

Looking for a counselor can feel strangely difficult at the exact moment you have the least energy for difficult tasks. Anxiety can make every option feel risky. Burnout can make even a short phone call feel like a mountain. Depression can flatten motivation until the idea of researching a mental health clinic, comparing profiles, and sending an email feels almost absurd.

If you are in that place, it helps to remember something simple: you are not trying to find the perfect human being on the first search. You are trying to find a qualified mental health professional who can meet you with skill, steadiness, and respect, then help you understand what is happening and what might change.

A counselor, psychotherapist, psychologist, clinical social worker, psychiatrist, or other licensed mental health professional may offer psychotherapy, depending on their training, license, and scope of practice. Psychotherapy is a mental health service that uses communication and interaction to assess, diagnose, and treat patterns in emotions, thoughts, and behavior. It can happen in Individual Therapy, Couples Therapy, family work, or Group Therapy. That broad definition matters because people often start with the word "counselor" when what they really need is a trained professional who can help them make sense of anxiety, burnout, Depression, trauma, relationship strain, or other concerns.

The search does not need to be elegant. It needs to be honest enough to get you through the first door.

## **When anxiety, burnout, and depression blur together**

People rarely arrive in therapy with one perfectly labeled problem. Someone might say, "I think I have Anxiety," then describe waking at 3 a.m. With a racing mind, snapping at their partner, avoiding email, skipping meals, and feeling ashamed that they cannot "handle life" the way they used to. Another person might say they are burned out, but the story includes sadness, loss of pleasure, dread, perfectionism, and a body that seems to have stopped cooperating.

Anxiety, burnout, and Depression can overlap in real life. Anxiety often shows up as worry, vigilance, avoidance, irritability, or the sense that something bad is about to happen. Burnout often carries exhaustion, cynicism, reduced capacity, and a feeling of being emotionally spent by work, caregiving, leadership, school, ministry, activism, or family expectations. Depression can involve low mood, loss of interest, changes in energy, difficulty concentrating, guilt, hopelessness, or a sense of moving through the day underwater.

A good counselor will not expect you to diagnose yourself before you arrive. You can start with ordinary language. "I cannot sleep." "I am crying in my car before work." "I feel numb." "I panic when I open my inbox." "I am functioning, but barely." "Everyone thinks I am fine because I keep performing." These sentences are often more useful than a polished self-assessment.

This is especially true for people who are used to being capable. Many clients who seek Therapy for Female Executives, high-performing professionals, caregivers, or students do not look "unwell" from the outside. They show up, lead meetings, answer messages, and meet deadlines. Then they collapse privately. Therapy can become the first place where the public performance and the private cost are allowed to sit in the same room.

## **What a counselor actually does**

A counselor is not there simply to give advice, although guidance may be part of the work. A psychotherapist uses psychological methods, usually through conversation and a structured therapeutic relationship, to help assess and treat emotional, cognitive, and behavioral concerns. In plain terms, that means therapy is not just

“talking about feelings.” It is a professional service focused on understanding patterns and helping those patterns shift.

In early sessions, a counselor may ask about your symptoms, relationships, work, sleep, health history, culture, family background, current stressors, and what you hope will be different. This is not small talk. It is assessment. A clinician is listening for what maintains the distress, what protects you, what has harmed you, and what kind of support may fit.

For anxiety, that might include noticing the cycle between fear and avoidance. For burnout, it might mean naming the gap between responsibility and recovery. For depression, it might involve paying close attention to withdrawal, self-criticism, and the loss of meaningful activity. For Perfectionism, the work might include exploring the rules you live under and the fear that appears when those rules loosen. For Religious Trauma, a counselor may help you sort through experiences of shame, fear, control, belonging, grief, and identity without rushing you toward a simplistic answer.

The word “therapy” covers many forms of care, and no single approach is right for every person. What matters most at the beginning is that the clinician is trained, licensed according to their profession, practicing within their scope, and able to explain how they work in language you can understand.

## **Counselor, psychotherapist, psychologist, psychiatrist: the names can be confusing**

The mental health field uses several titles, and the differences are not always obvious from a website bio. A psychotherapist is a professionally trained and licensed mental health professional who treats mental, emotional, and behavioral disorders by psychological means. That umbrella can include clinical psychologists, counselors, social workers, psychiatrists, and psychiatric nurses, depending on training and role.

