25,000-35,000	8,900	28
4	Gr**	42	Chinese	PhD	Research manager	JB	5 years	1	20,000-30,000	10,000	28
5	Ch**	33	Chinese	Degree	Music worker	KL	2 months	1	≤10,000	14,000	21
6	Vi**	38	Chinese	Master	Purchasing assistant manager	JB	3 months	1	15,000-20,000	9,800	28
7	Fa**	28	Malay	Diploma	Businesswo man	ML	1 month	1	5,000-15,000 (wife's)	5,900	14
8	Sh**	26	Malay	Diploma	Teacher	ML	1 month	2	≤10,000	9,600	28

*Note: JB = Johor Bahru; KL = Kuala Lumpur; ML = Malacca.

The data depicted in the preceding figure indicates a relatively uniform distribution of educational backgrounds among respondents, with a majority falling in the 30 years and above age group. However, significant variations in consumer values are revealed when examining the income- to-expenditure ratio on CC services consumption. Three respondents had expenses on CC services that greatly surpassed their monthly household income, while the expenditures of an Indian mother and a Muslim mother accounted for only one-third of the total family income.

Data Analysis using NVivo

NVivo is a professional qualitative research data analysis software primarily designed to assist researchers in collecting, organizing, analyzing, visualizing, and managing various types of unstructured and semi-structured data (Lopezosa, 2020), such as interviews, surveys, documentaries, reports, theses, social media posts, web pages, and more. Using NVivo allows for a more comprehensive and in-depth understanding and analysis of data, thus aiding researchers in making more accurate and scientifically sound conclusions (Mortelmans, 2019). NVivo 20 is the latest version released (https://support.qsrinternational.com/nvivo/s/).

Interview Data Formatting and Importation

Interview data files are input in Word format, with the six core questions displayed in "Title" font style and introductory questions in "subtitle" font style (Figure 1), facilitating recognition in NVivo. Each interviewee is edited into a separate file for import into NVivo.

Name:		Age: Education	on:
Job:		Cost:	
Parity:	Fetus Number:	Delivery method:	Baby age:
Location:_			
Question 1:	: Do you believe in pur	chasing such high-end service	es?
EN W 195	350 2 20	N GE W NULSES	
Question 2:	: Have you purchased t	he CC services before?	
Onestion 3	Was it solely for the s	ervices function or were there	any other reasons?
~	, read a society to a lage of		may other removals
Profess	sional service:		
Other 1	reasons to stay at the C	C‡	
Opertion 4	: Was peer pressure a d	atarmining factor?	
Question 4.	. was peer pressure a u	etermining factor:	
Ouestion 5	: Any hurdles you faced	d in making the decision, if ye	es, from whom?

Figure 1 The template of the interview data file

Word Frequency Query and Thematic Analysis

The generation of the Word Cloud selected items "Question 3" and "Question 6", as these two questions directly inquire about the motivations and expectations of the respondents. The process involves initially querying "Synonyms", sifting through and eliminating irrelevant vocabulary, as respondents often express the same concepts using different phrases. This is followed by re-running the query using the "Exact Matches" setting to generate the final Word Cloud (Figure 2).



Figure 2 The generated word cloud of consumption motivation

As shown in the final Word Cloud created by NVIVO 20, the words "baby" (6.89%), "food" (4.55%), "professional" (3.81%), "24-hour" (2.35%), "leisure" (2.20%), "sleep" (2.05%), stand the capital position of which are most reflected the function of the services they appreciate. Nonetheless, from this graphic, also have several key categories can be observed, such as "self" elements (leisure, gift, novelty, gratification), "social" relationships (husband, belongings), expectations (better recovery, well-being), and economic factors (expensive, cost-effective).

In addition, this step also generated tree map and cluster analysis graphs. However, the classification presented in these graphics, whether in single words or phrases, is overly simplistic and does not effectively capture the motivations. Hence, open coding on all interview data was performed.

Open Coding and Categories

Open Coding is a commonly used method in qualitative research. The researcher conducted open coding on interview contents sentence-by-sentence, identified five core themes, and 37 child codes, encapsulating a total of 172 references (Figure 3). This process is guided by step-by-step instructions outlined in Allsop et al. (2022)'s method for qualitative data analysis using NVivo software.

