

**Supplementary table 1.** Comparisons between coaches of different sex and coaches for male versus female teams.

<b>Health Action Process Approach construct in bold. The respective questions are presented in italics.</b>	Male coaches (n =379)	Female coaches (n =61)	Comparison male vs female coaches (p- value; Cohen's <i>d</i> )	Male team (n =262)	Female team (n =163)	Comparison coaches for male vs female teams (p-value; Cohen's <i>d</i> )
<b>Injury risk perceptions</b>						
<i>What do you think about the overall injury risk in football? (low–high)</i>	5.0 (1.0)	5.0 (1.5)	p=0.337; <i>d</i> =0.092	5.0 (1.0)	5.0 (1.0)	p=0.359; <i>d</i> =0.089
<i>What do you think about the injury risk in the team that you coach? (low–high)</i>	4.0 (2.0)*	4.0 (2.0)	p=0.475; <i>d</i> =0.068	4.0 (2.0)	4.0 (2.0)*	p=0.786; <i>d</i> =0.026
<b>Outcome expectancies</b>						
<i>I believe many injuries can be prevented in football (do not agree–agree)</i>	6.0 (2.0)*	6.0 (1.0)	p=0.816; <i>d</i> =0.022	6.0 (1.0)	6.0 (1.0)*	p=0.325; <i>d</i> =0.095
<i>I believe specific training can prevent injuries in football (do not agree–agree)</i>	6.0 (1.3)*	6.0 (2.0)	p=0.377; <i>d</i> =0.084	6.0 (2.0)	6.0 (1.3)*	p=0.624; <i>d</i> =0.048
<b>Action self-efficacy</b>						
<i>My knowledge about preventing injuries in football is... (inadequate–adequate)</i>	5.0 (1.0)	5.0 (1.0)	p=0.329; <i>d</i> =0.093	5.0 (1.0)	5.0 (1.0)	p=0.054; <i>d</i> =0.188

Values are median (IQR), p-values and effect sizes, Cohen's *d*. All questions are rated on a 1–7 Likert scale from 1 = low/do not agree/inadequate to 7=high/agree/adequate. Responses from the 15 coaches who responded that they coached both male and female teams are not presented in the table or comparisons. All comparisons were made with Mann Whitney U-test and effect sizes eta squared were transformed to Cohen's *d*.

\* 1 missing answer.