

## Sharing “Sex Secrets” on Facebook

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**Sharing “Sex Secrets” on Facebook: A Content Analysis of Youth Peer Communication  
and Advice Exchange on Social Media about Sexual Health and Intimate Relations**

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*Keywords:* social media; sexual health communication; peer advice; homophily; youth

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### **Abstract**

Social media present opportunities and challenges for sexual health communication among young people. This study is one of the first to examine the actual use of Facebook for peer communication of sexual health and intimate relations. Content analysis of 2186 anonymous posts in a “sex secrets” Facebook page unofficially affiliated with a Hong Kong university shows gender balance among posters, inclusiveness of sexual minorities, and frequent sharing of personal experiences in storytelling or advice seeking. The findings illuminate young people’s health concerns regarding condom use, avoiding pain, birth control, sexually transmitted infections, and body appearance. Relational concerns found entailed sexual practices, expectations, and needs—predominantly within dating relationships and include not wanting to have sex. Supportive communication among users was prevalent. A majority of posts involved advice solicitation in the form of request for opinion or information (30.38%), request for advice (13.68%), situation comparison (5.40%), or problem disclosure (9.97%). Comments to the advice-seeking posts were mostly supportive (69.49%); non-supportive responses (unsolicited messages and gratuitous humor) were concentrated with ambiguous advice solicitations. These findings hold implications for understanding self-disclosure of intimate concerns within social networks, and attuning sexual health intervention on social media to young people’s actual needs and advice preferences.

*Keywords:* social media; sexual health communication; peer advice; homophily; youth

**Sharing “Sex Secrets” on Facebook: A Content Analysis of Youth Peer Communication and Advice Exchange on Social Media about Sexual Health and Intimate Relations**

Social media’s considerable penetration, frequent use, and network interactivity have drawn attention to their potential role in promoting sexual health among young people (Evers, Albury, Byron, & Crawford, 2013; Gold et al., 2011). The popularity of social media among young people, however, does not automatically make them an effective platform for health communication and participation. Prior studies suggest that young people are unwilling to exchange information concerning highly sensitive health topics on social networking sites (SNS) owing to concerns about confidentiality, stigma, and personal image among peers (Evers et al., 2013; Syn & Kim, 2016). Peer sharing of sexual health experiences among young people would necessitate the assurance of anonymity, which provides a measure of perceived safety against potential social repercussions (embarrassment, bullying, etc.) in disclosing sensitive self-information (Evers et al., 2013; Rains, 2014). The recent emergence of “confessions” (also called “secrets” or “whispers”) pages on Facebook appears to offer such an assurance, presenting new opportunities for peer sexual communication via social media.

Facebook confession pages facilitate open sharing of sensitive personal issues in a de-identified manner. Users click on a link on the page to open a blank form on an external site (e.g., Google Forms) where they can write out their messages without including any identifiable information. An anonymous administrator then posts their messages to the page. Nevertheless, Facebook users who like or comment on the posts in the page are publicly identifiable. In Hong Kong, where there is a general reticence about sex (Jacobs, 2009), such confession pages offer a rare avenue for peer sexual communication. However, the pages’

popularity among high school and college students has stirred public controversy over their potential in addressing the inadequacy of sexuality education versus encouraging causal sex (Mohammed, 2015).

In this study, we investigate the use of a “sex secrets” Facebook page unofficially affiliated with a Hong Kong university as a peer resource among young people concerning sexual health and intimate relations. Beyond the specific context of this page, this research is designed to explicate the communication patterns in one of the most popular social media platforms (Facebook) among its key user demographic group (young people) concerning a pertinent topic (intimate relations). Sexual relationships are particularly significant for emerging adults and have important ramifications for their physical health and emotional well-being (Arnett, 2014). Furthermore, as young people increasingly access and post health-related information within the walled gardens of SNS rather than venture to topic-based Internet platforms (Kim & Syn, 2016; Oh, Lauckner, Boehmer, Fewins-Bliss, & Li, 2013; Syn & Kim, 2016), it is imperative for health communication researchers to gain a better understanding of such communication on Facebook, hitherto, the SNS most widely used by young people in Hong Kong and elsewhere (Centre for Youth Studies, 2017; Greenwood, Perrin, & Duggan, 2016).