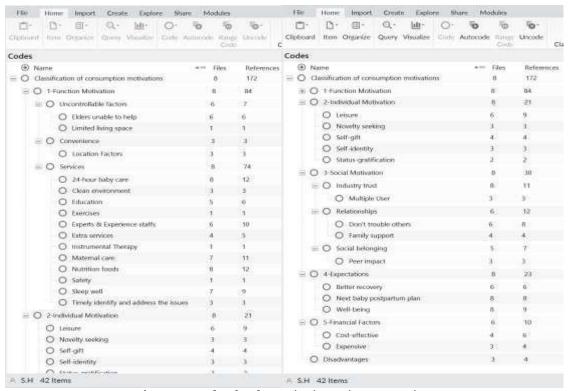


Figure 3 Codes for the entire interview transcripts

Among the coded 172 references, 84 emphasized the significance of the service function offered by CCs, covering various aspects and occupying the maximum proportion of all data. This category, comprising three sub-codes (18 items), accounts for 48.84% of all references. The remaining 88 references, there are social motivations, with three sub-categories (industry trust, relationships, and social belonging) consisting of 7 items and capturing 17.44% (30 references) of the references. Individual motivations, have five sub-categories with 21 references, encompassing leisure, novelty seeking, self-gift giving, self-identity, and statusgratification, making up 12.21% of the total references. Expectations, three child items, comprising 23 references (13.29%), and financial factors, with 10 references (5.78%).

Hierarchy Chart Analysis

The codes extracted from the interview file generate a Hierarchy Chart displaying five main themes, providing a clearer representation of the proportion within each dimension (Figure 4).



Figure 4 Hierarchy chart

The dominant factor on the overall chart is the demand for service functionality, driven primarily by intrinsic motivation but may also be influenced by uncontrollable factors and convenience considerations. Social motivations, expected well-being, and individual motivation hold a relatively similar proportion, occupying a middle position, while financial factors play a minor role. The "disadvantages" aspect pertains to respondents' suggestions for improvements in the specific CC they have resided in, rather than addressing issues inherent to the entire industry. Therefore, it is omitted in this study.

Sentiment Coding Analysis

Upon reviewing the sentiment coding of the five primary themes (Figure 5), a substantial portion was labeled as "Neutral," followed by "Positive" and "Mixed," with a smaller fraction categorized as "Negative".

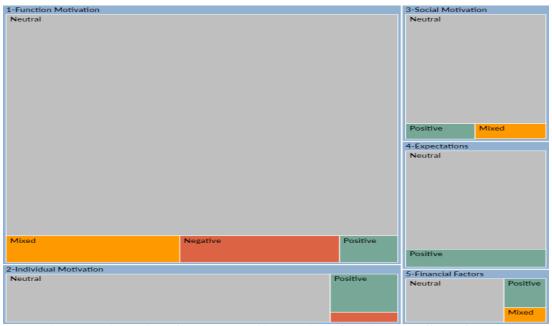


Figure 5 Thematic coding compared by number of sentiment coding references

In general, the respondents' motivation for consuming CC services is more positive than negative. However, upon closer examination of the references identified as "Negative", it was discovered that the majority actually contained positive contents, with some leveraging the drawbacks of home confinement practices to highlight the irreplaceability of CC services. The software might have been misled by the certain negative terms utilized (e.g., "don't"), resulting in these references being labeled as negative.

Mind Map Display

For better observation, this study utilized the 'Maps' of 'Visualizations' in NVivo to create a mind map and adjustment categories (Figure 6), and a professional mind map graphic design software (MindMaster) was employed further to redraw to enhance the visual presentation (Figure 7).