A psychologist is professionally trained in psychology, the scientific study of mind and behavior. Psychologists commonly hold doctoral degrees in psychology and may provide assessment, diagnosis, counseling, and other mental health services. A counselor may have a different graduate training pathway and may focus on counseling and psychotherapy. A psychiatrist is a physician who works in mental health and may be involved when medical evaluation or medication is part of care. Social workers and psychiatric nurses can also provide important mental health services when properly trained and licensed.

For a client, the most practical question is not, “Which title sounds best?” It is, “Is this person qualified to treat what I am bringing, and do I feel safe enough to begin honest work with them?”

Titles matter because they reflect training, legal scope, and accountability. They do not tell the whole story. A beautifully credentialed clinician may not be the right relational fit. A warm profile may not show enough experience with your concern. You are allowed to ask direct questions.

## **The first search: what to look for when you are tired**

When people are already overwhelmed, they often try to evaluate too much at once. They scan twenty profiles, open twelve browser tabs, and end up choosing no one. A more workable approach is to look for a few meaningful signals.

First, check whether the provider offers the kind of care you are seeking. If you want Individual Therapy for anxiety and depression, that should be clear. If you are looking for Couples Therapy because burnout has started to affect your relationship, look for a clinician who explicitly works with couples. Couples therapy addresses

problems within and between partners that affect the relationship. Sessions may begin individually, but the work is usually conducted with both partners together. That structure is different from individual counseling, where one person's inner life and goals are the center of treatment.

Second, notice whether the provider names areas that match your experience. Anxiety, Burnout, Depression, Eating Disorders, Perfectionism, Religious Trauma, identity-related stress, or relationship concerns may require different forms of attention. A counselor does not need to list every word you identify with, but their language should suggest familiarity with the terrain.

Third, pay attention to how the practice describes inclusivity and cultural awareness. BIPOC Therapy and LGBTQ-Affirming Therapy are not marketing decorations when they are done well. They signal that identity, context, minority stress, family systems, community history, and safety may be relevant to the work. If you have spent years editing yourself in medical, religious, family, or workplace settings, you may need a therapist who understands that trust is not automatic.

Fourth, look for clarity. A mental health clinic or independent practice should make it reasonably clear what services are offered, whether clinicians work with individuals, couples, or groups, and how to request an appointment. If a page leaves you more confused than informed, that does not necessarily mean the care is poor, but confusion adds friction when you are already depleted.

## **A short checklist for choosing someone to contact**

Use this as a first-pass filter, not a final verdict.



1. The clinician is a trained and licensed mental health professional, or is clearly working within an appropriate supervised training setting.
2. Their services match your need, such as Individual Therapy, Couples Therapy, Group Therapy, EMDR Therapy, Sex Therapy, or Premarital Counseling.
3. They describe experience with concerns close to yours, such as Anxiety, Burnout, Depression, Eating Disorders, Perfectionism, or Religious Trauma.
4. Their language feels respectful of your identity, relationship structure, culture, faith background, gender, sexuality, or professional role.
5. You can understand the next step for contacting them without needing to solve a puzzle.

That list is intentionally short. When your nervous system is overloaded, a five-point screen is kinder than a full research project.

## **The fit question: comfort matters, but it is not the same as ease**

A strong therapeutic fit does not always mean you feel instantly comfortable. Therapy often begins with awkwardness. You are telling a stranger things you [thedestinationtherapy.com](https://thedestinationtherapy.com) [Anxiety therapy](#) may have hidden from friends, colleagues, family, or yourself. The first session can feel exposed. Some people talk too fast. Some go blank. Some make jokes. Some leave thinking, "Why did I say that?" None of that means therapy is failing.

A better question is whether the counselor seems attentive, respectful, and grounded. Do they listen without rushing to a formula? Do they ask questions that help you think? Do they [Counselor](#) explain confidentiality and process clearly? Do they respond to your concerns without defensiveness? Do they recognize the difference between ordinary stress and the kind of suffering that narrows your life?

You may not know after one session. Sometimes it takes a few meetings to tell whether the work has traction. Still, you are allowed to notice your body's response. If you feel belittled, stereotyped, pressured, or persistently misunderstood, that matters. Therapy requires enough safety for honesty. It does not require perfect comfort, but it cannot thrive in ongoing dismissal.