This study provides a significant extension to extant research on computer-mediated supportive communication as one of the first studies to examine the use of Facebook by young people for peer advice and support on sexual health. Previous work has typically focused on young people seeking sexual health information and advice from professional services or within niche online communities (Buzi, Smith, & Barrera, 2015; Cohn & Richters, 2013; Simon & Daneback, 2013; Suzuki & Calzo, 2004; Willoughby & Jackson, 2013). For

example, young people were shown to engage in candid discussions about sexual health, sexuality, and intimacy in online bulletin boards catering specifically to teenagers (Suzuki & Calzo, 2004). The extent to which similar levels of openness and support extend to discussions in mainstream SNS such as Facebook, which are more open to the public and include a larger number of connections, remains unknown. Our study contributes to health communication research and practice in at least two ways. First, we evaluate the utility of the Facebook confession page in facilitating constructive peer engagement on sensitive personal concerns, which entails theoretical considerations about self-disclosure and homophily in supportive communication within SNS. Second, we document the actual communicative behaviors and topical concerns of young people around sexual health, providing insights for intervention efforts that are better attuned to their needs and advice preferences.

## **The Internet as a Resource for Sexual Health Concerns**

### **Seeking Sexual Health Information Online**

Young people tend to turn to the Internet for sex-related information when they need help with a problematic situation that could not be addressed by traditional sources or out of curiosity (Daneback, Månsson, Ross, & Markham, 2012). Research suggests that the Internet could fill gaps in young people’s sexual health knowledge and help them overcome the limitations of offline resources (lack of services, costs, omission of marginalized topics, etc.) (DeHaan, Kuper, Magee, Bigelow, & Mustanski, 2013; Holstrom, 2015; Mustanski, Lyons, & Garcia, 2011). Nevertheless, sexual health information on the Internet could be inaccurate, unhelpful, or difficult to find (Jones & Biddlecom, 2011). A survey of high school students in Hong Kong found that although the Internet was one of the most frequently mentioned sources of sex-related knowledge, it was considered to be less reliable than traditional sources

such as teachers or social workers (Family Planning Association of Hong Kong, 2012). The Internet’s appeal among young people as a sexuality and sexual health resource may therefore be based on more than just the attainment of formal health information.

### **Significance of Peer Communication**

Beyond filling gaps in factual knowledge, the greater value of the Internet for young people on sexuality and sexual health concerns lies in the availability of accessible, confidential, and interactive channels for peer communication and advice. Peer sexual communication provides a wealth of experiential information which could help young people manage and cope with uncertainty as well as influence their sexual attitudes (Holman & Sillars, 2012; Trinh & Ward, 2016). Prior studies have shown that young people often go online to ask if their sexual situations are “normal” or socially acceptable (Cohn & Richters, 2013; Harvey, Brown, Crawford, Macfarlane, & McPherson, 2007). The extensive reach of online social groups offers a greater likelihood to find someone in a common situation or facing a similar problem. An important and powerful factor in such online peer communication is homophily or the perceived similarity among communicators which drives identification and relating in online interaction (Postmes, Spears, & Lea, 1998). According to Wang, Walther, Pingree, and Hawkins (2008), advice from “similar others”—common experience, background, and views—is more powerful than advice from experts when it comes to online health information. Their experiment demonstrated that participants were more likely to deem online responses based on personal experiences as personally relevant and to adopt the advice offered compared to online responses based on formal credentials.

### **Advice Exchange**

A major theoretical concern in this study is to understand how young people seek and offer

advice on sensitive personal issues through SNS. Advice exchange has been identified as a prominent feature of online sexual discussions among young people (Suzuki & Calzo, 2004) but the underlying process in such contexts remains underexamined. Advice is a regular component of supportive communication that is concerned with soliciting and providing problem-focused guidance. Advice exchange is neither a necessary feature of online groups nor a straightforward process (Sillence, 2013). Both advice seeking and advice giving may be expressed in different forms and levels of directness not least because advice is not always warranted or welcomed (Goldsmith, 2000). According to the optimal matching theory, individuals tend to make decisions about approaching potential support providers based on the perception that they are capable of meeting their specific support need (Cutrona & Russell, 1990). The prevalence and ease in which people seek and offer advice, therefore, provide evidence of an effective social support environment.

### **Influencing Factors**

Previous research has shown that the nature and efficacy of supportive communication in online groups depend on several factors. Greater disclosure of embarrassing personal problems, for example, may be more common in anonymous groups or weak-tie networks (e.g., strangers, acquaintances) than groups based on real identities or strong-tie networks (e.g., family, friends) though supportive exchanges in the latter may result in greater tangible assistance (Suzuki & Calzo, 2004; Vitak, Ellison, & Steinfield, 2011). The intentions and level of cooperation among users, which vary across different online contexts, could also affect the efficacy of supportive communication (Gauducheu, 2015). For instance, exchanges about condom use and HIV in an online forum set up primarily for recreation and social networking may easily lose focus and become unruly, deterring the participation of those in genuine need of advice (Yeo, 2009). Furthermore, prior research suggests that



differences in supportive communication may arise from the gender composition of the group (Mo, Malik, & Coulson, 2009). In one study, information exchange was prevalent in an online support group with predominantly male participants but less common than the sharing of personal experiences in one with predominantly female participants (Gooden & Winefield, 2007). By contrast, studies on mixed gender online groups reported no significant gender differences in frequency of information requests or topics of the posts (Ravert, Hancock, & Ingersoll, 2004).