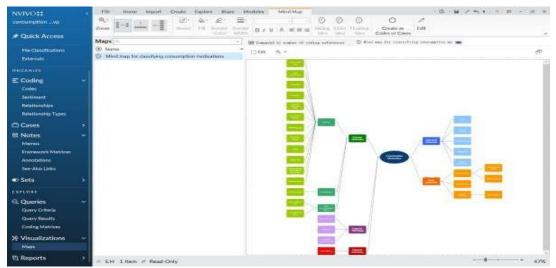


Figure 6 Mind mapping using NVivo 20

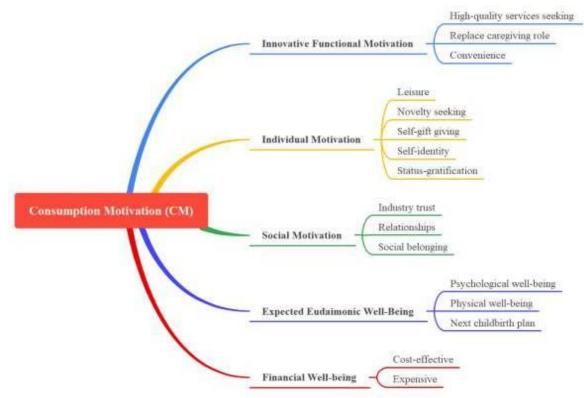


Figure 7 Mind map of consumption motivation (Drawing using MindMaster)

RESULTS

Based on varying levels of intrinsic or well-internalized extrinsic influences on motivation, and integrating previous scholarly research findings, this study categorized the consumption motivations for CC services conveyed by the participants into five sub-dimensions; innovative functional motivation (the basic demand for high-quality services), individual motivation (the demand for personal desires, needs, objectives, or values), social motivation (fostering relationships and social connections), expected eudaimonic well-being (a sense of psychological fulfillment as one's demands is probably to be achieved), and financial well-being (a sense of well-being derived from financial status and investment value).

Innovative Functional Motivation

The functional value refers to the quality, efficacy, and advantages of a product or service (Wiedmann et al., 2009). In this research, the term "innovative functional motivation" refers to individuals' eagerness to achieve functionalities in a product or service that exceed their previous experiences. Through the interview records, three major factors drive the demand for CC services: 1) the pursuit of high-quality services, 2) the quest for convenience, and 3) the function of replacing elder's caregiving role. Besides, mothers emphasized the irreplaceability of CC functions, viewing them as services that addressed numerous complex issues that cannot be resolved through home-based postpartum care. This is why this study labels this sub-dimension as "innovative". The representative interview content has been excerpted in Appendix B.

People usually seek better service quality and convenience because they genuinely want it. While the two uncontrollable factors, the absence of elder assistance may contribute to the situation, it does not constitute the primary determinant, since employing a live-in confinement nanny presents a viable solution. The constraint imposed by limited living space may create a perceived urgency to seek assistance, thereby further underscoring the necessity for CC services. Consequently, these factors all come down to functional motivation for service needs.

Individual Motivation

Individual motivation pertains to the internal impetus or aspiration that propels an individual to take action or attain a specific objective. These motivations which can be either intrinsic or well- internalized extrinsic motivation, have heightened the probability of respondents opting for CC services. The interviews for this study involved considerable personal elements: 1) leisure, 2) novelty seeking, 3) self-gift giving, 4) self-identity, and 5) status-gratification (Appendix C).

"Leisure" is a psychological condition that is typically seen as satisfying the individual's needs for enjoyment and relaxation. "Self-gift giving" means individuals purchasing gifts for themselves to boost self-worth,

strengthen the sense of well-being, or relieve stress. "Novelty seeking" encompasses the drive to pursue new and fresh experiences, representing an inherent personal trait or behavioral tendency. For some individuals, the pursuit of novel experiences is a natural motivation stemming from curiosity, a desire for new things, and a thirst for excitement and change. "Self-identity" typically refers to an individual's perception and self-awareness. It is a subjective and dynamic concept that can evolve over time. "Status-gratification" refers to the desire for a sense of accomplishment, social recognition, and the enjoyment of finer things in life.

With the pace of social development, consumers focus more on the construction of personal self and rich experience (Jang et al., 2021; Shahid & Paul, 2021). Thus, understanding individual motivation is critical to the development of the healthcare market as it can significantly impact an individual's performance and overall well-being.

Social Motivation

Social motivation refers to the psychological drive or desire that individuals have to engage with others, form connections, and participate in social activities. It involves the intrinsic or extrinsic factors that influence a person's behavior within social contexts. According to the theory of impression management, consumers are highly influenced by internal motivations to cultivate a positive social image through their purchasing behavior (Eagly & Chaiken, 1993; Sallot, 2016). The desire to avoid troubling family members for care, or received support and encouragement from family members (e.g., husband, parents-in-law) can both influence expectant mothers to opt for these services. Furthermore, social motives for participating in a popular activity by peer influence are strongly associated with increasing one's sense of social belonging (Skidmore et al., 2016). In economically privileged families, using CC services may not always be crucial. Participation might be driven by a desire to socialize with friends.