## **Matching the service to the problem**

Many people begin by searching for a counselor for anxiety or depression and later realize they need a more specific service. That does not mean the first search was wrong. It means the picture became clearer.

Individual Therapy is often the starting point for anxiety, burnout, depression, identity questions, grief, perfectionism, and trauma-related concerns. It gives one person protected space to examine internal patterns, relationships, choices, and symptoms. It can be especially helpful when you need privacy and focused attention.

Couples Therapy may be a better fit when distress lives inside the relationship pattern. Burnout can make partners feel like exhausted roommates. Anxiety can turn into reassurance cycles, conflict avoidance, or control. Depression can create distance that both people misread as rejection. Couples work does not simply decide who is right. At its best, it helps partners see the system they are co-creating and practice different ways of responding.

Premarital Counseling can support couples before they marry or make a major commitment. It can open conversations about conflict, family expectations, sexuality, money, faith, children, roles, and emotional needs before those topics become emergency-room-level arguments. It is not only for couples in trouble. Sometimes it is preventive care for a relationship people deeply value.

Group Therapy offers something individual work cannot always provide: the experience of being witnessed by peers who understand a struggle from the inside. A group can reduce isolation, especially around anxiety, depression, grief, identity, or relational patterns. It is not the right fit for everyone, and the quality of facilitation matters, but for some people it becomes a powerful mental health service.

Sex Therapy may be appropriate when concerns involve desire, pain, sexual functioning, sexual shame, intimacy, identity, or the effects of trauma or relationship distress on sexuality. Because sex therapy requires specific training, it is reasonable to ask about a clinician's preparation. Professional organizations in the field of sexual health promote standards for sex therapy, counseling, and education, and certification pathways can include graduate-level sex therapy training.

EMDR Therapy may be considered when traumatic or distressing experiences remain active in the present. EMDR is a therapeutic intervention for mental health conditions and trauma-related concerns, and it should be administered by an EMDR-trained clinician. If a provider lists EMDR, it is fair to ask about their training and how they decide whether it is appropriate for a client.

## **When identity and lived experience are part of the clinical picture**

No one leaves their identity in the waiting room. Race, culture, sexuality, gender, faith background, class, immigration history, disability, and professional role can shape how distress develops and how help is received. For some clients, these factors are central. For others, they are part of the background but still important.

BIPOC Therapy may involve working with the emotional toll of racism, code-switching, family expectations, intergenerational stress, workplace harm, or the loneliness of being the “only one” in a room. LGBTQ-Affirming Therapy may involve support around coming out, family rejection, relationship concerns, gender exploration, religious conflict, safety, joy, and belonging. Therapy for Female Executives may involve leadership strain, visibility, sexism, caregiving expectations, perfectionism, isolation at the top, or the pressure to appear composed while carrying more than others can see.

A counselor does not need to share every aspect of your identity to help you. Many excellent therapeutic relationships cross lines of difference. But the clinician does need humility, skill, and willingness to understand context. If you have to spend session after session proving that your environment affects your mental health, the therapy may become another place of labor.

A useful early question is, “How do you think about identity and culture in therapy?” The answer does not need to be fancy. In fact, overly polished language can sometimes feel thin. Listen for sincerity, specificity, and openness.

## **What to ask before the first appointment**

You do not have to interview a counselor like you are hiring a senior executive, but a few questions can save time and disappointment. Many people feel intimidated asking about training, fees, or approach. Try to remember that ethical clinicians expect questions. You are considering a professional service, not asking for a personal favor.

Here are five reasonable questions to ask in an email, consultation call, or first session:

1. What kinds of concerns do you most often treat, and do you work with anxiety, burnout, or depression?
2. What type of therapy do you provide, and how do you usually structure the first few sessions?
3. Are you trained to offer any specialized services you list, such as EMDR Therapy or Sex Therapy?
4. Do you offer Individual Therapy, Couples Therapy, Group Therapy, or another format that might fit my situation?
5. How do you handle situations where a client is unsure whether the fit is right?

The last question is more revealing than people expect. A grounded counselor will not be offended by fit concerns. They may invite you to talk about what feels off, adjust the work if appropriate, or help you think about another referral. Therapy should have room for honest feedback.

## **The first session is not a performance**

Many clients arrive worried they will “do therapy wrong.” They apologize for crying, for not crying, for rambling, for being too analytical, for forgetting details, for minimizing, for needing notes. A skilled counselor has seen many versions of nervous first sessions. You do [Psychotherapist](#) not need to present your pain in a tidy narrative.