### **Research Questions**

This study seeks to document the use of a “sex secrets” Facebook page among young people and evaluate its utility as a peer resource on sexual health and intimate relations. Informed by the prior literature discussed, the following research questions were addressed:

RQ1: *Topic types and health concerns.* (a) What types of topics are raised in the posts of a “sex secrets” Facebook page? (b) What are the frequently mentioned health concerns in the posts?

RQ2: *Advice seeking and other purposes for posting.* (a) What are the primary purposes of the posts in a “sex secrets” Facebook page? (b) How frequent do the posts involve advice seeking? (c) Which modes of advice seeking are common in a “sex secrets” Facebook page?

RQ3: *Gender differences.* Are there discernable differences between female and male posters of a “sex secrets” Facebook page in (a) types of topics raised, (b) support seeking versus other purposes sought, and (c) modes of advice seeking used?

RQ4: *Advice giving and other comments to advice solicitations.* (a) How do users of a “sex

secrets” Facebook page respond to advice-seeking posts in their comments? (b) How does the type of advice giving in the comment differ by the mode of advice seeking in the post?

## **Method**

### **Sample**

The Facebook “sex secrets” confession page unofficially linked to a large, comprehensive university in Hong Kong is the subject of this study. While many users of the page were members of that university, it was publicly accessible and had been popular with young people in general. This Facebook confession page was chosen because it seemed active, interactive, and substantial. The page was liked by over 18000 Facebook users and contained several messages posted daily in the past six months. A data scraping application (NCapture) was used to capture all publicly accessible posts in the Facebook page over six months and imported into NVivo 11 for empirical analysis. Each downloaded post entry includes the message, number of likes, comments, and timestamp indicating when the message was posted. Duplicated posts and original messages from the administrator were removed from the sample. The final sample comprised 2186 posts—anonymous messages submitted via Google Forms that the administrator received and posted to the page—between May and October 2015.

### **Coding**

One of the authors coded all 2186 posts in the sample for topics, posting purposes, and gender. To verify intercoder reliability, a trained coder independently coded 295 posts (13.5%) that were randomly selected from the sample. The intercoder reliability was

calculated using Cohen’s Kappa ( $K$ ).

**Topics.** To classify the range of topics raised in the posts, a list of 15 categories ( $K$  between .70 and .86) was developed through data inspection by the first author and refined through pilot coding by the second author (Table 1).

**Posting purposes.** An initial list of six primary purposes for posting was identified based on a preliminary examination of the posts: announcements, responses, support seeking, experiential storytelling, lamenting, and partner seeking. Adapting the classification of advice solicitations in previous works (Goldsmith, 2000; Sillence, 2013), support seeking was further expanded into four categories: request for advice, request for opinion or information, problem disclosure, and situation comparison. The final coding scheme for primary purpose (Table 2) thus comprised nine categories ( $K = .71$ ).

**Gender.** Presumed sex (female, male, or undetermined;  $K = .85$ ) of the poster was coded by the gender cues contained in the post. Although the messages posted were anonymous, posters could reveal their gender through direct mentions or the use of self-identifying hashtags (#he or #she).

**Comments.** A sample of comments associated with the advice-seeking posts was selected for analysis. To ensure fair comparisons, (a) the sample of comments span an equal number of posts per advice-seeking category, (b) the selected posts have a comparable number of six to eight comments which represent the typical range, and (c) every comment within each post is provided by a unique user. On this basis, we sampled 803 comments associated with 112 posts that were randomly but evenly selected from the four

advice-seeking categories. One of the authors coded all 803 comments. To verify intercoder reliability, a trained coder independently coded 351 comments (43.7%) that were randomly selected from the sample. The comments were classified by two primary categories: supportive and non-supportive (Table 3). Five subcategories of supportive comments ( $K = .71$ ) included four advice types adapted from Sillence (2013)—direct advice, indirect advice, hedged advice, relating to own experience—plus a fifth subcategory “probing questions” added after a preliminary examination of the comments. Three subcategories of non-supportive comments ( $K = .70$ ) were developed after a preliminary examination of the comments: unsolicited messages, gratuitous humor, and tagging.