In the study interviews, 87.5% of eight respondents expressed trust in the CC industry, with three having utilized its services multiple times. Despite one respondent considering it unnecessary, she affirmed choosing a CC for the next baby's birth. Furthermore, six mothers expressed self- sufficiency, preferring not to trouble others, while four received strong family support. Three mothers selected postpartum services based on friends' recommendations, and three were motivated by a desire for social belonging (Appendix D).

Expected Eudaimonic Well-being

The concept of expected eudaimonic well-being (EEWB) refers to the psychological satisfaction one experiences when their goals and positive aspirations are likely to be fulfilled. "Eudaimonic" is a term in ancient Greek philosophy, emphasizing a deeper sense of well-being derived from individual achievements, goal attainment, and the pursuit of life meaning. Scholars define this concept as the degree of an individual expects to derive well-being from expected self- acceptance and expected social contribution through a meaningful life Zhou et al. (2020). Nevertheless, the dimension of this study does not involve social contributions, it simply means that an individual is motivated by the expected well-being experienced when they believe their plans or goals can be better accomplished.

Among the participants in the study, a majority experienced a notable sense of well-being surpassing their initial expectations associated with the CC service. Six participants expected a better recovery before utilizing the service, and seven expressed a preference for choosing a CC again if they were to have another child. Remarkably, the majority intended to stick with the same CC brand, as only two respondents considered a potential switch to a different brand, emphasizing a high level of satisfaction with the service experience and industry recognition (Appendix E). Female social support systems were considered essential to the psychological well-being of women who give birth (Davis, 2001). In the fields of psychology and philosophy, scholars explore eudaimonic well-being to investigate the happiness and meaning of life. Consumers hold expectations regarding the outcomes of utilizing CC services and experience well-being upon the potential realization of the expected effect.

Financial Well-being

Financial well-being has been extensively studied across various academic fields, including economics, financial consulting and planning, developmental psychology, consumer decision-making, and service marketing (Brüggen et al., 2017). Achieving financial well-being involves managing resources effectively, making informed financial decisions, and having a sense of financial security and satisfaction. It acts as both a facilitator and a motivator for the choices individuals make regarding their spending and consumption patterns. Customers prefer to purchase products with the highest perceived value (Parment et al., 2021), and when individuals experience a sense of overall control over their finances, their financial well-being is likely to increase (Vlaev & Elliott, 2013).

However, the measurement of financial well-being is inherently subjective because it is based on how individuals perceive it rather than how others judge it. This implies that only individuals can assess their own happiness. As an illustration, individuals with the same income level may evaluate their financial situation

differently based on their personal preferences and values (Brüggen et al., 2017). The cost-effectiveness of CC services can contribute to a sense of financial well-being for consumers, but this outcome is contingent upon consumers' cognition and acceptance of CC services. During the interviews, it was observed that respondents' perception of the pricing for CC services did not align directly with their household income; instead, they are contingent on consumers' perceived value of the services. Despite this, all participants exhibited a certain level of satisfaction with their spending capacity and a sense of superiority (Appendix F).

"Before checking into this place, I thought the costs were pretty steep. But after experiencing it, I found that they were worth the higher price..., and it far exceeds my expectations."

An**, 43, lecturer

In summary, financial well-being plays a significant role in influencing consumption motivation. A positive financial situation can lead to increased confidence, security, and the ability to meet both basic and discretionary needs, fostering a greater motivation for consumption. In contrast, financial challenges may limit one's ability and motivation to engage in non-essential spending.

CONCLUSION

SDT has become one of the most influential theories in the field of motivation and well-being research in healthcare. This chapter utilized the SDT theory, identified five sub-dimensions for the consumption motivation of women in postnatal healthcare services, elucidated consumers' intrinsic and extrinsic motives from diverse viewpoints, as shown in Table 2. It fully reveals the multifaceted roles of consumer psychological needs, personal growth aspirations, and social dynamics. These five sub-dimensions collectively emphasize the complex relationship between autonomy, relatedness, and competence in shaping consumption motivations within the framework of SDT. This enriches the conceptual framework of the entire study, encompassing a spectrum from overarching ideologies to underlying influences.