If you are burned out, you may have trouble identifying what you feel. If you are anxious, you may over-explain. If you are depressed, you may struggle to believe anything will help. If you are dealing with perfectionism, you may try to be an excellent therapy client, which can become another exhausting role. These patterns are not obstacles to therapy. They are material for therapy.

It can help to write a few sentences before the appointment: what pushed **Anxiety therapy** you to seek counseling now, what has changed in your daily life, what you are afraid will happen if nothing changes, and what you hope therapy might help you recover. Not a full autobiography. Just enough of a thread to hold if your mind goes blank.

The counselor may ask questions that feel broad at first because they are building a clinical picture. They may ask about symptoms, relationships, work, family, health, culture, identity, coping habits, and previous therapy. If something feels too private too soon, you can say so. Consent and pacing matter.

## Red flags and yellow flags

Some concerns are obvious. A counselor who shames you, mocks your identity, violates boundaries, or pressures you into services you do not understand is not offering the kind of care therapy requires. Other situations are more nuanced.

A yellow flag might be a clinician who seems warm but vague about their training in a specialized service. For example, if someone advertises EMDR Therapy, they should be able to say they are EMDR-trained and explain, in ordinary language, how they use it. If someone offers Sex Therapy, they should be able to describe relevant training and scope. Specialized work is not just a label on a services page.

Another yellow flag is a poor match of format. If your main distress is relational, individual therapy can help you understand your part, but it may not change the couple’s pattern by itself. If both partners are willing, Couples Therapy may be more direct. If you are intensely private and easily overwhelmed by others’ stories, Group Therapy may not be the best first step, even if it is valuable later.

A further concern is feeling unseen in a patterned way. Any counselor can miss something. Good therapy includes repair. But if you repeatedly bring up race, sexuality, faith, gender, disability, or workplace context and the counselor repeatedly moves away from it, you may not be receiving the attunement you need.

## Therapy when you are still functioning

One of the most painful groups of clients is the “high functioning, quietly deteriorating” group. They often delay care because nothing has fully collapsed. They still earn, parent, lead, study, preach, organize, caretake, or perform. Their calendars look competent. Their inner life does not.

This is common among people with burnout and perfectionism. They measure distress by output. If the work still gets done, they assume they are fine. But the body keeps score in its own practical language: insomnia, headaches, dread, numbness, irritability, stomach problems, disconnection, or the inability to rest without guilt. Therapy can help interrupt the belief that collapse is the only valid reason to seek support.

A counselor may help you examine not only how to cope, but what the current structure of your life demands from you. Sometimes the work is internal, such as softening self-criticism or learning to tolerate uncertainty.

Sometimes it is relational, such as setting limits or asking for help. Sometimes it is existential, such as admitting that a role you worked hard to obtain is costing more than you expected.

Good therapy does not romanticize quitting, staying, forgiving, confronting, or reinventing yourself. It helps you look closely enough to choose with more honesty.

## **What progress can look like**

Progress in therapy is often quieter than people expect. It may not arrive as a dramatic breakthrough. For anxiety, progress might mean you still feel afraid, but you stop organizing your entire life around avoidance. For burnout, it might mean you notice depletion earlier and stop treating rest as something you must earn through suffering. For depression, it might mean you answer one message, take one walk, tell one true sentence to one safe person.

Progress can also look like better language. A client who starts with "I am broken" may eventually say, "I learned to survive by staying hyper-alert." Someone who says, "I am lazy" may learn to say, "I am exhausted and overwhelmed." Someone who says, "I ruin relationships" may begin to see a pattern that was shaped by fear, shame, or earlier harm. Language does not solve everything, but it can open a door that self-attack kept locked.

Therapy can also reveal that a different or additional service is needed. A counselor might recommend couples work, group support, trauma-focused care, or another kind of assessment. That is not failure. It is clinical judgment. Mental health care is often most helpful when it is specific enough to match the person's actual life.

## **If you have tried therapy before and it did not help**

A disappointing therapy experience can make the next search harder. Some people had a counselor who mostly nodded but did not help them understand what was happening. Some felt judged. Some were given tools that did not fit. Some stopped after two sessions because the vulnerability felt unbearable. Some stayed too long with a poor fit because they assumed discomfort meant they were "resistant."