### **Comparing Differences**

Chi-square tests were conducted to examine gender differences in topic types, support seeking versus other posting purposes, and advice-seeking modes. They were also used to examine differences in response types by advice-seeking modes. An optimal match entails meeting the specific need imposed by the support-seeker (Cutrona & Russell, 1990)—such as offering direct advice in response to an explicit request for advice.

## **Results**

### **RQ1: Topic Types and Health Concerns**

The 15 topical categories were loosely grouped into four salient themes: health concerns, expectations, needs and urges, and exploration (Table 1).

**Health concerns.** Posters often discuss sexual health ( $n = 444, 17.34\%$ ), among which the most frequently mentioned concerns were (a) condom use ( $n = 111, 4.34\%$ ), (b)

pain or injury during/after sex (n = 69, 2.70%), (c) contraception and pregnancy (n = 64, 2.50%), (d) sexually transmitted infections (STI), including HIV (n = 49, 1.91%), and (e) period and premenstrual syndrome (n = 36, 1.41%). Many posts also involved concerns about body appearance (n = 291, 11.37%), mostly pertaining to genitals, groin, and breasts (n = 231, 9.02%).

**Expectations.** When sharing their personal sexual experiences, posters often comment about their own sexual performance and pleasure (n = 377, 14.73%) as well as others’ sexual performance and characteristics (mostly about penis or breast size) (n = 305, 11.91%). Posters also discussed gender role (n = 43, 1.67%) and sexual arrangements (n = 118, 4.61%). Discussions of sexual arrangements entailed intimate relational concerns and practices, which comprised dealing with a sex partner (n = 39, 1.52%), monogamy or cheating (n = 38, 1.48%), abstinence before marriage (n = 23, 0.90%), and acceptance of casual sex (n = 18, 0.70%).

**Exploration.** Posters exchanged experiential information about sex techniques (n = 103, 4.02%), sexual experimentation (n = 60, 2.34%), and make out places (n = 83, 3.24%), a particularly pertinent concern for young people in Hong Kong given the lack of physical spaces for sex. Posters also discussed having sex for the first time or virginity (n = 130, 5.08%) and their sexual identity (n = 67, 2.62%). The participation of sexual minorities and open discussion of sexual orientation and practices (including not wanting to have sex) were evident in these posts.

**Needs and urges.** Many posters mentioned ungratified sexual needs (n = 298, 11.64%), wondering if they should seek sex partners or casual sex. Posters also discussed sex drive (n = 141, 5.51%), fantasies (n = 69, 2.70%), and initiation and gatekeeping (n = 31,

1.21%).

### **RQ2: Posting Purposes and Advice-Seeking Modes**

About 60% of the posts ( $n = 1299$ ) involved some form of support seeking (Table 2). The most common advice-seeking mode was request for opinion or information, comprising more than half ( $n = 664$ , 51.12%) of the support-seeking posts. The other support-seeking posts comprised request for advice ( $n = 299$ , 23.02%), problem disclosure ( $n = 218$ , 16.78%), and situation comparison ( $n = 118$ , 9.08%). Besides support seeking, the other prominent purpose of the posts was experiential storytelling ( $n = 508$ , 23.24%) which pertains to sharing personal encounters. By contrast, posts with the purpose of announcements, which pertains to sharing non-personal information or news, comprised only 4.03% ( $n = 88$ ) of the sample. A minority of posts involved responses to earlier posts ( $n = 170$ , 7.78%) and partner seeking ( $n = 108$ , 4.94%). It should be noted that most users responded to a post through comments rather than making new posts.

### **RQ3: Gender Differences**

The coding data indicate a balanced mix of female and male posters. Of the 1515 posts in the sample where the poster's sex could be determined, 50.69% of them were associated with female posters and 49.31% with male posters. Chi-square tests suggest that women and men tended to raise different topics in the posts. Sexual performance and pleasure of the poster ( $n_{\text{female}} = 215$  vs  $n_{\text{male}} = 124$ ,  $X^2[1] = 26.65$ ,  $p < .001$ ), evaluation of sexual others ( $n_{\text{female}} = 167$  vs  $n_{\text{male}} = 107$ ,  $X^2[1] = 14.09$ ,  $p < .001$ ), and first time or virginity ( $n_{\text{female}} = 72$  vs  $n_{\text{male}} = 35$ ,  $X^2[1] = 13.14$ ,  $p < .001$ ), were mentioned more frequently by female posters. Meanwhile, make out places ( $n_{\text{male}} = 31$  vs  $n_{\text{female}} = 9$ ,  $X^2[1] = 12.22$ ,  $p < .001$ ) and sexual identity ( $n_{\text{male}} = 42$  vs  $n_{\text{female}} = 18$ ,  $X^2(1) = 9.74$ ,  $p = .002$ ) were mentioned more frequently by male posters.