	Table 2 Sub-Dimensions of Consumption Motivation
Dimensions	Description
Innovative functional motivation	This motivation primarily emphasizes consumers' pursuit of higher-quality services that go beyond traditional functional constraints.
	Within the SDT framework, this aligns with the psychological need for autonomy.
Individual motivation	Individual motivation in consumption emphasizes people seek products and experiences that resonate with their values, interests, and identity.
	According to SDT, this may either intrinsic or well-internalized extrinsic motivation.
Social motivation	Social motivation underscores the inherent human need for connection and social interaction. This dimension recognizes that individuals often make consumption choices based on social influences.
	SDT's emphasis on relatedness aligns with this dimension, emphasizing the role of social connections in shaping and reinforcing consumption behaviors.
Expected eudaimonic well-being	Expected eudaimonic well-being refers to the anticipation or expectation of experiencing a sense of fulfillment, purpose, and flourishing in life. It plays a significant role in influencing individuals' choices and behaviors.
	This aligns with SDT's emphasis on autonomy and competence as essential elements for promoting eudaimonic well-being.
Financial well-being	Financial well-being refers to a state of overall financial health and a sense of happiness of individuals or groups, it involves managing resources effectively, making informed financial decisions, and having a sense of financial security and satisfaction.
	SDT recognizes the importance of external support and resources, including financial stability, in facilitating intrinsic motivation.

CONTRIBUTION

The significance of this research lies in its groundbreaking contribution to the understanding of consumption motivation in the context of the Confinement Centre industry. By reconstructing sub- dimensions based on intrinsic and well-internalized extrinsic motivations, guided by SDT, the study addresses a critical gap in previous research. This work not only enhances our comprehension of consumer behavior in healthcare institutions like CC but also represents a notable advancement in consumption motivation theory. Moreover, the focus on the unique needs of postpartum women adds valuable insights that can inform and improve services in this specific healthcare setting. Its valuable for both academics and healthcare practitioners, offering profound insights into customer psychological needs from the perspectives of both service quality and high consumption that can inform the refinement of business models. Additionally, it advocates for government initiatives to enhance awareness of the significance of professional postpartum healthcare services and provide necessary support.

DECLARATIONS

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Conflict of interest

The authors have no conflicting financial interests to declare.

Ethics approval

This research complied with the American Psychological Association Code of Ethics and was approved by the Institutional Review Board at Universiti Teknologi Malaysia (UTM). Informed consent was obtained from each participant.

Authors' Contribution Statements

Xiaofan Xia drafted and revised the work, made substantial contributions to the conception and design of the work, the acquisition, data input and analysis, and interpretation of data.

Logaiswari Indiran assisted in finding part of suitable interview subjects, reviewed and critically for important intellectual content.

YunYan Wang helped dealing with the data.

Logaiswari Indiran and Umar Haiyat Bin Abdul Kohar approved the version to be published. Xiaofan Xia agree to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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APPENDIX

Appendix A Interview Question Resource of Consumption Motivation (Qualitative)

No.	Questions (Original)	Questions (Modified/Paraphrased)
1	Do you believe in purchasing such high-end products?	Do you believe in purchasing such high-en services?
2	Have you purchased any luxury product in the recent past?	Have you purchased the Confinement Centr services before?
3	Was it solely for the quality or were there any other	Was it solely for the services function or wer there any other
	reasons?	reasons?
4	Was peer pressure a determining factor?	Was peer pressure a determining factor?
5	Any hurdles they faced in making their purchase, if yes,	Any hurdles you faced in making the decision, i yes, from
	from whom?	whom?
6	3.expectations for the museum and museum restaurant	Expectations for the Confinement Centre servic and
	experiences.	Confinement Centre experiences.

CC=Confinement Centre.