It is fair to carry skepticism. It is also fair to try again with clearer criteria. You might say to a new counselor, "I tried therapy before and felt like we never got below the surface," or "I need someone who can be warm but also direct," or "I am worried about being misunderstood because of my religious background," or "I want to work on anxiety, but I also think there may be trauma underneath."

Those statements give a clinician something useful. They help shape the work from the beginning. Therapy is not a magic room. It is a relationship and a method. When the relationship, method, timing, and need align, it can become a place where change feels possible again.

## **Taking the next small step**

If you are searching for a counselor for Anxiety, Burnout, or Depression, begin smaller than your panic wants and more concretely than your depression prefers. Choose two or three qualified providers or one mental health clinic that offers the service you need. Send a brief message. You do not need a perfect explanation.

You can write, "I am looking for therapy for anxiety and burnout. I am having trouble sleeping and functioning the way I normally do. I would like to know whether you are accepting new clients." If depression is the main concern, say that. If you are looking for LGBTQ-Affirming Therapy, BIPOC Therapy, Couples Therapy, EMDR Therapy, Sex Therapy, or support around Religious Trauma, name it. Directness helps both you and the clinician determine fit.



The right counselor will not require you to be polished before you receive care. You can arrive tired, uncertain, guarded, tearful, skeptical, or ashamed. The work can begin there. Not because everything is simple, but because you no longer have to hold the whole weight alone.

**Name:** Destination Therapy

**Address:** 3730 Kirby Dr Suite 204, Houston, TX 77098

**Phone:** (346) 266-2912

**Website:** <https://thedestinationtherapy.com/>

**Email:** [hello@thedestinationtherapy.com](mailto:hello@thedestinationtherapy.com)

**Hours:**

Sunday: Closed

Monday: 8:00 AM - 6:00 PM

Tuesday: 8:00 AM - 6:00 PM

Wednesday: 8:00 AM - 6:00 PM

Thursday: 8:00 AM - 6:00 PM

Friday: 8:00 AM - 6:00 PM

Saturday: 9:00 AM - 2:00 PM

**Open-location code / plus code:** PHMJ+56 Greenway / Upper Kirby Area, Houston, TX, USA

**Map/listing URL:** <https://maps.app.goo.gl/Jb9D6mv5G63BW4vUA>

**Google Map:**

**Socials:**

<https://www.facebook.com/profile.php?id=100083268884089>

[https://www.instagram.com/destination\\_therapy/](https://www.instagram.com/destination_therapy/)

<https://www.linkedin.com/company/destination-therapy>

<https://www.yelp.com/biz/destination-therapy-houston>

<https://thedestinationtherapy.com/>

Destination Therapy provides psychotherapy and counseling services for adults and couples from its Houston office in the Upper Kirby area.

The practice offers individual therapy, couples therapy, EMDR therapy, sex therapy, premarital counseling, LGBTQ+ affirming therapy, BIPOC therapy, group therapy, and therapy in Spanish.

Clients can visit the Houston office at 3730 Kirby Dr Suite 204, Houston, TX 77098, or ask about secure telehealth options when located in an eligible state.

Destination Therapy serves Houston-area clients in person and provides telehealth for clients located in Texas, New York, California, Massachusetts, and Utah.

The team works with adults and couples navigating anxiety, burnout, depression, trauma, relationship stress, perfectionism, religious trauma, and other mental health concerns.

Destination Therapy emphasizes affirming, culturally responsive care for ambitious professionals, BIPOC clients, LGBTQ+ clients, and people with intersectional identities.

To ask about scheduling, call (346) 266-2912 or visit <https://thedestinationtherapy.com/>.

The public map listing for Destination Therapy points to its Houston office near Kirby Drive in the 77098 ZIP code.

Houston clients near Upper Kirby, River Oaks, Montrose, Greenway Plaza, and West University can contact Destination Therapy to ask about in-person and online therapy availability.

For urgent mental health emergencies, Destination Therapy directs people to emergency resources such as 988, 911, or the nearest emergency room rather than using the website or client portal for crisis support.

## **Popular Questions About Destination Therapy**

### **What does Destination Therapy do?**

Destination Therapy provides psychotherapy and counseling services for adults and couples. Publicly listed services include individual therapy, couples therapy, EMDR therapy, sex therapy, premarital counseling, LGBTQ+ affirming therapy, BIPOC therapy, group therapy, and therapy in Spanish.