There were no statistically significant differences in gender distribution of posters between support seeking and other posting purposes,  $X^2(1) = 2.39, p = .131$ , or across the four advice-seeking modes,  $X^2(3) = 1.94, p = .584$ .

#### **RQ4: Comments and Advice Types**

Approximately 70% of the comments to advice-seeking posts were classified as supportive (Table 3). Supportive comments mostly comprised some form of advice giving. Among them, direct advice ( $n = 254, 30.13\%$ ) and indirect advice ( $n = 192, 22.78\%$ ) appeared more frequently than hedged advice ( $n = 34, 4.03\%$ ). The other types of supportive responses were relating to own experience ( $n = 69, 8.19\%$ ) and probing questions ( $n = 63, 7.47\%$ ).

Meanwhile, non-supportive responses mostly involved unsolicited messages ( $n = 131, 15.54\%$ ) and gratuitous humor ( $n = 85, 10.08\%$ ). There were a few comments ( $n = 15, 1.78\%$ ) that only comprised a tag to other Facebook users, presumably left by users to draw their friends' attention to the post.

Chi-square tests indicate significant differences in the distributions of direct advice ( $X^2[3] = 88.60, p < .001$ ), indirect advice ( $X^2[3] = 15.54, p = .001$ ), relating to own experience ( $X^2[3] = 13.73, p < .001$ ), probing questions ( $X^2[3] = 12.87, p = .005$ ), and unsolicited messages ( $X^2[3] = 22.68, p < .001$ ) in the comments with respect to the modes of advice seeking in the posts (Table 4). Explicit request for advice had the greatest proportion of direct advice whereas the less explicit request for opinion or information had the greatest proportion of indirect advice and probing questions. There were also reciprocal responses to situation comparison—it had the greatest proportion of comments coded as relating to own experience. Problem disclosure without explicitly making any request had a balanced proportion of direct advice and indirect advice. Notably, posts that did not include any request (for advice,

opinion, or information) had the greatest proportion of unsolicited messages.

## **Discussion**

This study is one of the first to document and evaluate the actual use of Facebook for peer advice and social support among young people on sexual health and intimate relations.

Overall, the findings provide evidence to demonstrate that Facebook confession pages may facilitate youth participation and dialogue about sensitive personal concerns in a constructive manner. Nearly 60% of all posts in the page involved some form of advice solicitation, indicating that support seeking was the top primary intention of posters. While posts that entailed only experiential storytelling and lamenting are not considered support seeking, they might afford posters the cathartic ventilation of emotions and self-disclosure (da Cunha & Orlikowski, 2008; Tong, Heinemann-LaFave, Jeon, Kolodziej-Smith, & Warshay, 2013). Not only did women and men post equally to the page, they were just as likely to solicit support and adopt similar advice-seeking modes. This finding is notable given that previous research suggests that men are generally less willing to admit a need for support and may feel more uncomfortable than women in discussing sensitive issues within their wider social networks (Mo et al., 2009). Our findings further show that women were more likely to reflect upon the quality of their sexual experiences in their posts and post about virginity or having sex for the first time. Men were more likely to discuss make out places and sexual identity (there were more posts about being gay or male bisexual than lesbian or female bisexual).

Our findings suggest that social media channels that facilitate de-identified sharing of experiences within a network of peers may accommodate both young people’s desire for peer opinion and validation regarding intimate concerns and their fear of social repercussions from



self-disclosure (cf. Syn & Kim, 2016). A vast majority of posts in the confession page contained a personal experience but differed in whether the experiential information was disclosed as a story in itself or as a background to solicit advice. Similar to previous studies (Cohn & Richters, 2013; Harvey et al., 2007), a prevalent characteristic of posts disclosing a personal experience to solicit advice is seeking assurance that the experience described is “normal.” Examples of such posts include questions about the normalcy of premarital sex, sex drive, sexual identity, penis size or appearance, sexual turn-ons, and fetishes (e.g., sado-masochism). A distinctive aspect of the advice exchange concerning normalcy in this study is that the disclosure of an intimate personal experience (e.g., sexual practice or same-sex attraction) in the page allows support-seekers to solicit acceptance or validation from their socially proximate peers even if nobody else shares that experience. Unlike Facebook pages or online groups that are based on particular health issues (e.g., cancer; Abramson, Keefe, & Chou, 2015), the homophily among users of the confession page is linked to a salient group reference (university affiliation), which signals a common social network. Users frequently invoked this common network, especially when discussing sexual norms. These findings resonate with prior research which indicates that participants of demographically homogenous online support groups are comparatively more empathetic to others in their groups (Lieberman, Wizlenberg, Golant, & Di Minno, 2005).