Appendix B Excerpt from interviews on functional motivation

Items	Interview Content
High-quality	"I expected receiving more professional and superior care. They offered osteop massage, hair wash, Yoga, medicinal
services	diet, and machines assist in bodily repairs, su infrared light therapy which can help to shrink the uterus."
	"I appreciate the quality of the baby care service, and more importantly, the abili
	detect and address various maternal and infant issues in a timely manner under e guidance."
	"The food. Very delicious. And I am a vegetarian. This is a Vegan confinement centr fully meets my needs."
	"I consistently experience ample rest and sleep."
	"Oh, I've got a story about my kid. Once, when my baby got jaundice elevated, their quickly spotted the issue. They
	swiftly arranged for us to move to the hospital, and w through the express lane, saving us from waiting in line and
	preventing potential me complications."
	"What I care most about is the care of my baby, and I value the importance of a he
	diet, particularly in a clean environment. They also offer yoga classes and breastfe lessons, providing education on
	how to properly care for the baby."
	"I have to say, the environment is essential. I have arranged for a high-end package, including an individual suite where the air is fresh, and leisure is abundant." "Besides the 24-hour baby care, they provided professional post-
	cesarean section m herbal baths, and hair washing. What mattered most to me was being able to get a
	night's sleep."
	"It's my first time having a baby, I'm not sure how this center compares to others, but really help me slept well. They
	offer education on baby care, including breastfe techniques. Plus, they have skilled doctors who can thoroughly

	examine the baby young nurses are on duty all night, making sure your little one is A-okay, and they
	up five meals a day, massages, and extra assistance."
	"I think every service they offer is valuable. If you insist on me picking the most impo one, I have to say it's their expertise. My husband chose this center because they h background in traditional Chinese medicine (TCM). Since I had a cesarean section was at risk of gestational diabetes, he hoped they could provide TCM treatment fo and my postpartum diet was specifically prepared for C-section recovery."
	"I think the most essential services are baby care and healthcare for mothers. The rec methods, coupled with professional nursery care, promote a healthy environment. confinement food, and 24-hour care, all surpassed my expectations."
	"I need support with maternal care, all-day baby care, and I aim for improved phy recovery and better sleep."
Additional value-added	"After leaving the center, they also offered us a total of five free babysitting service if I ever run into a tricky situation in the future and need someone to help take care o
services	baby, I can choose to bring the infant here for free daycare."
	"They took pics and gifted my baby a full-month photo album, that something my three kids didn't get. It made the birth of our fourth baby extra special, creating la memories that my hubby and I truly treasure."
Convenience	"It's right between my parents' house, my husband's office, and the hospital. Super h
	for both my man's work and my mom's visits!"
	"I'm a bit stressed about being away from my three kids for a whole month. The ma hooked me up with a better suite and an extra bed so my family could join, but it's s struggle. The place is way too far from home, and handling all kids would be tough. bringing only one kid would mess with my rest, so my husband holding down the fort the other three while I'm posted up at the CC with the newborn."
Replacing elder's caregiving role	"In fact, my in-laws thought it was too expensive. When our first child was born father-in-law disagreed with me staying at the postpartum care center. However, whe second child was born, they didn't want to spread themselves too thin taking care osecond baby, so they agreed. Now, with my third child, it's my second time staying h
	"Know what? I'm the only child of my parents, they had neither much time nor
	experience. What else, we live in a small apartment that doesn't allow more occupan
of Confinement	"Although the meals cooked by the dedicated confinement nanny at home during the three childbirths were praiseworthy, the offerings at confinement centre were punctual, with a diverse array of dishes, and exceptional taste. I frequently reminisce those meals."
Centres	"I just wanna chill without anyone buggin' me. Privacy is a big deal for me. Whtheir centers, you can kick back and no one's gonna bother you unless you say so."
	"Well, when you're confined at home, even with a confinement nanny, she can't be o call 24/7. She's got cooking and chores on her plate, plus she needs rest. That might her to handle both the baby and you simultaneously." "I appreciate the privacy and safety in this center; it's not accessible for everyone to in."
	"During home confinement, even with a confinement nanny's help, she cannot provid hour care. Allowing her to handle the baby solo can pose challenges. But in CC, the crib cams, so you can keep tabs on your little one using your phone whenever."