### **Where is Destination Therapy located?**

Destination Therapy is located at 3730 Kirby Dr Suite 204, Houston, TX 77098. The practice is in the Upper Kirby area and also offers telehealth for eligible clients in select states.

### **Does Destination Therapy offer online therapy?**

Yes. Destination Therapy publicly lists secure telehealth services for clients located in Texas, New York, California, Massachusetts, and Utah. Clients should confirm eligibility and therapist availability directly with the practice.

### **Does Destination Therapy offer couples therapy?**

Yes. Destination Therapy offers couples therapy and premarital counseling. The practice works with couples navigating relationship stress, communication challenges, intimacy concerns, and other relational issues.

### **Does Destination Therapy offer EMDR therapy?**

Yes. EMDR therapy is one of the services publicly listed by Destination Therapy. EMDR may be used by trained clinicians as part of trauma-informed care when appropriate for the client's needs.

### **Does Destination Therapy serve LGBTQ+ and BIPOC clients?**

Yes. Destination Therapy publicly describes its approach as affirming, anti-racist, and culturally responsive. The practice lists LGBTQ+ affirming therapy and BIPOC therapy among its services.

### **What are Destination Therapy's hours?**

The public listing shows Monday through Friday from 8:00 AM to 6:00 PM, Saturday from 9:00 AM to 2:00 PM, and Sunday closed. Scheduling availability may vary by clinician, so clients should confirm appointment times directly.

### **Does Destination Therapy accept insurance?**

The official website states that Destination Therapy is a private-pay practice and may provide superbills for possible out-of-network reimbursement. Clients should confirm current fees and insurance-related details before scheduling.

### **Is Destination Therapy a crisis service?**

No. Destination Therapy states that its website and client portal are not for emergencies. In an immediate crisis or medical emergency, call 911, call or text 988, or go to the nearest emergency room.

## How can I contact Destination Therapy?

Call (346) 266-2912, email [hello@thedestinationtherapy.com](mailto:hello@thedestinationtherapy.com), visit <https://thedestinationtherapy.com/>, or view the practice on social media at <https://www.facebook.com/profile.php?id=100083268884089>, [https://www.instagram.com/destination\\_therapy/](https://www.instagram.com/destination_therapy/), and <https://www.linkedin.com/company/destination-therapy>.

## Landmarks Near Houston, TX

**Upper Kirby:** Destination Therapy's Houston office is located in the Upper Kirby area, making it a practical option for nearby residents and professionals seeking in-person therapy.

**Kirby Drive:** The office is located on Kirby Drive, a major local corridor connecting nearby neighborhoods, restaurants, offices, and residential areas.

**River Oaks:** River Oaks is a nearby Houston neighborhood. Residents can contact Destination Therapy to ask about in-person sessions at the Kirby Drive office or telehealth availability.

**Montrose:** Montrose is close to the Upper Kirby area and is a useful landmark for clients looking for affirming therapy services near central Houston.

**Greenway Plaza:** Greenway Plaza is a major business district near the office. Professionals in the area can ask Destination Therapy about appointment availability before, during, or after the workday.

**West University Place:** West University Place is near the Kirby Drive corridor. Adults and couples in this area can reach out to Destination Therapy for therapy options in Houston or online.

**Rice Village:** Rice Village is a well-known shopping and dining area near Upper Kirby. Clients nearby can contact Destination Therapy for care options at the Houston office.

**Rice University:** Rice University is a major Houston landmark near the 77098 area. Destination Therapy can be a local reference point for adults seeking therapy near central Houston.

**Levy Park:** Levy Park is a popular community park near Upper Kirby. People living or working nearby can ask Destination Therapy about in-person and telehealth scheduling.

**Menil Collection:** The Menil Collection is a notable cultural destination near Montrose. Clients in nearby neighborhoods can contact Destination Therapy for counseling services in the Houston area.

**Houston Museum District:** The Museum District is a major cultural area east of Upper Kirby. Destination Therapy serves Houston clients from its Kirby Drive office and through eligible telehealth options.

**Texas Medical Center:** The Texas Medical Center is one of Houston's largest employment and healthcare hubs. Busy professionals in the broader central Houston area can contact Destination Therapy to ask about therapy services.