Another major contribution of this study is to offer insights into the preferred mode of advice exchange among young people that may promote more appropriate and effective advice giving. Consistent with previous research (Kouper, 2010; Sillence, 2013), there were comparatively few explicit requests for advice in the page. Only in about a quarter of support-seeking posts did posters specifically ask what they “should” do. Half of support-seeking posts involved requesting opinion or information that would aid posters in

determining their own course of action while the remaining quarter involved disclosing a problem or asking if anyone else had the same experience. This pattern of advice solicitation demonstrates the strive for self-determination of individuals seeking advice, which is important for maintaining a positive self-image (Goldsmith, 2000).

Our findings indicate that comments to the advice-seeking posts were mostly supportive and optimally matched in terms of correspondence between directness of advice given and explicitness of advice solicitation as well as reciprocation in the sharing of personal experiences. Such advice responses are more likely to be regarded as appropriate and effective by individuals seeking advice because they demonstrate respect for autonomy and rights to non-imposition (Goldsmith, 2000). However, not all advice solicitations were greeted by supportive responses. Non-supportive responses, mostly unsolicited messages and gratuitous humor, were observed in about 30% of the comments analyzed. While there was a sense of user moderation to challenge bad information in the responses, trolls were largely ignored. Our analysis further suggests that ambiguity in the poster’s intention to solicit advice tended to result in more non-supportive responses. According to Galegher, Sproull, and Kiesler (1998), participants in online support groups have to demonstrate legitimacy—that their concerns are genuine and justified—to obtain others’ direct support and information. It appears that without explicit requests for advice or opinion, the limited social cues in the anonymous posts might not be sufficient for users to discern the legitimacy of posters’ concerns.

The findings in this study can inform the development of sexual health information resources that are better attuned to young people’s actual concerns. In contrast to the typical focus of sexual health promotion messages on condom use, our findings suggest that young

people were less concerned about whether or when to use a condom than about finer details such as size, comfort, and proper usage. The documented posts show that young people sought advice on a neglected aspect of “safer sex”—how to avoid pain or injury during sex. The discussions about STI in the posts indicate that learning about specific pathogens or even the means of transmission was less relevant to young people than if the abnormalities (e.g., fishy-smelling penis) presented were symptoms of STI. Meanwhile, some posters were oblivious to STI symptoms and did not seek immediate medical attention even when experiencing pain in the penis. There were also posters who were unaware of the risk of unwanted pregnancy with unreliable birth control methods such as penile withdrawal before ejaculation and condomless sex after period. Our findings also reveal that young people were concerned about the normalcy of their (or partners’) genitals, groin, or breasts.

### **Conclusion**

By examining the actual use of a Facebook page unofficially affiliated with a local university, this study demonstrates that SNS can facilitate supportive communication among young people on sensitive health topics. Our findings challenge the cautionary views toward peer information exchange in much sexual health communication literature that highlights the dangers around privacy, bullying, non-professional information, and promoting risky sexual behaviors (e.g., Evers et al., 2013; Holman & Sillars, 2012; Jones & Biddlecom, 2011). As this study demonstrates, peer communication about sexual health on social media is highly contextualized and intertwined with sexuality and intimacy concerns. Within these contexts, professional expertise becomes less relevant than experiential information and homophily as users seek the experiences and thoughts of similar others. Moreover, the posts were rich on topics such as sexual practices, pleasure, and gender issues which professional resources have

tended to lack (Marques et al., 2015). And while our findings demonstrate that a sample of Hong Kong university students were sexually active, most personal accounts of heterosexual sexual practices in the posts entailed dating relationships rather than the non-relationship intimate interactions that characterize hook-up culture in American college campuses (Holman & Sillars, 2012).

Several limitations of this study are noted. The findings are limited to only one Facebook page and reflect the content captured within a given period. We cannot account for any messages that might have been deleted or altered prior to our analysis. Because messages were de-identified, the authenticity of the concerns or background of the poster cannot be fully verified. In addition, several categories had relatively low intercoder reliability ( $K < .75$ ). We also note that the frequencies and types of messages posted might have been influenced by the administrator in ways unknown to us. To the best of our knowledge, messages posted were not moderated by the administrator but posts primarily seeking sex partners were discouraged to avoid contravening Facebook’s community guidelines.

Despite these limitations, this study contributes to a nascent but growing body of research on social media channels as de facto social support groups (e.g., Abramson et al., 2015; Evers et al., 2013). As a first study, our focus was to examine the topics of peer communication and modes of advice exchange. Future studies should expand the assessment of advice exchange to include communication competence (O’Keefe, 1988) and enacted social support (Goldsmith, McDermott, & Alexander, 2000). In addition, further qualitative content analysis or digital ethnography of such social media channels could connect into the broader sexual cultures of young people for a richer understanding of why, when, and how they may pursue sexual health information.