Appendix C Excerpt from interviews on individual motivation

Items	Interview Content
Leisure	"I just want a place where I can handle my baby and myself without stressing about parents and mother-in-law.
(Psychological	Just eat good, chill good, and sleep tight.
condition)	It is really relaxed and comfortable. Hiring a postpartum caregiver at home still re supervision. While at the
	confinement centre, I am relieved of washing bottl performing any household chores. I don't have to handle
	anything, I just eat, sleep
	pass the time."
Self-gift giving	"Pregnancy and childbirth were tough, and after maternity leave, I have to go ba work. During the postpartum
	period, I just want to relax and treat myself well, like
	to myself, to fully recover."
Novelty seeking	"Yeah, I love trying new things. It's fun for me. And, if I have another kid, I'd still gconfinement centre, and next
	time, I'll try a different one."
Self-identity	"I hold myself to high standards, don't want any missteps affecting my recovery. I wrecover better, and keep up that
	flawless image."
	"Honestly, I never thought about a second way for postpartum recovery. I thin postpartum mothers should go for it,
	like it's a no-brainer. Pregnancy is so tough, bother with all the worries at home and make yourself and your family
	so tired?"
Status-	"Gotta soak up that top-notch service. I should be treated like this. It's a symbol ostatus, everything's gotta be the
gratification	absolute best!"

Appendix D Excerpt from interviews on social motivation

Items	Interview Content
Relationships - Don't	"You know, taking care of a newborn is incredibly challenging. My parents are ge
	older, I don't want them to get too tired."
	"I always make my decisions independently. I do not want to burden others and h
	cherish my privacy, preferring not to be interfered with by anyone. "
	"I am fortunate that my husband supported me in this choice. He understands the hard I faced during
support	our previous three children's upbringing, even with the assistance confinement nanny. I still had to
	handle breastfeeding and caring for the baby at midn
	which was physically and emotionally taxing, leaving me with little rest."
	"Yeah, it's really dependent. You know, some families, for example, like the mothe pregnant mothers,
	their parents, or in-laws, said 'I will support you', they want to do things for that. So, in this situation,
	they might just stay at home. The support system there, they might stay at home.
	For me, my personal preference, like you know, I want to be like isolated myself, I

	to be alone in the center. So, I can dress like I can tell. So, that's my personal prefere		
"Then one day, my hubby comes home and out of the blue goes, 'I've picked three confinement			
	let's have a look at them out together and see which one you li		
	was legit shocked. I almost had no idea when he started doing these things for me."		
Peer impact and Social	"The manager mentioned that if I booked with my sister, we could each get a discou 1000 RM. That		
belonging	was too tempting to pass up, so my friend and I placed the order		
	together."		
	"Almost all my friends were like, 'Stay in a confinement centre!' Like, I never even considered there		
	could be other ways to experience the postpartum period, you know		
	Almost everyone I know had resident in a confinement centre after childbirth."		
Social	"Staying at a confinement centre offers the opportunity to have teatime with other mot		
	fostering the sharing of experiences, rather than being isolated at home."		

Appendix E Excerpt from interviews on expected eudaimonic well-being

Items	Interview Content
Better recovery	"I expected to bounce back better to my pre-pregnancy state with their profess
	services."
Well-being	"Before I didn't expect much at first, but now I'm feeling so good physically. Super
	and comfy vibes."

Appendix F Excerpt from interviews on financial well-being

Items	Interview Content
Cost-effective	"Before checking into this place, I thought the costs were pretty steep. But
	experiencing it, I found that they were worth the higher price. Especially with the disc
	my package dropped from the original 8000 MYD to just 7000 MYD. You know, I'v
	three kids before this, and each time, I hired a postpartum caregiver at home. This ti also
	consulted a domestic service center, and their price shot up to 6800 MYD – that' for the
	caregiver for 26 days because they have to rest one day in each week. This d even include
	the additional expenses for purchasing a large amount of materials ne during the
	confinement period. All of these add up to be more expensive than stayi the confinement
	centre, not to mention that the center has a dedicated team to take ca both you and the
	baby, bringing professional value. I am really satisfied with this and it far exceeds my
	expectations."
	"It's cost-effective. I spent only 10,000 MYR over 28 days and received incredibly de
	care, all within our budget."
Expensive	"I think the cost is a tad steep. If it were a basic service package, it shouldn't be pr
	However, I wanted a standalone large house for a more comfortable space, so I went
	more luxurious package, which made the price a bit higher."
	"My husband thought the price was too expensive, he had to spend 14,000 MYR for days.
	But guess what? My in-laws had my back, so he finally had to give in.
	Honestly, I also thought it was a tad pricey. I feel like it'd be perfect if it was, like, MYR
	cheaper, you know? Like in the range of 10,000-11,000 MYR. That would've sweet!"