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Table 1. Coding Scheme and Frequencies of Topics Raised in the Posts

Topic	Description	<i>n</i>	%	Excerpted exemplar
Health concerns				
Sexual health	Physical or medical conditions related to sexual activities.	444	17.34	If both people don't have STD, they won't get infected if they have penetrative or oral sex right?
Body appearance	Superficial aspects (including size and shape) of one's body.	291	11.37	My biggest defect is hairy arms and legs.
Expectations				
Own sexual performance and pleasure	Personal satisfaction or achieving closeness and arousal in a sexual situation.	377	14.73	Ever since he meticulously helped me shave before we first have sex, I've felt very satisfied and comfortable each time.
Evaluation of sexual others	Assessing others' sexual performance and/or characteristics (penis, breast, etc.).	305	11.91	My SP's [sex partner] dick is really thick, it's painful every time during penetration but it also feels really good.
Sexual arrangements	Intimate relational concerns and practices.	118	4.61	This is my first time being someone's SP, how should I control myself?
Gender role	Gendered differences in expectations and demands.	43	1.67	When getting a room with an SP, do you guys prefer to go Dutch or the guy pays? If the girl doesn't share the cost, will the guy have any hard feelings?
Needs and urges				
Ungratified sexual needs	Inadequate sexual fulfillment from one's partner or under present circumstances.	298	11.64	How can I get my girlfriend to be more proactive? Normally I have to ask before she'll help me jerk off.
Sex drive	Frequency of sex and sexual demands of themselves or their partners.	141	5.51	I'm not sure whether I have a high sex drive or is addicted to sex. Previously with my ex, we had sex almost every day and cum at least twice each time.
Fantasies	Imagined sexual situations or erotic mental image.	69	2.70	I realized that I enjoy watching porn with rape or group sex scenarios and started to fantasize about being raped and getting banged by many guys, I feel very promiscuous and perverted :(
Initiation and	Communicating with a partner about a sexual	31	1.21	How can I get my boyfriend to start

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gatekeeping	activity.			sextexting me?
Exploration				
First time or virginity	Thoughts and experiences about having sex for the first time or virginity.	130	5.08	When guys know that their girlfriend is a virgin, will they be very happy?
Sex technique	Safer and/or more enjoyable method for a sexual activity.	103	4.02	Sharing my several years’ experience of cunnilingus. Disclaimer: Non-expert, all insights from serving my ex and reading Men’s Health.
Make out places	Sharing or evaluating places for sex and/or asking for suggestions on places to have sex.	83	3.24	Which toilet for the disabled [in the university] is best suited for “gathering”?
Sexual identity	Questions and frustrations concerning one’s sexual orientation, same-sex attraction, or gender identity.	67	2.62	I’ve been with this girl for not long. Really enjoyed going out with her but never had the impulse to be more intimate with her. I feel that I’m letting her down. Biologically, I’m more hehe [gay] but psychologically I’m more heshe [straight]. This is an immutable fact. Sometimes I feel being bi is really tough.
Sexual experimentation	New sexual activities, toys, positions, etc.	60	2.34	Tried footjob with my girlfriend last night, totally awesome!
Total		2560		

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*Note.* Each post may comprise more than one topic.

Table 2. Coding Scheme and Frequencies of Primary Purposes of Post

Category	Description	Frequency	Percentage	Excerpted exemplar
Support seeking		1,299	59.42%	
Request for advice	Asks explicitly for guidance; typically how or what one “should” do in a situation	299	13.68%	My boyfriend refuses to have sex with me, what should I do?
Request for opinion or information	Seeks opinion or information about an issue without explicitly asking for guidance on prudent action	664	30.38%	Do guys mind if their girlfriend used to have a sex partner when she was single?
Situation comparison	Seeks experiential advice or confirmation from anyone who faced the same situation	118	5.40%	My man's back would ache a lot after sex, it's like after vigorous exercise (actually it is quite vigorous). Anyone here with this problem? Any solution? Do we really need to stretch after sex?
Problem disclosure	Describes the situation or problem faced without explicitly asking for advice, opinion, or experiential confirmation	218	9.97%	My dick is small even when erected, I'm afraid that I cannot satisfy my girlfriend.
Other purposes		887	40.58%	
Announcements	Informs others about an event, link, news, or information	88	4.03%	CUHK x HKIed present Secret Angel round 2. Expand your social circle. Registration from June 24 to July 1, those interested please sign up soon!
Partner seeking	Seeks sexual or relational partner	108	4.94%	I thought I'm the only one in CU interested in SM if not for a previous post about an M woman and an S guy. Seeking friends in CU who are into SM. Let's chat <a href="http://www.contactify.com/xxxx">http://www.contactify.com/xxxx</a>
Responses	Responds to a previous post;	170	7.78%	Re #xxxx #sp #she I know that feeling: wishing to try finding sp

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	mostly marked “re #” (comment number)			because of ungratifying sex with boyfriend. Open-minded and in control of one's body.
Experiential storytelling	Shares a story, point of view or information stemming from personal experience	508	23.24%	I am a female exchange student in Hong Kong. I have MASSIVE asian fever but I just wanted to say. Hong Kong Guys, PLEASE Learn how to eat pussy properly. Circular motions with your tongue, please don't have any of that slobbering going on down there.
Lamenting	Expresses helplessness and frustrations	13	0.59%	Just realized that I'm having M on the second anniversary with my boyfriend. Can't make love on that day. Ahhhh....
Total		2186		

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*Note.* Each post may only be classified as either support seeking or other purposes so the percentages of these two main categories add up to 100%. In addition, the nine sub-categories were mutually exclusive and add up to 100%.

*Table 3. Coding Scheme and Frequencies of Comments to Support-Seeking Posts*

Topic	Description	<i>n</i>	%	Example
Supportive		558	69.49	
Direct advice	Any comment that included imperatives or the modal verb “should.”	254	30.13	See a doctor! If it’s just scratches, you won’t bleed for three days!
Hedged advice	Any comment that contained explicit hedges or hedging devices (e.g., “I think,” “It seems,” or “Why don’t you?”).	34	4.03	Why don’t you ask a doctor?
Indirect advice	Any comment that had no explicit or hedged advice, but had enough information to act on it.	192	22.78	It depends how you got hurt and the size of the area you hurt, vagina is mucosa, harder to recover is normal.
Relating to own experience	Providing an account of a personal experience corresponding to the situation that the advice seeker had described.	69	8.19	Actually I am like that as well, sometimes I really don’t have the sexual desire to do it with my girlfriend.
Probing questions	Asking follow-up questions to clarify the situation.	63	7.47	No sexual desire even when he is erected? Is he really able to differentiate between psychological and physiological response?
Non-supportive		245	30.51	
Unsolicited messages	Making unsolicited invitations to connect or frivolous/sarcastic remarks.	131	15.54	Kill yourself and start over
Gratuitous humor	Inappropriate joking about the poster’s situation.	85	10.08	Expired [to a query about fishy-smelling penis]
Tagging	Tags to other users.	15	1.78	@Username

*Note.* Each comment may only be classified as either supportive or non-supportive so the percentages of these two main categories add up to 100%. Sub-categories were not mutually exclusive so the sum of percentages is greater than 100%.

Table 4. Types of Comments by Modes of Advice Seeking in the Posts

	Request for advice	Request for opinion or information	Situation comparison	Problem disclosure	Total	$X^2$
Supportive	155 (74.88%)	148 (73.63%)	131 (62.68%)	124 (66.67%)	558 (69.49%)	
Direct advice	101 (47.64%)	48 (22.12%)	60 (26.79%)	45 (23.68%)	254 (30.13%)	88.60*
Hedged advice	9 (4.25%)	3 (1.38%)	9 (4.02%)	13 (6.84%)	34 (4.03%)	6.00
Indirect advice	33 (15.57%)	70 (32.26%)	42 (18.75%)	47 (24.74%)	192 (22.78%)	15.54*
Relating to own experience	9 (4.25%)	19 (8.76%)	29 (12.95%)	12 (6.32%)	69 (8.19%)	13.73*
Probing questions	13 (6.13%)	28 (12.90%)	11 (4.91%)	11 (5.79%)	63 (7.47%)	12.87*
Non-supportive	52 (25.12%)	53 (26.37%)	78 (37.32%)	62 (33.33%)	245 (30.51%)	
Unsolicited messages	18 (8.49%)	22 (10.14%)	52 (23.21%)	39 (20.53%)	131 (15.5%)	22.68*
Gratuitous humor	26 (12.26%)	23 (10.60%)	16 (7.14%)	20 (10.53%)	85 (10.08%)	2.58
Tagging	3 (1.42%)	4 (1.84%)	5 (2.23%)	3 (1.58%)	15 (1.78%)	0.73

Note. Each comment may only be classified as either supportive or non-supportive so the percentages of these two main categories add up to 100%. Sub-categories were not mutually exclusive so the sum of percentages is greater than 100%.

For each  $X^2$ ,  $df = 3$ .

\*  $p < .05$ .